



Trinity College Dublin

Coláiste na Tríonóide, Baile Átha Cliath  
The University of Dublin

# Practice Placement Handbook

## BSc Human Nutrition and Dietetics

[www.dietitian.ie](http://www.dietitian.ie)





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## Summary of placements

There are three practice placements on the undergraduate programme – Practice Placement A, Practice Placement B, and Practice Placement C. These three placements provide 1060h of practice education. Email [dietetics@tcd.ie](mailto:dietetics@tcd.ie) to discuss practice placement with a member of staff.

### Practice Placement A [PPA]

#### What is PPA?

A 150h practice placement completed in Year 1 for 5 ECTS

#### What is the objective of PPA?

To introduce students to the process of food provision and role of dietetics in healthcare settings

#### Where does PPA take place?

In the catering department of healthcare settings or appropriate alternative settings across the ROI

#### When does PPA typically take place?

From May to Jun

### Practice Placement B [PPB]

#### What is PPB?

A 400h practice placement completed in Year 2 for 15 ECTS

#### What is the objective of PPB?

To enable students to perform mandated dietetic skills with varying levels of guidance

#### Where does PPB take place?

In acute care and community-based settings across the ROI. Students train in one or more settings

#### When does PPB typically take place?

From Apr to Jun

### Practice Placement C [PPC]

#### What is PPC?

A 510h practice placement completed in Year 4 for 30 ECTS

#### What is the objective of PPC?

To enable students to independently perform mandated dietetic skills to a safe standard

#### Where does PPC take place?

In acute care and community-based settings across the ROI. Students typically train in one setting

#### When does PPC typically take place?

From Sep to Dec or from Jan to Apr

## Practice Education Team

### **Assistant Professor [AP] in Dietetics, Trinity College Dublin**

CORU-registered dietitian responsible for the strategic development and coordination of practice education. Ensures that placements meet required standards, develops practice education-related CPD for practitioners, and delivers innovative practice education teaching to students.

### **Practice Education Coordinator [PEC]**

CORU-registered dietitian responsible for coordinating placements and supporting students and placement settings. Facilitates the preparation of students in advance of placement and coordinates CPD related to practice education for staff in placement settings.

### **Practice Tutor**

CORU-registered dietitians responsible for providing tailored learning support to students before and during their practice education.

### **Dietitians in healthcare settings around Ireland**

CORU-registered dietitians occupy various roles to support day-to-day practice education, to include:

- **Student Coordinator**

Key contact person that links the placement setting with College throughout practice placement. Responsible for making first day arrangements with students, providing orientation, and overseeing the timetabling of activities throughout placement.

- **Practice Educator [PE]**

Is responsible for supervising the day-to-day practice and performance of students. Reviews and contributes to records of student performance. In the event a student struggles on placement for any reason, the Practice Educator supports the student in line with College processes.

- **Mentor or Buddy (optional)**

A dietitian that provides moral support to students throughout their placement. Is not routinely involved in student assessment and typically has <1 year post-qualification experience.

### **Catering staff in healthcare settings around Ireland**

The Student Coordinator for PPA is either the Manager of the Catering Department or a senior member of staff in the department. They are the first point-of-contact for the College during PPA. They are responsible for making first day arrangements, providing orientation, and overseeing the timetable. They liaise with staff in the department to assess student performance and complete assessment and attendance forms with a student at the end of the placement.

## Useful supports

Click on the name of the College to access the website of the service indicated.



### Chaplaincy

[Trinity College Dublin](#)

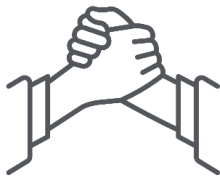
[Technological University Dublin](#)



### Counselling Service

[Trinity College Dublin](#)

[Technological University Dublin](#)



### disAbility Service

[Trinity College Dublin](#)

*The disAbility Service in Trinity specifically supports placement*



### Health Service

[Trinity College Dublin](#)

[Technological University Dublin](#)



### Online supports

[Trinity College Dublin Silver Cloud](#)

[Trinity College Dublin LinkedIn Learning](#)



### Students' Union

[Trinity College Dublin](#)

[Technological University Dublin](#)

# Attendance and Governance



[WWW.DIETITIAN.IE](http://WWW.DIETITIAN.IE)



## Procedure to source placements

Placements are sourced by the AP in Dietetics and/or PEC. For insurance and quality assurance reasons, students are not permitted to source their practice placement under any circumstances.

### Selection criteria for practice placement providers

The selection criteria below help ensure quality learning experiences for students. Confirmation that these criteria are met is provided through the Placement Agreement signed in advance of each placement.

**ALL** practice placements must take place in teams where:

- Facilitation of practice education is supported by management
- Staffing capacity for placement provision has been considered and deemed appropriate
- The responsibilities of placement providers, specified by the College, are accepted
- Placement-related procedures specified by the College are accepted
- CPD related to practice education and provided by the College are availed of

**PPA** must principally take place with teams that:

- Can contribute to 4 weeks of practice education
- Facilitate food provision to service users in healthcare settings

**PPB** must principally take place with teams that:

- Can be classified as at least one of the following (or their equivalent):
  - a) Community Nutrition and Dietetic Service
  - b) Nutrition and Dietetic Service in a model 1, 2 or 3 acute care setting
- Can contribute to at least 4 weeks and at most 10 weeks of practice education
- Employ at least two CORU-registered dietitians who will be responsible for the delivery of practice education across multiple areas of dietetic practice

**PPC** must principally take place with teams that:

- Can be classified as at least one of the following (or their equivalent):
  - a) Community Nutrition and Dietetic Service
  - b) Nutrition and Dietetic Service in a model 1, 2, 3, or 4 acute care setting
- Can contribute to at least 12 weeks and at most 14 weeks of practice education
- Employ at least four CORU-registered dietitians who will be responsible for the delivery of practice education across multiple areas of dietetic practice

## Procedure to allocate students

The procedure to allocate students follows this timeline in advance of placement commencing.

Approximately 6 months in advance

- Procedure for allocating placements is discussed with students to manage expectations
- Students are asked to register with the Trinity disAbility Service, if applicable
- Students are advised to disclose circumstances that may impact placement in a timely fashion

Approximately 2 months in advance

- Information on where placements are located is provided to students for their consideration
- Students have 1 week to specify, in writing, circumstances that may impact placement
- AP in Dietetics and/or PEC closely consider all information available to inform allocations
- Students are allocated to their placement 4-8 weeks before it is due to commence

### Factors that contribute to decisions on allocations

Final allocations are decided by balancing a range of factors, including:

- Types and locations of placement learning experiences to date
- Individual learning needs and academic records
- Special circumstances, e.g. ongoing health appointments, parent to children aged <18 years
- Placement availability and locations
- Collective needs and circumstances of a class group

### Guiding characteristics of placement allocation

- All students are advised to disclose matters that may impact placement, early in the process
- Due consideration is given to all information provided by students in relation to allocations
- It is never guaranteed that all requests made by students can be met
- It is never guaranteed that students will be allocated to their desired placement location

### Changes to placement allocations once issued

There are no changes to placement allocations within the original list of placement settings once issued (i.e. no swapping of students between original settings). A placement allocation will only change if a placement setting in the original list becomes unavailable.

### Costs associated with placement allocation

- Students should expect to travel daily and/or move accommodation to attend placement
- There is no provision at programme level for travel and accommodation expenses
- Students are welcome to apply for financial support at college level via [Trinity](#) and/or [TU Dublin](#)

## Support for students with disabilities

The disAbility Service in Trinity supports dietetic students who require reasonable accommodations specific to their practice placement.

### Role of the disAbility Service

The disAbility Service facilitates planning among all stakeholders to ensure that students with disabilities are reasonably accommodated during placement. The disAbility Service supports student learning by enabling stakeholders to:

- Engage in effective disclosure and confidentiality processes
- Agree on reasonable accommodations for placement
- Maintain academic and professional standards
- Ensure the safety of students, staff, service users, and members of the public

### Registering with the disAbility Service

Students seeking reasonable accommodations must register with the disAbility Service through the student portal at [my.tcd.ie](https://my.tcd.ie). A student must provide appropriate evidence of a disability and information on the impact of their disability on placement and related course requirements. Students can find information [here](#) on what is needed to register with the disAbility Service.

### Working with a Disability Officer

A Disability Officer will conduct a Needs Assessment to identify measures that will meet a student's disability support needs. This assessment may identify the need for a Professional Learning Educational Needs Summary (PLENS), which is a plan that outlines accommodations that assist a student to make progress on placement. More information on a PLENS can be found [here](#).

To assist with the Needs Assessment and preparation of a PLENS, a student is encouraged to discuss potential accommodations for their placement with the AP in Dietetics.

### Identifying reasonable accommodations for placement

A student will work with their Disability Officer to identify appropriate reasonable accommodations on placement. Examples of reasonable accommodations on placement can be found [here](#).

### Implementing reasonable accommodations

Once a Disability Officer prepares a PLENS, there is discussion with the student on the persons that will be permitted to read their PLENS. With the student's consent, the PLENS will be communicated to the relevant School via the student's record on SITS. The PLENS should be implemented, as appropriate, by the School. Students can re-engage with their Disability Officer for additional and/or amended reasonable accommodations, if required.

## Calculation of practice education hours

Practice education hours are comprised of **mandatory**:

- Health and safety training
- Supervised placement

### Hours for PPA

Total hours for PPA = 150h. This takes account of the June bank holiday that falls during PPA.

- |                              |             |
|------------------------------|-------------|
| • Health and safety training | 8h          |
| • Supervised placement       | 142h        |
|                              | <b>150h</b> |

### Hours for PPB

Total hours for PPB = 400h. Hours lost to national holidays are not accounted for and must be recouped when planning the dates of PPB.

- |                              |             |
|------------------------------|-------------|
| • Health and safety training | 8h          |
| • Supervised placement       | 392h        |
|                              | <b>400h</b> |

### Hours for PPC

Total hours for PPC = 510h. This takes account of 3.5 days of leave (national holidays and/or decided by College) during PPC. Any additional hours lost to leave must be deducted from contingency hours or recouped.

