

MSc Dietetics

Faculty of Health, Education & Life Sciences

**Placement A2 Workbook**

**Application**

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**Introduction**

Placement A2 is an 8-week placement, providing the opportunity for you to start to apply the knowledge, skills and professional attributes required to implement dietetic practice with individuals, groups, clients the general public, and other professionals in a variety of settings.

Four weeks of the placement will take place in a traditional healthcare setting, two weeks will take place within a different/emerging dietetic practice setting and two weeks will involve campus-based placement activities. During each part of the placement you will need to provide evidence to demonstrate that you have achieved the A2 professional capabilities (Page 6). This workbook has been designed to assist you in doing this. It may be collected as a hard copy or electronically, depending on which is most convenient in any particular setting. When collecting evidence, you must ensure that you implement strategies to maintain client confidentiality at all times.

Placements are a compulsory part of the Dietetics programme. If you do not successfully meet the professional capabilities at the required benchmark standard and the required number of practice hours for your placements, you will not meet the requirements for successful completion of the course. If you have any questions or concerns about your placement, it is important that you speak with your Practice Placement Educator or your Placement Tutor, sooner rather than later.

**Placement A2 Induction: Checklist**

Please check off the items below when they occur. You can add to the list and you can record n/a if an item is not applicable to this placement. Please discuss this with your Practice Placement Educator.

Signed Student Signed Practice Placement Educator: Date:

|  |  |
| --- | --- |
| **TASK** | **Date** |
| Introduced to key staff members and their roles explained |  |
| How to contact staff in an emergency or when need immediate help |  |
| Identification of mentor / preceptor and their contact details |  |
| Place and hours of work, including private study time |  |
| ID badge / card |  |
| Orientation to work space / work environment |  |
| Location of toilet facilities, rest-room, canteen (if relevant) etc. |  |
| Lunch, tea and coffee arrangements |  |
| Work etiquette, including mobile phone usage |  |
| How to answer the telephone, transfer calls and make calls both internally and externally |  |
| IT access |  |
| Post arrangements |  |
| Dress code |  |
| Car parking arrangements, if applicable |  |
|  |  |
| **HEALTH & SAFETY ISSUES** | **Date** |
| Illness reporting procedures |  |
| Emergency procedures, including fire procedures and location of fire extinguishers |  |
| Location of First Aid box |  |
| First Aid arrangements (including names of first aiders) |  |
| Accident / incident reporting and location of accident book |  |
| Safety policy received or location known/ Lone worker policy |  |
| Equality and Diversity Policy |  |
| Infection prevention policy |  |
| Confidentiality policy / information governance policy |  |
| Safeguarding Policy |  |
| IT policy |  |
| Manual handling procedures |  |
| Protective clothing arrangements, if applicable |  |
| Instruction on any equipment participant will be using (list equipment): |  |
| No smoking policy |  |
| Complaints policy |  |
| Whistle-blowing policy |  |

**Expectations Agreement:**

**What you can you expect from us as your placement educators:**

* To be treated with respect
* To be treated fairly and non-judgmentally
* That your training is well organised and you are given adequate notice of activities
* To be clear about the aims and objectives of each activity
* To be clear about what each dietitian/ member of the team expects of you during the time that they are supervising you
* To be given adequate support
* To have confidential matters kept confidential
* To be given the opportunity to contribute to the day to day running of the department
* To receive honest and constructive feedback
* To be given every opportunity to demonstrate your skills and abilities

**What we expect of a student on placement:**

* To work in line with the Guidance on Conduct and Ethics for Students (HCPC, 2016) and the BDA’s Code of Professional Conduct (BDA, 2008).
* To ensure that your supervisors are aware of your whereabouts at all times (specifically in times of unexpected absence)
* To treat all members of staff with respect
* To accept feedback and work to address any areas highlighted
* To be self-motivated
* To inform your lead supervisor if tasks or tutorials have been cancelled and need to be rearranged
* To be prepared to evaluate yourself critically and to learn from your experiences
* To prepare adequately for tutorials or other tasks, revising university notes or reading around a subject if needed
* To ask if you are unsure about something (although this doesn’t mean asking a dietitian something that you could easily look up instead)
* To use your initiative at every opportunity, for example answering the phone if everyone else in the office is busy
* To be punctual to meetings, tutorials etc.
* To meet deadlines without prompting and inform the supervising dietitian in advance if you are having difficulty
* To use any spare time in the office constructively
* To check that you understand what is expected in terms of your portfolio
* To accept that practice placement educators must assess your performance and supporting portfolio

I agree to comply with the above expectations agreement:

Signed Student Signed Placement Educator: Date:

**General Aims of Placement A2**

**For the student to**

1. Compare and contrast the roles, responsibilities and practice skills of dietitians working with a range of service user and client groups across the health and social care setting
2. Observe, demonstrate awareness and start to apply the knowledge, practice and food skills, and professional attributes required to implement dietetic practice with individuals, groups, clients and other professionals in a variety of settings

**Professional capabilities**

At the conclusion of the placement, the student should:

**In relation to Knowledge:**

**K1:** Demonstrate comprehensive knowledge of all areas required to support dietetic practice in placement A2

**In relation to Communication:**

**C1:** Communicate effectively in all areas of dietetic practice experienced on placement A2 [with evidence including communication with service users/carers, group facilitation, members of the public, reporting under supervision]

**In relation to the Care Process:**

**With decreasing direction:**

**CP1:** Be able to identify, collect and interpret relevant information and evidence from the range of sources available to assess the nutritional and dietetic needs of individuals, groups and communities

**CP2:** Formulate and justify a reasoned nutrition and dietetic diagnosis (or need) on the basis of current knowledge, which informs the aims of interventions or action plans.

**CP3:** Explain and critically evaluate how the dietitian (with individuals, groups and communities):

* uses the information gathered and critical thinking to formulate and justify the desired outcomes of interventions or action plans
* uses the information gathered and critical thinking to design and implement suitable dietetic management plans to achieve the desired outcomes

**CP4:** Explain and critically evaluate how the dietitian (with individuals, groups and communities) reviews, monitors and evaluates interventions or action plans undertaken as part of dietetic practice.

