

# PROFESSIONAL SUPERVISION FOR DIETITIANS

Vicki Paulin NZ Registered Dietitian

# Outline

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- History of supervision within dietetic profession
- Introducing supervision to a team of dietitians
- Focus group research with senior practitioners of profession
- Implementation in the NZ profession

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# Who are dietitians?

# Training for dietitians

- 3 year degree at University of Otago (BSc in nutrition or BCaps)
- Plus 18 months post graduate diploma
  - clinical nutrition
  - public health nutrition
  - applied dietetics
  - food service
  - service management
  - practicum



# Accountability for dietitians

- Registration by Dietitians Board
- Under HPCA Act
- Engage in continuing competency programme
- Annual Practising Certificate
- Dietitian is a legally protected name



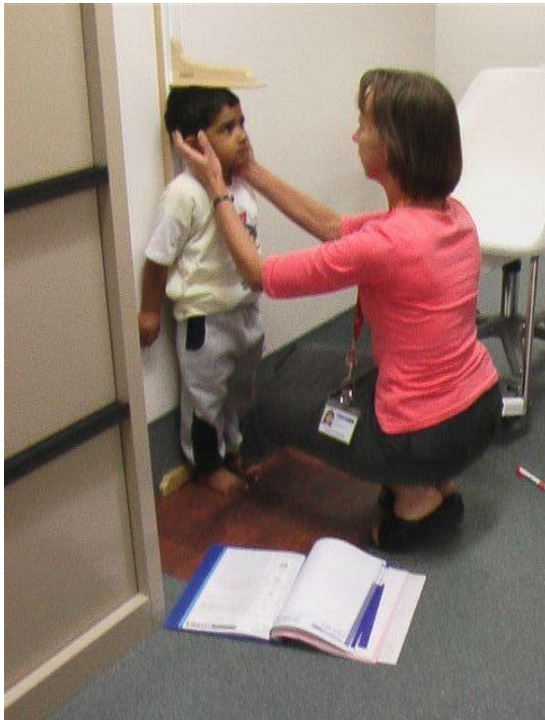
# Work done by dietitians

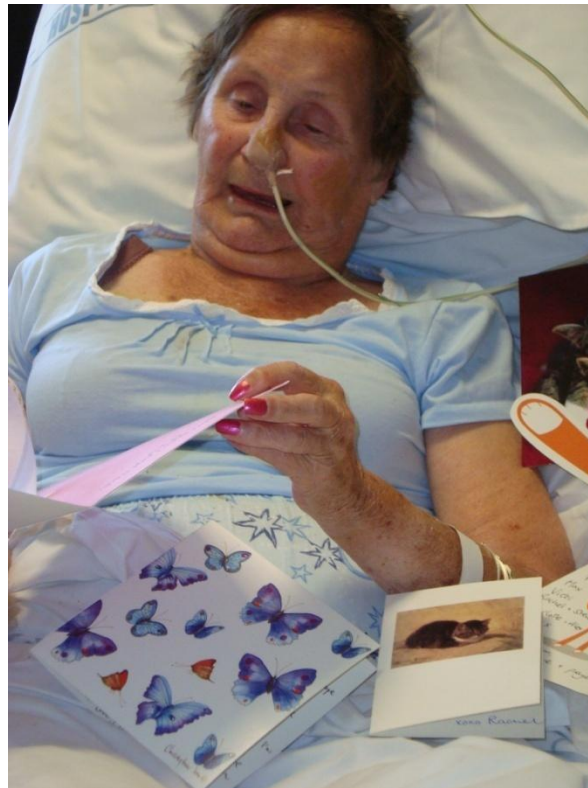
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- Nutrition programmes and education for individuals; also with groups and populations
- Health promotion and disease prevention



- Provide medical nutrition therapy and clinical nutrition education for patients with a wide range of medical conditions







- **Foodservice management**



- **Food industry and pharmaceutical consultants**

- **Education and research**

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# Historical perspective

# Dietetic supervision historically(UK)

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- ❑ Understood as observation during training or early stage of career
- ❑ A threat-challenge to individual competence
- ❑ Necessary or just another administrative burden?
- ❑ Resource implications
- ❑ Small profession-option for non-line supervisors?
- ❑ The descriptive “clinical” is limiting

- ❑ More like “patient care supervision”
- ❑ Range of models proposed - one model is not adequate
- ❑ Model must fit dietetic practice
- ❑ Supervisors must be skilled and supervised
- ❑ Begin a debate

Burton (2000); Kirk et al (2000)

- ❑ BDA working group define and develop overview - Guidance document
- ❑ Reflecting on practice to learn from experience
- ❑ Benefits for individual and for delivery of quality care
- ❑ Clarified not managerially led supervision

# A supervision definition for dietitians

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....a structured, formal process that enables dietitians to discuss their work with an experienced practitioner, trained to facilitate supervision. This discussion should be a guided reflection on current practice and should be used to learn from experience.

BDA Guidance Document (2000)

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What was happening for NZ  
profession?

