Overview
Students wishing to qualify register and work as a dietitian need to take an undergraduate or postgraduate course in dietetics in one of the twelve higher education institutions (HEIs) and universities in the U.K. approved by the Health Professions Council (HPC). Undergraduate courses are usually four years and postgraduate courses from one and a half to two and a half years. As part of the pre-registration course, students undertake three skill-based clinical placements of 4, 12 and 12 weeks in dietetics departments approved by the HPC. These shorter placements are replacing knowledge-based placements of 6 weeks catering and 28 weeks clinical dietetics.

Current practice
On placement, students are the responsibility of the dietetics (base) trainer. The trainer is usually either the Dietetics Services Manager or a senior dietitian in the department. The trainer designs the programme and makes the appropriate arrangements. The placement is usually organized in blocks of one or two weeks with different dietitians ensuring that the student gets a range of appropriate dietetics experience and practice and has the opportunity to develop their dietetics skills. The supervising dietitian at the end of each block gives feedback to the student. On completion of the placement the trainer and the supervising dietitian assess the student’s competencies on the basis of their observations and the students portfolio of evidence. Dietetics does not have HEI dietetics academic staff whose main task is the supervision and support of students on placement.

Discussion
Many of the HEIs are already offering clinical supervisory skill courses to dietitians who are training students on their placements. Supervisory skills training should be made available to all dietitians supervising dietetics students on placement. In addition, all base trainers need to be offered advanced clinical supervisory skills course. Such courses should be available through all HEIs training dietetics students.

Summary
Clinical supervisory skills training should be developed for all dietitians participating in the supervision of dietetic students. Courses are needed at two levels: basic and advanced. These courses should be accredited for the BDA Diploma in Advanced Dietetics Practice.

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CASE STUDIES
DIETETICS
An Overview of the Nature of the Preparation of Practice Educators in Five Health Care Disciplines
ACKNOWLEDGEMENTS

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## DIETETICS

### Abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>AHP</td>
<td>Allied Health Professionals</td>
</tr>
<tr>
<td>Base trainer</td>
<td>Dietitian in a dietetics department responsible for student training</td>
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<tr>
<td>BDA</td>
<td>British Dietetic Association</td>
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<tr>
<td>CPD</td>
<td>Continuous Professional Development</td>
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<tr>
<td>CPSM</td>
<td>Council for Professions Supplementary to Medicine</td>
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<tr>
<td>DHSS</td>
<td>Department of Health and Social Services, Northern Ireland</td>
</tr>
<tr>
<td>EU</td>
<td>European Union</td>
</tr>
<tr>
<td>HEI</td>
<td>Higher Education Institute (universities and certain colleges)</td>
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<tr>
<td>HPC</td>
<td>Health Professions Council</td>
</tr>
<tr>
<td>M.Nutr</td>
<td>Masters in Nutrition</td>
</tr>
<tr>
<td>NHS</td>
<td>National Health Service</td>
</tr>
<tr>
<td>PgD/M.Sc.</td>
<td>Postgraduate Diploma/Master of Science linked course</td>
</tr>
<tr>
<td>Ph.D.</td>
<td>Doctor of Philosophy</td>
</tr>
<tr>
<td>SAS</td>
<td>Scottish Assembly in Scotland</td>
</tr>
<tr>
<td>SHA</td>
<td>Strategic Health Authorities (England)</td>
</tr>
<tr>
<td>UWIC</td>
<td>University of Wales Institute, Cardiff</td>
</tr>
<tr>
<td>U.K.</td>
<td>United Kingdom</td>
</tr>
<tr>
<td>WDC</td>
<td>Workforce Development Consortia</td>
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Dietitians work with patients in critical care, acute and chronic illness in hospitals and the community. They use dietary manipulation and food to treat disease and optimise health. They also work in health promotion and in public health nutrition.

The practice of dietetics is based on nutritional science. It incorporates an understanding of the nutrient composition of food, the nature of nutrients and their metabolism in the body, with knowledge of the nutritional requirements of people through the lifecycle, the dietary effects of foods on health and the ways in which food can be used to treat disease and promote health in individuals and groups. It is a broad based subject ranging from the biological, chemical and clinical sciences through to social sciences (QAA 2001).

Dietetics is a relatively small profession with approximately 6000 dietitians registered with the Health Professions Council (HPC), the regulatory body for dietitians. Not all dietitians on the HPC register work in the U.K. About 5000 registered dietitians are members of the British Dietetic Association (BDA), the dietitians’ professional body and their trade union. Membership of the BDA includes professional indemnity cover. Dietetics is predominantly a female profession. The NHS has declared it as a “shortage” profession as many NHS trusts are unable to fill jobs advertised. Dietetics departments have difficulty in recruiting basic grade dietitians. The NHS has declared it as a “shortage” profession as many NHS trusts are unable to fill jobs advertised. Dietetics departments have difficulty in recruiting basic grade dietitians. The NHS has declared it as a “shortage” profession as many NHS trusts are unable to fill jobs advertised. Dietetics departments have difficulty in recruiting basic grade dietitians. The NHS has declared it as a “shortage” profession as many NHS trusts are unable to fill jobs advertised. Dietetics departments have difficulty in recruiting basic grade dietitians. The NHS has declared it as a “shortage” profession as many NHS trusts are unable to fill jobs advertised. Dietetics departments have difficulty in recruiting basic grade dietitians. The NHS has declared it as a “shortage” profession as many NHS trusts are unable to fill jobs advertised. Dietetics departments have difficulty in recruiting basic grade dietitians. The NHS has declared it as a “shortage” profession as many NHS trusts are unable to fill jobs advertised. Dietetics departments have difficulty in recruiting basic grade dietitians.

Since 1962, the Dietitians Board of the Council for Professions Supplementary to Medicine (CPSM), (the pre-2002 dietetics regulatory body now the HPC), has determined the education and training requirements for pre-registration training of dietitians. In November 2000, the Dietitians’ Board published new ‘Course Requirements and Guidelines for Pre-Registration Courses leading to State Registration in Dietetics’.