**In relation to Professionalism:**

**P1:** Demonstrate consistent professional behavior, in accordance with the legal and ethical boundaries of the dietetic profession and the requirements of the HCPC

**P2:** Self-evaluate knowledge and professional capabilities and formulate action plans to demonstrate ongoing commitment to personal and professional development.

**Pre-practice placement A2 form:**

*Please note this form will be sent to the lead practice educator at each part of placement A2, in order to tailor the placement according to your needs.*

**Student name and contact details:**

**Name:**

**Address:**

**Telephone:**

**University Email:**

**Sharing of Pre-Placement form details-** *(Please delete as appropriate)*

Request for this information to be shared with the Dietetic Manager and Dietetic Team

Request for this information to be shared with the Dietetic Manager only

**Academic Performance**

**What modules have you undertaken in the past academic year?**

**To date most of my marks have been:**

* **70 or above**
* **60-70**
* **50-60**
* **45-50**

**Comments**

*Please include here, any areas of dietetic practice that are of particular interest to you*

**Personal statement:** *(Please write a summary statement about yourself. You may wish to highlight some of your strengths, personal attributes and any previous experiences that you feel is relevant).*

LEARNING STYLE

When I am learning, I prefer to: *(please circle the description you most identify with)*

* *Watch someone else first, then have time to think & prepare before I have a go*
* *Give it a go & see how it turns out*
* *Understand everything (the activity itself, its context and the theory behind it) before I do anything*
* *Only do things if they seem relevant & practical; theories & models are of less interest than getting things done in a way that works*

Please complete a learning style questionnaire such as Honey and Mumford and document what your learning preference was highlighted to be:

Please share some examples that would help illustrate your learning preference

**Is English your first language?** Yes / No

**Are there any factors that might impact on your training that may need to be considered by your practice educator?**

*(e.g. carer responsibilities, health or other personal issues, religious requirements, transport or commuting issues)*

**Consideration of the learning on Placement A2**

*Use the following boxes to highlight those areas that you are confident about, those that you feel you need to develop and any actions you are already taking/ would like to take to help you develop.*

**KNOWLEDGE**

**Strengths:**

**Areas for improvement:**

**Action points:**

**COMMUNICATION**

**Strengths:**

**Areas for improvement:**

**Action points:**

**THE CARE PROCESS *(Information gathering, assessment, making a diagnosis, planning an intervention, reviewing/monitoring/evaluating interventions)***

**Strengths:**

**Areas for Improvement:**

**Action Points:**

**PROFESSIONAL PRACTICE**

**Strengths:**

**Areas for improvement:**

**Action points:**

|  |  |
| --- | --- |
| **Name of Student** |  |
| **Signature of Student** |  |
| **Name of Tutor** |  |
| **Signature of Tutor** |  |
| **Date** |  |

\*If you have chosen to disclose a disability, please also include yourPlacement Action Plan (PAP) with this form, which will outline the reasonable adjustments required for practice.

**NHS/Traditional Setting:**

In order to pass this 4-week part of placement A2, you must have successfully met the professional capabilities through attendance and completion of a portfolio containing:

|  |  |  |
| --- | --- | --- |
| **Practice Educator (PE) Completed:** | **Student completed:** | **Additional information to be collected:** |
| Dietetic consultation assessment tools | Dietetic Practice forms | Verified Witness Statements |
| Professionalism Checklist | Critical Discussion forms | Service User Feedback forms |
| Reflective diary |  |
| Weekly review forms  End of placement review form | |

**These forms must evidence that the professional capabilities have been signed off as competent in line with the benchmark standards (p 17).**

* **Dietetic consultation assessment tools (PE) p.19**

To support you in developing your information gathering, assessment and communication skills, you will be given the opportunity to work with dietitians to complete assessments for a range of client groups in a variety of settings.

During this placement, it is expected that you will focus on undertaking the first part of a patient/client consultation:

***Introduction***; ***Data collection/information gathering***; ***Assessment and diagnosis***

And will then observe the HCPC registered dietitian using this information in care planning and implementation.

It is recommended that you aim to collect a minimum of one of these tools in week one and two in every subsequent week. They are completed by a practice educator during direct observation of a consultation led by you. The tools should be completed for the same consultations for which you complete a dietetic practice form.

The practice educator will indicate on the form, and discuss with you, whether the tool can be used as a formative, or summative assessment. A summative assessment can be used as evidence of competency for the capabilities that have been circled by the practice educator on the last page of the form.

To meet the criteria of the stated capabilities, your portfolio must include **at least 3 summative dietetic consultation assessment tools by the end of week 4**, which show that you are **consistently meeting** the benchmark standards for K1, C1, CP1, CP2 and P1:

* ***With at least 2 different patient/client types***
* ***In at least 1 new and 1 review consultation***
* **Professionalism checklist (PE) p.24**

The Professionalism checklist allows for the collection of evidence of professional behaviour and adherence to clinical governance guidelines throughout this placement. On weeks 2 and 4, the practice placement educator will assess whether you are reaching the expected standard:

***Sometimes / Usually / Always***

And will circle the appropriate word, followed by a signature. For any standards that are not being met or showing an improvement, an action plan may be needed. **You should demonstrate competence in all skills by week 4.**

Where possible, a practice educator should sign off a skill when they have witnessed you demonstrate competence (for example, punctuality, telephone manner, behaviour and dress code, pro-active attitude, maintenance of confidentiality, use of IT, acceptance of constructive feedback).

In some cases, it may be necessary for you to provide evidence, in order for certain skills to be signed off. Examples may include:

* ***Acts within the limits of current knowledge and skills:***example of recognition of own limitations (dietetic practice forms/ critical evaluation forms/ self-reflection)
* ***Takes responsibility for own learning, education and training:*** in addition to being witnessed by practice educators, evidence of this skill should be provided from maintenance of portfolio, reflective diary and completion of weekly review forms prior to meetings.
* ***Can demonstrate practice in a non-discriminatory way:*** reflective diary/pro-forma entries on key incidents.
* **Dietetic practice forms (Student) p.26**

You need to complete and include in your portfolio, one of these forms in week one and two of these forms in every subsequent week.