# Status of supervision for NZ dietitians in 2003

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- Reflective practice included in Dietetic training since 1997
- Supervision at ADHB home health
- Role development supervision for allied health including dietitians at CCDHB
- Dietitians working in Eating Disorders

# Introducing supervision to a dietitian team (2003-2005)

1. Fact finding and recommendations
2. Supervision training
3. Implementation
4. Evaluation



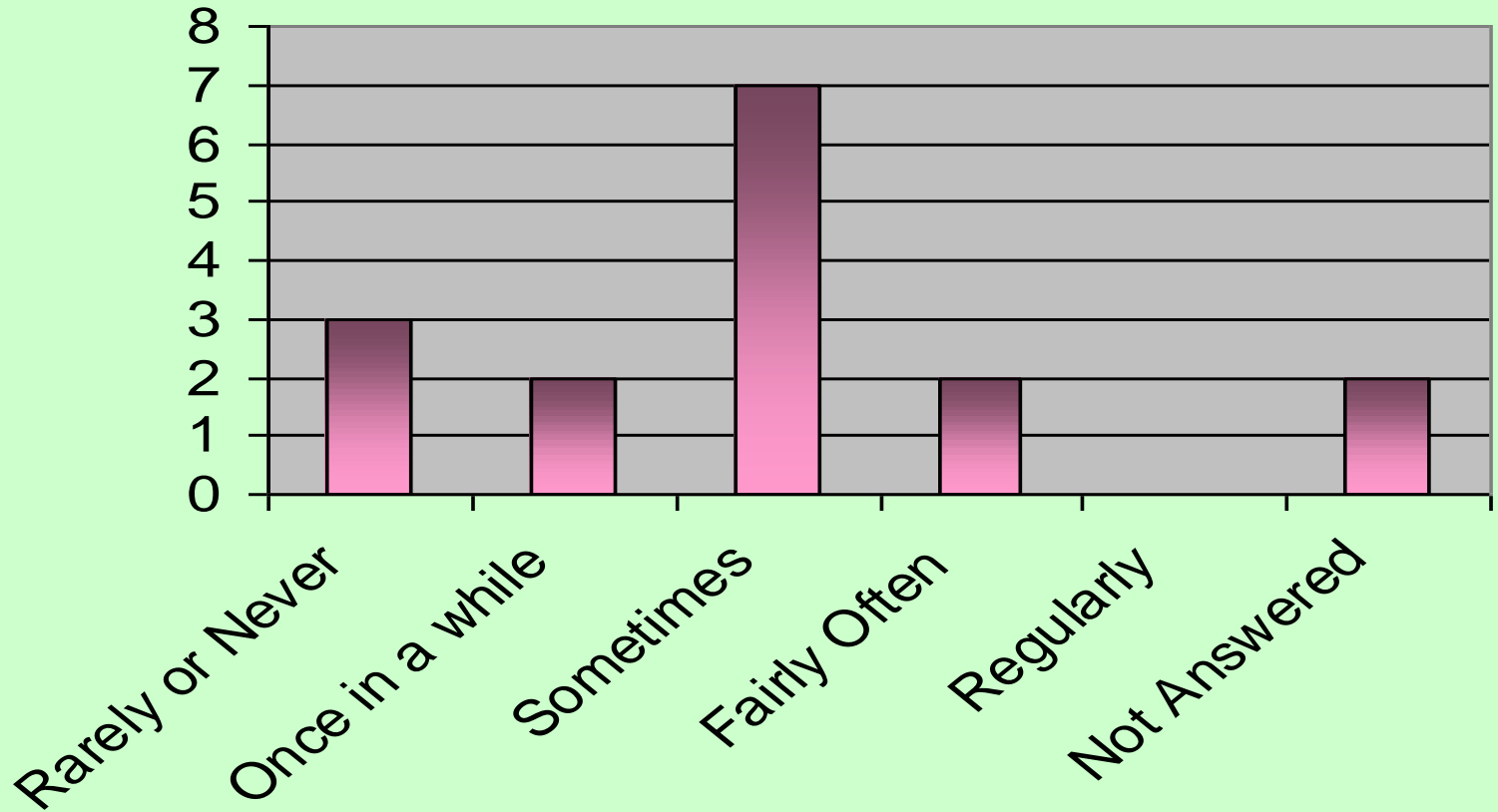
# CMDHB team (20 dietitians)

