



The Association
of UK Dietitians

Assistant Practitioner Curriculum

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Foreword

The British Dietetic Association (BDA), as the professional body for the dietetic workforce, has responsibility for holding and developing the pre-registration curriculum framework¹. It is likewise responsible for the voluntary accreditation of degree programmes against its standards.

The profession recognises the increasingly strategic roles expected of the registered dietitian, and this is reflected in the latest version (2013) of the Pre-registration Curriculum Framework. This has clear implications for the support workforce and particularly the role of the dietetic assistant practitioner. It is important that the profession recognises and values the knowledge, skillset and contribution of the assistant practitioner, whilst clearly differentiating between both dietetic support worker and the entry level dietitian, particularly in terms of autonomy of practice.

This document identifies the benchmark for the training of the dietetic assistant practitioner workforce. Engagement with the curriculum and associated training may be through one of the following pathways:

1. Initial training and education to develop individuals for a dietetic assistant practitioner career; or
2. Formalised study and training for current dietetic assistant practitioners, seeking the qualification framework to support their level of expertise; or
3. Continuing professional development for current dietetic or other support workers, seeking to progress through the career structure.

In contrast to a number of allied health professions and other international dietetic professional bodies, there is currently no national, profession-set curriculum for dietetic assistant practitioners in the UK. A recent scoping exercise undertaken by the BDA Education Board (2013) showed there to be a variety of training, development and educational methods employed across the UK to provide dietetic assistant practitioners with the required knowledge and skills to work in the National Health Service, with no consistency of approach. The majority of dietetic assistants (assistant practitioners and dietetic support workers) are trained and developed within their own workplace resulting in variation of knowledge and expectations.

It is therefore expected that the availability of a profession approved dietetic assistant practitioner curriculum will:

1. Enable training providers to map their provision to profession approved skills, knowledge and capabilities;
2. Enhance the knowledge, skills and performance of dietetic assistant practitioners;
3. Further integrate dietetic assistant practitioners into the dietetic profession; and
4. Assist employers in the recruitment, retention and training at the assistant practitioner level.

¹ Curriculum Framework for the Pre-registration Education and Training of Dietitians, BDA 2013

It is important to note that the Assistant Practitioner Curriculum Framework is not intended to be prescriptive, but to be flexible and provide guidance which will support the development of education and training programmes, both work and Higher Education Institution (HEI) based, which are responsive to the demands of dietetic assistant practitioner employment within the NHS, Public Health and other sectors.

Background and Context

1.1 Purpose of the framework

The Assistant Practitioner Curriculum Framework sets out the BDA's expectations for the content and conduct of education and development programmes for dietetic assistant practitioners by:

- Providing specific guidelines for the required content of training initiatives for dietetic assistant practitioners whilst allowing flexibility for employers and higher education institutions to develop their individual programmes.
- Taking into account developments in dietetic assistant practitioners' practice and allowing for future developments in health and social care.
- Describing what is expected of dietetic assistant practitioners whilst recognising that each role will be specific to employer requirements.

In addition it is expected that this document will be used as a reference document by:

- Employers and programme providers, both in academic institutions and the workplace to assist them in recruiting, retaining and developing dietetic assistant practitioners;
- Dietetic assistant practitioners, to give an overview of the expectations of the breadth and depth of their learning for practice;
- Employers and potential employers in understanding the breadth and depth of capability required of dietetic assistant practitioners.

The role of the dietetic assistant practitioner was developed for the following reasons:

- The ever more strategic nature of the role of the registered dietitian means that a skilled support workforce is needed to undertake routine care, over and above that required of a level 3 support worker;
- To create a career pathway for dietetic support workers as roles evolve, with greater and more complex expectations attached;
- To provide support workers with preparatory experience, (to sit alongside required scientific and other academic qualifications) and thus potentially enable them to apply for pre-registration dietetic training.

In the post-Francis^{2,3} era, there is a political drive across the whole of the UK to improve governance structures pertaining to the support workforce.^{4,5,6} This relates to healthcare

² The Mid Staffordshire NHS Foundation Trust Public Inquiry, 2013

³ The Cavendish Review, An Independent Review into Healthcare Assistants and Support Workers in the NHS and social care settings, July 2013, www.gov.uk

⁴ Talent for Care, Health Education England, 2014

assistants (nursing) and beyond including allied health professions support staff. Part of such quality assurance initiatives is the will to provide support workers with formal training structures thorough which to progress their careers, both within the Level 1-4 NHS structure (if applicable) and beyond in order to widen participation in pre-registration training.

