

College of
Dietitians
of Ontario



Quality Assurance Program

Peer & Practice Assessment Handbook

STEP 1: MULTI-SOURCE FEEDBACK

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The Peer and Practice Assessment (PPA) Process

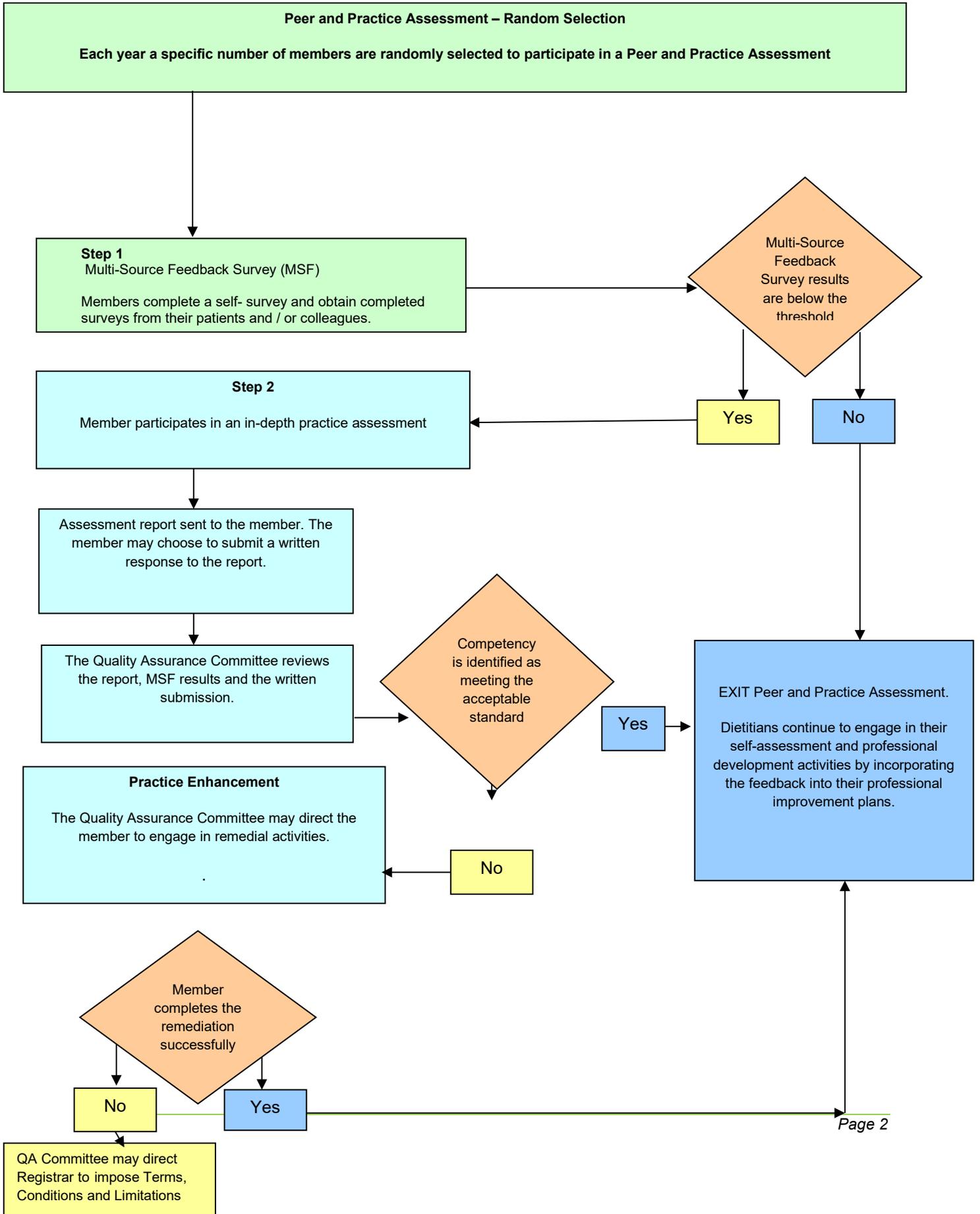


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Introduction

Welcome to the *Peer and Practice Assessment (PPA) Handbook* prepared by the Quality Assurance Program of the College of Dietitians of Ontario. You have been chosen at random to participate in the PPA. The PPA is a two-step quality assurance process, educational in nature, which provides feedback to dietitians to encourage practice improvements. The PPA tools are based on the [Integrated Competencies for Dietetic Education and Practice, April 2013](#), (ICDEP) and were developed in consultation with practicing dietitians.