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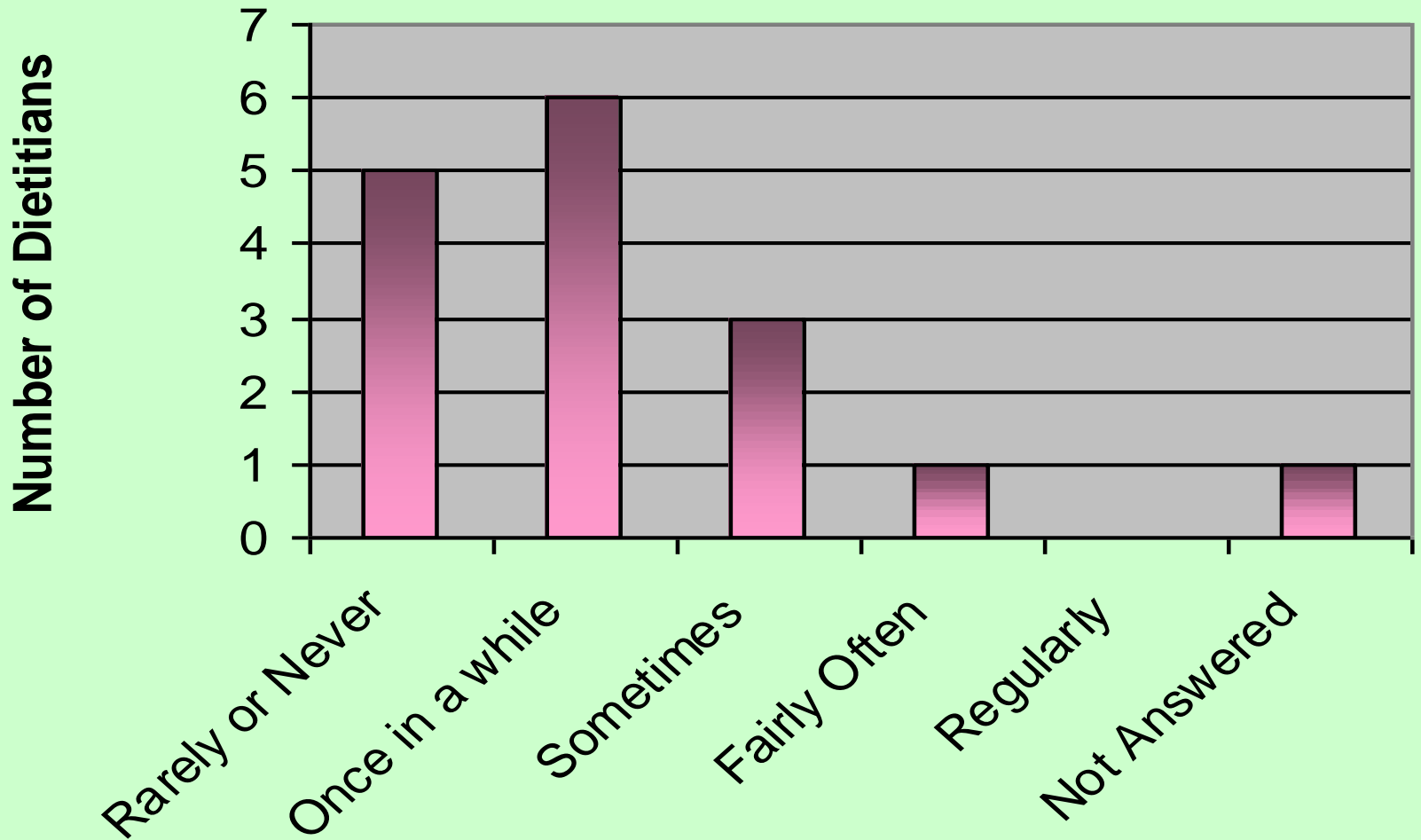
- Clinically experienced team (11 > 5 years)
- No one regularly received supervision
- No one had received training as supervisor or supervisee
- 16/20 responded to survey asking about impact of work and views about implementing supervision