Whilst in some areas the NHS is considering the creation of generic support worker roles, this does not detract from the continuing requirement for assistant practitioner roles in specific areas of practice. Indeed, in many cases, it is the specialist knowledge and experience that differentiates the assistant practitioner from lower level support. This curriculum aims to differentiate the competencies required for the Level 4 dietetic assistant practitioner role from those expected of a level 3 dietetic support worker. It is also clearly imperative that the remit of the dietetic assistant practitioner be understood as distinct from the entry level dietitian, both in terms of academic knowledge and scope of practice; the clear differentiation being autonomy of practice of the registered dietitian.

This document provides the framework for specific dietetic support at level 4, and is aligned to a number of key BDA documents, including the Pre-registration Curriculum Framework⁷, the Dietetic Career Framework⁸, and Dietetic Support Worker and Assistant Practitioner Competency Framework⁹.

⁵ Guide to Healthcare Support Worker Education and Role Development, NES 2009,

⁶ Transforming Your Care, Health and Social Care Northern Ireland, 2013

⁷ Curriculum Framework for the Pre-registration Education and Training of Dietitians, BDA 2013

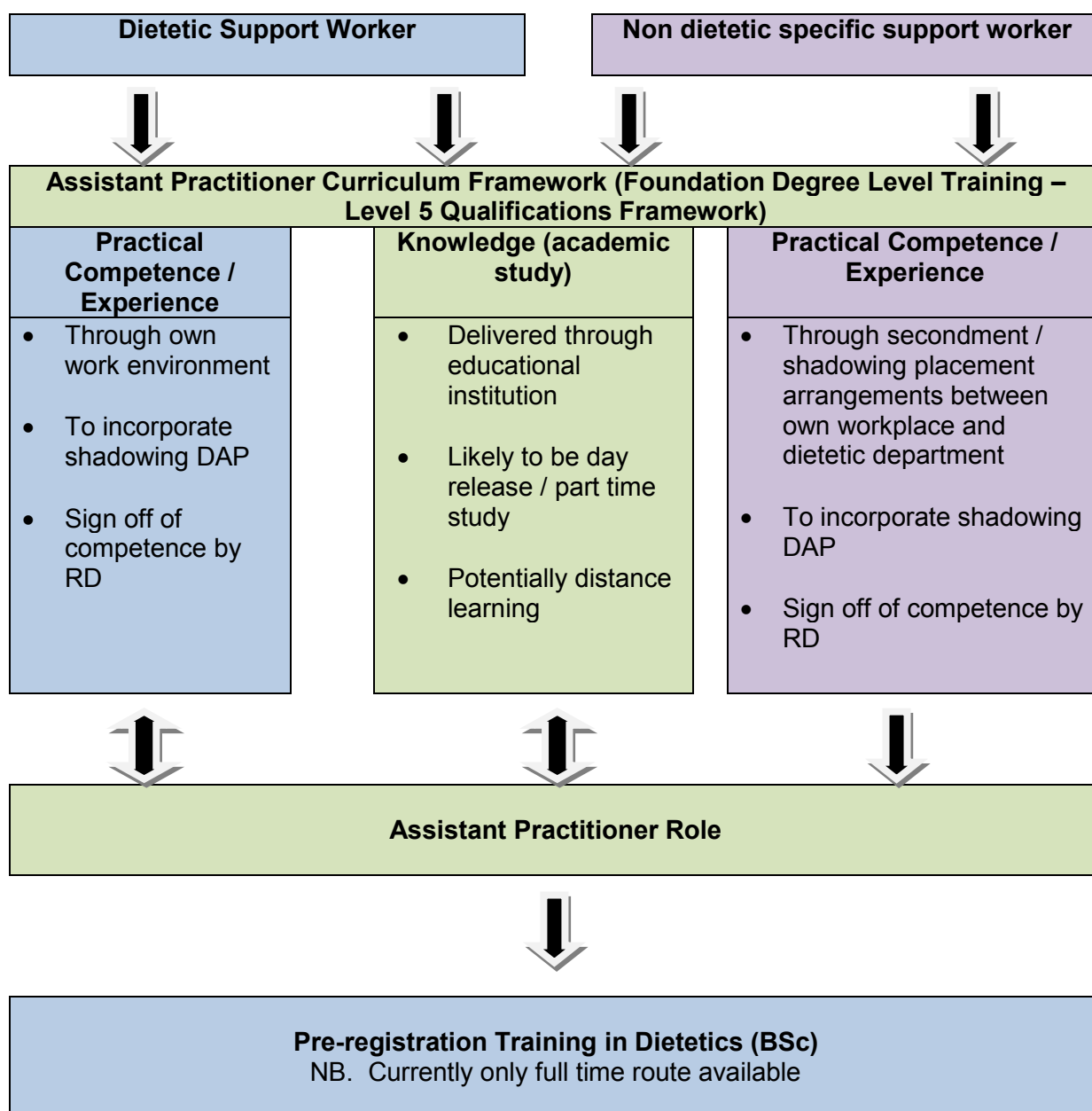
⁸ Dietetic Career Framework, BDA, 2013

⁹ Dietetic Support Worker and Assistant Practitioner Competency Framework, BDA, 2013

1.2 The Role and Scope of Practice of the Dietetic Assistant Practitioner

The role of the Assistant Practitioner (AP) is described by NHS Employers¹⁰ and has been adapted by the BDA as follows:

“A Dietetic Assistant Practitioner delivers dietetic care with a level of knowledge and skills beyond that of traditional Health Care Assistants or dietetic support workers. They would be able to deliver elements of delegated dietetic care and undertake work in domains that have previously only been within the remit of dietitians. The Assistant Practitioner works within an agreed scope of practice under the direction or supervision of a dietitian within relevant legal and ethical frameworks and in accordance with organisation protocols and policies. They would have the underpinning knowledge and assessed competence to undertake such a role, and be educated to Foundation degree or equivalent and employed at a minimum of Level 4.”



¹⁰ NHS Employers 2013, Role of the Assistant Practitioner

The BDA recognises the essential need for governance within this dietetic staff group. The framework meet this needs and offers quality assurance in the training and development of dietetic assistant practitioners. It is recognised that individuals may access dietetic assistant practitioner training via a number of pathways. For dietetic support workers or for generic health or social care support workers, the framework and associated training may be used to as career development prior to application for level 4 roles. However, there is recognition that currently there are level 4 dietetic assistant practitioners who have received limited formal training for the role (although may have significant practice based experience). The framework can thus be used as a training needs analysis in order to formalise the qualification / training that underpins the assistant practitioner's current role.