**At the end of week 4**, your portfolio must include **at least**,

* **2 completed dietetic practice forms for new referrals,** where you have completed the assessment/ information gathering, and the supervising dietitian has set an action plan/intervention
* **1 completed dietetic practice form for a review consultation**, where you have completed the review assessment/information gathering, and the supervising dietitian has revised the action plan/intervention

These forms should demonstrate an ability to apply the dietetic care process, to understand the patient’s condition and management, and to reflect on the intervention.

As part of this form, you are expected to reflect on your performance after a consultation/interaction and consider aspects that need improvement. This is then discussed with the dietitian that supervised the consultation. Where possible, try to use the same consultation that the supervisor has completed the dietetic consultation assessment tool for.

|  |
| --- |
| **Case Discussion**  Please note that for one of the patients/clients for which you have completed a dietetic practice form, you will be required to present the care plan to your course team and peers at University in the form of a ***case discussion***.  You will be given 10 minutes to present, with up to 5 minutes for questions.  The case discussion should be on a patient/client where you have led on and completed the first part of the consultation and the supervising dietitian has used the information you have collected, to set an action plan with the patient/client.  Please look at the ***‘Case Discussion assessment tool’*** and ‘***Case discussion self-review form’*** in The University setting workbook section whilst you are on your NHS placement, in order to ensure that you appropriately prepare and collect the required information. |

* **Critical Discussion form (Student) p.31**

**For at least one chosen ‘new’ consultation**, you are required to write a critical evaluation using the form provided, of how the dietitian used the available information and critical thinking to devise and implement an appropriate action plan/intervention. You should consider any identified barriers or challenges and how strategies were employed to overcome these.

**For at least one chosen ‘review’ consultation**, you are required to write a critical evaluation using the form provided, of how the dietitian reviewed, monitored and evaluated the intervention. Again, you should consider any identified barriers or challenges and how strategies were employed to overcome these.

* **Reflective Diary (Student) p.37**

Throughout your placement, you are required to keep a reflective diary on your experiences in practice ***(at least one entry per week).*** These written reflective accounts will be used to inform the weekly placement reviews with your practice placement educator. A pro forma to help you to structure your reflections has been included in this workbook, although this does not have to be used.

* **Verified Witness Statements p.38**

Verified Witness Statements should be collected to demonstrate effective communication and professional behaviour with other Health Care Professionals/team members when you are information gathering and completing a patient/client assessment.

They can also be used to demonstrate effective communication and professional behavior when you are working with your dietetic supervisors.

There is no specified number of these forms to be completed.

* **Service User feedback forms p.39**

You should aim to collect **2 service user feedback forms** for this placement. These forms should ideally be completed by patients/clients for which a practice educator has completed a dietetic consultation assessment tool. The practice educator (supervising dietitian) should approach the service user in the first instance to ask if they would be prepared to complete a feedback form.

* **Weekly review forms (Student and PE) p.40**

A weekly review form should be completed towards the end of weeks 1 to 3. You should complete the majority of this form before the end of week meeting with your practice placement educator. Action points and responsibility for the actions, with a timescale, should then be agreed and documented. You should both sign and maintain a copy of the form.

Benchmarks standards for each professional capability can be found in the next section of this workbook to aid the assessment of progress.

* **End of placement review form** (**Student and PE)**

Towards the end of week 4 you will have an end of placement review with your practice placement educator. It is expected that you will prepare for this meeting by compiling a summary record of the evidence collected to meet each professional capability that can then be cross checked/confirmed by the practice educator. **They will make a final decision as to whether you have passed the placement, by considering whether there is sufficient evidence that you have met the required benchmark standards for each professional capability.** You must both sign the form and maintain a copy for your records. A copy must also be sent back to University.

