Identifying Dietitian’s Experiences and Views of Other Health Professionals (HCPS) Giving Nutritional Advice (2013)

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Author’s contributions

This work was carried out in collaboration between both authors. Author CG designed the study, wrote the questionnaire, performed the analysis and wrote the first draft of the manuscript. Author JM reviewed the design, questionnaire and analysis. Both authors read and approved the final manuscript.

ABSTRACT

Background: There is an increase in dietary related long term conditions with insufficient numbers of dietitians to see all the patients requiring dietary advice. Previous research has highlighted that dietitians are uncertain as to the ability of healthcare professionals (HCPS) to give nutritional advice and that aspects such as training need improvements to increase the effectiveness of advice Doherty et al., [1]. The aim of this study is to expand on this research by identifying the HCPS dietitians commonly work with, whether dietitians think it is suitable for these HCPS to give nutritional advice and the role of dietitians in facilitating HCPS giving advice and any barriers to this role.

Methods: An online questionnaire using the Bristol Online Survey Programme was developed. The participants were registered NHS dietitians in the Eastern Region. Verbal permission for the dietitians to participate was gained through their dietetic managers via a telephone call. Subsequent information and the questionnaire’s link was then e-mailed to participants via their dietetic manager. In total 300 dietitians were recruited. The data collected was then analysed using descriptive statistics and categorisation into key themes, Dey [2] & LoBiondo-Wood and Haber [3].

Ethics: Ethics approval was gained from the University of Hertfordshire’s Health and Emergency Professions Ethics Committee.
**Results:** 84 dietitians responded (28% of those recruited), working in different dietetic settings alongside a wide range of HCPs, with the top 3 HCPs, the dietitians worked with, being diabetes nurses (69% respondents), General Practitioners, GPs, (64% respondents) and Speech and Language Therapists (66% respondents). Also, through the use of the “other” option, dietitians added addition HCPs such as health visitors, community carers, education programme leads (1% respondents). Overall, 91.7% of dietitians believed that HCPs giving advice is beneficial. The qualitative data gained highlighted two main themes; “HCPs involvement in first-line advice” and “implications of incorrect advice”.

**Discussion:** Overall dietitians were positive about other HCPs providing first line nutritional advice. However concerns were raised with regards to incorrect advice being given by HCPs, due to barriers for dietitians in facilitating support such as limited time for training and high turnover of staff members. Dietitians were concern as incorrect, non-up-to-date information given to patients could have a negative impact on patients Hankey, Eley, Leslie, Hunter and Lean, [3]. The dietitians’ classification of HCPs was also unclear. The original HCP list was composed using the HCPC register with the addition of doctors and nurses; however some participants classed other advisory sources such as health programme trainers as HCPs. This questions whether dietitians are aware of all potential advisory sources giving nutritional advice and also questions whether these sources have appropriate nutritional training.

**Conclusion:** Overall, Dietitians believe that HCPs are beneficial when giving out first-line nutritional advice but were concerned with HCPs giving out more in-depth, complex advice. The dietitians’ definition of an HCP was also unclear, questioning whether dietitians are aware of all sources of nutritional advice. This is therefore a potential area that could be explored through further research.

**Keywords:** Dietitians; healthcare professionals; nutritional advice; questionnaire.

**REFERENCES**


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