1.3 The Curriculum Framework

This Curriculum Framework offers a curriculum for dietetic assistant practitioners in terms of the expectations of the learning required to be competent in post. It identifies the knowledge components, which can be divided into three core units of study:

1. Nutrition and Nutrition Support
2. Underpinning Sciences
3. Ethical Practice in the Health and Social Care Environment

It is expected that employers and educational providers will use this as a basis to develop their own specific education programme. It is not expected that the elements of learning described within this framework should always be addressed precisely as within the Curriculum. Rather, they should be subsumed within traditional or work-based training in such a way as to ensure that all aspects are covered. Employers and educational institutions should be able to use the statements contained within this document to describe the learning outcomes expected of someone at this grade. In addition, employers may use the Framework (alongside other relevant documentation) to distinguish between the requirements of the level 3 and level 4 support worker and the entry level dietitian.

NB. In some cases, the competence level required of the level 4 dietetic assistant practitioner may not vary greatly from the registered professional. However, it is the level of autonomy associated with the competence which must be clearly distinguished. The dietetic assistant practitioner is not an autonomous professional, nor must they register with the Health and Care Professions Council (HCPC). Therefore, whilst they are responsible for carrying out the role assigned to them, strategic decisions about service-user care must be taken under the supervision of a registered professional.

There are two main sections to this Framework. The first describes the knowledge and skills required by the assistant practitioner and the second puts this into the context of the workplace and thus the application of knowledge and skills in practice. Both the knowledge and the competence must be achieved by the student at the point of graduation from the programme of study.

The curriculum content has been described in such a way that those involved in the education and development of dietetic assistant practitioners can develop distinct programmes to meet the specific needs of the local workforce. Given the variety of roles for this group, some institutions and employers, may choose to place more importance upon the development of one component of dietetic practice for example, public health or education for those with long term conditions.

Training delivery is envisaged as a partnership between the employer and the local education/training provider, and as such could be led by either party.

Section 2: Knowledge and Skills Framework (Curriculum)

Disciplines underpinning dietetic support work (assistant practitioner level).