- |                              |             |
|------------------------------|-------------|
| • Health and safety training | 8h          |
| • Supervised placement       | 502h        |
|                              | <b>510h</b> |

Total hours completed across all placements **1060h**

### Contingency hours

There is a contingency of 60h for practice education (i.e. hours accrued in excess of the 1000h requirement). This contingency may be utilised to absorb placement hours lost to serious or contagious illness, non-routine medical appointments, and exceptional personal circumstances.

Efforts will be made to recoup missed hours through negotiation with a placement setting. If hours cannot be recouped and there is no risk to the 1000h requirement, contingency hours will be utilised.



## Standards and procedures for attendance and absence

Students must complete 1000h of practice placement. One day of placement is 7h, excluding lunch. One week of placement is 35h, including white time and excluding lunch.

### Standards for attendance

- Attendance is mandatory for all components of practice education
- All hours for practice education are recorded using relevant attendance logs
- Absence from practice education is permitted only in the circumstances specified below
- In cases of contagious illness, failure to remain absent will result in a professional warning

### Recording attendance

- The College records hours completed on health, safety, and related clinical training
- Students record start and finish times for each day of placement
- Student Coordinators sign an Attendance Log to verify placement hours

### Reporting absence

The College must be informed of any absence on placement as soon as possible.

Absence is permitted for:

1. Serious or contagious illness
  - Includes acute injury and illness, e.g. norovirus, food poisoning, sprain, concussion, etc.
  - Email Trinity and your placement setting as soon as possible to flag the need for leave
  - Email a medical certificate to Trinity for a medical absence of 3 or more days
2. Non-routine medical appointments
  - Includes consultant appointments and non-routine medical procedures
  - Email a medical letter for the appointment/procedure to Trinity when requesting leave
3. Exceptional personal circumstances
  - Includes exceptional personal and family circumstances, e.g. bereavement
  - Contact Trinity as soon as possible to outline the circumstances and negotiate suitable leave

Absence is not permitted for:

1. Routine medical and dental appointments
2. Holidays
3. Unspecified or other leave

## Consequences of absence

Students will be informed of the procedures for, and consequences of, absence on placement as part of placement preparation. Absences may be permissible, non-permissible, and/or extensive.

- **Permissible absence**

Where there is permissible absence from health and safety training, the affected content will be rescheduled and completed on an alternative date, where possible.

Where there is permissible absence during placement, efforts will be made to recoup missed hours through negotiation with a placement setting. Such hours will be consecutive to the original end date of the placement, where possible.

If hours cannot be recouped and the 1000h threshold is not at risk, contingency hours will be utilised.

- **Non-permissible absence**

Students take the risk of not completing at least 1000h practice placement, since special arrangements will not be made for practice education hours lost to non-permissible absence.

Students will receive a written professional warning should any non-permissible absence occur. A student can receive a maximum of two written professional warnings for non-permissible absence per placement before the Reasonable Adjustments Process must be initiated.

Upon a third and/or significant instance of non-permissible absence, a meeting must be held between the student, College, and placement setting to discuss expectations of attendance through the Reasonable Adjustments Process. Outcomes of the Reasonable Adjustments Process include failing placement, should unacceptable practices not be remediated in an agreed timeframe.

- **Extensive absence**

If the duration of absence is such that the 60h contingency allocation has decreased to <0h, despite appropriate efforts to recoup hours and regardless of the reasons behind absence, a pass outcome to the affected placement is not possible.

The appropriate procedure to manage a failed placement will be applied, to include procedures for:

- Repeat placements on medical or related grounds
- Placements failed on the first attempt
- Placements failed on the second attempt

Placements cannot be carried, i.e. a student cannot progress to the next stage of the programme until all components of their current stage are satisfactorily completed, including practice placement.

## White time and study time

### During placement hours

Students should have 2-3 hours per week set aside during placement hours for study, often called 'white time'. This time:

- Is unsupervised
- Should take place in the placement setting, where this is practical and possible
- Can be used by students to study theory, practise dry cases, complete presentations, etc.

White time may be waived once a fortnight if it is in a student's best interests to have additional time working with patients, i.e. a minimum of 2-3 hours white time per fortnight must be provided.

### Outside of placement hours

During standard placement hours, as much time as possible should be spent working with service users. As such, students should be prepared to spend some time outside of standard hours revising notes, completing portfolio documentation, and preparing presentations.

Students should set aside time for adequate rest in the evenings and at weekends. If a student feels overwhelmed with study, they must contact the placement team in Trinity for support and advice.

## Part-time work during placement

Placement is a busy and often tiring period of learning that amounts to a full-time job. Students are advised to:

- Avoid part-time work in the evenings
- Limit or avoid part-time work at the weekends

Students who choose to work part-time during placement are advised to:

- Limit work to no more than one day per weekend
- Avoid unsociable working hours, i.e. late evenings, overnight shift work, long hours on Sundays
- Take leave at the start and close to the end of placement (e.g. first and last weekend) to rest

Suboptimal performance on placement that is attributed to the demands of part-time work is unacceptable. Students must assess their part-time working arrangements and take action to ensure they meet their placement commitments as a priority.

Should a student require financial support during placement, they are advised to apply to:

- The [Student Assistance Fund](#) in Trinity; and/or,
- A [relevant scheme or fund](#) in TU Dublin.

## Grievance process

A grievance is a complaint of an alleged unfair or discriminatory practice or decision by faculty, administration, and/or practice education staff. A grievance should be flagged as soon as possible after the alleged issue occurs. There are 4 stages to resolving grievances related to placement.

### Condition of raising a grievance

A grievance must be supported by evidence that the contested practice or decision is in violation of institutional policy or practice, or that the complainant has been treated in a different way than persons in similar circumstances have been treated.

### Permissible accompanying persons

A student can be accompanied by a named representative at any stage of grievance resolution. Representatives typically include a student's College Tutor or a representative from the Students' Union. The named representative **cannot** be a family member, friend, classmate, or another student on the same undergraduate programme.

### Stage 1

The student should discuss the grievance with their Practice Educator and/or Student Coordinator and collaborate on a plan to resolve the matter. If a student does not feel confident raising the matter with their Practice Educator and/or Student Coordinator, they must contact the Assistant Professor in Dietetics (or proxy) in Trinity.

### Stage 2

If the matter is not resolved at stage 1, the Assistant Professor in Dietetics (or proxy) must be contacted. They (or the proxy) will discuss the matter with relevant parties and devise a resolution plan. This plan will be reviewed by the Assistant Professor in Dietetics (or the proxy) at agreed intervals until the grievance resolves. Written records of meetings and any other forms of follow-up will be kept by the Assistant Professor in Dietetics (or the proxy).

### Stage 3

If the matter is not resolved at stage 2, the Programme Directors and/or Dietetic Department Manager will be informed. A meeting will be arranged with all relevant parties to devise a resolution plan. Written records of meetings and any other forms of follow-up will be kept.

### Stage 4

If the student is unsatisfied with the conduct of the investigation or the outcome of Stage 3, they must progress the matter through appropriate procedures via their Tutor in Trinity College.



## Procedures to monitor placement quality

Several processes are used to promote quality governance, learning, and professional development on the programme.

### Quality placement governance

Placements are governed using procedures that promote clear communication and adherence to regulatory standards. Quality governance is ensured through measures such as those below.

- Defined roles and responsibilities for all stakeholders
- Practice Placement Agreement
- Procedure to allocate students to placement settings
- Minimum health and safety requirements in advance of placement
- Standards for attendance and contingency to manage absence
- Standard schedule of engagement
- Procedure to obtain and action feedback through relevant committees
- GDPR-compliant procedures for form retention
- Grievance process

### Quality learning environments

Policies and procedures are in place to protect student learning and welfare. Quality learning environments are promoted through measures such as those below.

- Indicators for the selection of Practice Placement Providers
- Defining the standard of practice expected on each placement
- Fitness to Practice [policy](#)
- Reasonable Adjustments Process for struggling students
- Provision of Practice Tutors

### Quality professional development for practice educators

The Education Provider provides training to persons that support student learning in placement settings. Measures to support their professional development include those listed below.

- Provision of training on educating students
- Recordings of training sessions are made available
- Online resource repository on [www.dietitian.ie](http://www.dietitian.ie)
- Contact details of the Practice Education Team in College are widely circulated
- CPD certificates
- Feedback surveys

A person wearing a blue hoodie with the text 'Trinity Disability Student Ambassador askds@tcd.ie' on the back, standing in a cafe. The cafe has a white brick wall and a sign that says 'THE PE... CAFE'. There are other people in the background, including a person in a white and black shirt. The scene is lit with warm, yellow pendant lights.

# Placement Preparation

[WWW.DIETITIAN.IE](http://WWW.DIETITIAN.IE)

## Pre-placement standards

Students must comply with all relevant pre-placement standards before they can proceed to placement. Non-compliance with specified standards will result in placement delay or deferral.

### Academic commitments

Prerequisite modules specified in placement module descriptors must be successfully completed.

### Code of Conduct

Students read and sign the *Code of Conduct for Students on Practice Placement in Dietetics*.

### Garda vetting

All students are Garda-vetted upon enrolment. Garda vetting in Trinity includes International Police Clearance for students who have lived in another country for more than 6 months after the age of 18 years. Satisfactory Garda vetting completed in Year 1 is valid for the remainder of the degree programme. Information on the process of Garda vetting is updated annually by [Academic Registry](#).

### Public liability insurance

During placement, students are covered under the public liability insurance policy of Trinity College.

### Immunisation and vaccination

All students provide evidence of absence of infection from, and immunity to:

- Chickenpox (varicella zoster)
- Hepatitis B
- Hepatitis C
- Measles
- Mumps
- Pulmonary tuberculosis
- Rubella

Students must also be vaccinated against influenza each year. The most up-to-date information on immunisation and vaccination is provided annually by [Health Screening](#) in Trinity.

### Health and safety training

All students complete training in health and safety, to include (not an exhaustive list):

- An Introduction to Children First
- Safeguarding Adults at Risk of Abuse
- Hand Hygiene
- Moving and Handling (people and inanimate objects)
- Basic Life Support and CPR

The training completed in advance of each placement is specified in the Placement Agreement.