## I feel in an unsafe position with respect to my workload

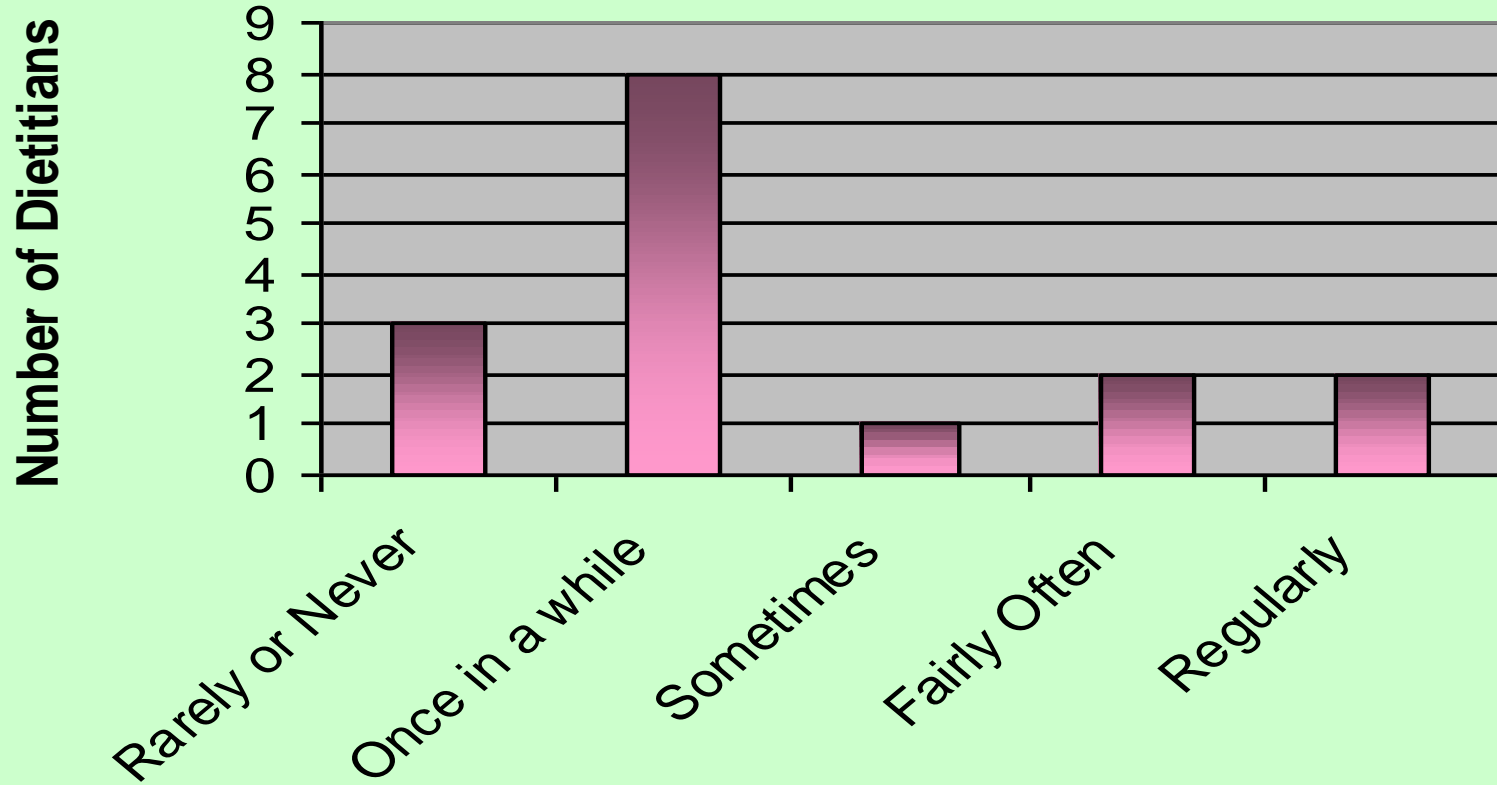
Number of Dietitians



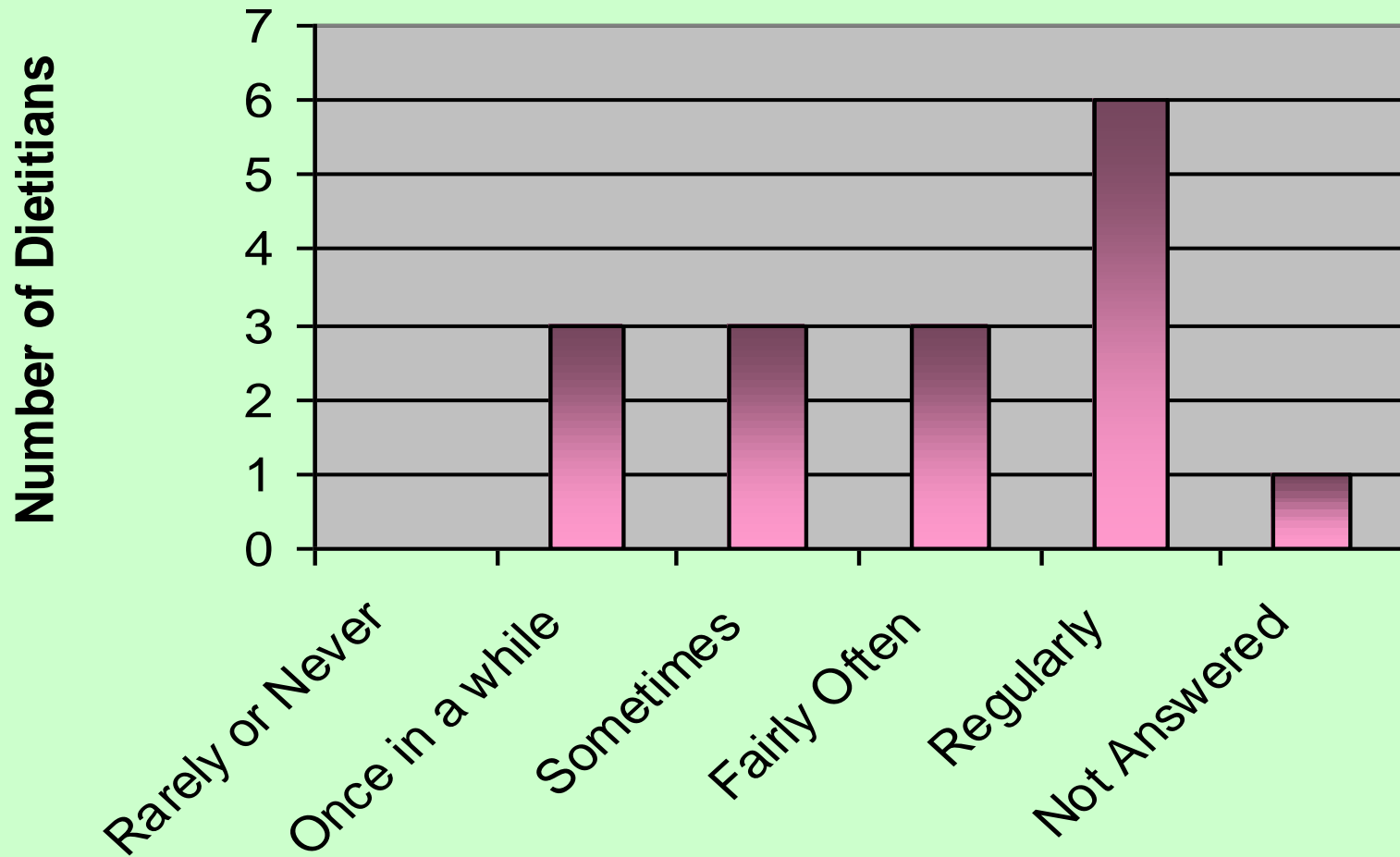