The required knowledge components can be divided into three core areas:

- 1) Nutrition and Nutrition Support
- 2) Underpinning Sciences
- 3) Ethical Practice in the Health and Social Care Environment

1.0 Nutrition and Nutrition Support

1.1	<p><i>Basic understanding of nutrition and dietetics for the prevention and treatment of disease</i></p> <ol style="list-style-type: none">a) Anthropometric methodology, reference standards and their applications and limitations with individuals and populations.b) Specific dietary modification in the treatment of specified diseases in relation to the post being undertaken as decided by the employer: working to agreed protocols.c) Methods of fortifying/modifying foods and dietsd) Nutritional products and their role.e) Understanding the impact of dietary modifications.f) Methods of monitoring of dietary treatment.
1.2	<p><i>Basic understanding of applied nutrition and food.</i></p> <ol style="list-style-type: none">a) The diet of the populations of the UKb) Methods of optimising nutritional status in individuals and communities.c) An understanding of nutrient standards, dietary guidelines and nutrient requirements in individuals and populationsd) The manner in which food choice and eating behaviours are influenced by factors such as physiology, sociology, psychology, economics and culture.e) Range and relative cost of foods available to the general public including nutrient modified foods.f) Commonly consumed foods, including convenience foods and their nutrient content.g) Portion sizes of common foodsh) Understanding of derivation and limitations of food composition data.i) Use of food tables and computerised dietary analysis packages for individual assessments, recipe analysis and menu planning.
1.3	<p><i>Basic understanding of food science, food skills and food systems management.</i></p> <p><i>Food Science and skills</i></p> <ol style="list-style-type: none">a) Effects of food production, preparation and processing on the nutrient content of food.b) Understanding of food preparation methods and their application to dietetic practice. <p><i>Food Systems Management</i></p>

	<ul style="list-style-type: none"> c) Principles of catering management and use of nutritional standards within the public sector d) Menu planning to meet the needs of the population served taking into account any constraints such as clinical, social, economic and food system e) Be able to analyse the nutritional content of menus using food composition tables and databases f) The organisation of mealtimes within care settings. g) An understanding of food provision, including production, procurement and delivery and food security and sustainability.
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2. Underpinning Sciences

2.1	<p><i>Awareness of nutrition, physiology , biochemistry appropriate to the role</i></p> <ul style="list-style-type: none"> a) Structure and function of the human body b) Factors affecting biochemical measurements and reference standards c) Role, function and regulation of major body systems in health and disease d) Role and function of energy and nutrients in human metabolism including the effects of deficiency and toxicity and requirements through the lifecycle. e) Role of exercise in managing health and disease
2.2	<p><i>Basic understanding of infection control</i></p> <ul style="list-style-type: none"> a) Structure & function of common microbes which cause infection & disease b) Micro-organisms associated with infection and how to prevent the spread of infection c) Food safety legislation and practice to manage and evaluate the service of safe food
2.3	<p><i>Basic understanding of clinical medicine, pharmacology and disease processes with respect to dietetic and nutrition interventions.</i></p> <ul style="list-style-type: none"> a) Aetiology of common lifestyle issues e.g. obesity, diabetes and malnutrition b) Current therapies, interventions, public health and person management strategies in common diseases c) Drug nutrient interactions appropriate to the role d) The use of nutrients and functional foods as pharmacological agents e) The role of the dietitian within Medicines Management f) Awareness of the role of complementary and alternative medicine in diet related diseases.