**Benchmark Standards/ expectations For A2**

|  |  |  |
| --- | --- | --- |
| **Professional Capability** | **Week 2** | **Week 4** |
| Knowledge | | |
| K1: Appropriate application to practice | - Recognises the importance of key information e.g. anthropometry and biochemistry  - Has a basic knowledge of common diseases/conditions e.g. Malnutrition, Diabetes Mellitus, Obesity, CVD and be able to find information on specific conditions (may require prompting) | - Demonstrates understanding of where to find key information e.g. drugs and supplements, food composition  - Basic knowledge of commonly used nutritional supplements  - Basic knowledge of commonly used drugs (laxatives, anti-emetics, anti-diarrhoeal, antibiotic re: cause diarrhoea).  - Basic knowledge of biochemistry ranges, and an idea of what they relate to  - Knowledge of what information to gather for basic common diseases or common therapeutic diets (e.g. diabetes, hyperlipidaemia, obesity and malnutrition)  - Initiates looking up information about specific conditions/diseases  - Demonstrates an understanding of the principles behind routine dietary intervention and how this can be translated into practical advice |
| Communication | | |
| C1: In all areas of dietetic practice experienced | - Aware of department record keeping standards/ format  - Demonstrates awareness of MDT working  - Able to obtain informed consent  - Appropriate verbal and non-verbal communication with patients  - Able to initiate a conversation: introduce self and gather basic information etc. | - With supervisor direction, is able to draft uncomplicated entries for a patient’s/client’s record and medical notes (for assessment and diagnosis)  - Is further developing the ability to listen attentively to service users and carers (Active listening)  - Beginning to recognise and respond to non-verbal cues  - Communicates appropriately (ask appropriate questions) with other disciplines, with support  - Delivers appropriate verbal feedback to supervisors about info. gathered  - Demonstrates an understanding of the roles/relationships of MDT |
| Care Process | | |
| CP1: identification, collection and interpretation of relevant information and evidence to assess nutritional and dietetic need | - Demonstrates an understanding of the available sources of information in the practice setting  - Can collect a basic diet history (with support) but not necessarily in sufficient detail.  - Able to estimate an individual’s energy and protein intake from food records using food composition tables  - Understands principles of estimating nutritional requirements and deficits  - Demonstrates an appreciation of different social, financial factors related to eating habits.  - Demonstrates an awareness of strategies to maintain confidentiality in practice  - Demonstrates awareness of limitations with clinical understanding and (with prompting), is able to find reference information | - Knows (with support) where to find relevant information in the practice setting  -Able to use basic indices of nutritional assessment eg BMI, weight loss  - Recognises which anthropometric measures may be relevant, for when  - Diet history – can collect with increasing accuracy and is beginning to use different questioning styles and techniques.  **-** Able to estimate an individual’s energy and protein intake from food record charts or a diet history (with reduced reliance on food composition tables).  - Able to estimate nutritional requirements for energy, protein and fluid.  - Obtains information from other health care professionals with support/discussion  - Actively implements strategies to maintain confidentiality in practice  - Knows where to find reference material or other information in the department, and/or in medical and nursing libraries/ online resources. |
| CP2: Formulate and justify a reasoned nutrition and dietetic diagnosis (or need) | - With prompting, is able to summarise the key findings from a dietetic assessment  - With supervisor lead, is able to assist in formulating an appropriate nutrition and dietetic diagnosis/need. | - Summarises the key findings from a dietetic assessment with routine clients  - With minimal supervisor guidance, formulates and justifies appropriate nutrition and dietetic diagnoses/need with routine clients |
| CP3: Dietetic management planning | - Knows about the concept of clinical reasoning and is able to give a reason for why a patient/client needs to be seen by the dietitian  - Demonstrates an understanding of the types of interventions that may be implemented for basic common diseases/conditions | - Demonstrates an understanding of the principles behind routine dietary intervention and how this can be translated into practical advice  - Able todiscuss with supervisor, and demonstrate understanding of, the clinical reasoning for a routine patient/client’s treatment plan  **-** Able to give appropriate ideas to supervisors on the advice to give to a routine patient/client  - Able to evaluate how the dietitian uses the information gathered to formulate and justify appropriate action plans and desired outcomes, with consideration of identified barriers and challenges. |
| CP4: Review and evaluation of action plans and interventions | - Demonstrates an understanding of outcome measures and how these may be used in review consultations and evaluation of practice | - Able to discuss with supervisor, possible appropriate outcome measures that could be used to review a routine patient/client’s progress  - On discussion with supervisor, is able to demonstrate understanding of, the clinical reasoning for making changes to patient/client interventions during a review consultation  - Able to evaluate how the dietitian reviews, monitors and evaluates interventions or action plans, with consideration of barriers and challenges |
| Professionalism | | |
| P1: Professional Behaviour | - Completes work on time, negotiating if required  - Punctual to meetings and for visits  - Professional attitude demonstrated at all times – dress, seeking info (knowing boundaries), listening and respecting others, asking appropriate questions | - Demonstrating competence and consistency in all skills on the professionalism checklist |
| P2: Self-evaluation and action planning | - Completes weekly reflective diary  - Brings portfolio evidence and weekly review form with comments added, to weekly review meetings  - Completes self-review forms and initiates action plans (minimal prompting)  - Demonstrates insight into own limitations; may require support in understanding these limitations with the supervisor | - Maintenance of adequate portfolio evidence  - Able to identify own learning needs with discussion / supervisor feedback and can develop a plan to build on strengths and overcome weaknesses  - Demonstrates the ability to respond to action plans and reflective practice (reflection on action) |

### Dietetic Consultation Assessment Tool A2- NHS

**Practice Educator**

**Name of Student:**

**Name of Observer (Practice Educator):**

**Date: Week:**

*For completion by a* ***supervising dietitian.***

|  |
| --- |
| **N/A (Not observed/not applicable):** No opportunity to demonstrate in this consultation  **NI- Needs Improvement:** Not performing at required benchmark standard yet*.* ***Please use comments to explain what improvement is needed to meet the benchmarks for A2.***  **Yes this time:** Successfully completed to required benchmark standard in this consultation |
| **Which sections should I complete?**  ***This is a shortened form of the Dietetic Consultation Assessment Tool used on placements B and C as students are not yet expected to be progressing beyond the assessment and diagnosis phase of a consultation. Students are aiming to be able to complete a dietetic assessment with ‘decreasing direction’***  You may find that you cannot complete every section of this form, but try to complete as many sections as possible or appropriate for their stage of training. You may also find that not every point is relevant to every consultation. Decide which areas are relevant in each case and tick N/A where appropriate.  **At the end of week 4**, the student’s portfolio must include summative dietetic consultation tools for at least:   * ***2 different client groups*** * ***1 new referral and 1 review consultation***   Where the professional capabilities have been signed off as competent in accordance with the benchmark standards. |