## **Dress code**

On **PPA**, students must wear chef whites. Professional dress may be required on occasion, as indicated by the Student Coordinator. On **PPB and PPC**, the Student Dietitian uniform must be worn. Students incur all costs associated with uniforms.

### **Hair**

Hair must be neat and clean. If shoulder length or longer, hair must be tied back from the face. Beards and moustaches must be neatly trimmed.

### **Face**

Make-up must be minimal and false eyelashes must be avoided. Up to two earrings per ear are permitted and any other piercings must be covered or removed.

### **Hands**

Nails and skin must be clean. Must be 'bare below the elbow'. A plain wedding band is allowed, but any other adornment is not, to include nail varnish, fake nails, bracelets, watches, or other rings.

### **Feet**

Clean and non-slip flat black shoes must be worn. Other types of shoes, to include ballet flats, trainers, runners, high heels, slingbacks, and open-toe shoes are not permitted.

### **Chef whites**

Full chef whites with safety shoes must be worn. Chef whites must be well-fitted, clean, and ironed.

### **Student Dietitian uniform**

The Student Dietitian uniform consists of a white tunic and black trousers. A name badge must also be worn. Uniforms must be washed daily throughout placement.

### **Professional dress**

Professional dress must be worn if a student cannot, or is requested not to, wear a Student Dietitian uniform. All clothes must be clean and ironed. Necklines and hemlines must be appropriate.

Acceptable clothing includes:

- Collared shirt or blouse or smart top with sleeves no longer than elbow-length
- Smart trousers
- Smart skirt or smart dress (minimum of knee length and maximum of mid-calf length)

Unacceptable tops include hoodies, strapless or string tops, crop tops, t-shirts, and any top that exposes the chest or midriff. Unacceptable bottoms include jeans, tracksuit bottoms, and flared trousers. Clothes should not have slogans or imagery that could be perceived as offensive or political.



## Modules studied in advance of PPA

Alongside key science modules, students cover a range of modules to prepare for PPA. The aim of PPA is to facilitate exposure to food provision in a healthcare setting and to apply the principles of professionalism in a work context. Modules on safe food provision, national dietary guidelines, and professional and reflective practice are delivered to support the achievement of PPA module aims.

Placement preparation classes are also delivered to enable students to become familiar with the learning expectations, logistics, and casework associated with PPA.

### Introduction to Professional Practice, Communication, and Behavioural Science

Delivered in	Year 1
Aim	To introduce the concepts of professionalism and professional regulation
Classes on	Code of Conduct and scope of practice Obtaining informed consent Elements of professional behaviour Role of the dietitian in acute and primary care settings

### Evidence-based Practice and Inter-professional Learning

Delivered in	Year 1
Aim	To introduce the principles of scientific evidence which underpin dietetic practice
Classes on	Hierarchy of scientific evidence and its interpretation How to source reliable scientific evidence to support clinical practice Translating scientific information into guidance suitable for lay audiences Interprofessional case-based learning Reflective learning and its role in optimising best clinical practice

### Food Studies

Delivered in	Year 1
Aim	To teach the key principles and considerations underpinning population health
Classes on	HACCP and food safety practices for healthcare settings Food pyramid and national Healthy Eating Guidelines Health inequalities and their impact on food and nutritional intake Vegetarianism and veganism Ethnic diets and their faith-based, cultural, and geographic considerations Role of the Ottawa Charter in health promotion and dietary interventions

## **Nutrition through the Life Cycle**

Delivered in Year 1

Aim To teach students about the age-related nutritional needs of a healthy population

Classes on	Topic	Main areas covered within the topic
	Infancy	DRVs   Milk feeding   Weaning   Allergies
	Toddlers	DRVs   Fussy eating   Acquiring eating skills   Allergies
	School-age children	DRVs   Fussy eating   Bone health   Weight management
	Adolescence	DRVs   Key nutrients for growth   Weight management
	Adults	DRVs   Key nutrients that reduce chronic disease risk
	Pregnancy	DRVs   Folic acid   Key nutrients for pregnancy  Weight gain
	Elderly	DRVs   Common nutritional deficits   Malnutrition

## **Other supporting modules completed in Year 1**

### **Biochemistry and Molecular Biology**

Provides a general introduction to the molecular and biochemical processes upon which cells depend. Facilitates knowledge of key chemical and cellular structures of life such as carbohydrates, proteins, nucleic acids, lipids, and subcellular organisation.

### **Infection and Immunity**

Provides a basic understanding of infectious disease and how the immune system is equipped to overcome the microbial challenge. It describes the nature of microbial growth and pathogenicity and fundamentals of microbial transmission and infection control.

### **Introduction to Anatomy and Physiology**

Introduces students to the structure and function of the human body through the study of anatomy, histology, and physiology. Enables students to become familiar with the structure and function of normal tissues in the body.

### **Organ System Physiology**

Introduces students to the anatomy and physiology of several body systems, to include cardiovascular, respiratory, renal, and nervous systems. This module forms the basis for further study on the control and integration of body systems and their role in disease processes.

### **Nutrition Science 1**

Provides an understanding of energy and the macronutrients and their roles in human health and disease. It explores energy and macronutrients, and particular micronutrients and their relative importance for population subgroups.

## Modules studied in advance of PPB

PPB facilitates the application of professional and dietetic knowledge and skills in acute care and/or community-based settings. To prepare for PPB, students build on the science, nutrition, and dietetic modules from Stage 1. Modules on the dietetic management of common chronic conditions and on professional practice are delivered in Stage 2 to support the achievement of PPB module aims.

Placement preparation classes are also delivered to enable students to become familiar with the learning expectations, logistics, and casework associated with PPB.

### Practice Placement A

Delivered in Year 1

Aim To familiarise students with hospital food provision systems

Experience of Implementing HACCP

Maintaining safe and hygienic practices during food preparation and delivery

Preparing hospital meals and special diets

Understanding the limitations of food provision in a healthcare setting

Reflective practice

Understanding the role of the dietitian in food provision in a healthcare setting

### Introduction to Dietetics

Delivered in Year 2

Aim To teach students about the management of common nutrition-related disorders

Classes on	Topic	Main areas covered within the topic
	Cancer	Prevalence   Trends   Dietary guidance to reduce risk
	Diabetes	Types   Trends   Dietary & pharmacological management
	Dysphagia	Common causes   Prevalence   Texture modification
	Enteral feeding	Types   Feeding regimens [introductory classes only]
	Food fortification	Food First approach   Role of ONS in fortification
	Heart disease	Definitions   Trends   Dietary intervention for risk factors
	Health promotion	Principles   Ottawa Charter   Application to nutrition
	Malnutrition	Prevalence   At-risk groups   Dietary management
	Paediatric growth	Growth charts   Managing obesity & growth faltering
	Pregnancy	Diabetes   Hyperemesis gravidarum   Best dietary practice
	Obesity	Trends   Policy   Management at group & individual level
	Osteoporosis	Trends   Dietary guidance for prevention & management

## **Professional Practice Studies**

Delivered in Year 2

**Aim** To enable students to develop skills related to dietetic assessment, intervention, evaluation, and reflection

**Classes on** Conducting dietetic assessments  
Taking diet histories from peers acting as patients with common chronic diseases  
Practising behaviour change skills through role play  
Practising advice-giving in line with evidence-based guidelines  
Ethical, legal and consent considerations related to dietetic practice and patient care

## **Other supporting modules completed in Year 2**

### **Biochemistry of Metabolism**

Facilitates an understanding of the metabolic pathways in the human body, to include the storage and management of energy and the regulation of metabolism.

### **Clinical Chemistry**

introduces the concepts of clinical chemistry tests and their relevance to clinical diagnostics. Facilitates knowledge and understanding about biochemical changes in disease. Enables learners to relate clinical laboratory results with the signs and symptoms of underlying biochemical and physiological phenomena.

### **Control and Integrative Physiology**

Facilitates an understanding of the control of physiological systems and the response of the body to altered demand and disease states.

### **Nutrition Science 2**

Facilitates an understanding of the micronutrients and their roles in human health and disease. Explains the functions and metabolism of micronutrients in the body, and the approaches to assessing the nutrient status and requirements of population subgroups.

### **Nutritional Epidemiology**

Facilitates a detailed understanding of the role of epidemiology in research, clinical trials, disease monitoring and public health. Enables students to critique and evaluate research findings.

### **Pathophysiology**

Facilitates an understanding of the cellular, immunological, and physiological disturbances in diseases, including endocrine disorders, cardiovascular diseases, respiratory diseases, cancer, and neuromuscular and skeletal systems disorders.

## Modules studied in advance of PPC

PPC facilitates the application of knowledge and skills to the dietetic management of conditions that present in acute care and/or community-based settings, with the expectation that students become capable of independently providing safe, effective, and professional dietetic care to an employable standard. To prepare for PPC, students build on the science, nutrition, and dietetic modules from Stages 1 and 2. Modules on the management of acute and chronic conditions and on professional dietetic practice are delivered in Stage 3 to support the achievement of PPC module aims.

Placement preparation classes are also delivered to enable students to become familiar with the learning expectations, logistics, and casework associated with PPC.