3. Ethical Practice in the Health and Social Care Environment

3.1	<p><i>Appreciation of Social and Health Policy, Public Health, Health Improvement and Public Health Nutrition</i></p> <ul style="list-style-type: none"> a) Understanding the organisation of health and social care within the UK b) Awareness of government policies and the impact on healthcare provision. a) Impact of social organisation including inclusion, exclusion, health inequalities and different cultural belief systems. b) Promote and protect public health and wellbeing, focusing on the social determinants of health and health and social inequity.
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	<ul style="list-style-type: none"> c) Application of nutrition to the promotion of good health and the primary prevention of diet related illness in communities and populations. d) Health improvement/promotion/education strategies in relation to nutrition e) Nutrition guidelines appropriate for selected audiences, to empower individuals to make informed choices. f) Diet, lifestyle and other environmental factors and disease processes. g) Ethical and political issues in public health. h) Understanding of strategies designed to promote behavioural change. i) The settings approach to health promotion; consideration of key settings: school; hospital; workplace; informal contexts j) Planning of health promotion/improvement programmes to possibly include: assessing needs; determining priorities; setting aims and objectives; selection of methods and resources; evaluation
3.2	<p><i>Application of ethical practice</i> Scope of and legal and ethical boundaries of practice.</p> <ul style="list-style-type: none"> a) Importance of maintaining own health. b) Importance of acting with integrity. c) Contribution of the dietitian and dietetic assistant practitioner to the work of the multi-disciplinary teams, developing networks and building and maintaining relationships. d) Person centred care including: <ul style="list-style-type: none"> • the role of service users in service development, improvement and decision making • practitioner compassion, values and behaviours to enhance the quality of the patient experience e) Reflective practice, self evaluation and continuing professional development. f) Confidentiality and appropriate disclosure. g) Importance of effective resource management.
3.3	<p><i>Basic understanding of Self Management Strategies</i></p> <ul style="list-style-type: none"> a) The impact of oneself on others; individual accountability and skills associated with self management. b) Positive use of constructive feedback to develop skills and behaviours. c) Independent working and team work in order to deliver delegated care for a designated group of individuals. d) Engagement in all required change management.
3.4	<p><i>Basic knowledge and understanding of communication and educational methods</i></p> <ul style="list-style-type: none"> a) Different methods and styles of communication required for interacting in a variety of situations and settings. b) Principles of communication using a variety of media with service users, colleagues and other stakeholders in order to build and maintain professional and therapeutic relationships c) Barriers to communication and ways in which they may be overcome. d) Facilitation of learning to include the promotion of self care with groups, individuals and populations e) Demonstrate the use of communication skills.

3.5	<p><i>Basic understanding of behaviour change and behaviour modification as applied to dietetic practice for individuals, groups and populations.</i></p> <ul style="list-style-type: none"> a) Background to behaviour change and modification as applied to health b) The psychological component in hunger, satiety, food choice and normal eating c) Recognition of disordered eating d) The psychological aspects of long term conditions.
3.6	<p><i>Knowledge of health related information and the management of information</i></p> <ul style="list-style-type: none"> a) Confidentiality and information governance b) The regulations surrounding person identifiable information including: legislation, regulatory guidance, protocols and individual responsibility governing the security, confidentiality and sharing of information. c) Data quality, terminologies, classifications and their use in health and social care d) Principles of record keeping including use of electronic health records. e) Use of clinical records to inform service management and improvement, evaluation of interventions, research and public health and by services users f) Knowledge and understanding of health information and technology including e-health (telehealth, telecare and assistive technologies) and communications technology.

Section 3: Dietetic Assistant Practitioner Capabilities¹¹

The following section outlines the level of capability expected of the dietetic assistant practitioner upon completion of the education/work-based learning programme. The framework for this section is based on the curriculum for the graduate dietitian, building upon the four pillars of practice comprising:

- Dietetic practice
- Evidence Based Practice
- Education and Communication
- Leadership and management

The capabilities within this section have been mapped directly to the BDA Career Framework (2010), level 4. All capability statements should be prefaced with the phrase “**Following appropriate delegation and within their scope of practice, the Dietetic Assistant Practitioner will be able to:**”

¹¹ Knowledge and Skills Framework, Department of Health 2010

1. Dietetic Practice

This core area includes the scope of practice of the assistant practitioner. It concerns the application of nutritional knowledge to individuals and groups and the skills needed in this application. It includes care of patients, people with long term conditions as individuals or groups and public health practice. It excludes education of other health professionals, leadership, management and strategy, as these are covered in other domains.