There have never been colleges of dietetics as there were for other Allied Health Professions (AHP). Dietetic pre-registration education and training has always been a partnership between higher education institutes (HEIs/universities) and the National Health Service (NHS) dietetic departments. The academic study of dietetics and the science and social science underpinning the subject have been taught by HEIs. Dietitians, appointed as members of academic staff in the HEI, are responsible for the dietetics course structure, placement administration and the overseeing of the placement application process. Traditionally certain UK hospital dietetic departments have provided the clinical practice placements with the Chief Dietitian/Dietetic Services Manager responsible for the students’ placement including the planning of the weekly placements, making the arrangements with other departments or sites as required, overall supervision and assessment and writing the final reports. The dietitians in the department undertake the day to day supervision, training and formative and summative assessment of students on placement. Normally a member of the HEI dietetic staff visits students on placement. Unlike other AHPs, HEIs do not normally employ dietetic clinical tutors whose primary job is to oversee student placements including approval of placements, and student supervision, support and assessment.

Dietetics has been an all-graduate profession since 1986. There are currently twelve HEIs in the UK and one HEI in the Republic of Ireland providing pre-registration dietetic education and training. There are about 450 students a year undertaking dietetic pre-registration training. A new undergraduate course at the University of Plymouth is being planned and 50 places have been commissioned commencing in September 2004. Pre-registration courses are both at undergraduate and postgraduate diploma level and are located in departments of Human Nutrition, Food Science, Biomedical Sciences, Health Sciences and Biology, see Table One.

Dublin Institute of Technology also offers a B.Sc (Hons) in Nutrition and Dietetics.

Table One: HEIs offering pre-registration dietetics education and training, degrees offered and number of students registered in Year 1 2002. The number of male students is indicated in brackets.
New courses in dietetics are also coming on line: from 2003 Chester College has offered a B.Sc. (Hons) degree; and London Metropolitan University has offered a PgD/M.Sc.; from 2004 the University of Plymouth will offer a B.Sc. (Hons) degree; and from 2005 the University of Surrey may offer a PgD/M.Sc..

Undergraduate courses are usually for four years and postgraduate courses vary in duration from 1 to 2 years. Different HEIs attract applications from different student markets. Some HEIs like Robert Gordon University, Kings College London, Nottingham University and the University of Surrey recruit students from across the U.K. and the European Union whilst others tend to recruit students more locally for example Coventry and the London Metropolitan Universities. The University of Ulster mainly recruits students from the island of Ireland. The majority of dietetic students are female and of white origin although the ethnic mix of specific institutions reflect the communities and recruitment catchment area that they serve. For a breakdown of students by ethnic origin see Appendix 1. Up to 11% of students in a course may have learning and/or physical disabilities (See Appendix 3). It should be noted to 11% of students in a course may have learning and/or physical disabilities.

The number of clinical dietetics placements available nationally has limited the number of dietetic students recruited on to pre-registration dietetic courses by HEIs. Up to about 2000, under a “gentleman’s agreement” between HEIs training dietetic students, each HEI could take an agreed number of students onto their courses and be reasonably sure that all students would be allocated placements within the national system. The agreed number of students for each HEI was based on historical precedent unless the HEI could show that it had generated new placements to match the number of extra students taken on to their courses.

From 1984 to 2000, the Diététiquiers Board of CPSM required that dietetic pre-registration students undertake two blocks of placements: 6 weeks Catering and 28 weeks (with 3 weeks holiday) clinical dietetics. From November 2000, new Course requirements and Guidelines for Pre-Registration Courses leading to State Registration in Dietetics require that students undertake 3 placement blocks of 4, 12 and 12 weeks.

Because dietetics has been taught in HEIs, mostly in conjunction with food science and/or human nutrition, there are a higher proportion of dietitians with Ph.D.s than in other health professions, see Table Two.

Table Two: Numbers of Allied Health Professionals with Ph.D. degrees (Towards a Research Strategy for Allied Health Professions (2001)).

<table>
<thead>
<tr>
<th>Dietetics</th>
<th>Podiatry</th>
<th>Occupational Therapy</th>
<th>Physiotherapy</th>
<th>Radiography</th>
<th>Speech &amp; Language Therapy</th>
</tr>
</thead>
<tbody>
<tr>
<td>State Registered</td>
<td>4999</td>
<td>3447</td>
<td>21006</td>
<td>30002</td>
<td>19696</td>
</tr>
<tr>
<td>State Registered &amp; Teaching</td>
<td>33</td>
<td>80</td>
<td>237</td>
<td>480</td>
<td>206</td>
</tr>
<tr>
<td>With Ph.D.s</td>
<td>50-100</td>
<td>12</td>
<td>60-80</td>
<td>130</td>
<td>8</td>
</tr>
</tbody>
</table>

Dietetics departments have been reluctant to start training students for the following reasons:

- Trusts have to pay student-training allowances under the Whitley terms and conditions. Therefore training students is a financial cost to the Trust;
- Almost all dietitians in a department participate in the training of students. The first part of Placement B is labour intensive, as students require almost constant supervision as they have to be shown where and how to appropriately obtain information and how to give information to patients/clients. This takes dietitians time and means that, while they are supervising a student, they may be unable to meet their full commissioned caseload. Towards the end of their training when students can work independently, students may facilitate the work of a department;
- Students need at least access to a desk in a department although many departments use a system of hot-desking. They also need access to some reference books and journals. Some departments are small and so are limited by their available space and resources;
- Staff may not have, or may not believe that they have, the knowledge and skills required for training, supervising and assessing students;
- The process to gain HPC approval to become a student trainer may be perceived as time intensive and daunting.

The new Board “Course requirements and Guidelines for Pre-Registration Courses leading to State Registration in Dietetics” (2000.) broke the clinical placements from a block of 28 weeks to 3 blocks of 4, 12 and 12 weeks. It was hoped that by having smaller blocks of placement, more dietetics departments in NHS Trusts could participate in the clinical training of students and that HEIs would integrate clinical placements into academic studies. It had been intended that the NHS Agenda for Change which reviewed NHS staff grades and salaries would result in a student training allowance being included in the salary of dietitians who were actively training students.

In order to increase the number of Trusts taking students for placements, dietetic facilitators have been funded by Workforce Development Consortia (WDC) to become Strategic Health Authorities (SHA) in some regions of England and by the Welsh Assembly in Wales and the Scottish Assembly in Scotland (SAS), to encourage and support more dietetics departments to undertake student training. The job of the facilitators have been to:

- identify hospital departments that are not training students;
- encourage those departments to train students by helping them plan the placement, train the staff and prepare the required documentation for the HPC approval;
- support staff as they take students for the first time.

These facilitators have had a key role in encouraging more dietetic departments to train students.