The two-step PPA process consists of:

Step 1 Randomly selected members are required to engage in the multi-source survey feedback process.

Step 2 Requiring some dietitians, who participated in Step 1, to engage in a more in-depth, focused peer assessment. You will be informed about whether you have to move onto Step 2.

Please Note: If your work setting makes it difficult to approach patients/families (e.g. ICU), to complete surveys. you may have an option to move directly to Step 2. Please contact qaordinator@collegeofdietitians.org to discuss this option.

Professional Obligation

Under Section 82 of the *Regulated Health Professions Act (RHPA)*, Registered Dietitians are required to participate in the College's PPA. If a Registered Dietitian does not fully participate in the PPA, the QA Committee may refer the matter to the College's Inquiries, Complaints and Reports Committee for consideration of professional misconduct.

The College acknowledges that extenuating circumstances may occur. Requests for deferral are considered individually. To request a deferral, the appropriate document must be provided to the College and received as outlined in the pre-notification email.

Employers must also cooperate with the College's practice assessment of a Registered Dietitian. Enclosed in your package is an [information letter](#) that explains an employer's obligations with regard to Quality Assurance and privacy legislation (see *Access to Client Information and Records*, [page 13](#)).

At this time, you are required to complete Step 1 of the PPA, which includes:



To DO:

1. Watch the video [Step 1-How to](#)
2. Reading this handbook and following all instructions;
3. Completing the self-survey; and
4. Ensuring that all multi-source feedback surveys are returned to the College by the deadline prescribed

Competence is more than the accomplishment of discrete and isolated tasks. Rather, it involves the interaction and integration of knowledge, critical thinking, judgment, attitudes, skills, values and beliefs. It also includes the ability to generate learning and move from one situation to another.

Multi-Source Feedback Surveys Overview

What is the purpose of the multi-source feedback survey process?

The purpose of the multi-source feedback process is two-fold; 1) provides formative feedback to a large number of dietitians to prompt practice awareness and improvement if needed; and 2) provides a screening tool to identify those dietitians who require a more in-depth practice assessment.

The multi-source feedback surveys are designed to collect information about your professional interactions and evaluate your knowledge, skill and judgment related to professional behaviours and communication skills. This process involves colleagues and patients (if applicable) completing feedback surveys which help assess your practice. The multi-source feedback surveys are based on the [*Integrated Competencies for Dietetic Education and Practice, April 2013*](#), (ICDEP)

What do the surveys look like?

There are three surveys:

- 1) Self-surveys
- 2) Colleague surveys
- 3) Patient surveys: only dietitians who see patients (groups or individuals) are required to obtain patient surveys.

Each survey consists of a series of statements representing a specific performance indicator from the *Integrated Competencies for Dietetic Education and Practice* (see survey samples, [pages 17 -19](#)). The surveys are relevant to different types of practice and have user-friendly terms for ease of completion. In all of the surveys, respondents rate each statement on a seven point scale and may also indicate that a statement is “not applicable.” The surveys are bilingual.

Who are Colleagues?

Colleagues include other dietitians, other health care and non-health care professionals with whom you work, for example, staff who report to you, your manager, food service staff, students, interns, school board members, nurses, physicians, speech-language pathologists , suppliers, sales personnel, researchers and research assistances, fellow committee members or board members.

Choose colleagues who know your work and performance, and can provide constructive feedback. Please use your professional judgment to determine appropriate colleagues to complete the surveys and/or contact the College for further assistance.

Who are patients? (If applicable)

Patients are defined as individuals, caregivers, family members, substitute decision-makers who:

- a) have received care within the last year; or
- b) are currently receiving service.

Note: Population health dietitians: For the PPA process, your patients are the consumers you see either individually or in groups. The nurses and other people you train, manage etc. are your Colleagues

If you approach a patient who is currently receiving your services:

- Advise the patient that the information will be kept confidential between them and the College, and you will not be reviewing the individual survey responses; and
- Advise the patient that his/her responses will not affect their current or future services.

If you are providing service to a patient who has several family members or a substitute decision-maker with whom you interact, it is appropriate to ask all of these people to complete a survey. Each family member may complete and submit a separate survey tool.