# I celebrate my successes at work



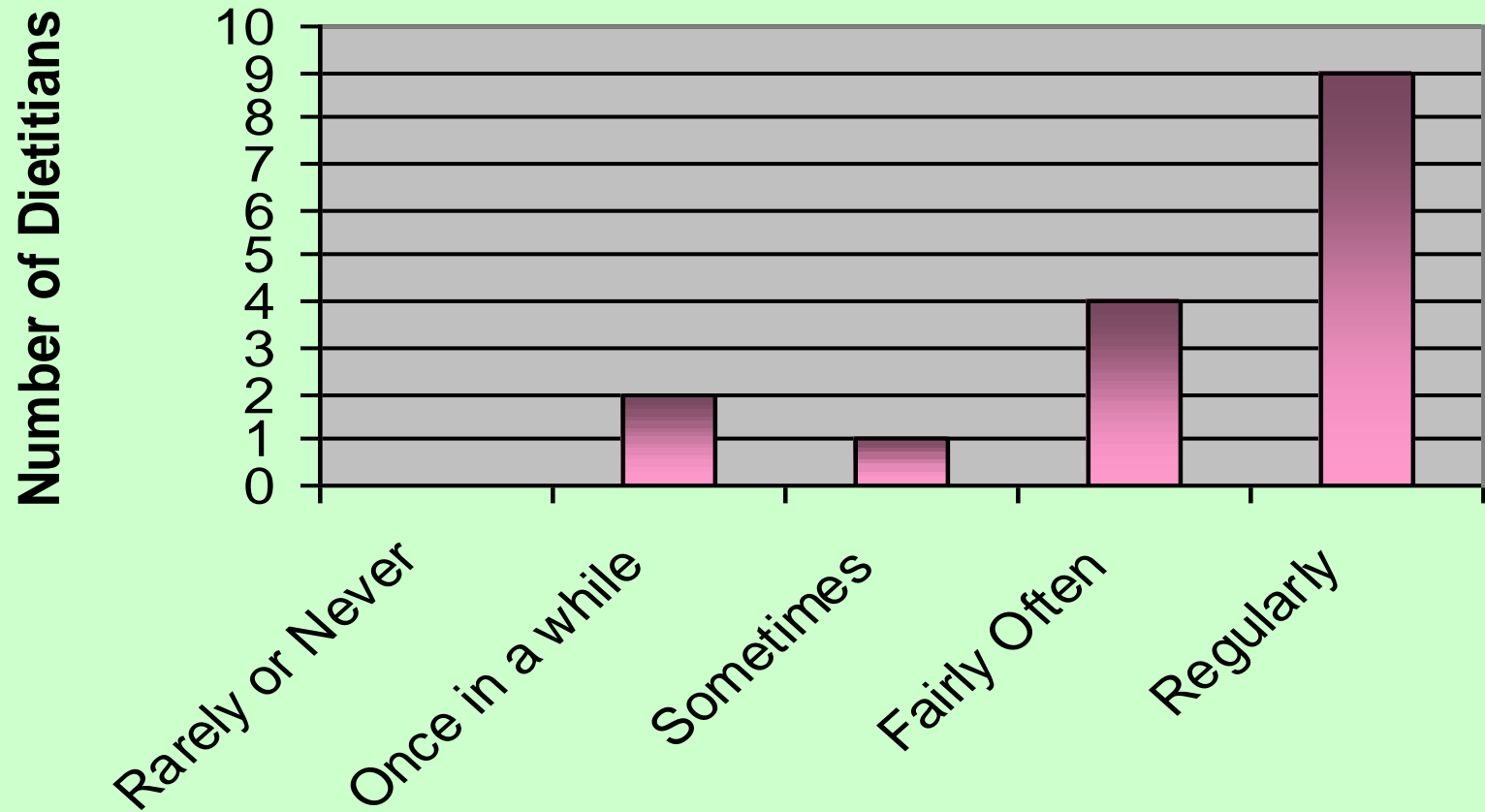
## I have opportunity to talk about my future career path