The CPSM Diététiquiers Board and the successor the Health Professions Council (HPC) have separately approved HEIs and hospital dietetic departments for training dietetic students, with the HPC retaining the records of those institutions and placements it has approved. From July, 2004, the HPC will continue to approve HEIs for pre-registration training but will hand over, to the HEIs, the responsibilities of approving and monitoring dietetic clinical placements. In order to facilitate this approval process, criteria for clinical dietetic placements are being drawn up.

Each dietetic department may take between one and four dietetics students at three or four starting times a year. The BDA Placement Officer, whose post is currently funded by
the HEIs, allocates the available dietetics clinical placements to students ensuring that their starting date is appropriate for their HEI. Since the different HEIs send their students on placements at different times of the year, this national system:

- ensures that all the clinical placements available are used throughout the year;
- enabled each HEI to send all their students on each of the placement blocks starting at the same time of the year. If an HEI had students starting at different times of the year, the HEI would have to double teach thereby increasing the workloads of academic staff and costs to the institution;
- has helped students' personal development, widened students' knowledge of the UK, its many cultures, eating patterns and behaviours;
- assisted in the dissemination of good dietetic practice across the country to the benefit of the profession.

Traditionally, HEIs in Wales, Scotland and Northern Ireland have provided the academic component of the training for more students than they have had clinical placements, using the extra clinical placements available in England. With regionalisation, English Workforce Development Consortia (WDC), responsible for commissioning training for dietitians and other AHPs from English HEIs, have increased the numbers of dietetic training places commissioned from English HEIs to meet the increased demand for qualified dietitians. WDCs consider HEIs in Wales, Scotland and Northern Ireland the arrangements for commissioning of dietetic student places at HEIs are slightly different.

WDCs (to become Strategic Health Authorities (SHAs)) would like HEIs to take local students and give them local placements. HEIs do not believe that local placements with local students is best for the profession. HEIs believe that placing students nationally ensures maximum use of the limited number of placements while allowing HEIs to be efficient with their delivery of courses, and optimise opportunities for students' personal development and professional learning.

It should be noted that, from September 2005, the BDA will withdraw its support of the BDA Placement Officer. The University Dietetics Education Group (UDEG) is considering alternative methods of employing a placement officer.

University Dietetics Educators Group (UDEG – formerly the University Tutors Group)

Representatives of each of the universities offering pre-registration courses together with the BDA Education and Training Officer and the BDA Placement Officer meet at least twice a year to discuss issues of pre-registration education and training. This forum has enabled all institutions to be aware of the changes that are taking place in dietetics education and in particular placements. It has also provided a network and support system for dietetic tutors.

BDA Student training forum:

For many years, the BDA has organized an annual meeting for both base trainers and representatives from HEIs to discuss issues relating to pre-registration training especially placements. Because of the increased numbers of Trusts offering dietetic training, from 2004 these meetings will be organised regionally rather than nationally. Matters of education and training will now be included in the BDA's annual conference.

Appendices 3 to 9 detail the learning outcomes, the forms to be completed by the students before, during and after each placement and the type of programme that may be undertaken for each of the placements (Dietitians Board, CPSM (2000)).

Nature of Dietetics Practice (Clinical) Placements

HPC requirements for practice placements:

The Dietitians Board require dietetic clinical placements to consist of three blocks:

- Placement A 4 weeks
- Placement B 12 weeks
- Placement C 12 weeks

Following each block, students are required to return to their HEI to consolidate their knowledge. There must be at least 4 weeks at university between Placements B and Placement C.

Aims of each of the placement blocks (Dietitians Board, CPSM (2000))

Placement A aims to:

- introduce the student to the work of a dietitian;
- provide the student with opportunities to practice communication skills with patients and healthcare workers and demonstrate basic communication skills;
- create awareness by the student of the interaction of dietitians with other health professions;
- provide the student experience in an institutional food production unit;
- make the student aware of the complementary roles of the catering and dietetics services;
- allow the student to demonstrate the ability to apply their knowledge of food portion sizes, basic cooking methods, standard recipes and recipe modification and the range of food products available to the public including nutrient modified foods to menu planning.

Placement B aims to:

- enable the student to translate theory into practice for patients seen in this placement;
- develop the student's confidence in obtaining information and advising clients;
- develop the student's interpersonal and social skills to facilitate communication with clients;
- develop the student's skills of self and time management with respect to their own learning and management of a given workload;
- assist a student to gain insight into health promotion and public health strategies;
- develop the student's professional approach to dietetics practice.

Placement C aims to:

- enable the student to become competent in transferring theory into practice;
- enable the student to become competent in obtaining information and advising clients;
- ensure that the student can communicate with all clients using all appropriate interpersonal, social and counselling skills;
- ensure that the student is competent in handling a full workload in line with given standards;
- enable the student to become competent in the delivery of health promotion and public health strategies;
- enable the student to show a commitment to the delivery of an explicit quality of service.

Appendices 3 to 9 detail the learning outcomes, the forms to be completed by the students before, during and after each placement and the type of programme that may be undertaken for each of the placements (Dietitians Board, CPSM (2000)).
Overview of Practice Education in Dietetics

Placement Allocation Process
All HEIs contribute to the cost of the BDA employing a placement officer. Each Trust (base trainer) completes a form indicating the clinical placements they can offer and when. The placement officer collates this information and makes it available, through each HEI dietetic placement coordinator, to students in September when they are applying for placements in the coming year (January to December). Students complete forms indicating their preference for hospitals or areas where they wish to undertake their placement(s) and indicate if they have any special reason for needing to be placed at a particular hospital or area (priority placement). Acceptable reasons for requesting a priority placement include family responsibilities (children, parents or relatives needing care and support), and financial commitments such as a mortgage. These forms are collated by each HEI Placement tutor and sent to the BDA placement officer who allocates students to placements and informs the base trainers and the HEI tutors. The HEI tutor tells the students where they have been placed. Normally the students contact the base trainer to determine starting dates and whether accommodation near the hospital is required. Base (or named) trainers provide students with information about their hospital, uniforms, etc.

Placement Organisation and Administration
Prior to the start of the placement, each student will complete the pre-placement form (see Appendix 3). With his/her HEI placement tutor. Copies of this form are sent to the BDA placement officer who allocates students to placements and informs the base trainers and the HEI tutor. The HEI tutor tells the students where they have been placed. Normally the students contact the base trainer to determine starting dates and whether accommodation near the hospital is required. Base (or named) trainers provide students with information about their hospital, uniforms, etc.