The College appreciates that some dietitians may feel shy in asking family members and/or patients to complete a survey. As health professionals, dietitians are sensitive to **not bothering** these people during difficult times. However, keep in mind that, in most situations, family members and patients want to provide feedback on the care they have received.

How many surveys should be completed?

If your practice is **non-clinical** (you do not provide **direct patient care**) submit:

- one self-survey; and
- at least 6 colleague surveys.

If you provide **direct patient care** submit:

- one self-survey;
- at least 6 colleague surveys; and
- at least 9 patient surveys.

Why are a minimum number of surveys required?

When fewer than the minimum number of surveys is received, the data is considered too unstable for meaningful results, and anonymity may not be maintained.



Tips for completing the surveys

To ensure you obtain valuable feedback from respondents and to ensure that the required number of surveys are completed, please:

- Approach your patients and colleagues well in advance of the submission date.
- Inform the respondents when you require the surveys submitted online or mailed.
- Ensure a sufficient number of surveys are completed by asking more than the required number of people to complete the surveys (you have additional surveys in your package).
- Inform respondents that it only takes 5–10 minutes to complete the survey and their valuable input is required for ongoing practice enhancement.
- Inform the respondents that this process is confidential and individual survey responses are not shared with you.
- Ask a family or caregiver to provide support to patients who may require assistance to complete the survey.

Multi-Source Feedback Survey Instructions

Your PPA Package contains:

1. **One Envelope addressed to you containing:**
 - Member Notification letter with your password to access the survey website
 - Directions for emailing the Colleague surveys
 - Access to Client records information

AND, if you provide dietetic services directly to patients:

2. **A second large white envelop marked "Patient"**



The envelopes marked "Patient" hold the required number of sealed envelopes for each patient survey*. **Please do not open the sealed envelopes.** The College's third party mailing house has completed a quality control check on each envelope and has ensured its correct contents. They contain:

- An instruction letter (see samples, pages [15-16](#));
- A multi-source feedback survey (see samples, pages [17-19](#)); and
- A self-addressed postage paid envelope (with confidential stamp).

How to Complete Your Self-Feedback Survey

Log onto the College's website and follow the link to the *Multi-Source Feedback Surveys*.

What to do with the Sealed Envelopes

1. Confirm that your CDO registration number is printed on the exterior of the patient envelopes (your CDO registration number is printed on your notification letter). **Remember to get agreement from your patients and Colleagues before you enter them on your tally sheet.**
2. Log onto the College's website and access the *Multi-Source Feedback Surveys*, then select the Tally Page. The tally sheet is divided into 2 parts: 1) Patient, 2) Colleague. On the Tally sheet, record the envelope number (1-15) and name of the person who is filling in that patient survey. **Email addresses are not necessary for patients.** For the colleague surveys, list the colleagues on the tally sheet (1-10), then send the colleague an email from the tally sheet.
3. You will send a copy of your tally page to the College at the end of the survey process.
4. Choose 15 patients and 10 colleagues to complete the surveys. At least 6 colleague and 9 patient (if applicable) surveys must be completed. Distributing extras will help ensure a sufficient number of surveys are returned. Record their names on the tally sheet next to their envelope number.
5. **Colleagues:** Must complete the survey online. Send the selected colleagues an email from the tally page. This email will include all the pertinent information for the Colleague to complete the survey online.

6. Patients: Provide the selected patients with the appropriate sealed envelopes, with instructions to complete and submit the survey by the due date (either online or through the mail in the postage paid envelope provided).

Please contact the College if you are having difficulties obtaining the required number of surveys.

How are the surveys submitted?

Patients:

The instruction letter in each patient envelope offers respondents a choice to either complete the survey:

- 1) Online (access code and dietitian ID are enclosed in the sealed envelope), or
- 2) On paper: Seal the completed survey in the self-addressed envelope with the stamp marked "Confidential" and mail to Cido Research Ltd. **Envelopes received by *Cido Research Ltd.* with a broken confidential label will not be included in the overall survey results.**

...And

- 3) If hand delivering the survey to patients is not an option, you can simply login to the survey site using your unique password and send them an email from your tally sheet which will contain the link to the survey along with their own unique password.