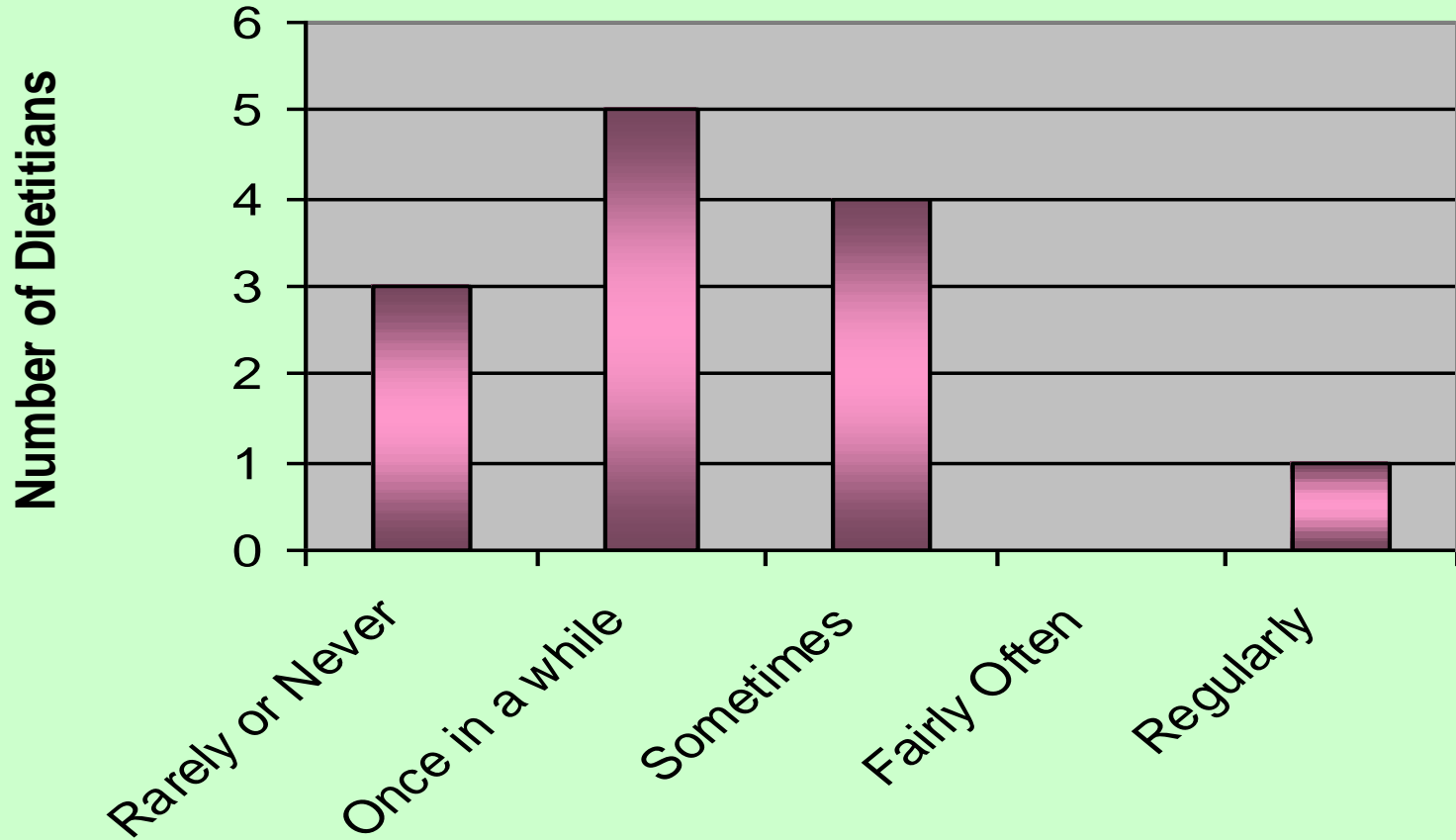
# I feel supported in my work



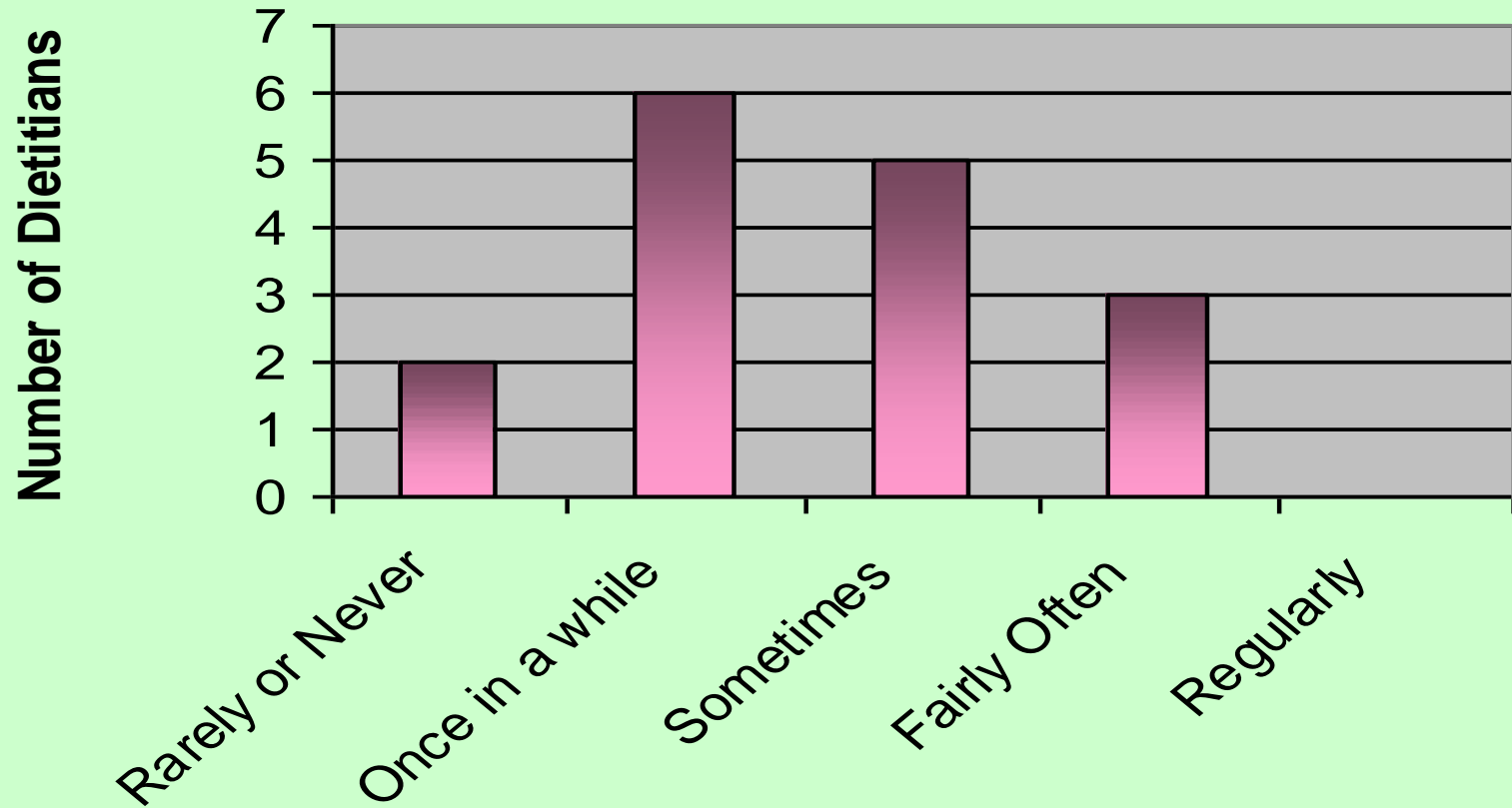
## I am able to discuss challenging patient situations