Towards the end of the placement, the base trainer along with the staff who have participated in the training, completes the assessment, checking that the student has met all required competencies learning outcomes. At the end of the training, their report is sent to the HEI and is available for inspection by the HEI External Examiner.

Sources of Funding
- HEIs are contracted by the SHAs to provide pre-registration training for dietitians;
- Trusts may fund dietetic departments to train students. In Northern Ireland, dietetic departments can claim £70/week training allowance from the Department of Health and Social Services (DHSS);
- Students are paid means-tested bursaries by the NHS (or SAS in Scotland, Welsh Assembly in Wales and the DHSS in Northern Ireland) depending on their (parents) income.

Roles and Responsibilities in Practice Education
As laid down by the Dietitians Board (Dietitians Board, CPSM 2000):

HEIs are responsible for ensuring that the student has completed and passed the approved course of academic study and practical exercises to prepare them for each of the placements and completed the respective Review of Student Pre-Placement forms. These Review of Student Placement forms are sent to the supervising dietitian prior to the student starting the placement. On completion of placement, students return to their HEI for debriefing, practical exercises, possibly further study and completion of pre-placement forms for the next placement. On completion of the final placements, the HEI are responsible for the final summative examinations.

The named base trainer dietitian is responsible for the placement. He/she plans a programme that provides the student with the appropriate experiences to meet the learning outcomes of the placement with formative and summative assessments. The student will work in one to two week blocks with a range of dietitians during her placement. The base trainer assesses the student as being competent to practice on the completion of Placement C (subject to satisfactory academic performance).

The student is required to complete all placements and tasks associated with placement. They are expected to compile a portfolio of evidence to demonstrate that they have met the learning outcomes. Placements are full-time. Absence from placement for whatever reason has to be made good.

Clinical facilitators, funded by the SHA, WALES by the Welsh Assembly and Scotland by the SAS, encourage, support and mentor dietetics departments whether they are newly started as trainers or commencing the new style of student training.

Professional Requirements and Standards
Professional requirements and standards have been set by

- The Dietitians Board of CPSM (2000) now the HPC
- QAA Dietetic Benchmarks (2001)
- The HPC’s “Standards for Proficiency Dietitians” (2003).

Inter-Professional Learning
Inter-professional learning may take place both at the HEIs and during clinical placements.

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HEIs:

In HEIs, the opportunities available for inter-professional learning depend on where dietetics is taught in relation to other training courses for AHPs, nurses, doctors and dentists in the university. Dietetics is taught in departments/schools/faculties where other AHPs, nurses, doctors, etc.

Most HEIs are planning to introduce more structured inter-professional learning from 2004 or 2005. Inter-professional learning can be difficult to organise within the constraints of modular teaching, organisational differences and timing of placements.

Dietetic Clinical Placements:
Increasingly, dietetic clinical placements may contain one or two weeks where students work on wards as part of a multi-disciplinary team, for example in the Royal London and Hammersmith Hospitals.
The aim of Placement B is to teach the student to become competent to practice so at the end of the placement the student should be able to work with a wide range of clients/patients in the same way as a would newly qualified dietitian. Placements may be both in the acute and primary care setting although placements should not be in the same hospital/primary care unit as Placements A and B. A sample 12 week programme for Placement C is given in Appendix 9.

Student Status
The named base trainer takes the responsibility for students for their placement. The named base trainer is usually the Dietetics Services Manager or his/her nominee. This base trainer facilitates the student’s programme week by week and allocates the student to work under different dietitians in the department either on site or in primary care or community trusts. While with this dietitian, professional indemnity for the student is covered though the qualified dietitian’s own professional insurance. Student dietitians are not expected to hold professional indemnity cover in their own right.

Some Trusts require the HEI to provide limited public liability insurance whilst other Trusts give students honorary contracts over the period of their placements.

Students undertake placements at different stages of their course depending on the HEI. The Dietitians Board, CPSM encourages HEIs to send students out on placement as early as possible in the course as this placement allows students to become familiar with the work of dietitians. Placements B and C are towards the end of the course. The Dietitians Board requires the student to spend at least 4 weeks back at the HEI between blocks B and C.

Status of Practice Educator
In Dietetics there are no practice educators as such. All dietitians, except the most newly qualified, participate in the practical training and supervision of students. This enables dietetic students to see a range of different dietitians practicing dietetics, and to appraise their different approaches, assessments and methods in order to become proficient themselves. Towards the end of the Placement C, students will have their own caseload, reporting back to a qualified dietitian.

Preparation of Practice Educators
HEIs, Trusts or groups of Trusts provide courses in clinical supervisory skills. There are two levels of courses:

- Basic supervisory skills for all dietitians supervising students on placement;
- Intermediate/Advanced clinical supervisory skills training for the named (base) trainers as they are required to complete the summative assessment of the student, decide if a student requires extra weeks to meet the placement learning outcomes and take disciplinary action if necessary.

Supervisory skills training courses may be taught by dietetic placement facilitators, HEI academic staff and named (base) trainers. Some courses are accredited for continuous professional development (CPD) by the BDA for the Advanced Diploma in Dietetics Practice.

- Chester College is currently offering 3 basic level courses and two intermediate courses each training 60 –100 dietitians a year together with annual updates. These courses are funded by the SHA in the North-West;
- The University of Surrey’s placement facilitator has organized courses for all dietetic departments in Trusts within South East England;
- Queen Margaret’s University College Edinburgh with Glasgow Caledonian University under Education and Training Scotland (EATS) are offering two basic programmes a year for 20 to 25 dietitians each;
- Robert Gordon University offers three day Multiprofessional Clinical Practice Educators courses in various centres in Scotland;
- UWIC annually offers BDA approved clinical educators’ courses for forty dietitians;
- Northern Ireland Hospital Trusts have run basic level courses for dietitians.
These courses cover: roles, responsibilities and accountability, programme planning, learning contracts, setting student tasks, portfolios, monitoring student progress, student assessment, student absence, insurance issues, communication skills, coaching skills, counselling skills, teaching and learning styles, reflective practice, facilitation, discipline, confidentiality and ethics, legal requirements, rules and regulation, etc.

Student Preparation for Practice Placements

The HEIs are required to prepare students for their placements and ensure that students meet the Dietitians Board’s competencies required prior to starting each of the clinical dietetics placements. In order to achieve this, HEIs:

- prepare students through a combination of workshops, cohort lectures, small group tutorials, discussions, visiting speakers and individual sessions with named academic staff;
- provide handbooks;
- increasingly put information on their web site with discussion blackboards live for students during discussions, visiting speakers and individual workshops, cohort lectures, small group tutorials.