### Practice Placement B

Delivered in Year 2

Aim To apply dietetic skills in acute care and community-based settings

Experience of Conducting nutrition assessments with guidance

Engaging with members of the wider multidisciplinary team

Reflecting on clinical practice

### Dietetics 1

Delivered in Year 3

Aim To provide students with a detailed knowledge of the clinical assessment and acute care dietetic management of paediatric and adult inpatients

Classes on	Topic	Main areas covered within the topic
	Cardiovascular disease	Risk factors   Medical management   Surgical management Dietary management   Dietary targets
	Diabetes	Types   Dietary targets   Calculating nutrient requirements Metabolic parameters   Pharmacological management
	Growth faltering	Definition   Risk factors   Indications   Management
	Infant feeding	Growth charts   Calculating requirements   Breastfeeding Formula feeding   Types of formula   Weaning
	Enteral feeding	Paediatric   Adult   Indications   Routes   Standard formulae Impact of medications   Regimens   Complications
	Obesity	Paediatric   Adult   Calculating nutrient requirements Dietary targets   Behaviour change considerations
	Oral nutrition support	Factors affecting intake   Dietary targets   Food fortification Oral nutritional supplements



## Dietetics 2

Delivered in Year 3

Aim To provide students with a detailed knowledge of the dietetic management of patients who are at risk of disease-related malnutrition

Classes on	Topic	Main areas covered within the topic
	Acute trauma	Managing the metabolic response   Feeding route Choice of feed   Factors affecting nutritional requirements
	Cancer of the gut	Head   Neck   Oesophageal   Stomach   Liver   Pancreas Bowel   Dietary considerations specific to the cancer site Managing dietary implications of treatment and resection Managing malabsorption   Stomas and fistulas
	Disorders of the gut	Oesophageal stricture   Achalasia   GORD   Liver disease Pancreatitis   Coeliac disease   Inflammatory bowel disease Fistulas   Dietary considerations specific to the disorder
	Dysphagia	Causes   Signs   Consequences   MDT management Feeding route   Food and fluid descriptors   Thickeners Food preparation   Meal presentation   Feeding assistance Food fortification   Combining oral and enteral feeding
	Enteral nutrition	Paediatric   Adult   Indications   Contraindications   Routes Bolus feeding   Continuous feeding   Whole protein feeds Elemental feeds   Standard and specialised infant formulae Standard and modified paediatric feeds   Complications Refeeding syndrome   Maintaining tubes   Home feeding Decreasing feed to increase PO intake   Psychosocial factors
	Malnutrition	Prevalence   Risk factors   Consequences   Screening Treatment   Treatment guidelines   Monitoring
	Neurology	Common neurological diseases (PD, MS, MND)   Symptoms Impact of symptoms on oral intake and nutritional status Management of diet and nutrition-related consequences
	Oncology	Role of diet in development   Role of diet in management Consequences for dietary intake and nutritional status Radiotherapy   Chemotherapy   Side-effects of treatment Managing treatment side-effects   Monitoring progress Palliative care   Ethics of palliative care   Alternative diets
	Parenteral nutrition	Indications   Routes   Formulation   Requirements Mechanical and metabolic complications   Infection control
	Renal disease	Types   ARF   CRF   ESRF   HD   PD   Nephrotic syndrome Biochemical and metabolic parameters   Energy   Protein Potassium   Phosphate   Sodium   Fluid   Monitoring

## Clinical Medicine and Therapeutics

Delivered in Year 3

Aim To provide students with a detailed knowledge of the role of nutrition and dietetics in the pathogenesis or management of a patient's condition

Classes on	Topic	Main areas covered within the topic
	Bone	Aetiology   Signs and symptoms   Diagnosis   Osteoporosis Osteopenia   Rickets   Osteomalacia   Bone biochemistry Pharmacological management
	Cardiology	Hypertension   Ischaemic heart disease   Cardiac failure Cerebrovascular disease   Aetiology   Signs and symptoms Diagnosis   Role of diet   Pharmacological management Interventional cardiovascular procedures
	Endocrinology	Fluid and electrolyte imbalances   Acid-base imbalance Dyslipidaemia   Serum lipids   Gout   Obesity   Diabetes Aetiology   Signs and symptoms   Diagnosis   Role of diet Pharmacological management
	Gastrointestinal	Aetiology   Signs and symptoms   Diagnosis   Mouth Oesophagus   Stomach   Pancreas   Liver   Small intestine Colon   Coeliac disease   Pharmacological management
	Geriatrics	Dementia   Alzheimer's disease   Aetiology   Diagnosis
	Oncology	Aetiology   Signs and symptoms   Screening   Diagnosis Classification   Staging   Chemotherapy   Radiotherapy Treatment   Cancers of the gut, lung, breast, and prostate
	Paediatrics	Medical management of growth faltering and obesity Allergy   Tests and investigations
	Pharmacology	Adherence to prescribed medication   Drugs and weight Drug-nutrient, drug-drug, and adverse interactions
	Psychiatry	Anorexia   Bulimia   Binge-eating   Harmful alcohol use Medical management
	Renal	Aetiology   Signs and symptoms   Diagnosis   AKI   CKD Management of acute-on-chronic episodes Renal replacement therapy   Pharmacological management
	Respiratory	Chronic obstructive pulmonary disease   Cystic fibrosis Aetiology   Signs and symptoms   Diagnosis   Prognosis Bronchodilators   Anti-inflammatories and antibiotics
	Surgery	Upper GI surgery   Lower GI surgery   Vascular surgery Indications   Role of medical management Common nutritional consequences

### **Applied Nutrition**

Delivered in Year 3

Aim To facilitate an understanding of the factors affecting food and nutrient selection

Classes on Dietary recommendations and guidelines  
Non-nutrient factors affecting dietary intake  
Legislation on food, nutrition, and health claims

### **Applied Nutrition and Metabolism**

Delivered in Year 3

Aim To enable an understanding of how nutrient metabolism impacts health and disease

Classes on Areas of human health in which macronutrient metabolism plays a significant role  
Mechanisms involved in the dysregulation of macronutrient metabolism  
Factors that may lead to energy imbalance relevant to under- and over- nutrition

### **Health Services Management for Dietitians**

Delivered in Year 3

Aim To provide knowledge on best practice in managing health services

Classes on Structures of health services in Ireland and the role of the dietitian with these  
Statutory regulation of health care professions

### **Advanced Professional Practice**

Delivered in Year 3

Aim To develop skills related to dietetic assessment, intervention, and evaluation

Classes on Role of standardised tools, reflection, and self-directed learning in dietetic practice  
Performance management, team working, and project management

### **Clinical Laboratory Science**

Delivered in Year 3

Aim To provide an overview of the role of clinical laboratory sciences in dietetic practice

Classes on Clinical chemistry investigation of organ systems and disease states  
Interpreting common laboratory reports and results

**N.B. Modules include best practice guidelines, case studies, presentations, assignments, and written exams, to consolidate and cross-reference learning.**

A photograph of a diverse group of students in a classroom or lecture hall. In the foreground, the back of a man's head with grey hair and glasses is visible, looking towards the right. Behind him, several students are looking in the same direction. On the left, a young man with glasses and a grey hoodie looks forward. In the center, a young woman with dark hair looks towards the right. On the right, a young woman with glasses and a dark blue jacket looks forward. The background shows a wooden wall with decorative metalwork.

# Code of Conduct



## Code of Conduct for Students on Practice Placement in Dietetics

Working in line with the Code of Conduct is essential to protect the public. The *Code of Conduct for Students on Practice Placement in Dietetics* specifies the standard of conduct, performance, and ethics expected of students. To participate in practice education, all students must agree to comply with the standards set out below.

### 1.0 CONDUCT

#### 1.1 You must maintain high standards of personal conduct and behaviour

You must behave with dignity, integrity, empathy, honesty, and politeness when with service users, colleagues, and the programme team. Therefore, you must:

- 1.1.1 Respect the rights and dignity of all individuals
- 1.1.2 Conduct yourself in a manner that enhances public confidence in you and your profession
- 1.1.3 Respect the roles and expertise of supervising practitioners and work collegially with them
- 1.1.4 Never harm, abuse, or neglect service users
- 1.1.5 Never exploit or discriminate against service users, colleagues, and staff
- 1.1.6 Never condone discrimination against service users, colleagues, and staff

#### 1.2 You must provide relevant information about your conduct to your education provider

You must report to the Education Provider any serious breaches of behaviour or malpractice that may have a negative effect on service user care. Therefore, you must:

- 1.2.1 Tell the Education Provider if you are convicted of, or cautioned for, any offence
- 1.2.2 Report negligence, incompetence, or breach of contract to the Education Provider

#### 1.3 You must act in the best interests of service users

You must act in the best interests of service users regardless of sex, gender, family status, civil status, age, disability, sexual orientation, religion, ethnicity, or membership of minority groups such as the Traveller Community. Therefore, you must:

- 1.3.1 Respect the rights, dignity, privacy, and autonomy of all service users
- 1.3.2 Respect the diversity, cultures, economic status, and values of all service users
- 1.3.3 Never do anything that you think will put someone in danger
- 1.3.4 Take responsibility for any service or professional advice you give or fail to give
- 1.3.5 Respect a service user's right to be assessed by a professional and not a student
- 1.3.6 Inform a supervisor if you have concerns about the health, safety, or welfare of service users



#### **1.4 You must respect the confidentiality of service users**

You must keep information about service users confidential, and only use it for the purpose for which it was given, unless the information raises concerns that a person may be at risk. Therefore, you must:

- 1.4.1 Follow policies on confidentiality in all practice education settings
- 1.4.2 Inform service users of the limits of confidentiality that apply to information disclosed
- 1.4.3 Remove personal identifiers from information recorded during assessments of service users
- 1.4.4 Avoid knowingly giving any confidential information to anyone not entitled to access it
- 1.4.5 Consult service users on information to be shared with relatives/carers, where possible
- 1.4.6 Share service user information with colleagues when necessary and in a confidential manner

#### **1.5 Use social media responsibly**

Social media is defined as web-based platforms or applications that enable users to create and exchange content, including blogs, discussion boards and forums, and networking sites. You must use social media in a responsible way, adopting the same professional standards expected in other forms of communication with service users and others. Therefore, you must:

- 1.5.1 Consider the possible impact on service users before publishing any material on social media
- 1.5.2 Avoid abusive, unsupported, or defamatory comments when using social media
- 1.5.3 Never discuss service users on social media platforms
- 1.5.4 Never use social media in a way that would breach any of your obligations under this Code
- 1.5.5 Maintain professional boundaries on social media to preserve public trust in the profession

## **2.0 PERFORMANCE**

### **2.1 Obey laws, regulations, and guidelines**

You must work within the laws and regulations governing the health system. Therefore, you must:

- 2.1.1 Obey the laws of the country in which you live and work
- 2.1.2 Keep up to date with any changes in legislation, regulations, or guidelines

### **2.2 Comply with requirements for the protection of children and vulnerable adults**

You must take action to safeguard children and other vulnerable persons. Therefore, you must:

- 2.2.1 Comply with national guidelines and legislation for the protection of children
- 2.2.2 Comply with national guidelines and legislation for the protection of vulnerable adults
- 2.2.3 Report any concerns in relation to the welfare of children or vulnerable adults to the appropriate authorities