## I receive feedback about my strengths and weaknesses as a dietitian



## I feel at risk or have experienced symptoms of burnout



# Implementing supervision

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- All agree or strongly agree it is needed
- 15 believe it would be useful to have regularly
- 4 think the idea is intimidating
- 3 think supervision is too time consuming
- Most think it would enjoyable, a good way to relieve stress and is a way to develop high quality practice

# Senior dietitians in team wanted

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- Flexibility: models and frequency
- Policy and contracts
- Choice of supervisor
- Training for supervision

(semi-structured questionnaire)



policy development, training, implementation

# Evaluation after one year:

## Supervisee perceptions of quality and outcomes of their own supervision

<b>Perception of supervision</b>	<b>% of supervisees in agreement</b>
Excellent or good quality	89.4
Getting kind of supervision wanted	94.7
Fitted all or most of needs	84.2
Would recommend current supervisor	94.8
Satisfied with amount of supervision received	89.5
Helped to be more effective as dietitian	89.5
Satisfied with supervision overall	94.7
Would wish to continue with current supervisor	78.9

# Supervisor perceptions

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- Valued external training received and wanted more for supervisors and supervisees
- Reported wide range themes coming to supervision
- Held different views on line managers taking role of supervisor
- Believed would be benefit from regular change of supervisor
- Raised issue that non-line supervisors have responsibility to organisation
- Time pressure to supervise a concern for some
- Overall enthusiastic support for supervision

(semi-structured questionnaire)

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What was happening in the NZ  
profession by 2005?

- Dietitians Board recommend that all dietitians have a mentor for their CCP but not mandatory
- Choose own mentor, informal, no contract, meeting frequency not defined
- A growing number of dietitians in NZ giving and receiving professional supervision

? What do dietitians understand about professional supervision's meaning and purpose

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# Qualitative research

# Aim

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Using focus groups:

- investigate senior dietitians' understanding and experience of professional supervision and seek their views on its value in dietetic practice settings

# Methods

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- Invited a convenience sample of senior dietitians to participate
- Prepared an interview guide for focus group discussions
- Obtained ethical approval from University of Auckland ethics committee
- Conducted face to face focus groups interviews- audio taped and transcribed
- Analysed transcripts manually into common themes

# Results

- ❑ Participant description
- ❑ 4 main themes from focus group discussions

# Participant description

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- 20 senior dietitians in 4 focus groups with 5 participants each
- Participants from urban settings throughout NZ
- Focus groups held in Auckland and Wellington
- Average time of dietetic registration: 24 years

# Participant location and work setting

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	Hospital or out-patient	Community	Foodservice	Public Health	Private Practice	Research
Upper North Island	5	3	1	1	1	1
Lower North Island	5	1	3			
Upper South Island	2				1	
Lower South Island						1

# Theme 1: Range of perceptions

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Informal/Casual

Mentoring

Professional  
Supervision

- Regular, contracted, having protected time, formalised
- 8 participants

With manager

- For Dietitian managers around budgets, service, strategic planning, staff resourcing

Like food  
supervisor

- Related to day to day direction and oversight

## **Past experiences informed initial understanding**

*“....it reminded me of the old days of the word food supervisors ..... I didn't have a positive thought about it. I think it was related to day to day micro supervision... there was nothing for you personally really. There was no reflective practice, it was just well this wasn't done and it had to be done and this has to be done too and these were the standards of hygiene...and that's how we were supposed to perform. So it had very negative connotations for me..”*

## **The term “supervision” itself seen as problematic if the meaning not clarified**

*“ I actually think it is quite a negative term. When I think about it now, it doesn't worry me because I know how we define it....but I think if you just look at it as a word, it sounds like Big Brother's watching over you”*