<p>1a: Caseload Manages a routine caseload appropriate to the setting within agreed competency framework, with supervision.</p> <p>Will undertake specific aspects of project work including public health</p>	<ul style="list-style-type: none">i. recognise the need for effective self-management of workload and resources and be able to practice accordinglyii. ensure safe case-load managementiii. support the dietitian to assess the nutritional status of individuals and groups through collection of anthropometric measurements, selected biochemical, haematological and clinical chemistry test results.iv. gather appropriate information regarding medical, social, psychological, personal, cultural and economic factors;v. formulate appropriate and practical dietary advice for individuals and populations within agreed protocolsvi. enable the service user to meet the aims of the intervention plan, by supplying a range of supporting activitiesvii. understand and utilise the methods of optimising nutritional status in selected disease states, working with the individual to set appropriate goals;viii. maintain records appropriately; record concisely and in line with applicable legislation, protocols and guidelines and the professional code of conduct all the necessary information to support the professional dietetic judgement;ix. report accurately and appropriately to relevant people, including documentation in healthcare records;x. review, monitor and evaluate in consultation with the dietitian the progress of nutrition and dietetic interventions.xi. reflect on dietetic interventions to inform future practice <p><u>Nutritional Planning</u></p> <ul style="list-style-type: none">xii. work with catering services to ensure the nutritional needs of the population served are met;
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	<p>xiii. prepare meal plans for individuals and groups within remit which meet nutritional, cultural and socio-economic need;</p> <p>xiv. using agreed protocols apply existing standards, including nutritional standards, to the evaluation of food service systems.</p> <p><u>Communication</u></p> <p>i. maintain relationships with other professionals and service users that are culturally sensitive and respect the rights of individuals and their specific needs;</p> <p>ii. contribute to activities that enable each individual and group to make appropriate and safe food choices;</p> <p>iii. use a range of different methods and styles of communication when interacting with various individuals and groups including active listening, facilitation, establishing a rapport and interpreting non verbal cues;</p> <p>iv. demonstrate a range of communication approaches to influence behaviour change, identifying barriers to communication in practice;</p> <p>v. communicate in written form with service users, healthcare professionals and other stakeholders as appropriate</p> <p><u>Use of Technology</u></p> <p>vi. use available IT for the organisation of all relevant data;</p> <p>vii. understand and, where appropriate, engage with e-health, telehealth, telecare and assistive technologies</p> <p>viii. appropriately use Information and Communication Technology (ICT) to communicate with colleagues and service users (maintaining ethical practice);</p> <p>ix. use recognised nutritional analysis programmes, competently</p>
<p>1b: Autonomy / Autonomous practice</p> <p>Under supervision has responsibility for limited areas of</p>	<p>i. recognise and work within the limits of their practice and when to seek advice or refer to another professional;</p> <p>ii. demonstrate awareness of own limitations knowing when and from whom to seek help, recognising when to use skills available to them and when not to;</p> <p>iii. understand the importance of maintaining their own health;</p>

<p>practice, has autonomy for decision making within agreed protocol.</p> <p>Manages own caseload within curriculum framework and care pathway</p>	<ul style="list-style-type: none"> iv. assess a situation, determine the nature and severity of the problem and call upon the required knowledge and experience to deal with the problem, considering possible solutions; v. use reasoning and problem solving skills to make judgements in prioritising actions within delegated areas. Assign priorities to the information collected to agree person centered goals; vi. review the on-going effectiveness of the intervention and re-assess priorities as a result of the review.
<p>1c: Knowledge and Development</p> <p>Continually seeks to develop their practice with supervision.</p> <p>Demonstrates required knowledge of scope and breadth of nutrition and dietetics and applies as relevant.</p> <p>Demonstrates appreciation of knowledge and skills limitations.</p> <p>Demonstrates clinical reasoning which applies knowledge in familiar circumstances</p> <p>Applies and develops their communication skills.</p>	<p><u>Clinical reasoning</u></p> <ul style="list-style-type: none"> i. review information gathered quantitatively and qualitatively and compare to protocols to support individuals and groups make changes to their eating behaviour <p><u>Improving Own Practice</u></p> <ul style="list-style-type: none"> i. keep skills and knowledge up to date and demonstrate career-long learning; ii. take responsibility for own continuing professional development, reflecting on own practice. iii. draw up a plan for her/his own professional development including methods for continually updating dietetic knowledge and practice; iv. be a reflective practitioner, modifying behaviour where necessary. Reflect on practice and learning from clinical incidents; v. actively seek and respond to feedback, changing behaviour in light of feedback and reflection, as appropriate; vi. acknowledge mistakes and treat them as learning opportunities; vii. demonstrate evaluation of his/her performance as an individual and as part of a team

<p>1d: Multidisciplinary working/sphere of practice</p> <p>Has awareness of and respect of roles of MDT and contributes to the function of the MDT</p>	<ul style="list-style-type: none"> i. understand the need to build and sustain professional relationships as both an independent practitioner and collaboratively as a member of a team; ii. contribute to multi-disciplinary care plan / initiatives; iii. work, where appropriate, in partnership with other professionals, support staff, service users and their relatives and carers; iv. contribute advice to a multi-disciplinary team to enhance its effectiveness; v. show awareness of the role of the dietetic professional in primary, secondary and tertiary healthcare settings, and other statutory agencies; vi. recognise the place and contribution of his/her involvement within the total healthcare profile/package, through effective communication with other members of the health and social care team; vii. support the development of other professions. viii. recognise and value the central role of the service user in the MDT.
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2. Evidence Based Practice / Evidence, Research and Development

This core area encompasses all aspects of the development and use of the evidence base for professional practice. The development of professional skills and knowledge through continuing professional development also sits within this domain.