### **2.3 Act within the limits of your knowledge, skills, competence, and experience**

You are accountable for your behaviour and for what you do or fail to do. Therefore, you must:

- 2.3.1 Ensure you are appropriately supervised for any task that you are asked to carry out
- 2.3.2 Only carry out a task unsupervised if you have the appropriate knowledge and skills
- 2.3.3 Avoid claiming to have knowledge and skills you do not currently possess
- 2.3.4 Refer to a colleague who has the skills, competence, or experience where a task is beyond your knowledge, skills, competence, or experience

### **2.4 Address health issues related to your fitness to practise**

You may put service users or yourself at risk if your performance or judgement is affected by your health. Therefore, you must:

- 2.4.1 Take reasonable steps to protect your physical, emotional, and psychological health
- 2.4.2 Contact the disAbility Service in Trinity if you have a condition that may affect your practice
- 2.4.3 Get help from a suitably qualified health professional if you are concerned about your health
- 2.4.4 Notify the Education Provider of health conditions that may put you or service users at risk

### **2.5 Communicate effectively with service users and others involved in their care**

Effective communication with all parties encountered throughout your practice education is essential to optimise outcomes. Therefore, you must:

- 2.5.1 Take all reasonable steps to communicate appropriately and sensitively with service users
- 2.5.2 Respond to service users' questions professionally, honestly, and openly
- 2.5.3 Communicate effectively with colleagues to benefit service users
- 2.5.4 Cooperate with colleagues on the care of a service user to promote continuity of safe care

### **2.6 Obtain informed consent from service users**

To obtain informed consent, the assessment, intervention, or treatment, along with any risks, benefits, and alternatives, must be explained to a service user in a manner they can understand and using an approach that considers their capacity to process information. Therefore, you must:

- 2.6.1 Obtain informed consent from a service user or their designated representative
- 2.6.2 Ensure a service user is aware that you are a student, before you carry out any intervention
- 2.6.3 Ensure a service user has given permission for an intervention to be carried out by a student
- 2.6.4 Follow the national and/or placement provider's policy on consent
- 2.6.5 Ensure that if a service user cannot give consent, all actions taken are in their best interests
- 2.6.6 Respect a service user's right to refuse an intervention

## **2.7 Assess service users' capacity to consent where necessary**

You must always presume that all service users have capacity to make their own decisions, even those that you believe to be unwise, unless you have good reason to doubt that this is the case. Therefore, you must:

- 2.7.1 Take all practicable steps to maximise a service user's capacity to make their own decisions
- 2.7.2 Provide all practicable supports to enable the service user to make their own decision
- 2.7.3 Assess service user capacity only by reference to the decision to be made at a particular time
- 2.7.4 Document the process undertaken to establish service user capacity to make a decision
- 2.7.5 Only carry out necessary interventions among service users that lack capacity to decide
- 2.7.6 Ensure that interventions minimise restrictions on the rights of service users
- 2.7.7 Ensure that interventions are proportionate and as limited in duration as possible
- 2.7.8 If another person has the legal authority to make a decision on behalf of a service user, consult with them appropriately and take their views into consideration

## **2.8 Act in accordance with the principles of open disclosure**

If a service user suffers an adverse event that may have caused them harm, they must be informed promptly, openly, and honestly about what happened. Therefore, you must:

- 2.8.1 Respond courteously and honestly to anyone who complains about care they received
- 2.8.2 Participate in a culture of open disclosure in the workplace
- 2.8.3 Provide information about relevant complaints mechanisms if requested

## **2.9 Keep accurate records**

You must ensure that any information you document in a person's record is accurate, clear, legible, and documented in line with local policies. Therefore, you must:

- 2.9.1 Protect healthcare records from being lost, damaged, or tampered with
- 2.9.2 Ensure that all healthcare records are signed, dated, and co-signed by a supervising dietitian
- 2.9.3 Ensure that information already signed into a medical record is not erased or altered
- 2.9.4 Store and use records according to data protection legislation
- 2.9.5 Understand that service users generally have a right to obtain copies of their records

## **2.10 Keep your professional knowledge and skills up to date**

You are primarily responsible for your learning and progression. Therefore, you must:

- 2.10.1 Think about, and respond constructively to, all feedback given to you
- 2.10.2 Collaborate with dietitians in placement settings to develop appropriate learning outcomes

### **2.11 Address health, safety, and welfare risks**

You must follow risk assessment policies and procedures to assess potential risks in the workplace. Therefore, you must:

- 2.11.1 Read, understand, and comply with, the safety statement of your placement settings
- 2.11.2 Take appropriate steps to protect yourself where a service user may pose a risk to your safety

### **2.12 Raise concerns about safety and quality of care**

You must put the safety and well-being of service users before professional or other loyalties. Therefore, you must:

- 2.12.1 Follow [designated procedure](#) if you are aware of unsafe practices that may put service users, yourself, or others at risk
- 2.12.2 Act to prevent any immediate risk to a service user by notifying relevant persons of any concerns you have about service user safety as soon as possible

## **3.0 ETHICS**

### **3.1 Demonstrate ethical awareness**

You must demonstrate an awareness of ethical standards and carry out your duties in a manner that embodies such standards. Therefore, you must:

- 3.1.1 Carry out your duties in a professional and ethical way to protect the public
- 3.1.2 Always behave with honesty and integrity
- 3.1.3 Read, understand, and comply with this Code

### **3.2 Undertake research in an ethical manner**

When you engage in research, you must submit your research proposal to the relevant research ethics committee and get ethical approval before starting the research or, where there is no relevant research ethics committee in place, ensure that your research conforms to the current version of the Declaration of Helsinki. Therefore, you must:

- 3.2.1 Collect, protect, and destroy data in line with relevant policies and procedures
- 3.2.2 Treat all data as confidential and ensure participants are not identified through their data
- 3.2.3 Make sure that the welfare of all participants is not adversely affected
- 3.2.4 Obtain voluntary informed consent from all research participants, where applicable
- 3.2.5 Never distort or misuse clinical or research findings
- 3.2.6 Ensure that refusal to participate in research does not affect a person's access to healthcare
- 3.2.7 Employ good teamwork practices, where applicable

## Breaches of the Code of Conduct

If a student's behaviour becomes inconsistent with that specified in any section of the Code of Conduct, disciplinary action will be taken against the student. The form of disciplinary action taken will depend on the nature, magnitude, frequency, and timing of the breach.

### Breaches during placement

The Practice Placement Provider must contact the AP in Dietetics and/or PEC to notify them of an alleged breach of the Code. Further clarification will be sought through discussion between the student, Student Coordinator, and AP in Dietetics and/or PEC. Where a breach is confirmed to have occurred, one of the following courses of action will be initiated.

#### 1. Verbal professional warning

A verbal professional warning will generally be used to address minor and isolated breaches that are unlikely to impact on the safety and wellbeing of any person in a healthcare setting. Warnings will be issued in a communication to the student from the AP in Dietetics and/or PEC. Up to 3 verbal warnings can be issued per student per placement before the matter must be escalated.

#### 2. Written professional warning

A written professional warning will generally be used to address breaches that occur on more than one occasion but that are unlikely to impact on the safety and wellbeing of any person in a healthcare setting. A letter will be emailed by the AP in Dietetics or PEC to the student. Up to 2 written warnings can be issued per student per placement before the matter must be escalated.

#### 3. Reasonable Adjustments Process (RAP)

Refer to the RAP section in this handbook.

- Minor breaches in conduct that may impact on the safety and wellbeing of service users or others in the workplace will invoke **RAP1**
- Major breaches occur when the safety and wellbeing of a student, service users, or others in the workplace are put at risk or are at imminent risk. Major breaches invoke **RAP2**, the consequences of which may include the immediate termination of placement

For each course of action outlined above, information will be provided to the student to clarify the:  
Nature of the breach | Affected section of the Code | Solution | Consequences of further breaches

### Breaches before or after placement

Breaches before/after placement may result in proceedings being instigated by Trinity in line with its [Fitness to Practise](#) policy. The outcome of proceedings may require a delay to the start of placement.





# Roles and Responsibilities

[WWW.DIETITIAN.IE](http://WWW.DIETITIAN.IE)



## Roles and responsibilities

### Responsibilities of the Education Provider (Trinity and TU Dublin)

#### In advance of placement

- Provide relevant academic knowledge, reading lists, and resources to students
- Facilitate the completion of relevant health and safety training
- Secure placements and issue placement agreements
- Allocate students in line with standard procedure
- Verify that students meet specified Garda vetting, vaccination, and insurance standards
- Provide relevant information to students on placement support, etiquette, and assessment
- Provide Train the Trainer training to placement settings

#### During placement

- Maintain regular contact with students and placement settings
- Provide support in relation to the monitoring and assessment of progress
- Follow due procedure to monitor the hours of practice education accrued by each student

#### After placement

- Process the results of each practice placement
- Provide guidance, in line with college regulations, to students who have failed placement
- Record and act on feedback from Practice Placement Providers and students

### Responsibilities of the Practice Placement Provider (teams in healthcare settings)

#### In advance of placement

- Return a completed placement agreement to Trinity
- Avail of training opportunities provided by the Education Provider
- Devise a student timetable that meets learning objectives

#### During placement

- Provide induction
- Provide appropriate supervision and feedback to support learning outcomes
- Assess student performance and practice in line with placement guidelines
- Notify Trinity of any absences and report challenges with student progress

#### After placement

- Post or email the summative assessment form and attendance log to Trinity
- Provide feedback on the experience of placement provision

## Key duties

Resources to support all duties listed here can be found on [www.dietitian.ie](http://www.dietitian.ie). Further guidance and training are available from the College at any time.

### Student Coordinator

Refer to [www.dietitian.ie](http://www.dietitian.ie) for supports on the duties listed below.

#### Before placement

- Avail of training provided by the College
- Create a timetable
- Plan orientation
- Notify students of their first day arrangements approx. 1 week before their arrival

#### During placement

- Link with Practice Educators and students for 5 minutes every 2 weeks for an update on progress
- Record all absences
- Contact the College ([dietetics@tcd.ie](mailto:dietetics@tcd.ie)) to discuss any concerns over progress

#### End of placement

- Contribute to the summative assessment form (optional)
- Post or email the signed summative assessment form and attendance log to Trinity
- Securely dispose of documentation (see *Returning and Retaining Documentation*)
- Provide feedback on the placement experience via the online survey issued

### Practice Tutor

Refer to [www.dietitian.ie](http://www.dietitian.ie) for supports on the duties listed below.