Colleagues: You must use only the online method as instructed below:

Here's how

- Log in to the survey site
- Click Access Tally Sheet. (Option 2)
- Enter your email address at the top of the form
- Enter the names and email addresses of one or more patients and/or colleagues click "Save Tally / Send All Email(s)".

Note: Any bounce-backs will be returned to the email address you entered at the top of the form. You can correct and re-send emails at your convenience by accessing the email tool at any time. There is always a possibility that some of these emails will be delivered to the junk folder. The patient/colleague should be told to check this folder if they've not received the email you sent.

Multi-Source Feedback Survey Tally Page

Use the online system to record the names of the patients who you asked to complete the surveys matched to the appropriate envelope number. In other words, make sure that if you record John Doe in position 1 that you give Jon Doe envelope #1. For any patient that you cannot hand deliver the survey to, make sure that you put their name in a new line on the tally sheet and do not give that envelope to anyone else. i.e. If Mary Smith is being emailed from position # 2 on the tally sheet, do not give envelope # 2 to anyone else (keep the envelope aside until the deadline)

You must send the Tally sheet to the College when the survey deadline is reached.

The online *Tally Page* is an easy way to keep track of the completed and missing surveys. To complete and access the online *Tally Page*:

1. Log onto the College website at www.collegeofdietitians.org
2. Click on *Multi-Source Feedback Survey*.
3. When prompted, enter your password and user ID. Then select the desired function (*Complete the Multi-Source Feedback Self-Survey* or access the *Tally Page*.)

	Name	Email Address	Received
SELF			
PATIENTS			
#1			<input type="checkbox"/>
#2			<input type="checkbox"/>
#3			<input type="checkbox"/>
#4			<input type="checkbox"/>
#5			<input type="checkbox"/>
#6			<input type="checkbox"/>
#7			<input type="checkbox"/>
#8			<input type="checkbox"/>
#9			<input type="checkbox"/>
#10			<input type="checkbox"/>
#11			<input type="checkbox"/>
#12			<input type="checkbox"/>
#13			<input type="checkbox"/>
#14			<input type="checkbox"/>
#15			<input type="checkbox"/>
COLLEAGUES			
#1			<input type="checkbox"/>
#2			<input type="checkbox"/>
#3			<input type="checkbox"/>
#4			<input type="checkbox"/>
#5			<input type="checkbox"/>
#6			<input type="checkbox"/>
#7			<input type="checkbox"/>
#8			<input type="checkbox"/>
#9			<input type="checkbox"/>
#10			<input type="checkbox"/>

Save tally and send New Emails

Multi-Source Feedback Survey Results

How will the multi-source feedback survey results be used?

The multi-source feedback survey process is a screening assessment for education purposes. As regulated health professionals, it is a legislative obligation that dietitians participate in a self, peer and practice assessment. During the survey process, dietitians obtain feedback from patients and colleagues to inform their practice. Dietitians should reflect on the results to encourage change or to maintain an acceptable level of performance. The results provide the objective perspective from peers, patients and colleagues related to the integrated competencies.

The results are used by the QA Committee to select dietitians for an in-depth practice assessment. Dietitians whose multisource survey results fall below a norm reference score will move on to Step 2. Some dietitians will be randomly selected to move onto Step 2 regardless of their performance in Step 1.

How are the multi-source feedback surveys scored?

A score report is provided to all participating dietitians who have submitted the required number of surveys. The report provides your mean score for each survey question and the normative reference score. The normative reference scores are established from all of the co-worker and patient surveys that are submitted during the peer and practice assessment process.

Providing the norm reference score for each question encourages you to compare your scores to the scores generated by all participating dietitians. You will see how your patients and/or colleagues rate you in comparison to your self-rating and the rating of all dietitians who participated. This can be very useful information as it is known to be difficult for individuals to accurately assess their own strengths and weaknesses.

Most dietitians get high ratings from both co-workers and patients, and so even if you score less than average this may not be indicative of a need for you to address an issue. The survey feedback is just there to help point you to the areas that may not be your primary strengths. It will be up to you to decide if you would like to make changes.

Do "non- applicable" or "don't know" scores apply to my overall score?

No. When a patient and/or colleague indicate a "non-applicable" or "don't know" score, this response is not considered in your average score or in the norm-reference.

Interpreting Your Scores

How should I use the feedback obtained from the multi-source feedback surveys?