|  |  |
| --- | --- |
| **Case Summary** | |
| **Setting**  e.g. inpatient, outpatient, home visit |  |
| **Patient Group**  e.g. older adult, south Asian |  |
| **Intervention**  e.g. oral/ enteral nutrition support, IBS, weight management, type 1 diabetes |  |
| **New/ Follow up** |  |
| **Additional info**  e.g. carer present, interpreter, challenging patient |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **N/A** | **NI** | **Yes this time** | **Comments** |
| **Pre-consultation preparation** | | | | |
| Understands the medical condition and reason for referral or review (K1) |  |  |  |  |
| Ensures relevant supporting paperwork/resources are available (CP1; P1; P2) |  |  |  |  |
| Collects, records and interprets relevant quantitative and qualitative information, including changes in patients’/client’s condition (from referral letter, medical notes, nursing notes, computer databases, biochemistry, drugs charts). (K1; CP1) (If |  |  |  |  |
| Recognises 'at-risk' biochemistry (CP1) |  |  |  |  |
| Checks/communicates with relevant staff/other disciplines, if applicable (C1; CP1) |  |  |  |  |
| **Interview** | | | | |
| **Introduction** | | | | |
| Identifies correct patient and obtains consent (C1; P1) |  |  |  |  |
| Welcomes patient/client, introduces self and role (C1; P1) |  |  |  |  |
| Creates a physical environment conducive to counselling (i.e. gets at the same level as patient/client) (P1) |  |  |  |  |
| Clarifies the purpose & format of the interview. (C1; P1) |  |  |  |  |
| Establishes rapport with the patient/client and/or carer. (C1) |  |  |  |  |
| Outlines basic principles of condition *(if appropriate)* (K1; P1) |  |  |  |  |
| Checks progress to date with patient/client ***(Review consultations only)*** (C1; CP1) |  |  |  |  |
| **Dietetic Assessment** | | | | |
| Undertakes/calculates relevant anthropometric measures and recognises 'at-risk' anthropometry (CP1) |  |  |  |  |
| Takes/records Diet history/24 hr recall/food charts (CP1) |  |  |  |  |
| Considers: Food groups, portion sizes, frequency, cooking methods, meal patterns, food likes/dislikes (CP1) |  |  |  |  |
| Establishes whether patient/client is meeting previous target ***(Review consultations only)*** (CP1) |  |  |  |  |
| Assesses patient’s/client's or carer’s nutritional knowledge (CP1; C1) |  |  |  |  |
|  | **N/A** | **NI** | **Yes this time** | **Comments** |
| Recognises and acknowledges individual’s cultural and religious beliefs (CP1; P1) |  |  |  |  |
| Identifies the patient’s/client's or carer’s perceived barriers to change (CP1; C1) |  |  |  |  |
| Gathers additional information from patient/client or carer (e.g. social, medical, psychological, personal and economic factors) and synthesises this information (C1; CP1) |  |  |  |  |
| **Interpretation of nutritional data** | | | | |
| Estimates dietary intake quantitatively e.g. carbohydrate, fat, energy if relevant (K1; CP1) |  |  |  |  |
| Estimates/reviews nutritional requirements (K1; CP1) |  |  |  |  |
| Compares dietary intake with appropriate standards/estimated requirements (K1; CP1) |  |  |  |  |
| Critically interprets and evaluates information collected and uses this to identify nutritional needs/ aspects of the diet to focus on (K1; CP2) |  |  |  |  |
| Identifies and prioritises dietetic diagnoses (CP2) |  |  |  |  |
| **Communication Skills** | | | | |
| Shows encouraging/ supporting/motivating manner, makes patient/client feel at ease (C1) |  |  |  |  |
| Identifies barriers to communication and develops strategies to overcome these (C1; P1) |  |  |  |  |
| Communicates at an appropriate level, eye contact, volume of speech, appropriate language +/- interpreter (C1) |  |  |  |  |
| Structures interview in a logical sequence and keeps direction/focus (C1) |  |  |  |  |
| Uses appropriate questioning style to elicit relevant information (C1) |  |  |  |  |
| Uses appropriate non-verbal communication (C1) |  |  |  |  |
| Demonstrates active listening /allows and facilitates patient to ask questions (C1) |  |  |  |  |
| Responds to verbal and non-verbal cues (C1) |  |  |  |  |
| Responds to patient/client’s and/or carer’s concerns (C1; P1) |  |  |  |  |
| **Handover** | | | | |
| Assessment is completed within a reasonable time frame (P1) |  |  |  |  |
| Communicates accurately and concisely, details of the dietetic assessment and diagnosis to supervising dietitian and/or other disciples as appropriate (C1) |  |  |  |  |
| Writes/types concise legible notes on assessment in appropriate documents (C1) |  |  |  |  |

**Based on this observation, three strengths of this assessment were:**

**1.**

**2.**

**3.**

**Based on this observation, three areas to work on/ actions points are:**

**1.**

**2.**

**3.**

**This consultation should be used as:**

**Summative assessment** (to be used as evidence of competency)  **OR Formative assessment**

**This could be used as evidence for (please circle)**

**K1 C1 CP1 CP2 P1**

Date:\_\_\_\_\_\_\_\_\_\_\_ Student Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Practice Educator signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

### Professionalism Checklist A2-NHS (To be completed by the Practice Educator)

**Practice Educator**

Please place a tick in the relevant column to indicate whether a skill or attribute is demonstrated: Sometimes, Usually, or Consistently at weeks 2 and 4. Once a student is demonstrating a skill or attribute consistently, please sign in the box. Students should progress to competence in all skills by week 4.

**PC = Professional Capability** *(Over the previous 2 weeks: Sometimes = Demonstrated on at least one occasion. Usually =More than 50% of the time. Consistent= Every time)*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Skills/attributes demonstrating professional behaviour** | **PC** | **Week 2** | | | **Week 4** | | | **Sign once demonstrated consistently** |
| **Demonstrates this . . .** | | | **Demonstrates this . . .** | | |
| **Consistently** | **Usually** | **Sometimes** | **Consistently** | **Usually** | **Sometimes** |
| **Appropriate time keeping and management, e.g.**   * Manages workload within departmental working hours * Reliable and punctual in attendance * Reports back at time requested * Completes assigned tasks on time * Uses time efficiently. | **P1**  **P2** |  |  |  |  |  |  |  |
| **Demonstrates a pro-active attitude, e.g.**   * Makes appropriate offers to help * Recognises learning needs and looks up information/ forms action plans. | **P1**  **P2** |  |  |  |  |  |  |  |
| **Demonstrates appropriate reflective skills, e.g.**   * During weekly feedback/in self-review * Acknowledges mistakes and treats as learning opportunities | **P1**  **P2** |  |  |  |  |  |  |  |
| **Demonstrates appropriate communication manner e.g.**   * Appropriate verbal skills to answer phone appropriately identifying self and area * Written/electronic skills to record and pass on messages accurately and concisely. * Appropriately uses ICT to communicate with colleagues and service users (maintaining ethical practice) | **C1**  **P1** |  |  |  |  |  |  |  |
| **Understands and demonstrates the concept of safe practice and recognises own limitations e.g.**   * Asking for help when needed * Incident reporting and health and safety issues * **Complies with protocols e.g. hand washing.** * **Understands concept of risk assessment.** | **K1**  **P1** |  |  |  |  |  |  |  |
| **Takes an objective approach to meeting service user needs at all times, irrespective of personal beliefs and values** | **P1** |  |  |  |  |  |  |  |
| **Demonstrates appropriate behaviour, e.g.**   * Has appropriate and culturally sensitive relationships and rapport with patients/clients and other professionals/members of the team * Acts in accordance with current legislation applicable to Equality, Diversity and Inclusion * Demonstrates an appropriate level of confidence * Act in a manner consistent with the values and priorities of the organisation and profession | **C1**  **P1** |  |  |  |  |  |  |  |
| **Adheres to departmental dress code** | **P1** |  |  |  |  |  |  |  |
| **Maintains confidentiality, e.g.**  Adheres to data protection including electronic records and communications | **P1** |  |  |  |  |  |  |  |
| **Actively seeks and responds appropriately to feedback, e.g.**   * Changes behaviour in light of feedback, where appropriate * **Uses feedback effectively to improve knowledge, skills and professional practice** * Is respectful of feedback from peers, dietitians and other professionals/ team members | **P1**  **P2** |  |  |  |  |  |  |  |
| **Using IT effectively, e.g.**  **To obtain results, look up information, communicate with other staff.** | **C1**  **P1** |  |  |  |  |  |  |  |
| **Takes responsibility for own learning e.g.**   * Seeks answers to questions without asking first. * Contributes to departmental meetings and other activities. * Keeps an up to date portfolio of evidence of development * Demonstrates evaluation of own performance | **P1**  **P2** |  |  |  |  |  |  |  |