#### Before placement

- Avail of training provided by the College
- Review pre-placement forms issued by the College to determine initial learning needs

#### During placement

- Prepare relevant activities to support student learning
- Inform Student Coordinator of any concerns over progress
- Liaise with the College at designated intervals to share learnings with other Practice Tutors

#### End of placement

- Provide feedback on the placement experience via the online survey issued

## Practice Educators

Refer to [www.dietitian.ie](http://www.dietitian.ie) for supports on the duties listed below.

### Before placement

- Avail of training provided by the College

### Week before rotation

- Provide a brief recommended reading list, e.g. college notes, consensus guidelines

### Day 1 of rotation

- Take 5 minutes to clarify expectations
  - a) Ensure learning outcomes are realistic
  - b) Clarify the role you expect the student to take in assessing service users
  - c) Specify if/when you will require placement documentation for review

### Throughout rotation

- Give verbal feedback daily
- Mark-up and discuss one patient case and one reflection log per week
- Contribute to assessment form
- Inform Student Coordinator of any absence
- Inform Student Coordinator of any concerns over progress

### After rotation

- Provide feedback on the placement experience via the online survey issued

## Students

Refer to [www.blackboard.tcd.ie](http://www.blackboard.tcd.ie) and [www.dietitian.ie](http://www.dietitian.ie) for supports on the duties listed below.

### Week before a new area

- Ask your Practice Educator for a short and specific recommended reading list to support revision

### Day 1 of a new area

- Have your learning objectives and most recent assessment form with you for discussion

### Throughout placement

- Take a lead on managing your placement portfolio and learning outcomes
- Proactively seek and implement feedback to advance your learning

### After placement

- Provide feedback on the placement experience via the online survey issued

## Student supervision

Students must be supervised in a manner that enables them to acquire new learning while also demonstrating increasing levels of independent practice, as appropriate.

All dietitians supervising students must be CORU-registered. All persons supervising students must:

- Be suitably experienced within the area(s) in which they are supervising
- Avail of CPD opportunities relevant to their area of work to ensure their skills are up-to-date
- Avail of training opportunities on practice education
- Review relevant guidance and training resources available on [www.dietitian.ie](http://www.dietitian.ie)

### Principles of effective supervision

Persons supervising a student should always aim to:

- **Adhere to specified standards.** Do not introduce assessment processes specific to you or your healthcare setting. Such processes have no oversight from the Education Provider and are unacceptable. Only use the forms and mapping documents provided by the Education Provider.
- **Give students a chance to develop.** Demonstrate skills and allow observation only when essential. To optimise skill acquisition and consolidation, students must be given as many opportunities as possible to actively apply their knowledge in a real-world setting.
- **Communicate clearly.** Provide clear instructions and constructive feedback at regular intervals. Do not delay in providing constructive feedback – doing so only hinders a student’s opportunity to correct suboptimal practice.
- **Establish appropriate boundaries.** To ensure that everyone’s time is respected and protected, it is okay to make students aware that you are balancing other work commitments with supporting their learning. This also helps to reduce burnout and needless over-supervision of students.

### Supporting those who supervise students

Training for those supervising students covers topics such as:

- Standards and expectations specific to a placement
- Supporting reflective practice and giving constructive feedback
- Using assessment and mapping tools to support progressive independence with practice
- Having difficult conversations and managing underperformance

All persons involved in practice education are expected to engage with live and/or [recorded training](#). Attendance is taken at live training sessions. The links for recorded training are issued to Student Coordinators and staff timetabled to train students. Staff complete an online form that obtains their registration number, confirmation that they completed live and/or recorded training, and confirmation that they have the contact details of the placement team in Trinity.



# Engagement and Feedback



## Engagement with stakeholders

The schedule of engagement for PPA, PPB, and PPC ensures consistent and ongoing communication with practice placement providers and students from the Practice Education Team.

### Engagement outside the standard schedule

To facilitate communication with placement providers outside the designated times for engagement:

- The Placement Agreement provides the contact details of the Practice Education Team
- The contact details of the Practice Education Team are issued at each standard engagement
- A weekly open phone line for any placement queries is manned for 1h on Thu afternoons
- All queries raised by email ([dietetics@tcd.ie](mailto:dietetics@tcd.ie)) receive a response within 2 working days

To facilitate communication with students outside the designated times for engagement:

- The details to call, or request a call from, the College are included in all standard communications
- All queries raised by email receive a response by email or phone within 1 working day

### Engagement during Practice Placement A

PPA has 5 standard points (**Fig. 1**) at which communication is initiated by the Practice Education Team with all **placement settings** involved in the delivery of PPA.



**Fig. 1.** Standard communication schedule with placement providers during Practice Placement A

Standard contact points with **students** throughout PPA are:

- Weekly Mid-week all-class email on the casework to be completed on Fri afternoons
- Week 2 Email each student individually to check they are settling in. Phone calls on request
- Week 3 All-class email reminder about forms for completion at the end of PPA
- Week 4 Email a second all-class reminder about forms for completion and congratulate

## Engagement during Practice Placement B

PPB has 10 standard points (Fig. 2) at which communication is initiated by the Practice Education Team with all **placement settings** involved in the delivery of PPB.

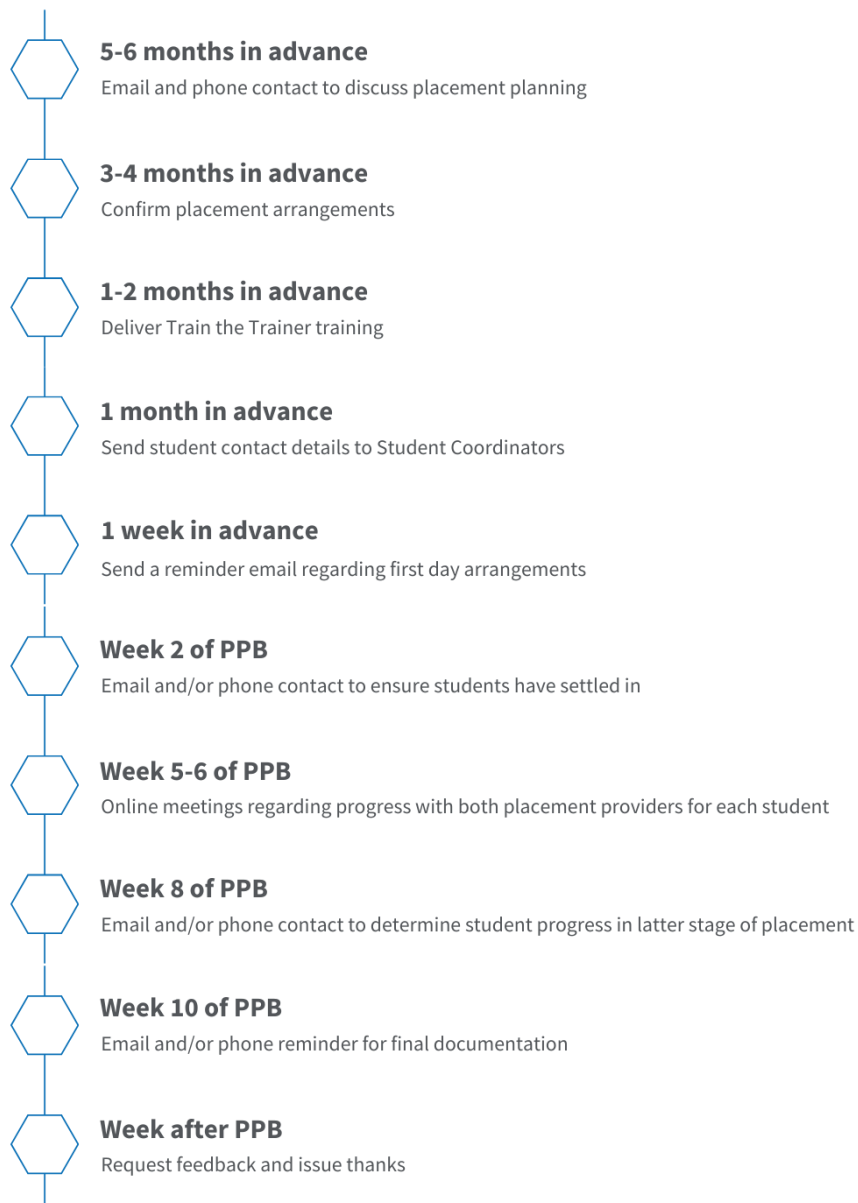


Fig. 2. Standard communication schedule with placement providers during Practice Placement B

Standard contact points with **students** throughout PPB are:

- Weekly End-of-week email with reminders on documentation, supports, absence, etc.
- Week 2 Email each student individually to check they are settling in. Phone calls on request
- Week 5 Phone or video call with each student to discuss PPB experience and obtain feedback
- Week 7 Email each student individually to check they are settling in.\* Phone calls on request
- Week 10 All-class email about forms for completion, feedback survey, and congratulate

\* Students typically train in two PPB settings, spending about 5 weeks in each, hence the contact in Weeks 2 and 7

## Engagement during Practice Placement C

PPC has 12 standard points (Fig. 3) at which communication is initiated by the Practice Education Team with all **placement settings** involved in the delivery of PPC.