2a: Policies, procedures and guidance Works within local policies and procedures and local governance structure. Is aware of BDA policies, position statements and guidance documents.	<ul style="list-style-type: none">i. apply the legal and ethical responsibilities of healthcare practice;ii. maintain the standards and requirements for the Assistant Practitioner role and undertake the professional role within their own scope of agreed practice;iii. understand the importance of and be able to maintain confidentiality;iv. understand the importance of and be able to obtain informed consent;v. reference specific legislation when dealing with children and vulnerable people/adults, and maintain up to date knowledge in this area;vi. know when disclosure of information is permitted under the law and be aware of when a duty to disclose overrides duty to maintain confidentiality;vii. appreciate the medico-legal risk and assess and manage risk in the practice setting, consulting with supervisor as appropriate
2b: Use of evidence base Is able to identify information from reputable sources to use in practice. Is aware of the evidence base for nutrition and dietetics within scope of practice	<u>Evidence Based Decision Making</u> <ul style="list-style-type: none">viii. conduct appropriate activities in accordance with best/evidence-based practice;ix. have knowledge of current theories of human nutrition and clinical dietetics that supports safe and effective practice;x. use educational and communication skills, together with knowledge of all factors which affect food choice, to support behavioural change in individuals, groups and communities within agreed protocols;xi. integrate health education programmes into patient treatment regimens as part of overall health care;

	<ul style="list-style-type: none"> xii. undertake educational activities that enable others to influence the dietary behaviour of individuals and groups;
<p>2c: Risk Management</p> <p>Demonstrates awareness of the risks of dietetic intervention and raises any issues with the supervisor, following through on any delegated actions.</p> <p>Is aware of health and safety and undertakes mandatory local training.</p>	<ul style="list-style-type: none"> i. exercise a professional duty of care to service users; ii. be aware of and take into account the clinical risk associated with any dietetic intervention; iii. make necessary risk assessments and take appropriate action in order to protect self, clients, colleagues and the public; seek support as required; iv. continually identify and mitigate against potential risks to self, clients, colleagues and the public. <p><u>Information Governance</u></p> <ul style="list-style-type: none"> v. apply the principles of information governance and maintain safe and effective use of health and social care information; vi. recognise and respond appropriately to situations where it is necessary to share information to safeguard service users or the wider public;
<p>2d: Research</p> <p>Understands the importance of research underpinning dietetic practice</p>	<ul style="list-style-type: none"> i. use knowledge of evidence, reasoning and problem solving skills to determine appropriate actions in specified situations; ii. understands importance of using a sound evidence base in practice; iii. Participate as appropriate in audit, data collection, clinical trials; iv. respect the contribution that service users make to the collation of data and research information underpinning evidence based practice.
<p>2e: Audit and Service Improvement</p> <p>Understands the importance of audit and participates in local audits.</p>	<ul style="list-style-type: none"> i. gather information, including qualitative and quantitative data, that helps to evaluate the responses of service users to their care; ii. recognise and implement the principles of clinical governance and the applicability of

	<p>this to their practice as a framework for quality improvement;</p> <p>iii. engage in evidence-based practice, review practice systematically, and participate in audit procedures</p>
<p>2f: Ethical practice</p> <p>Recognises the importance of duty of care for all service users and seeks guidance whenever ethical issues are raised</p>	<p><u>Person Centered Care</u></p> <p>i. exercise a professional duty of care to service users;</p> <p>ii. practice in a non-discriminatory, non-oppressive manner;</p> <p>iii. work within the requirements of the Disability Discrimination Act / Single Equality Act and other relevant legislation;</p> <p>iv. demonstrate compassion, empathy and understanding, respecting the dignity of service users;</p> <p>v. plan, devise and review nutritional programmes, with support, to achieve agreed goals, taking into consideration the contribution of the family, other health professionals and other agencies;</p> <p>vi. engage service users and carers in planning and reviewing interventions to meet their needs and goals;</p> <p>vii. Use skills to: influence motivation in individuals or groups, improve awareness, support learning and behaviour that contributes to healthy living;</p> <p><u>Values Based Care – Acting with integrity, self management and self awareness</u></p> <p>viii. take an objective approach to meeting service user needs at all times, irrespective of personal beliefs and values;</p> <p>i. demonstrate sensitivity to social, economic and cultural factors that may affect the interaction between the dietetic professional and service user.</p>

3. Dietetic professionals as educators and a nutrition and dietetic resource (Facilitation of Learning)

In this core area the Assistant Practitioner acts as a resource and shares nutrition and dietetic knowledge and skills across and beyond the profession. It is a core aspect of dietetic practice that nutrition and dietetic knowledge and skills are shared with the wider workforce for the benefit of service users.

