

## Survey Provides Insight Into HIGH RISK ACTIVITIES IN DIETETICS

Carole Chatalalsingh, Ph.D., RD Practice Advisor & Policy Analyst carole.chatalalsingh@collegeofdietitians.org

In Spring 2014, the College sent out a consultation survey to help identify high risk activities in dietetics. Risk of harm or unsafe acts were defined in the survey as "the potential for an event, action or inaction to adversely affect an RD's work in providing quality, safe dietetic services." This definition includes physical, mental, emotional, and social harm or danger to a practicing RD or a client due to intended or unintended events or circumstances.

The survey results have provided valuable insight into the critical issues surrounding perceived high risk practice. Identifying and addressing the areas of high risk dietetic practice is important to help the College fulfill its public protection mandate by developing resources and standards for RDs to practise safely, ethically, and competently in their changing practice environments.

## THE THREE HIGHEST LEVELS OF PERCEIVED RISKS IDENTIFIED

- 1. Nutrition Support (Parenteral Nutrition and Enteral Nutrition including Refeeding);
- 2. Swallow assessments and dysphagia management; and
- 3. Diabetes: Insulin adjustments, glucose testing, hypoglycemia management.

More than 50% of College members report working in one of the top three high risk areas in their annual renewal membership. 85% agreed or strongly agreed that, "Defining risk and risky activities is an important first step to managing risk of harm to the public in changing dietetics practice environments." While it is not necessarily difficult to "think" about risk and risk assessment, it may take some processes to apply and mitigate risk of harm to clients.

The College will establish guidelines and standards in these high risk areas to help RDs to identify and address high risk dietetic practice.

35% (1342) of members responded to the survey

We would like to express our sincere appreciation to all the RDs who responded to the risk survey. Your input was valuable and has provided the insight needed for the development of standards and guidelines to address risk in dietetic practice.

Thank you.

7

résumé SUMMER 2014 College of Dietitians of Ontario