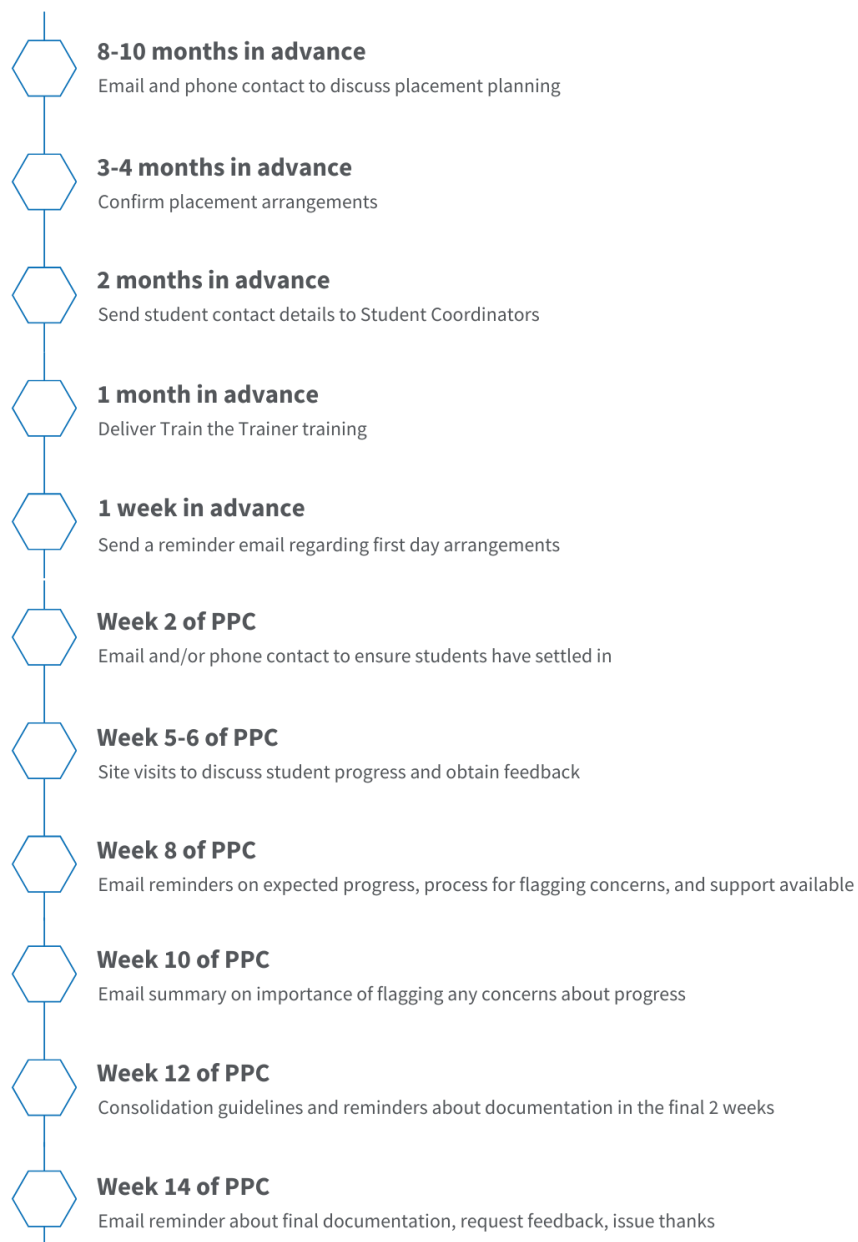


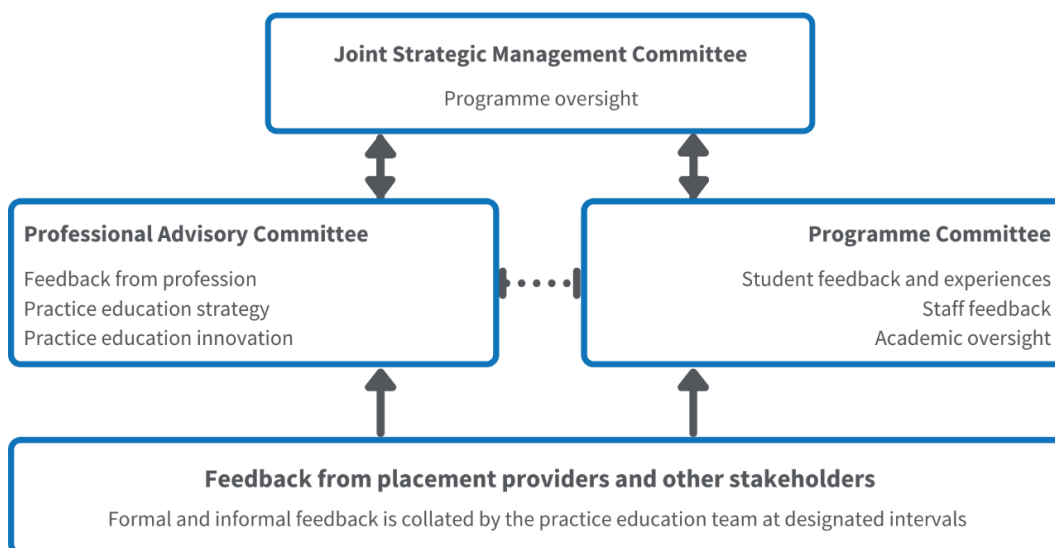
Fig. 3. Standard communication schedule with placement providers during Practice Placement C

Standard contact points with **students** throughout PPC are:

- Weekly End-of-week email with reminders on documentation, supports, absence, etc.
- Week 3 Email each student individually to check they are settling in. Phone calls on request
- Week 5-6 Visit with each student to discuss PPC experience and obtain verbal feedback
- Week 10 Email each student individually to check in. Phone calls on request
- Week 12 Email students individually to wish them good luck on consolidation
- Week 14 All-class email about forms for completion, feedback survey, and congratulate

## Feedback process

The governance structure (**Fig. 4**) facilitates ongoing communication between the Education Provider and key stakeholders. The business assigned to each committee (**Fig. 4**) highlights the approach to receiving and actioning feedback at appropriate levels of management.



**Fig. 4.** Communication pathways between Education Provider and Practice Placement Providers

Feedback is invited from students and stakeholders on pre-placement training, readiness for placement, knowledge deficits, clarity of documentation, and any other areas that respondents wish to highlight. Feedback is translated into actions that are prioritised annually and acted upon with the input of relevant committees (**Fig. 4**), students, and Practice Placement Providers.

### Written feedback

Feedback from students is sought at the end of each placement via an online survey. The feedback is summarised and discussed with students during class and with the Professional Advisory Committee to determine how it may be best acted upon.

Feedback from Student Coordinators, Practice Tutors, and Practice Educators is sought at the end of each placement via an online survey. The feedback is discussed with Student Coordinators, Practice Tutors, and the Professional Advisory Committee to determine how it may be best acted upon.

Feedback from national committees is also used to inform development, e.g. service users on the *Obesity Stigma Education 4 All* committee and PECs in the *Practice Education Coordinators Network*.

### Verbal feedback

Verbal feedback provided in response to placement-related emails or during meetings is noted by the Education Provider and acted on immediately or recorded to inform long-term developments.



A photograph of two female rowers in a yellow boat, celebrating with their arms raised. They are wearing black athletic gear with pink and white horizontal stripes. The background is a blurred natural setting. A semi-transparent dark grey banner is overlaid across the middle of the image, containing the text 'Assessing progress'.

# Assessing progress

[WWW.DIETITIAN.IE](http://WWW.DIETITIAN.IE)



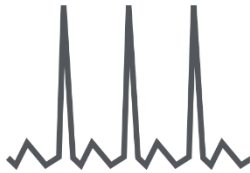
## Characteristics of assessment

Consistent and fair assessment is essential to all placements. The use of formative and summative assessment tools ensures that assessment is a dynamic process that accurately monitors progress across a range of areas while accounting for variability between students and Practice Educators. To promote assessment integrity and quality, five characteristics apply to all types of assessment.



### Student-led

Students draft assessment documentation in the first instance. This allows Practice Educators to see how a student views their progress and provides a baseline from which to discuss areas for improvement.



### Regular and proportionate

Overassessment is discouraged. Progress with individual skills or domains is assessed weekly through documentation such as reflection logs. Progress across all areas is assessed through assessment forms every 2-3 weeks.



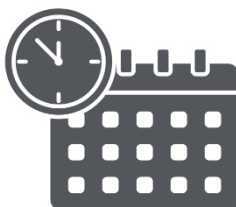
### Mapped to the Standards of Proficiency

All assessment documentation is mapped to the Standards of Proficiency. The time at which proficiency should emerge is outlined in the Mapping Document for each placement. This helps identify any issues with progress.



### Consistent between placement settings

The same process of assessment for a particular placement applies to all participating settings. Consistency is ensured through regular engagement with stakeholders and by monitoring student placement portfolios.



### Time-limited

Students must achieve the proficiencies specific to a placement within the standard duration of time allocated to that placement. Additional time may only be arranged to address deficits in hours, not deficits in proficiency.

These characteristics optimise the accuracy of assessment processes and ensure that any challenges to progress are identified promptly and in collaboration with a student.

## Assessment tools

**Formative assessment** is the regular assessment of skills as they emerge over the course of a placement. Formative assessment involves tools such as patient cases, reflection logs, and formative assessment forms. The specific formative assessment tools for each placement are outlined below.

PPA	PPB	PPC
Patient cases	Patient cases	Patient cases
	Reflection logs	Reflection logs
	Formative assessment forms	5-minute feedback forms
		Formative assessment forms
		Mid-point review form

**Summative assessment** is the assessment of all skills acquired at the end of a placement. The specific forms of summative assessment per placement are outlined below.

PPA	PPB	PPC
Summative assessment form	Summative assessment form	Summative assessment form
Summative reflection log		

### How to complete assessment tools

The completion of all tools is student-led, but final decisions on proficiencies and feedback rest with the Practice Educator and/or Practice Tutor. The process to complete all assessment tools is the same, where they are:

1. Drafted by the student
2. Submitted to Practice Educator(s) for comments
3. Collaboratively discussed and signed off
4. Uploaded by the student to their placement portfolio on Trinity Blackboard

The only assessment tool to be returned to the College by a Student Coordinator is the summative assessment form. All other assessment tools are uploaded by a student to their placement portfolio.

### Frequency

The timing and frequency of each type of assessment tool is outlined **overleaf** and in the section specific to each placement on [www.dietitian.ie](http://www.dietitian.ie).

### Decision on placement outcome

To pass placement, all essential proficiencies on an assessment form must be performed to the required standard. If a student is not on-track to achieve essential proficiencies in the time available, the College must be contacted to discuss the need for a Reasonable Adjustments Process.