**This could be used as evidence for (please circle)**

**K1 C1 P1 P2**

### Dietetic Practice Form A2- NHS

**Student**

You need to complete and include in your portfolio, one of these forms in week one and two of these forms in every other week of this placement.

**You will need evidence from activity with at least 2 new and 1 review patients/clients, ideally seen in a range of settings.**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Date:** |  | | | | | |
| **Week**  (Please circle): | **1** | **2** | | **3** | | **4** |
| **Type of Patient/client:** | New/Review | | In/out Patient/ Home visit | | Adult/Child | |
| Other information (e.g. working with an interpreter) | | | | | | |
| Current Strengths: | | | | | | |
| Key areas to focus on to develop skills: | | | | | | |
| This has been discussed with my supervising dietitian  Signed student:  Signed dietitian:  Date: | | | | | | |

The completed care plan should be attached to a dietetic consultation assessment tool, completed by the supervising dietitian (practice educator). It should then be given to the practice educator for checking and signing.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **This could be used as evidence for (PE to circle if appropriate):** | | | | | | | | |
| **K1** | **CP1** | **CP2** | **CP3** | **CP4** | **P2** |  |  |

**Patient Details:**

|  |  |
| --- | --- |
| **Age** |  |
| **Gender** |  |
| **Reason for referral** |  |

**Dietetic Assessment: (K1; CP1)**

**(A) Anthropometry and Functionality** *(Consider all relevant anthropometric variables and functional measures, including timeframe where appropriate)*

**(B) Biochemistry** *(consider relevant biochemistry including reference ranges)*

**(C) Clinical:** *(consider signs and symptoms, relevant recent and past medical history, family history, relevant medications)*

**(D) Dietetic:** *(include summary of factors affecting dietary intake, qualitative and quantitative assessment of diet history, consider relevant nutrients)*

**(E) Estimated nutritional requirements** *(Consider energy, protein, fluid and any other relevant nutritional requirements)*

**(F) Family/Environmental/Lifestyle/Psychosocial** *(consider social and psychological factors, ethical and cultural considerations, communication needs, readiness to change, barriers to change)*

**Dietetic Diagnosis: (CP2)**

**Problem:** *(What is the dietetic problem or need?)*

**Aetiology:** *(What is the cause/ background?)*

**Signs and symptoms:** *(How is it showing itself?)*

**Desired outcomes/ goals of nutritional intervention: (CP3)**

*On this placement, the supervising dietitian may formulate the desired outcomes/goals, but you should still document them here*

1**.**

2**.**

3.

**Dietetic Management Plan: (CP3)**

*On this placement, the supervising dietitian will develop the plan to achieve the outcomes, but you should still document the key elements here*

**Monitoring, Review and Evaluation plans: (CP4)**

*On this placement, the supervising dietitian will outline the monitoring plan, but you should still document the key elements here, including the outcomes to be measured, and the timescale*

**Reflective Account: (P2)**

**How did I start the consultation and build rapport with patients/clients, relatives or staff?**

**Were there any difficulties or areas that went well with my communication to the patient/client, relatives or staff?**

**What communication approaches did I use and was I effective?**

**Did I collect and record all relevant information? Was there anything I missed?**

**Did I recognise and note any factors that may affect compliance?**

**Did I correctly identify the dietetic problems, their causes and presenting symptoms?**

**Was I able to prioritise the problems and justify this prioritisation?**

**How did the dietitian use the information to set dietetic goals/outcomes that were acceptable to the patient/client and evidence based?**

**How did the dietitian set a plan for monitoring and review?**

**What was challenging about this experience?**

**Action points:** (Please note 3 action points to take forwards)

**Critical Discussion pro forma:**

**Student**

**Dietetic management plan/intervention**

You must complete at least one of these forms for a chosen consultation with a newly referred patient/client to evaluate how the dietitian used the available information and critical thinking to devise and implement an appropriate action plan/intervention

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Date:** |  | | | | | |
| **Week**  (Please circle): | **1** | **2** | | **3** | | **4** |
| **Type of Patient/client:** | In/out Patient/ Home visit | | Adult/Child | | Reason for referral | |
| Other information (e.g. working through interpreter) | | | | | | |
| This has been discussed with my supervising dietitian  Signed student:  Signed dietitian:  Date: | | | | | | |

The completed critical evaluation should be attached to a dietetic consultation assessment tool that has been completed by the supervising dietitian (practice educator) and the dietetic care plan that you have completed for the consultation.

After discussion, this form should be given to the practice educator for verification (signing).