1. Calibrate or adjust your self-assessment.

The results of the surveys provide valuable formative feedback, as the research suggests professionals tend to either overrate themselves or under value their abilities. Therefore, the results provide a method for dietitians to adjust or "calibrate" their self-assessment. You are encouraged to review your results with the notion of adjusting your future self-rating by comparing your score with the colleague ratings.

2. Use results as a self-reflection to develop goals.

Take special note of any competencies that were scored lower than other competencies. Considering the gaps between the colleagues, self, norm reference scores may help you identify learning needs. To determine a gap review the results and look at scores for the competencies that show a negative rating for the GAPS analyst. Targeting the competencies that show the largest gap may provide you with insight into specific learning needs.

How does the College use the results?

The QA Committee sets a threshold score (Z Score) and other specific criteria to determine which dietitians require further assessment of their practice.

Falling below a specified Z score remains the main criteria for moving onto Step 2; However, the QA Committee will have some discretion based on z-scores such that if a dietitian does not have any low scores (but rather has most scores closer to 6), they **may not be asked** to proceed to Step 2.

Regardless of the Z score, any RD who receives an average score of 4 or less from a single patient or colleague will move onto to Step 2.

To ensure that the process is identifying the right RDs, 2-3 RDs whose Z scores are above the established criteria will be randomly chosen to move onto Step 2.

Step 2 is a more in-depth Behaviour-based interview with a Peer Assessor. In Step 2, a dietitian's multi-source feedback survey results and peer assessor report are reviewed by the QA committee to determine whether actions should be undertaken by the member to improve their competence. For this review, the QA Committee considers only the mean scores of the patient and colleague results. The self-assessment result is not reviewed.

Confidentiality

Confidentiality is strictly adhered to in Quality Assurance. All member information acquired during the Peer and Practice Assessment process will be used for QA purposes only and is kept confidential within the QA Program. It will not be used in other College proceedings.

The College **will not** notify your employer of your participation in a Peer and Practice Assessment and/or inform your employer of the outcome of your assessment. If the employer must be notified to obtain patient contact information and charts, it is the member's responsibility to advise his or her employer of the process.



Access to Client Information and Records (for RDs with Direct Patient/Client Care)

Peer and Practice Assessment

Access to Client Information and Records

Background

The College of Dietitians of Ontario randomly selects 10% of its members to participate in the Peer and Practice Assessment (PPA) annually. The PPA is a mandatory component of the Quality Assurance Program. In keeping with *The Regulated Health Professions Act, 1991* (RHPA), the PPA is meant to provide assurance to the public and other stakeholders that Registered Dietitians (RDs) in Ontario practice safely, competently and ethically. Where there is a need, it also assists RDs in improving their individual competence in a positive and supportive environment.

All information collected is kept confidential between the College's Quality Assurance Program and the RD. The RD is not obligated to share their results or the outcome of the assessment with their employer. The College will not advise the employer of a RD's participation.

Step 1-The Multi-Source Feedback Survey (MSF)

The RD is asked to contact 6-10 colleagues and 9-15 patients to complete an anonymous and confidential practice feedback survey. The results will inform the dietitian about how a group of patients and colleagues view their professional behaviours. To facilitate this process the RD may require access to patient records to obtain the patient's address and/or phone number.

The College does not collect any personal patient information. The patients' participation is voluntary and the patient feedback collected will remain anonymous and confidential. The RD will not be informed of the individual survey result, but will receive an aggregate report of all completed surveys.

Step 2-Behaviour-based interview and Chart review (if applicable)

Once the MSF surveys are collected and the results tabulated, any RD who falls outside the norm reference score will be required to undergo a face-to-face behaviour-based interview and chart review*. The interview will be conducted by a trained peer assessor. The chart review component requires that the assessor be given access to 10 patient charts of the RD's choosing.

Does the College have the authority to access patients' records?

Yes, the right for the College Assessor to access this information is cited in the *Health Professions Procedural Code* under the *Regulated Health Professions Act, 1991* (RPHA), ss. 82. (1)(c).

Under ss. 82(2) and 82(3) of the *Code*, facility operators and health information custodians are required to provide access to premises and charts. This section applies despite any provision in any Act relating to confidentiality of health records [(*Code*), ss.82 (5)].