Form	Frequency and Timing	Signed off by
<b>Practice Placement A</b>		
1. Patient case	1 per week from Weeks 1-3	College-based practice education team
2. Summative assessment form	Week 4	Catering Manager or Student Coordinator
3. Summative reflection log	Week 4	College-based practice education team
<b>Practice Placement B</b>		
1. Patient case	1 per week from Weeks 2-9	Practice Educator
2. Reflection log	1 per week from Weeks 2-9	Practice Educator
3. Formative assessment form	<i>Depends on time spent in a placement setting</i>	Practice Educator(s)
• 5 weeks + 5 weeks	Weeks 3, 5, and 7	
• 6 weeks + 4 weeks	Weeks 3, 6, and 8	
• 4 weeks + 6 weeks	Weeks 2, 4, and 7	
• 10 weeks	Weeks 3, 5, and 7	
4. Summative assessment form	Week 10	Practice Educator(s) ± Student Coordinator
<b>Practice Placement C</b>		
1. Patient case	1 per week from Weeks 2-12	Practice Educator
2. Reflection log	1 per week from Weeks 2-12	Practice Educator
3. 5-minute feedback form	Max. 1 form per week from Weeks 2-12	Practice Tutor
4. Formative assessment form	Every 2-3 weeks from Weeks 1-12	Practice Educator(s)
5. Mid-point review form	Complete once between Weeks 7-9	Student Coordinator and Practice Tutor
6. Summative assessment form	Week 14	Practice Educator(s) ± Student Coordinator



# Reasonable Adjustments Process

A woman wearing a yellow and purple patterned sweater, blue jeans, and yellow sunglasses is walking towards the camera on a cobblestone street. In the background, there is a large, multi-story classical building with a portico supported by columns. Other people are visible walking around the building. The sky is blue with a few wispy clouds.

[WWW.DIETITIAN.IE](http://WWW.DIETITIAN.IE)



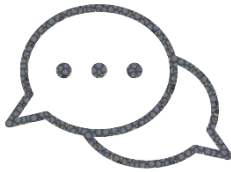
## Principles of the Reasonable Adjustments Process (RAP)

An individualised approach is taken to every student identified as struggling on placement. Each RAP is tailored to an individual case, but the management of all cases is underpinned by six key principles to promote fairness, transparency, and good record-keeping at all stages of the process.



### Every reasonable opportunity to show progress is provided

Placement failure is not confined to a specific week of placement, and what constitutes 'reasonable opportunity' is informed by careful consideration of the concerns identified, rate of progress, and time available.



### Feedback is consistently provided

Verbal and written feedback are provided as part of RAP meetings. Verbal feedback is provided through discussion, and written feedback is provided on RAP documentation.



### Clear actions are agreed upon to support progress

SMART actions are agreed upon during RAP meetings, as required. These reflect the feedback provided and are developed in consultation with a student. All paperwork from RAP meetings is shared with the student.



### A common understanding of agreed actions is confirmed

Students are given the opportunity in RAP meetings to ask questions, to ensure they understand what is expected. The person(s) to contact if they have questions at a later stage is clarified.



### Safety of students and service users is paramount

Students are offered opportunities to disclose any personal difficulties they may be having, and appropriate supports are offered. The safety of service users is the foundation on which decisions on placement outcome are made.



### The placement provider recommends a placement outcome

It is the responsibility of the Practice Educator ± Student Coordinator to recommend a pass or fail outcome. The College ensures that the recommendation meets regulations and standards and is proportionate.



## Implementing a RAP

The Reasonable Adjustments Process (RAP) is implemented when a student does not meet an acceptable standard of practice for their stage of placement, despite:

- Clear instructions
- Multiple opportunities to practise
- Specific and action-focused feedback

### Indicators for implementing RAP

This list is not exhaustive. Difficulties can be flagged with any proficiency listed on the placement assessment form. Indicators to initiate the RAP may include:

1. Suboptimal or inconsistent application of knowledge and skills, where a student:
  - Lacks knowledge and skills expected for their stage of placement
  - Provides insufficient or inaccurate scientific evidence to support their practice
  - Does not demonstrate critical and/or holistic thinking in the provision of care
  - Does not demonstrate patient-centred and empathic care
  - Does not engage effectively with other professionals relevant to dietetic care provision
  - Demonstrates unsafe practice
2. Lack of professionalism, where a student consistently behaves:
  - Without accountability e.g. does not take responsibility for their behaviour, blames others
  - Unenthusiastically e.g. does not ask questions, clearly lacks motivation
  - Unreliably e.g. not punctual, does not bleep Practice Educator at agreed times
  - Disrespectfully e.g. dismissive of feedback, inconsiderate of staff
  - Inappropriately e.g. does not respect boundaries, is frequently overwhelmed

### Structure of the process

This process has two levels: Level 1 (RAP1) and Level 2 (RAP2).

**RAP1** For use with minor and moderate concerns

**RAP2** For use when RAP1 does not resolve concerns and/or significant concerns arise over progress

To initiate the process:

1. PE that observes the area(s) of concern should promptly notify the Student Coordinator
2. PE should outline the concern(s) and present evidence to support their observations
3. Student Coordinator must contact the Assistant Professor in Dietetics to discuss the concern(s) and arrange a meeting within 3 working days for facilitate further discussion

### **Scheduling a RAP meeting**

As a general rule, avoid telling a student in advance of a meeting that a RAP will be opened. Schedule a meeting to discuss progress without referencing the RAP. This is to avoid unnecessarily heightening student stress as they await a meeting. It is best to wait until the meeting to discuss the RAP, as progress will be contextualised and quickly followed by a discussion on how to support the student.

### **Attendance at RAP meetings**

The Assistant Professor in Dietetics (or proxy) must chair all meetings and take notes. The Student Coordinator will also be present ± Practice Educator *or* Practice Tutor, to provide evidence and perspective on practice. The student will also be present to contribute evidence to discussions.

### **Structure of RAP meetings**

To commence RAP1 or RAP2:

1. Explain the area of concern in neutral language, giving specific examples to support what is said
2. Obtain the student's understanding of their performance
3. Tease out reasons for concern
4. Collaboratively complete a plan (as appropriate) and disseminate as agreed

To review RAP1:

1. Constructive discussion on progress will take place among all parties (incl. the student)
2. Based on the evidence provided and discussion held, one of three pathways must be taken:
  - a. All concerns have fully resolved and is now progressing as expected for stage of placement  
= Close the process
  - b. Is making progress, but the concerns have not fully resolved  
= Continue and have another review meeting within 7 working days
  - c. Has made insufficient progress  
= Escalate to RAP2

To review RAP2:

1. Constructive discussion on progress will take place among all parties (incl. the student)
2. Based on the evidence provided and discussion held, one of three pathways must be taken:
  - a. All concerns have fully resolved and is now progressing as expected for stage of placement  
= Close process
  - b. Is making progress, but the concerns have not fully resolved  
= Continue and have another review meeting within 7 working days
  - c. Has made insufficient progress and a pass outcome is not possible  
= The Chair will explain the implications of this to the student. Implications include a student being withheld from consolidation and/or failing placement

## Decision to fail a placement

A student can fail at any point in placement. Failure is not confined to a certain week, e.g. final week.

In the event of a fail outcome, the Assistant Professor in Dietetics in Trinity liaises with a student to:

- Clarify the academic impact (on overall progression and prerequisite modules)
- Direct a student to appropriate support services, if needed
- Discuss the process of repeating placement, where relevant

### Failing on the first attempt

- In the absence of medical grounds or other recognised extenuating circumstances, a student that fails placement has one opportunity to repeat
- A repeat placement will be offered in the next academic year, or as soon as a suitable training place becomes available, i.e. a repeat placement may not be available for >12 months

### Failing on the second attempt

- In the absence of medical grounds or other recognised extenuating circumstances, a student that fails a placement on the second attempt must exit the undergraduate programme
- Students who successfully complete Stage Three of the programme (i.e. amass 180 ECTS) but who do not successfully complete Practice Placement C on any attempt, are eligible for consideration for a Bachelor of Arts (Level 7) degree

### Appealing the outcome of a failed placement

All appeals must be conducted in line with the procedures of Trinity College. It is vital that a student recognises that a successful appeal **cannot** overturn the decision to exit placement (i.e. a return to finish placement is not possible).

There are 3 grounds on which an appeal can be made, i.e. where a student's case:


- Is not adequately covered by the ordinary regulations of the College
- Is based on a claim that College regulations were not properly applied in the case
- Represents an *ad misericordiam* appeal

To initiate this process, a student must:

1. Inform the Assistant Professor in Dietetics, who will email essential information to the student
2. Liaise with their College Tutor to refer the matter through the appropriate college procedures

The policy that underpins the process is the **Appeals Policy (Academic Progress)**. Information on all aspects of an appeals process, to include the grounds covering an *ad misericordiam* appeal, is provided by [Academic Regulations](#).





# Returning and retaining documentation

## Returning documentation

An email from the College will be issued in the final week of placement to remind placement settings of the process for returning forms. The placement documentation that must be returned to Trinity by Student Coordinators includes:

- Summative assessment form
- Attendance log

These forms must be sent via email to a secure inbox ([dietetics@tcd.ie](mailto:dietetics@tcd.ie)) or by post within 5 working days of a placement ending. Should forms not be returned within 5 working days of a placement ending, email or phone contact will be made by Trinity with relevant placement settings to prompt their return.

An acknowledgement of receipt will be issued by Trinity to the placement setting once the completed forms are returned.

## Retaining documentation

### Placement setting

Placement settings must not retain any placement documentation related to the progress and assessment of a student. This documentation includes:

- Student Details form
- Learning Needs form
- Formative and summative assessment forms
- Mid-point review forms
- Patient cases, reflection logs, and feedback forms
- Attendance logs
- Reasonable Adjustments Process forms

All such documentation must be deleted or securely disposed by the Student Coordinator within 4 weeks of a placement ending. Destroy records under confidential conditions, where:

- Paper files are shredded as confidential waste
- Electronic files are securely and permanently deleted

### Education Provider

The Education Provider retains all placement documentation in a secure online system accessible only by the AP in Dietetics, PEC, college-based Practice Tutor, and a Senior Executive Officer.