The disadvantages of placements:

- increased costs for the provision of a dietetics department;
- for the student, if clinical placements are undertaken away from their home area, cost may be incurred because of increased telephone, transport and accommodation costs;
- with the shortage of dietetic clinical placements, there are not enough placements to meet the requirements of students being trained by HEIs. This means that some students may not able to undertake placements as scheduled, thereby delaying the studies of those students and causing increased stress and uncertainty. Since there are now three placements, there is a potential for the start of placements to be delayed three times.

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- prepare students through a combination of workshops, cohort lectures, small group tutorials, discussions, visiting speakers and individual sessions with named academic staff;
- provide handbooks;
- increasingly put information on their web site with discussion blackboards live for students during their placements.

The HEIs may support students on placements through:

- e-mails, telephone conversations and correspondence by post;
- visits by HEI tutors especially if there are problems with the placement;
- web sites including blackboards are being set up by many of the HEIs.

Induction of the student at the workplace is the responsibility of the dietetic base trainer or her nominee.

Assessment of Practice Placements

The dietitian responsible for the student carries out formative assessments of the students at the end of each one or two week block of training. Students are asked to complete assessment forms, reflect on what they have achieved, and set learning outcomes for the next block of placement. Competencies achieved are signed off on the basis of the portfolio of evidence and observed practice.

At the end of Placement B and C, the base trainer collates the reports, checks that all competencies have been achieved and signed off and compiles the final report.

The Dietitians Board has laid down the competencies students must have to satisfactorily complete Placements B and C. Students who do not satisfactory meet the learning outcomes/competencies will be required to undertake either extra weeks of placement or the whole placement. The extent of the repeat of placement depends on the number of competencies/learning outcomes not attained.

If a student has not satisfied the competencies expected on completion of that placement, then the matter is discussed between the student, the dietetic base trainer, the HEI dietetic tutor and the HEI External Examiner before a final decision is made. The student will be asked to undertake extra weeks of placement or repeat the full placement. The extent of additional training required depends on the number of competencies/learning outcomes not attained.

On-Going Support Systems

The HEIs may support students on placements through:

- student training is time consuming for dietitians time particularly at the start of Placement B. Time is needed for the organisation of the programme, to explain practice, record keeping and reporting back to the trainer. This is particularly difficult for staff when there are staff shortages, sickness and maternity leave. Time with students may result in increased costs for the provision of a dietetics service and therefore the NHS;
- for the student, if clinical placements are undertaken away from their home area, cost may be incurred because of increased telephone, transport and accommodation costs;
- with the shortage of dietetic clinical placements, there are not enough placements to meet the requirements of students being trained by HEIs. This means that some students may not able to undertake placements as scheduled, thereby delaying the studies of those students and causing increased stress and uncertainty. Since there are now three placements, there is a potential for the start of placements to be delayed three times.

Some base trainers appoint a mentor, a dietitian on the staff of the department not directly involved in student training, to support the student on placement.

Perceived Benefits/Limitations of Educating Students on Practice Placements

Dietetic placements are an essential part of the training of a dietitian. Benefits of placements:

- they allow students to learn how to get information from patients, medical records and others and decide the dietary changes that are needed and the most appropriate way to give advice to encourage the individual to make dietary changes. Since everyone has different needs, diets, lifestyles, behaviour and attitudes, this application of nutrition in dietetics cannot be learnt in any other way;
- if placements are away from home, they enable students to experience different cultures, attitudes, food habits, food terminology and food behaviour;
- they ensure practising dietitians explain and question their current dietetics practice and hopefully encourage them to read widely to justify the rationale of their advice and therefore keep their dietetics practice up to date.

The disadvantages of placements:

- for the student, if clinical placements are undertaken away from their home area, cost may be incurred because of increased telephone, transport and accommodation costs;
Discussion

Areas of Good Practice

- Thanks to the work of the Dietitians Board of the CPSM (2000) and the BDA, the dietetic clinical placements are highly structured with defined learning outcomes and examples of the types of programme required;
- Placements have been approved nationally so there is a minimum standard for placements;
- The BDA Placement Officer ensures that placements are allocated to students fairly across all HEIs;
- The central allocation system ensures that all placements available are used to train dietetic students;
- The central distribution system is efficient on HEIs tutors’ time;
- Clinical facilitators, funded by WDCs, have successfully encouraged more dietetics departments to train students, and are helping to ensure that common assessment tools are used nationally;
- The University Dietetics Education Group has ensured that there is networking between HEI tutors and HEI staff are informed of dietetics developments outside their institution (and research areas);
- Students are carefully prepared for clinical placements through lectures, discussions, tutorials, role play and the preparation of reports;
- Dietitians may receive basic and advanced supervisory skills training as described above to help them improve their training and education skills;
- Because there are no clinical supervisors in Dietetics, all dietitians except the junior staff most recently in post, participate in student training. Students may have space in the main office or in a room very close by. This increases the chances of students being integrated into the department and thereby feeling as if they belong and contribute to the work being done.

Discrepancy between Rhetoric and Reality

In spite of all the careful direction of the HPC and the HEIs, there is considerable variation in the student experience on placement in respect to:

- interaction of staff and students in the department;
- the support and supervision of a student having difficulty with one or more aspects of the work of learning to be a dietitian;
- the variation in dietetic practice between dietitians.

It is to be hoped that as evidence-based practice and clinical governance becomes a greater part of the work of dietitians, the requirements of students are better understood and dietitians all receive clinical supervisory skills training, then placement training will improve.

Conclusion

Dietetics is a relatively small profession but the growth in the numbers of dietitians to meet demand is limited by the availability of clinical placements. Pre-registration dietetic education and training includes both undergraduate and postgraduate courses. Courses are tightly regulated by the HPC but are going through a period of substantial change. In November 2000 the Dietitians Board of CPSM published changes in pre-registration training including the length of clinical placements and the learning outcomes of each placement block.

The Dietitians Board of CPSM and its successor the HPC have approved both HEIs and dietetics clinical placements. However, from July 2004, HEIs will be responsible for approving clinical placements in their regions using criteria to be set by the HPC. A BDA Placement Officer, funded by the HEIs, allocates clinical dietetic placements nationally. This process ensures that all placements are used efficiently and without the HEIs being required to double teach. From September 2005, the BDA will no longer support this activity so alternative arrangements for a national placement system are being discussed in the UDEG.