“Co-operation with Committee and assessors

82. (1) every member shall co-operate with the Quality Assurance Committee and with any assessor it appoints and in particular every member shall,
- (a) permit the assessor to enter and inspect the premises where the member practises;
 - (b) permit the assessor to inspect the member’s records of the care of patients;
 - (c) give the Committee or the assessor the information in respect of the care of patients or in respect of the member’s records of the care of patients the Committee or assessor requests in the form the Committee or assessor specifies;
 - (d) confer with the Committee or the assessor if requested to do so by either of them; and
 - (e) participate in a program designed to evaluate the knowledge, skill and judgment of the member, if requested to do so by the Committee.”

Further, the *Personal Health Information Protection Act, 2004* (PHIPA), clause.9(2)(e) supports the College’s right of access and states that PHIPA is not to be construed to interfere with the regulatory activities of the College under the RPHA.

The College encourages RDs to follow the applicable policies set out by their practice setting to facilitate access to patient records. For instance, where the practice setting requires notification of an employer before patient charts are accessed for non-treatment purposes, the College would encourage the RD to do so.

Questions?

Quality Assurance Program at the College of Dietitians of Ontario

416-598-1725 / 1-800- 668-4990 ext. 234

qacoordinator@collegeofdietitians.org

Patient Instruction Letter

Dear Sir or Madam,

As one of the regulated health care professions in Ontario, dietitians are required to participate in activities set out by The College of Dietitians of Ontario. The College's mandate is public protection, and its Quality Assurance Program is in place to ensure that dietitians practice safely and effectively.

One component of the Quality Assurance program is the Peer and Practice Assessment. Your dietitian has been randomly selected to participate in a Peer and Practice Assessment. An important part of this assessment is obtaining feedback from patients like you. The results will inform the dietitian about how a group of patients view their professional behaviours. If any consistent concerns are expressed, the College will explore these further with the dietitian.

Your dietitian is asking you to rate his/her practice by completing the attached survey.

This survey should take about 15 minutes to complete. Your input is voluntary and the information collected will remain confidential. The dietitian will not be informed of the individual survey results, but will receive an overall report of all the completed surveys. The only possible exception is in the event of a legal challenge. The completed surveys will remain on record for 5 years. Your participation is very much appreciated.

Complete the Survey and return it by June 1

This survey should take about 15 minutes to complete. You may complete the survey either online or by mailing the enclosed paper survey.

- 1) Read each survey question carefully.
- 2) Rate the dietitian on a scale from 1= Strongly Disagree to 7 =Strongly Agree.
- 3) If you have not observed a particular skill asked on the survey, indicate "not applicable" (NA).

Online

Access and fill out the survey online by following these steps:

- 1) Logon to www.collegeofdietitians.org, and click on link *Multi-Source Feedback Surveys*.
- 2) Enter the password located in the top right corner of the enclosed "Patient Survey."

OR

Paper

Complete the paper survey, as follows:

- 1) Use an ink pen; clearly circle the appropriate rating number on the survey entitled "Patient Survey".
- 2) Place the completed survey into the self-addressed, postage-paid envelope.
- 3) Either mail the sealed envelope to Cido Research or return the sealed envelope to the dietitian, who will return the envelopes unopened to Cido Research.

Please complete the online survey or return the print copy by the prescribed deadline.

Sincerely,

Quality Assurance Program

Colleague Instruction Email

Dear Sir or Madam,

Your dietitian colleague has been randomly selected to participate in a Peer and Practice Assessment by the College. The first step of this assessment is a Multi-Source Feedback Survey process.

A multi-source feedback Survey (MSF) is a process designed to collect information about the dietitian's practice both from colleagues and patients (if applicable). The dietitian is asked to choose colleagues and patients for feedback. The results inform the dietitian of how a group of colleagues and patients view his/her performance.

The dietitian is asking you to rate their practice by completing a survey.

This survey should take about 15 minutes to complete. Your input is voluntary and the information collected will remain confidential. The dietitian will not be informed of the individual survey results, but will receive an overall report of all the completed surveys. The only possible exception is in the event of a legal challenge. The completed surveys will remain on record for 5 years. Your participation is very much appreciated.

Complete the Survey by June 1

1. Rate the dietitian on a scale from 1= Strongly Disagree to 7 = Strongly Agree.
2. If you have not observed a particular skill asked on the survey, indicate "not applicable" **(NA)**.