3a: Sharing nutrition and dietetic knowledge Participates in the development and delivery of education and training programmes to others Acts a nutrition and dietetic resource providing answers to queries within scope of practice Contributes to the development of nutrition and dietetic resources	<ul style="list-style-type: none">i. educate service users within the remit of own knowledge and agreed scope of practice;ii. tailor educational sessions to ensure meaning to audience;iii. identify external resources, as appropriate, in order to support the client's dietetic needs and agreed care plan;iv. contributes to departmental research projects and audits.
3b: Developing and using personal networks Is aware of and uses groups and networks.	<ul style="list-style-type: none">i. foster strong working relationships with members of the MDT, including colleagues and external organisations.
3c: Practice Supervision Accesses supervision and uses it to develop own practice.	<ul style="list-style-type: none">i. participate in supervision in a positive manner. Accept support and feedback offered and reflect upon this, implementing changes to own practice as appropriate;ii. disseminate key messages / ideas fostered through supervision in order to benefit the MDT, clients, patients and the public;iii. engage with the principles and techniques of supervision, in order to support others as career progresses.

<p>3d: Education</p> <p>Participates in designated aspects of dietetic student training in practice placements</p>	<ul style="list-style-type: none"> i. demonstrate a willingness to contribute to teaching students and practitioners from all health and social care professions as appropriate; ii. provide feedback to students on their practice and actively seek feedback on own teaching skills; iii. maintain high standards of professional behaviour, acting as a role model; iv. use educational and communication skills, together with knowledge of all factors which affect food choice, to contribute to individual, agreed care plans and the dietary education of individuals, groups and communities; v. contribute to, and encourage colleagues to initiate and participate in, enquiry into all areas of dietetic practice; vi. contribute to an evidence based team/service and profession
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4. Dietetic professionals as Leaders and Managers

This core area recognises that the dietetic professional at all levels acts as a leader within their scope of practice, taking responsibility for their actions and the quality of the service provided to patients. At all levels there will be some managerial responsibility for themselves and resources. This encompasses the management and leadership aspects of all dietetic roles.

4a: Quality of service Monitors the quality of own work, and service and demonstrates problem solving skills to address quality issues.	<ul style="list-style-type: none">i. contribute to the development of the profession (through audit, role-modelling, and mentorship)ii. follow appropriate policy and process to raise concerns about the quality of practice and poor practice/unprofessional behaviour in others;iii. hold themselves and others accountable for service outcomes, as appropriate;iv. actively contribute to department plans to achieve service goals;
4b: Working in a changing environment Recognises dietetics in a changing environment and is able to work within a changing environment. Contribute effectively to change within area of practice.	<ul style="list-style-type: none">i. recognise and respond appropriately to situations where it is necessary;ii. actively contributing to change processes that lead to improving healthcare;iii. as appropriate questions the status quo and its impact on people and services.
4c: Advocate for the Dietetic Team Promotes the profession by acting in a professional manner and as an advocate for their client group within their scope of practice	<ul style="list-style-type: none">i. demonstrate professional behaviourii. discuss openly what constitutes professional behaviour, actively contributing to ongoing debate, sharing ideas whilst respecting the views of others;iii. behave as an ambassador for the NHS,
4d: Management of resources Effectively manages self by prioritisation and time management.	<ul style="list-style-type: none">i. effectively manages their own time prioritizing as requiredii. effectively and safely use resources

Uses and maintains resources efficiently and effectively (including environments, equipment, information and materials.)	
4e: Being a leader Works as an effective and responsible team member.	i. demonstrate appropriate leadership skills; ii. encourage service users to be active participants in their own care; iii. seek evaluation of own performance, iv. provide feedback to others in a constructive, objective and timely manner
4f: Understanding the policy and strategic environment Demonstrates knowledge of relevant policies and strategies within practice area. Has knowledge and understanding of local policies and strategies and knows how these influence their service delivery.	i. demonstrate an understanding of the dietetic professional's roles within a variety of settings; ii. practice in accordance with current legislation and advise others of this; iii. practice in accordance with governance arrangements including health and safety legislation; iv. act in a manner consistent with the values and priorities of the organisation.