Dietetic facilitators have successfully increased the number of hospitals training dietetics students, by supporting new trainers and providing supervisory skills training for dietetic staff often in conjunction with HEIs. There is still more work to be done by dietetic facilitators as there is still a need for more placements. In dietetic departments who train students almost all staff are involved. Therefore any clinical supervisory skills courses organized must be available to all such dietitians and be credited for CPD. However, training will need to be at two levels: basic supervisory skills for all staff; advanced supervisory skills for base (named) trainers. Provision must also be made for annual updating of staff. The Dietetic staff in HEIs together with the facilitators need training and support in the delivery of these courses.
### APPENDIX ONE: Breakdown of students by ethnic origin in Year 1 of their studies in 2002/0

<table>
<thead>
<tr>
<th>HEI</th>
<th>Degrees</th>
<th>Student Registered</th>
<th>White</th>
<th>Black Afr</th>
<th>Black Carri</th>
<th>Black Other</th>
<th>Indian</th>
<th>Pakistani</th>
<th>Bangladeshi</th>
<th>Chinese</th>
<th>Asian Other</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chester College</td>
<td>PgD/M.Sc.*</td>
<td>35</td>
<td></td>
<td>3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Coventry University</td>
<td>B.Sc (Hons)</td>
<td>27</td>
<td>18</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Glasgow Caledonian University</td>
<td>B.Sc (Hons) / PgD</td>
<td>38</td>
<td>24</td>
<td>10</td>
<td>2</td>
<td>1</td>
<td></td>
<td>2</td>
<td>12</td>
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<tr>
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<td>1</td>
<td>1</td>
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<td>1</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Leeds Metropolitan University</td>
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<td>30</td>
<td>31</td>
<td>27</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>London Metropolitan University</td>
<td>B.Sc (Hons)</td>
<td>36</td>
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<td></td>
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<td>1</td>
<td>1</td>
<td>1</td>
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<td></td>
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<tr>
<td>Nottingham University</td>
<td>M.Nutr</td>
<td>24</td>
<td>21</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Queen Margaret University College,</td>
<td>B.Sc (Hons) / PgD/M.Sc.</td>
<td>35</td>
<td>33</td>
<td>22</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td></td>
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</tr>
<tr>
<td>Edinburgh</td>
<td>B.Sc (Hons)</td>
<td>35</td>
<td>35</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Robert Gordon University, Aberdeen</td>
<td>B.Sc (Hons)</td>
<td>35</td>
<td></td>
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<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>University of Surrey</td>
<td>B.Sc (Hons)*</td>
<td>38</td>
<td>35</td>
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<td></td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>University of Ulster, Coleraine</td>
<td>B.Sc (Hons) / PgD/M.Sc.</td>
<td>19</td>
<td>19</td>
<td>5</td>
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<td></td>
</tr>
<tr>
<td>University of Wales Institute Cardiff</td>
<td>B.Sc (Hons) / PgD/M.Sc.</td>
<td>28</td>
<td>28</td>
<td>19</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dublin Institute of Technology</td>
<td>B.Sc (Hons)</td>
<td>19</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total No HEIs: 13

Abbreviations: Black Afr = Black African, Black Carri = Black Caribbean, Bl

### APPENDIX TWO: Students (N and %) with physical disability and learning disability in Year 1 of their studies in 2002/03

<table>
<thead>
<tr>
<th>HEI</th>
<th>Degrees</th>
<th>Students Registered</th>
<th>With Physical Disability</th>
<th>With Learning Disability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chester College</td>
<td>PgD/M.Sc.*</td>
<td>45</td>
<td>2 (6%)</td>
<td>4 (11%)</td>
</tr>
<tr>
<td>Coventry University</td>
<td>B.Sc (Hons)</td>
<td>27</td>
<td>0 (0%)</td>
<td>2 (7%)</td>
</tr>
<tr>
<td>Glasgow Caledonian University</td>
<td>B.Sc (Hons) / PgD</td>
<td>28</td>
<td>0 (0%)</td>
<td>3 (11%)</td>
</tr>
<tr>
<td>Kings College, University of London</td>
<td>B.Sc (Hons) / PgD</td>
<td>28</td>
<td>0 (0%)</td>
<td>2 (7%)</td>
</tr>
<tr>
<td>Leeds Metropolitan University</td>
<td>B.Sc (Hons) / PgD</td>
<td>30</td>
<td>Not Given</td>
<td>Not Given</td>
</tr>
<tr>
<td>London Metropolitan University</td>
<td>B.Sc (Hons)</td>
<td>36</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
</tr>
<tr>
<td>Nottingham University</td>
<td>M.Nutr</td>
<td>24</td>
<td>1 (4%)</td>
<td>2 (8%)</td>
</tr>
<tr>
<td>Queen Margaret University College,</td>
<td>B.Sc (Hons) / PgD/M.Sc.</td>
<td>35</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>Edinburgh</td>
<td>B.Sc (Hons)</td>
<td>35</td>
<td>0 (0%)</td>
<td>01 (2%)</td>
</tr>
<tr>
<td>Robert Gordon University, Aberdeen</td>
<td>B.Sc (Hons)*</td>
<td>38</td>
<td>0 (0%)</td>
<td>1 (3%)</td>
</tr>
<tr>
<td>University of Surrey</td>
<td>B.Sc (Hons)</td>
<td>35</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
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<tr>
<td>University of Ulster, Coleraine</td>
<td>B.Sc (Hons) / PgD/M.Sc.</td>
<td>19</td>
<td>0 (0%)</td>
<td>0 (0%)</td>
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<tr>
<td>University of Wales Institute Cardiff</td>
<td>B.Sc (Hons) / PgD/M.Sc.</td>
<td>28</td>
<td>1 (4%)</td>
<td>3 (11%)</td>
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</tbody>
</table>

Total No HEIs: 13
APPENDIX THREE: Forms for completion by student prior to placement A (or B or C) (Dietitians Board 2000)

Higher Education Review of Student Pre-placement A or B or C

| Name of Student |  |
| Signature of Student |  |
| Name of Tutor |  |
| Signature of Tutor |  |
| Name of University |  |
| Date |  |

This review should be undertaken by the tutor with the student before commencing Placement A (B or C).