*“ How I felt about supervision (before I understood what it was and before the training), I really wanted to come up with another name for it as I did not like the term “supervision” and it has connotations of having to be checked up on, to be watched over by someone”*

**Before clarification the term ‘supervision’, the term ‘mentoring’ is preferred**

*“everybody probably has warm fuzzies about mentoring, not necessarily warm fuzzies about supervision”*

# Overall there was understanding & acceptance of professional supervision

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*“Now that we have done it for a few years, I have to say I can’t imagine being without supervision...now that we know what it is and we know the value of it.”*

## Due to:

- workplace training and positive experiences
- introduction of Reflective Practice into dietetic training

## Theme 2: Purposes of supervision

Competency

Support

Professional Development

# Competency

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- Agreed main purpose of professional supervision: safe and competent practice
- But wanted additional requirements outside supervision relationship to ensure safe practice (e.g. observation of colleague relationships, caseload reviews, case studies)
- Boundary between competency and professional supervision discussed

# Competency

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- *“It’s very easy to get mixed up between competency which is a Dietitians Board measure and supervision, isn’t it?”*
- *“ If I were the supervisee....it would be more my role to comment on my performance and what my competencies are or aren’t. Whereas if you are talking about a general view of somebody’s competency, that would be something a colleague or manager might do”*

# Support

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- Being listened to, providing a focus or reality check  
*“...you can be at risk of taking on too much responsibility or not processing that sense of responsibility....and it (supervision) can help you unload that or park it or recognize that it is not as significant as you thought it might be.”*
- Personal support but not for personal issues

# Professional development

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- Enhancing or extending practice beyond minimal competency
- Increasing confidence-strengthening profession as a whole

# Theme 3: Scope of supervision discussions

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- Supervisee led, in depth, beyond day to day problem solving, extension of reflective practice
- Any topic impacting on professional role is appropriate
  - *Feedback on practice*
  - *Clinical discussions*
  - *Professional development*
  - *Managing relationships*
  - *Ethical issues*
  - *Future planning*
  - *Achievements*

## Bring achievements to supervision

*“ I don’t think dietitians celebrate enough (agreement). I think you are always bringing problems and puzzles and cases and you know, we must be able to do it better, what have I done wrong here....we are too busy in saying now, can we do something better? (agreement)”.*

# Theme 4: Implementation for dietitians

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- Strong feeling that every dietitian should receive it
- New graduates need more directive supervision
- Particular concern for isolated dietitians (private practice, part-time, primary care, solo rural positions)
- Public Health and Foodservice need it too as have potential to affect greater number of people

# Discussion

Definitional conundrums

The competency dilemma

# Definitional conundrums for dietitians

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- Professional Supervision needs to be distinguished from other professional and complementary activities
- Lack of clarity contributes to resistance to uptake (*Bond and Holland, 1997*)
- Training in supervision is critical
- Ensure separation between managerial and professional supervision (*Swain, 1995*)
- Informal/casual collegial conversations valuable and should also be encouraged

# The competency dilemma

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- Literature supports concept that one of supervision's purposes is to ensure practitioner delivers **competent service** *Bond & Holland(1997); Lyth (2000); Hyrkas & Ilmonen (2001); Davys (2005).*
- But distinction needs to be made between professional supervision and evaluation of competency

# HPCA Act (2003)

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*“Supervision means the monitoring of, and reporting on, the performance of a health practitioner by a professional peer”*

*Act also refers to certain practitioners “practising subject to the supervision of one or more nominated health practitioners”*

- Dietitians Board definition: “Supervision is seen as a way to check professional competencies are being met to ensure the health and safety of the public”

# Discussion with Dietitians Board

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To clearly distinguish supervision under the HPCA Act from professional supervision, use the following terminology:

## *For some identified practitioners*

There may be a Dietitians Board requirement for that practitioner to be subject to practice supervision or to be under practice supervision

(new graduates, returning to practise in NZ after 3 years, overseas qualified dietitians, or those required to address competence deficits)

## *For every practising dietitian*

They are strongly encouraged to engage in professional supervision

# Supervision for dietitians has variants on a continuum (adapted from Howard et al 2007)

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High

Responsibility  
Evaluation/Oversight  
Power difference  
Accountability

Lower

Low

Professional  
Supervision



# Practice review and Professional Supervision

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- Dietitians also need to demonstrate Continuing Competency by formal observations of their practice
- Report via Performance Review and Dietitians Board CC programme
- Keep this reportable practice review separate from Professional Supervision

# Research conclusion

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- Professional supervision understood, accepted and valued
- Participants believed purpose was for competency, support and professional development
- Definitional and competency dilemmas
- Concepts found in helping profession literature can be utilised in dietetics
- Participants felt Professional Supervision should be implemented for all dietitians

# Implementation in NZ Profession

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- Gathering momentum as part of Allied Health training and implementation programmes in DHBs
- Some DHB dietitian groups are funding training and implementing it into teams
- Professional Association (DNZ) published supervision guidelines 2009
- Clarification discussion followed by Dietitians Board endorsement 2010

# Next steps

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- Increase access to supervision training for dietitians
- Target broader dietitian workforce and private practitioners
- Continue debate within profession (DNZ, Dietitians Board, Dietetic Training School)
- Conduct further research on supervision in dietetic practice

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