Access and fill out the survey online by following these steps:

1. Click on the following link: <LINK>
2. Enter your unique password: <PASSWORD>

Thank you for your participation in this survey.

Sincerely,

Quality Assurance Program

Multi-source Feedback: Self Survey

Multi-source Feedback: Self Survey



Please rate yourself using the scale from 1 to 7 (1 = STRONGLY DISAGREE, 7 = STRONGLY AGREE)

Please circle the appropriate number in each row.

	Strongly Disagree	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree	Strongly Agree	Not Applicable
1. I treat others in a respectful and non-judgmental manner (e.g. respects others' time, space, ideas, religious beliefs, economic status, culture).	1	2	3	4	5	6	7	NA
2. I demonstrate behaviours that are customer and/or client focused.	1	2	3	4	5	6	7	NA
3. I ensure confidentiality and security measures are in place when using technology (e.g. confidentiality statements on facsimiles/email, encryption, logging off computer, password protection).	1	2	3	4	5	6	7	NA
4. I minimize the potential risk of a breach in confidentiality when disclosing information (e.g. hold meetings in private locations, ensure permission / consent to disclose confidential information).	1	2	3	4	5	6	7	NA
5. I adapt communication styles to increase understanding of information when presenting or speaking to others.	1	2	3	4	5	6	7	NA
6. I use active listening skills (e.g. paraphrase, clarify, summarize, restate information, acknowledge others' opinions).	1	2	3	4	5	6	7	NA
7. I present educational material or information that meets the required learning needs of others (e.g. new ideas or concepts, reports, policies, pamphlets, meeting materials).	1	2	3	4	5	6	7	NA
8. I provide education or information in a way that is easily understood.	1	2	3	4	5	6	7	NA
9. I work with team members in a collaborative and co-operative manner.	1	2	3	4	5	6	7	NA
10. I use conflict resolution skills when working with team members (i.e. define the problem, identify possible solutions, negotiate resolution).	1	2	3	4	5	6	7	NA
11. I demonstrate initiative to improve the quality of my work to achieve positive outcomes.	1	2	3	4	5	6	7	NA
12. I demonstrate new knowledge related to the work environment (e.g. new trends, literature, evidence-based practice, policies, legislation).	1	2	3	4	5	6	7	NA
13. I weigh relevant information before making a decision when managing an issue (e.g. benefits and risks, others' opinions).	1	2	3	4	5	6	7	NA
14. I suggest alternative solutions when resolving issues.	1	2	3	4	5	6	7	NA
15. I determine the impact of change on others (e.g. clients, coworkers, staff, students, family members) and their readiness for change.	1	2	3	4	5	6	7	NA
16. I evaluate the effectiveness of the plan after a change has occurred (e.g. asks how those involved have adapted to the change, evaluate the impact of the change).	1	2	3	4	5	6	7	NA

Multi-source Feedback: Colleague Survey

Multi-source Feedback Survey: Colleague Survey

College of
Dietitians
of Ontario



Ordre des
diététistes
de l'Ontario

Please rate your colleague Dietitian on these statements using the scale from 1 to 7 (1 = STRONGLY DISAGREE, 7 = STRONGLY AGREE)		Strongly Disagree	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree	Strongly Agree	Don't Know
Please circle the appropriate number in each row.									
THE DIETITIAN:									
1.	Treats others in a respectful and non-judgmental manner (e.g. respects others' time, space, ideas, religious beliefs, economic status, culture).	1	2	3	4	5	6	7	DK
2.	Demonstrates behaviours that are customer and/or client focused.	1	2	3	4	5	6	7	DK
3.	Ensures confidentiality and security measures are in place when using technology (e.g. confidentiality statements on facsimiles/email, encryption, logging off computer, password protection).	1	2	3	4	5	6	7	DK
4.	Minimizes potential risk of a breach in confidentiality when disclosing information (e.g. holds meetings in private locations, ensures permission / consent to disclose confidential information).	1	2	3	4	5	6	7	DK
5.	Adapts communication styles to increase understanding of information when presenting or speaking to others.	1	2	3	4	5	6	7	DK
6.	Uses active listening skills (e.g. paraphrases, clarifies, summarizes, restates information, acknowledges others' opinions).	1	2	3	4	5	6	7	DK
7.	Presents educational material or information that meets the required learning needs of others (e.g. new ideas or concepts, reports, policies, pamphlets, meeting materials).	1	2	3	4	5	6	7	DK
8.	Provides education or information in a way that is easily understood.	1	2	3	4	5	6	7	DK
9.	Works with team members in a collaborative and co-operative manner.	1	2	3	4	5	6	7	DK
10.	Uses conflict resolution skills when working with team members (i.e. defines the problem, identifies possible solutions, negotiates resolution).	1	2	3	4	5	6	7	DK
11.	Demonstrates initiative to improve quality of work and achieve positive outcomes.	1	2	3	4	5	6	7	DK
12.	Demonstrates new knowledge related to the work environment (e.g. new trends, literature, evidence-based practice, policies, legislation).	1	2	3	4	5	6	7	DK
13.	Weighs relevant information before making a decision when managing an issue (e.g. benefits and risks, others' opinions).	1	2	3	4	5	6	7	DK
14.	Suggests alternative solutions when resolving issues.	1	2	3	4	5	6	7	DK
15.	Determines the impact of change on others (e.g. clients, coworkers, staff, students, family members) and their readiness for change.	1	2	3	4	5	6	7	DK
16.	Evaluates the effectiveness of the plan after a change has occurred. (e.g. asks how those involved have adapted to the change, evaluates the impact of the change).	1	2	3	4	5	6	7	DK
17.	I would recommend this dietitian if asked to provide a reference for a similar role.	Yes			No				