Please use the attached form to summarise your findings, considering the following:

Is there evidence to demonstrate that all the clinical areas identified in Introduction to Clinical Education Placement A (or B or C) have been addressed? If not, please identify the omissions below:

| Areas Not Addressed |  |

Are there particular areas which need to be developed whilst on placement?

After completion, this form should be sent to the dietitian supervising Placement B and a copy given to the student for their portfolio.
APPENDIX FOUR: Forms for completion by student on completion of placement A (or B or C)

REVIEW OF PLACEMENT A (or B or C)

<table>
<thead>
<tr>
<th>Name of Student</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Signature of Student</td>
<td></td>
</tr>
<tr>
<td>Name of Dietitian</td>
<td></td>
</tr>
<tr>
<td>Signature of Dietitian</td>
<td></td>
</tr>
<tr>
<td>Location of Placement</td>
<td></td>
</tr>
<tr>
<td>Date</td>
<td>From To</td>
</tr>
<tr>
<td>Number of Weeks Completed</td>
<td></td>
</tr>
</tbody>
</table>

This review should be undertaken by the supervising dietitian with the student on completion of Placement A. (or B or C)

Please use the attached form to summarise your findings, considering the following:

Is there evidence to demonstrate that all the learning outcomes have been met? If not, please identify the omissions below:

Specific Aims Not Met

You should identify any strengths or areas for improvement, using the evidence presented by the student to inform your comments, under the general headings of Knowledge, Communication and Readiness for Placement.

<table>
<thead>
<tr>
<th>KNOWLEDGE</th>
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</thead>
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<tr>
<td>Strengths:</td>
</tr>
<tr>
<td>Areas for Improvement:</td>
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<tr>
<td>Action Points:</td>
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</table>

<table>
<thead>
<tr>
<th>COMMUNICATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strengths:</td>
</tr>
<tr>
<td>Areas for Improvement:</td>
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<tr>
<td>Action Points:</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>PROFESSIONAL PRACTICE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strengths:</td>
</tr>
<tr>
<td>Areas for Improvement:</td>
</tr>
<tr>
<td>Action Points:</td>
</tr>
</tbody>
</table>

Are there particular areas which need to be developed upon return to university?

After completion this form should be sent to the student’s tutor and a copy given to the student for their portfolio.
APPENDIX FIVE: Summary of specific aims achieved for placement A Dietitians Board of CPSM 2000

Dietitions Board - Summary of Specific Aims Achieved for Placement A

K1 Have a working knowledge of portion sizes of common foods
K2 Be familiar with the range of food products available to the general public including major nutrient-modified foods and ready-prepared meals
K3 Be aware of how the use of nutrient-modified foods can influence the diet both quantitatively and qualitatively
K4 Have a working knowledge and practical experience of producing both standard and modified recipes
K5 Be able to demonstrate the ability to record, calculate and analyse individuals’ nutritional intake both by hand and by computer assisted analysis
K6 Appreciate the factors to be considered in all aspects of menu planning
K7 Appreciate the process of meal selection, service and delivery within an institutional food production unit
K8 Be aware of the major health and safety issues within the working environment
K9 Have an understanding of the methods by which dietitians communicate with other health professionals, patients and the general public
K10 Have experience of communicating with patients and healthcare professionals
K11 Demonstrate an ability to talk with patients and healthcare professionals
P12 Be aware of the need to respect the point of view of patients and why it is important to avoid discrimination
P13 Demonstrate the ability to maintain confidentiality
P14 Be able to explain the reason and need for the Statement of Conduct
P15 Demonstrate professional appearance and behaviour
P16 Be able to identify those health professionals who work closely with a dietitian
P17 Be able to identify the key sources of patient information available to plan dietetic care
P18 Demonstrate an interest in and a commitment to the work of dietitians

Location of Placement A: 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### APPENDIX EIGHT: Placement B - Sample 12-week programme (Dietitians Board of CPSM 2000)

<table>
<thead>
<tr>
<th>Week</th>
<th>Content</th>
<th>Timming of Summative Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Week 1</td>
<td>Induction and orientation to include: Explanation of timing and methods of assessment including the student’s responsibilities within the assessment process Introduction to departmental and national standards for dietitians Trust/departmental structure Observe dietitian in individual patient interviews. Great, weigh and measure patients attending clinic sessions</td>
<td>C3 P1 P2</td>
</tr>
<tr>
<td>Week 2</td>
<td>Introduction to Dietitians Board/SDA Standards on Record Keeping. Undertake diet history taking as part of patient consultations. Practise information gathering and recording. Continue weighing and measuring patients. Attend a multi-disciplinary team meeting and visit appropriate personnel.</td>
<td></td>
</tr>
<tr>
<td>Week 3</td>
<td>Continue information gathering and diet history taking in a variety of settings and start qualitative and quantitative assessment of patient information. Start planning dietary advice. Observe a dietitian giving a talk to a group. Visit catering department and view food service. Start mini case study.</td>
<td>P3 P10</td>
</tr>
<tr>
<td>Week 4</td>
<td>Practise giving non-complex explanations for a variety of medical conditions (e.g. diabetes, hyperlipidaemia). Practise explaining and justifying dietary advice given. Audit sample of record cards.</td>
<td></td>
</tr>
<tr>
<td>Week 5</td>
<td>Continue to develop skills with individual patients. Concentrate on summarising and recording relevant information. Practise presentation e.g. mini case study to dietitians.</td>
<td></td>
</tr>
<tr>
<td>Week 6</td>
<td>Practise assessing and recording the relevant information needed to develop, review, monitor and evaluate nutritional care plans for individual patients. Involvement in local health promotion exhibitions e.g. healthy eating display in staff restaurant. Attend multi-disciplinary team meeting. Audit of own record cards. Formal Review of Progress (Guidance Appendix B)</td>
<td>K1 P6 P9 P13</td>
</tr>
<tr>
<td>Week 7</td>
<td>Concentrate on identifying key points for change, by negotiation and discussion with the patient. Record targets and follow up arrangements. Contribute to multi-disciplinary team.</td>
<td>C3 P2 P12</td>
</tr>
<tr>
<td>Week 8</td>
<td>Continue to practice skills with a range of individual patients. Take an active part in a group session with a dietitian do an evaluation of the session. Practise skills within the Statement of Conduct.</td>
<td>P1 P7 P8</td>
</tr>
<tr>
<td>Week 9</td>
<td>Practise undertaking the whole patient interview with selected patients, including full up arrangements and liaising with other healthcare professionals.</td>
<td>C1 P3 P4</td>
</tr>
<tr>
<td>Week 10</td>
<td>Share with a qualified dietitian a caseload of selected patients if competent. Develop skills in prioritisation, self-organisation, time management. Take part in journal club.</td>
<td>P11 P13</td>
</tr>
<tr>
<td>Weeks 11 &amp; 12</td>
<td>Continue to observe dietitians and manage own patients. Handover caseload to relevant dietitian. Undertakes a group session, including evaluation to a patient group and present case study to dietitians.</td>
<td>C2 P5 P6 P9 P10 P12 K1</td>
</tr>
</tbody>
</table>

*Tutorials with practical exercises to be undertaken through the placement.*

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### Summary of Achieved Learning Outcomes for Placement B (Dietitians Board of CPSM 2000)

**P11** Continue to both observe dietitians and manage own patients. Handover caseload to relevant dietitian.

**P12** Begins to take responsibility for personal and professional development and shows commitment to excellence of practice.

