

# Dietary advice and collaborative working: do health care professionals have a role?

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## Introduction

Long term health conditions either wholly or partly diet-related continue to increase both nationally and internationally. Health care professionals (HCPs) have a key role to play in the management of patients with long term conditions (AHPF 2008). There is limited research exploring whether HCPs other than dietitians are important in the delivery of dietary advice although in the UK, however locally the NHS Midlands and East Cluster who commission many of the healthcare programmes has outlined their ambition to ensure 'a revolution in patient and customer experience' by enabling staff when they meet with patients to systematically use every opportunity to provide healthy lifestyle advice and, if necessary, signpost people to behaviour change services (Midland and East NHS 2013). In addition community pharmacists are now expected to undertake public health activities and have been identified in the pathway for the provision of oral nutritional supplements ([www.malnutritionpathway.co.uk](http://www.malnutritionpathway.co.uk) no date). This research aimed to explore the views of HCPs other than dietitians regarding the provision of dietary advice that is, or could be, given to their patients.

## Method

The study adopted a generic qualitative approach (Williams 2012) using focus groups to generate group views. A total of 23 participants took part in five uni-professional focus groups. Each focus group was recorded and transcribed verbatim, analysed using an interpretivist approach and the data and the management and retrieval of the qualitative data was supported by the use of a computer programme, NVivo8<sup>®</sup> (QSR 2008). The themes and codes emerging from each focus group were discussed within the research team and main themes were identified.

## Findings

The topics covered across the different professions varied and reflected the range of specialisms present within the groups and the type of role each professional group has within healthcare. Despite this variation in roles all groups considered the provision of dietary advice in the context of their own professional roles, discussed issues relating to referral to the dietitian for specialist advice and discussed the need for written information.



## Conclusion

The findings suggest that HCPs perceive that they have a role in the delivery of dietary advice, that they are aware that there are times when specialist dietary advice provided by a dietitian is required and understand the value of dietary advice provided in the written form. These results seem to suggest that HCPs are not always able to utilise specialist expertise and highlight the importance of maximising the role of all HCPs in the delivery of health promotion advice including dietary advice (Midlands and East NHS (2013). With the need for HCPs to work more collaboratively and flexibly (AHPF 2008, Needle et al. 2011) these findings relating to role, referral pathway and written information could equally be relevant to other HCPs and other aspects of caring for patients with long term conditions.

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