Multi-source Feedback: Patient Survey

Multi-source Feedback: Patient Survey

College of
Dietitians
of Ontario



Ordre des
diététistes
du Québec

Please rate the Dietitian on these statements using the scale from 1 to 7 (1 = STRONGLY DISAGREE, 7 = STRONGLY AGREE)

Please circle the appropriate number in each row.

THE DIETITIAN:

	Strongly Disagree	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree	Strongly Agree	Not Applicable
1. Treated me with respect.	1	2	3	4	5	6	7	NA
2. Respected my privacy and dignity.	1	2	3	4	5	6	7	NA
3. Explained information in a way that I could understand.	1	2	3	4	5	6	7	NA
4. Recognized when I needed more or less information (e.g. offered me a break when needed/ provided more details without me asking).	1	2	3	4	5	6	7	NA
5. Talked about the reason for the visit.	1	2	3	4	5	6	7	NA
6. Encouraged me to feel at ease during the visit.	1	2	3	4	5	6	7	NA
7. Gave me nutritional information that met my needs.	1	2	3	4	5	6	7	NA
8. Asked me if the session or information was useful.	1	2	3	4	5	6	7	NA
9. Addressed issues that could prevent or stop me from reaching my goals.	1	2	3	4	5	6	7	NA
10. Asked me if I needed additional or further support (e.g. more counselling/information, see other professionals or obtain additional support services)	1	2	3	4	5	6	7	NA
11. Provided information on how to choose the right foods for my health.	1	2	3	4	5	6	7	NA
12. Showed knowledge of my cultural, religious and personal reasons for my food choices.	1	2	3	4	5	6	7	NA
13. Talked with me about my health and/or nutritional goals.	1	2	3	4	5	6	7	NA
14. Helped me develop a nutritional plan to meet my needs.	1	2	3	4	5	6	7	NA
15. Talked with me about my usual food choices, my medications, any vitamin/mineral or other supplements, health history.	1	2	3	4	5	6	7	NA
16. I was satisfied with the services provided by the dietitian.	Yes				No			
17. I would recommend this dietitian to a family member.	Yes				No			

Additional Information – Multi-Language

For those members participating in Step 1 (Multi-Source Feedback) of the Peer and Practice Assessment, the patient letter and survey are now available not only in English and French but also in the other 6 most common languages spoken in Ontario. **You can use this link to choose both the Patient survey and accompanying letter of instruction or simply type the language that you require in the search field on the College Website. Once you print both, follow the instructions listed below**

[Surveys and letters in different languages](#)

Instructions

- 1) Once you determine that your patient or a support person is not fluent in English, print the patient letter and survey in the appropriate language
- 2) You must give the patient the envelope with the English survey and letter. The English letter has your ID identifier on it so that the survey is assigned to you. The patient will mail the completed survey and the blank English survey to Cido Research in the self-stamped envelope provided.

The other languages are: Italian, Portuguese, Chinese (Simple Mandarin), Spanish, Tagalog and Punjabi