**P13** Demonstrates a professional attitude.

**K1** Demonstrates a working knowledge of all disciplines required to support practice with patients seen in Placement B.

**P9** Manages available time and resources in completing tasks allocated.

**P8** Practises in line with anti-discriminatory policies such as discrimination on grounds of race, gender, religion, physical disability, learning disability, sexual orientation.

**P7** Practises within the Statement of Conduct.

**P6** Demonstrates an ability to contribute to both dietetic and multidisciplinary teamwork.

**P5** Demonstrates an understanding of the strategies which can be used to influence nutritional intake.

**P4** Is able to review, monitor and evaluate dietetic practice with patients or clients.

**P3** Is able to plan and justify dietary advice to patients seen in Placement B.

**P2** Is able to assess client information qualitatively and quantitatively.

**P1** Reflects on experience and evaluates their own practice.

**C1** Is able to communicate effectively using appropriate aids and skills with individuals seen in Placement B.

**C2** Is able to communicate effectively using appropriate aids and skills to groups seen in Placement B.

**P10** Reflects on experience and evaluates their own practice.

**C3** Is able to report accurately to dietetic supervisors or action taken.

**P9** Is able to plan and justify dietary advice to patients seen in Placement B.

**P8** Practises in line with anti-discriminatory policies such as discrimination on grounds of race, gender, religion, physical disability, learning disability, sexual orientation.

**P7** Practises in line with anti-discriminatory policies such as discrimination on grounds of race, gender, religion, physical disability, learning disability, sexual orientation.

**P6** Demonstrates an ability to contribute to both dietetic and multidisciplinary teamwork.

**P5** Demonstrates an understanding of the strategies which can be used to influence nutritional intake.

**P4** Is able to review, monitor and evaluate dietetic practice with patients or clients.

**P3** Is able to plan and justify dietary advice to patients seen in Placement B.

**P2** Is able to assess client information qualitatively and quantitatively.

**P1** Reflects on experience and evaluates their own practice.

**C1** Is able to communicate effectively using appropriate aids and skills with individuals seen in Placement B.

**C2** Is able to communicate effectively using appropriate aids and skills to groups seen in Placement B.

**K1** Demonstrates a working knowledge of all disciplines required to support practice with patients seen in Placement B.

**P9** Manages available time and resources in completing tasks allocated.

**P8** Practises in line with anti-discriminatory policies such as discrimination on grounds of race, gender, religion, physical disability, learning disability, sexual orientation.

**P7** Practises within the Statement of Conduct.

**P6** Demonstrates an ability to contribute to both dietetic and multidisciplinary teamwork.

**P5** Demonstrates an understanding of the strategies which can be used to influence nutritional intake.

**P4** Is able to review, monitor and evaluate dietetic practice with patients or clients.

**P3** Is able to plan and justify dietary advice to patients seen in Placement B.

**P2** Is able to assess client information qualitatively and quantitatively.

**P1** Reflects on experience and evaluates their own practice.

**C1** Is able to communicate effectively using appropriate aids and skills with individuals seen in Placement B.

**C2** Is able to communicate effectively using appropriate aids and skills to groups seen in Placement B.

**K1** Demonstrates a working knowledge of all disciplines required to support practice with patients seen in Placement B.

**P9** Manages available time and resources in completing tasks allocated.
### APPENDIX NINE: Placement C - Sample programme (Dietitians Board of CPSM  2000)

<table>
<thead>
<tr>
<th>Week</th>
<th>Content</th>
<th>Timing of Summative Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Introduction to the department. Orientation and learning new systems. See both in-patients and outpatients already demonstrated competence within Placement B. Start preparation of subject for talk in Week 5.</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Continue to manage patients, start to contribute to care of Placement C patients</td>
<td>P7 P8</td>
</tr>
<tr>
<td>3</td>
<td>Work with patients, developing skills of aiding compliance and practising communication skills with different groups. Review a current paper</td>
<td>K1 C3</td>
</tr>
<tr>
<td>4</td>
<td>Continue to work with patients developing skills of aiding compliance and practising communication skills with different groups. Include talk to other health professionals and attendance at journal clubs. Audit dietetic advice given against departmental standards.</td>
<td>P12 P13 C1</td>
</tr>
<tr>
<td>5</td>
<td>Spend week working with a dietitian as part of multi-disciplinary team, undertaking some tasks which contribute to patient care.</td>
<td>P1 P2 P3</td>
</tr>
<tr>
<td>6 &amp; 7</td>
<td>Formal review of progress (Guidance Appendix C1) Spend time working in primary care setting familiarising self with personnel who work alongside dietitians. Start case study.</td>
<td>P9 P10 P11</td>
</tr>
<tr>
<td>8</td>
<td>Participate in health promotion project. Give talk to members of general public.</td>
<td>C2</td>
</tr>
<tr>
<td>9, 10, 11 &amp; 12</td>
<td>Continue to work with patients developing skills of aiding compliance and practising communication skills with different groups giving assessed talk to other health professionals.</td>
<td>C2 C3 P1 P2 P3 P4 P5 P6 P7</td>
</tr>
</tbody>
</table>

The timing of the summative assessments has been identified throughout the 12 weeks. Where a learning outcome has been written in more than once e.g. C3 weeks 3 and at the end, the purpose is to look at learning brought to Placement C and developed and action to be taken prior to the next assessment during routine feedback.

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### References

- Dietitians Board, CPSM (2000) Course Requirements and Guidelines for Pre-Registration Courses leading to State Registration in Dietetics. CPSM. London.

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www.practicebasedlearning.org