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **This could be used as evidence for (PE to circle if appropriate)** | | | | | | | | | |
| **CP3** | **P1** | **P2** |  |  |  |  |  |  |  |

**Critical Discussion of Dietetic management plans/intervention**

**In your evaluation, consider how the dietitian (if relevant):**

* Negotiated SMART goals with the patient/client and/or carer, other professionals
* Individualised the advice to the patient/client
* Acknowledged and considered the patient/client’s beliefs, attitudes and knowledge
* Used the evidence base to provide accurate information
* Explained reasons for the advice given to the patient/client/carer
* Used appropriate visual aids or written information
* Included strategies to overcome identified barriers to compliance
* Responded to questions

**Is there anything that you might have done differently?**

**Learning points:** (Please note 3 learning points from this observation experience)

**How will you apply this to your future training?**

**Critical Discussion pro forma:**

**Student**

**Dietetic monitoring and evaluation of interventions**

You must complete at least one of these forms for a chosen consultation with a review/follow-up patient/client to evaluate how the dietitian reviewed, monitored and evaluated the intervention

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Date:** |  | | | | | |
| **Week**  (Please circle): | **1** | **2** | | **3** | | **4** |
| **Type of Patient/client:** | In/out Patient/ Home visit | | Adult/Child | | Reason for review: | |
| Other information (e.g. working through interpreter) | | | | | | |
| This has been discussed with my supervising dietitian  Signed student:  Signed dietitian:  Date: | | | | | | |

The completed critical evaluation should be attached to a dietetic consultation assessment tool, completed by the supervising dietitian (practice educator) and the dietetic care plan that you have completed for the consultation.

After discussion, this form should be given to the practice educator for verification (signing).

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **This could be used as evidence for (PE to circle if appropriate)** | | | | | | | | | |
| **CP4** | **P1** | **P2** |  |  |  |  |  |  |  |

**Critical Discussion of Dietetic monitoring and evaluation of interventions**

**In your evaluation, consider how the dietitian (if relevant):**

* Checked progress to date with the patient/client and/or carer, other professionals
* Reviewed the dietetic aims
* Measured the outcomes of the intervention and communicated this back to the patient/client and/or carer, other professionals
* Evaluated patient/client and/or carer understanding of progress
* Negotiated new SMART goals with the patient/client and/or carer, other professionals
* Used the evidence base to provide accurate information
* Explained reasons for the advice given to the patient/client/carer (including any changes from the last consultation)
* Used appropriate visual aids or written information
* Included strategies to overcome identified barriers to compliance
* Responded to questions

**Is there anything that you might have done differently?**

**Learning points:** (Please note 3 learning points from this observation experience)

**How will you apply this to your future training?**

**Reflective Pro forma**

**Student**

|  |  |
| --- | --- |
| **Date:** | |
| **Issue or experience:** | |
| Describe Describe what happened and who was involved. |  |
| Evaluation What was good or bad about the experience?  Why was it good or bad?  What else could you have done? |  |
| ***Feelings***  How did you feel? |  |
| Reflection What have you learnt from the experience? |  |
| **Action Plan**  If you had this situation again, what would you do differently? |  |

**This could be used as evidence for (PE to circle if appropriate)**

**K1` P1 P2**

**Verified Witness Statement**

**Dietitian/HCP/Team member**

Student’s Name: Date:

Supervisor Name: Role:

## To be completed by the Dietitian/Health Professional/Team member

*Please answer the questions below, by placing a tick in the relevant box*

**Punctuality and time management**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes** | **No** | **N/A** |
| Did the student arrive on time? |  |  |  |
| Did the student use their time effectively? |  |  |  |
| Did the student report back at the required time? |  |  |  |

**Communication**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Yes** | **No** | **N/A** |
| Did the student introduce themselves? |  |  |  |
| Did the student initiate conversation? |  |  |  |
| Did the student use an appropriate level of language? |  |  |  |
| Did the student respond to non-verbal communication? |  |  |  |
| Did the student demonstrate the ability to listen? |  |  |  |
| Did the student ask appropriate questions? |  |  |  |
| Did the student respond appropriately to questions? |  |  |  |

Please add any further comments related to effective communication and/or professional behaviour

|  |
| --- |
|  |

Signature of Student

Signature of Dietitian/HP/ Team member Date:

(PRINT NAME )

**This could be used as evidence for (PE to circle if appropriate)**

**K1 C1 P1**

**Service user/ carer. Initial approach should be made by PE**

### Service User Feedback Form

Feedback about your experience with student dietitians is valuable information. If you would like to provide feedback, please tick the boxes below, which most accurately reflect your experience. Base your answers only on the consultation or interaction you have had today.  
**Please do not record your name on this questionnaire.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Question | **Yes, definitely** | **Yes, to some extent** | **Not really** | **Definitely not** | **Does not apply/ Not sure** |
| 1. Did the student dietitian introduce himself or herself to you? |  |  |  |  |  |
| 2. Did the student seek your consent to speak with you? |  |  |  |  |  |
| 3. Did the student dietitian explain the purpose of the conversation? |  |  |  |  |  |
| 4. Did you feel that the student dietitian listened to you? |  |  |  |  |  |
| 5. Did the student dietitian ask questions in a way you could understand? |  |  |  |  |  |
| 6. Did the student look at you when they were asking questions? |  |  |  |  |  |
| 7. Did the student dietitian give you enough opportunity to ask questions |  |  |  |  |  |
| 8. Did the student dietitian respect your views? |  |  |  |  |  |
| 9. Was the student dietitian dressed appropriately? |  |  |  |  |  |

**Please make additional comments about the student dietitian in the space below or overleaf to help us understand your response**

|  |
| --- |
|  |

**This could be used as evidence for (PE to circle if appropriate)**

**C1 P1**

Weekly Feedback Form A2 NHS:

**Student & PE**

Week No: Date:

* This form should be completed during the week. It should be brought to the weekly review meeting, together with all portfolio evidence gathered that week, for discussion with the supervising dietitian. Both parties should sign this form to indicate it is an accurate record. It should then be used to develop the action plan for the following week.
* Strengths and completed action plans can be used as evidence toward competency
* In week 2, please indicate whether the benchmark standards have been met for the half-way point (Benchmarks start on p.17)

|  |  |  |
| --- | --- | --- |
|  | **Learner Comments** | **Educator Comments:** |
| **Current Main Strengths**  **Knowledge (K1)**  **Communication (C1)**  **The Care Process (CP1- CP4)**  **Professional Practice (P1, P2)** |  |  |
| **Key Areas for Improvement and means of doing so**  **Knowledge (K1)**  **Communication (C1)**  **The Care Process (CP1- CP4)**  **Professional Practice (P1, P2)** |  |  |
| **You should have reflected on your practice this week using your reflective diary**  **Give one example of good practice**  **Give one example of how you would do something differently** |  |  |
| **Learning activities not met this week**  **Any other issues you would like to discuss** |  |  |
| **WEEK 2 ONLY: Halfway Review**  **Please comment on whether the week 2 benchmarks have been met/ not met** | **(K1):** | **(K1):** |
| **(C1):** | **(C1):** |
| **(CP1-CP4)** | **(CP1-CP4):** |
| **(P1, P2):** | **(P1, P2)** |

