Dietitians’ Perceptions of Developing Best Practice in Communication Skills

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Authors’ contributions

This work was carried out in collaboration between all authors. All authors were involved in the design of the study. Author KW undertook the interviews and performed the analysis with support from JS. Author KW wrote the first draft of the manuscript and all authors read and approved the final manuscript.

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ABSTRACT

Background: The communication skills of health care practitioners, such as Registered Dietitians (RDs) are increasingly recognised as fundamental to patient care and monitoring the effectiveness of these skills is recommended [1,2]. The aim of this study was to explore experienced RDs views on best practice in relation to the use of communication skills for behaviour change (CSBC) and the assessment of these skills in practice.

Methods: This qualitative study recruited eight RDs from the East Midlands and Yorkshire to participate in semi-structured interviews. The study was part of a larger mixed methods study which developed and validated a tool for the assessment of CSBC in dietetic consultations, DIET-COMMS. The details of sampling, recruitment, ethics and research methods including data collection, data management and data analysis have been reported elsewhere [3]. Participants had viewed and assessed 20 video recorded mock dietetic consultations. This study is a preliminary report of their opinions of those consultations, the importance of CSBC in dietetics, what best practice is and possible methods for professional development in this area. Interviews were transcribed verbatim and subject to inductive thematic analysis.

Results: Preliminary analysis identified three main themes. Theme 1: Concern about consultations viewed. Although there was great variation, participants were disappointed

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and sometimes ‘shocked’ by the poor skill level observed in some consultations. They felt passionately that RDs should be highly skilled in CSBC throughout patient consultations to be effective. Theme 2: Communication skill development and assessment: ready or not? Participants felt that post-registration training and assessment of CSBC was desirable throughout the profession at all levels and in all specialities but they had strong reservations about the acceptability of this and perceived it needed to be ‘handled very sensitively’. Theme 3: Knowledge versus communication skills: one or the other or both? This theme related to the development and use of knowledge and/or CSBC. Participants perceived that knowledge was more highly valued and CSBC sometimes neglected. Poor ability to implement CSBC throughout the whole patient consultation was observed and thought to have a negative effect on patient dietitian relationships and patient outcomes.

Discussion: Despite concerns at some of the communication skills viewed participants were still not overwhelmingly supportive of radical action such as regular, compulsory assessment in practice. Concern for how RDs would ‘feel’ about assessment was stronger than concern about the effectiveness and outcomes of consultations. Theme 3 suggests that participants recognise that both knowledge and skills are important but observed a lack of ability to use CSBC beyond ascertaining the patients’ reason for attending the consultation. This suggests a need to support RDs to integrate these skills throughout the consultation for optimal effectiveness and patient outcomes. Post-registration training and development of these skills, including tailored assessment, may be beneficial, if challenging to implement. A change in the behaviour of RDs may be necessary in order to facilitate more behaviour change in their patients.

Conclusion: Although it may be challenging to implement in practice, the development and assessment of CSBC in RDs post-registration is an area for improvement in dietetics.

Keywords: Communication skills; behaviour change; interviews; dietitians; assessment; qualitative.

REFERENCES


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