**Agreed action plan for the following week:**

**Signed.....................................................................(Practice Educator) &.........................................................(Student)**

**Review of Placement A2 Form- NHS**

|  |  |
| --- | --- |
| **Name of Student** |  |
| **Signature of student** |  |
| **Name of Dietitian** |  |
| **Signature of Dietitian** |  |
| **Location of Placement** |  |
| **Date**  **From: To:** |  |
| **Number of Weeks Completed** |  |
| **Days absent (and dates)** |  |
| **Extra days worked** |  |

It is expected that you will prepare for this meeting by completing this form with a summary record of the evidence collected to meet each professional capability that can then be cross checked/ confirmed by the practice educator. **They will make a final decision as to whether you have passed the placement by considering whether there is sufficient evidence that you have met the required benchmark standards for each professional capability.** You must both sign the form and maintain a copy in your portfolio.

After completion, this form should be sent to the student’s tutor (electronically and by post) with the placement feedback form.

Is there evidence to demonstrate that all the professional capabilities have been met to the level of the benchmark standards? If not, please identify the omissions below:

|  |
| --- |
| **Week 4 Capabilities not met:** |

**Please identify any strengths and areas for further development that have been identified during the placement using the portfolio evidence to inform your comments.**

|  |
| --- |
| **Knowledge:** Demonstrate comprehensive knowledge of all areas required to support dietetic practice in placement A2 |
| **Strengths**  **Areas for development and action points** |

|  |
| --- |
| **Communication:** Communicate effectively in all areas of dietetic practice experienced on placement A2 [with evidence including communication with service users/carers, group facilitation, members of the public, reporting under supervision] |
| **Strengths**  **Areas for development and action points** |
| **The Care Process (Student doing)**  **With decreasing direction:**  **CP1:** Be able to identify, collect and interpret relevant information and evidence from the range of sources available to assess the nutritional and dietetic needs of individuals, groups and communities  **CP2:** Formulate and justify a reasoned nutrition and dietetic diagnosis (or need) on the basis of current knowledge, which informs the aims of interventions or action plans. |
| **Strengths**  **Areas for development and action points** |

|  |
| --- |
| **The Care Process (Student observing)**  **With decreasing direction:**  **CP3:** Explain and critically evaluate how the dietitian (with individuals, groups and communities):   * uses the information gathered and critical thinking to formulate and justify the desired outcomes of interventions or action plans * uses the information gathered and critical thinking to design and implement suitable dietetic management plans to achieve the desired outcomes   **CP4:** Explain and critically evaluate how the dietitian (with individuals, groups and communities) reviews, monitors and evaluates interventions or action plans undertaken as part of dietetic practice. |
| **Strengths**  **Areas for development and action points** |

|  |
| --- |
| **Professionalism:**  **P1:** Demonstrate consistent professional behavior, in accordance with the legal and ethical boundaries of the dietetic profession and the requirements of the HCPC  **P2:** Self-evaluate knowledge and professional capabilities and formulate action plans to demonstrate ongoing commitment to personal and professional development.  **Strengths**  **Areas for development and action points** |

|  |  |  |  |
| --- | --- | --- | --- |
| **EXPERIENCE GAINED IN ACUTE AND / OR COMMUNITY SETTINGS** | | | |
| **ACUTE** | | **COMMUNITY** | |
| Inpatients | Outpatients | Clinics | Other |
|  |  |  |  |

|  |  |
| --- | --- |
| **DIETETIC PRACTICE AREAS COVERED ON A2** | |
| **PRACTICE AREAS** | **COMMENTS** |
| e.g. Nutrition support, Diabetes | e.g. observed only; undertook assessment independently |

**Summary of achieved week 4 capabilities for placement A2 (NHS)**

|  |  |
| --- | --- |
| **Professional Capability** | **Please Enter Met or Not Met, or N/A** |
| **K1:** Demonstrate comprehensive knowledge of all areas required to support dietetic practice in placement A2 |  |
| **C1:** Communicate effectively in all areas of dietetic practice experienced on placement A2 [with evidence including communication with service users/carers, group facilitation, members of the public, reporting under supervision] |  |
| **With decreasing direction:**  **CP1:** Be able to identify, collect and interpret relevant information and evidence from the range of sources available to assess the nutritional and dietetic needs of individuals, groups and communities |  |
| **With decreasing direction:**  **CP2:** Formulate and justify a reasoned nutrition and dietetic diagnosis (or need) on the basis of current knowledge, which informs the aims of interventions or action plans. |  |
| **With decreasing direction:**  **CP3:** Explain and critically evaluate how the dietitian (with individuals, groups and communities):   * uses the information gathered and critical thinking to formulate and justify the desired outcomes of interventions or action plans * uses the information gathered and critical thinking to design and implement suitable dietetic management plans to achieve the desired outcomes |  |
| **With decreasing direction:**  **CP4:** Explain and critically evaluate how the dietitian (with individuals, groups and communities) reviews, monitors and evaluates interventions or action plans undertaken as part of dietetic practice. |  |
| **P1:** Demonstrate consistent professional behavior, in accordance with the legal and ethical boundaries of the dietetic profession and the requirements of the HCPC |  |
| **P2:** Self-evaluate knowledge and professional capabilities and formulate action plans to demonstrate ongoing commitment to personal and professional development. |  |

**\*N/A should only be entered if there has been no opportunity for the student to demonstrate the professional capability and to be fairly assessed against the benchmark standard in this 4-week part of placement A2.**