

# CCP Audit Template

Registration No. xxxxxxx

Name: xxxxxx

Signature:

Audit Start Date: January 08

Audit End Date: March 09

Brief description of current work, hours/wk and time in this role: Community Paediatric Dietitian

## 1: Continuing Education

	A	B	C	D	E
Date Activity Undertaken	Description of Activity Undertaken	Provide a detailed description of the <u>application</u> of the knowledge, attitude or skills acquired. Consider and reflect on \$ new or enhanced knowledge and/or skills \$ how your attitudes, perception, awareness and practice have changed	Evidence of impact, list as many as apply	Credits	Evidence Required for Audit, 3,4 or 5 only
			1, 2, 3, 4, 5	1, 2, 3, 4, 5	
02/07/08-05/07/08 And 26/11/08-29/11/08	Melbourne Paediatric Dietetic Course Unit 1 and Unit 2	This course was an invaluable learning opportunity. Unit 1 provided a good refresher course for the core skills that are essential for a Paediatric Dietitian. Being an overseas trained dietitian it was reassuring to find that the assessment and treatment of common Paediatric conditions were very similar as that in the UK. Unit 1 did provide me with new knowledge on growth charts, different ways to concentrate infant formula and faltering growth calculations. Since the course I have found that using the faltering growth calculation has provided me with another tool in working out requirements for children with faltering growth and has had good results in practice. The course was also a good opportunity to network with other Paediatric dietitians from New Zealand and Australia so has given me good contacts when needing advice on patient or developing resources/care path ways in the future etc. Feedback from the submitted case studies has given my good direction for future case studies especially in terms of lay out and readability.	1,2,3,4	4	Course feedback forms and feedback from submitted post course case studies
03/09/08	New Zealand Dietetic Association Conference, Hamilton NZ Day 2 Malnutrition in Hospitals Growth Charts – which to use/when Paediatric liver disease Nutrition support and management of chronic liver disease in infants/young children Paediatric enteral feeding	The Paediatric session on growth charts consolidated the knowledge I had learned at the Melbourne course on the differences between the two main growth charts currently used in NZ. Since the conference I have been asked by other colleagues and health professionals about the differences between the growth charts and have felt more confident in the information I have been giving. The liver session was very timely as I had just recently been referred a child in the community with liver disease so made me more confident in the treatment I was providing.	1	1	
25/07/08, 08/08/08, 22/08/08	Tikanga Best Practice over 3 days	Participation in the Tikanga Best Practice course was a great learning experience especially being from overseas and having very limited knowledge. The course helped me to understand the values and beliefs of Maori and how to apply them to our DHB's values. Since being on the course I realize the importance of first encounters and how building a good rapport is essential for working with Maori families. I have worked on my pronunciation of Maori names and now if I am unsure on how to pronounce a name I will ask rather than say	1,2,4	3	Course feedback form

### Column C (list as many as apply)

1 self perceived impact on practice

3 something was produced as a result of the learning activity

5 have received feedback confirming impact on client/ appropriate others.

2 information passed on to colleagues / peers / clients

4 perceived impact on client or appropriate others

### Column D 1

- Refresher/ basic information
- Minimal effort
- Little / no change in

### 3

- New knowledge, attitude or skill requiring, attitude or skill requiring moderate effort
- Moderate change to practice

### 5

- New knowledge, attitude or skill resulting in substantial innovative actions
- Change in Practice
- Requires major effort
- Noted by colleagues / peer
- Confirmed impact on client or appropriate others

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		name incorrectly. I have also spent more time introducing myself to members of the child's whanua and finding out their roles in the child's upbringing rather than just on the parents who are not always the main caregivers. I have found since taking more time to get to know the family's on the first encounter rather than going straight into the child's assessment that I have had a better relationship with the families and in turn they have been more willing to follow my advice.			
Jan 2008- March 2009	Attendance of Monthly Dietetic Department meetings: 16/01/08 – Tikanga Best Practice up-date, planning for dietitians week and regional food service project. 20/02/08 – Team Building Afternoon 19/03/08 – Evidence based Practice 16/04/08 – Failure to thrive guidelines in the elderly and wound healing guidelines 18/06/08 – Nasogastric Tube guidelines and practice review expectations 16/07/08 – Tikanga and Evidence based practice 20/08/08 – Presentation on new renal diet sheets and session with librarian on systematic review searches 17/09/08 – Presentation by cultural support team and paediatric presentation on GP article 15/10/09 – Evidence based practice and feedback from NZDA conference 19/11/08 – Lets beat diabetes up-date and educating Maori patients with diabetes	Attending the monthly dietitians meeting has been a great way of not only networking with other members of the team that I do not see as often but also keeping up-to-date in the other areas of dietetic practice.	1,2	1	
Jan 2008 – March 2009	Attendance and participation in the DHB's monthly Paediatric dietitian's case study/journal club and Auckland SIG Paediatric group meetings.	Being involved in the paediatric groups has been a good way to keep up-to-date with the latest journal articles published in Paediatrics, receive feedback on case studies and presentation skills and also the opportunity for team building and networking. Since presenting at the meetings I have received feedback on ways to improve my presentations and will try to include these suggestions in future presentation. Been a good opportunity to receive feedback on management of more challenging cases and learn from others experiences.	1,2	1	

2: Practice Review		Registration Number:			
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07/08/08 and 16/09/08	Presentation of 2 different case studies to different audiences	Presented 2 case studies of patients who I had found challenging to 2 different groups of Paediatric Dietitians. Preparation of the case studies involved more research into medical conditions and abbreviations which on a day-to-day base's I did not have time to do. I found this very useful and have now taken more time to look up new conditions and abbreviations. Feedback from my first presentation showed I should of given more detail of the dietary intake i.e. intake vs. RDI rather than focus on medical management. In the second presentation I was able to apply this and I received better feedback from my audience.	1,2,3	3	Reflection on case studies and feedback forms from audience
January 2009	Performance review undertaken by colleague on home visit	This was a good opportunity to receive feedback on my assessment and treatment management skills when conducting a first home visit assessment for a child referred for faltering growth. It was encouraging to receive positive feedback on my dietary assessment skills and treatment plan. One area that was identified that I could improve on was speaking slower. As I have an accent when I speak quickly it became difficult to understand. Since the feedback I have made a concerted effort to speak slower and get people to reflect back on the advice I have given then to assure they have understood correctly.	1	1	

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3: Additional Professional/Personal Development			Registration Number:		
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June-Sept 2008	Contributed in the production of an article on infant feeding difficulties for publication in New Zealand Doctor magazine (24/09/08)	Part of the process in producing the article involved researching my designated areas of feeding difficulties, which included literature reviews. This provided the opportunity to up-date myself on the most up-to-date evidence based practice for reflux, coeliac disease and food allergies. As the new ministry of health 0-2years of age infant feeding guidelines had recently been published this was used as the underlying focus of the article. This resulted in me having a good understanding of the guidelines and the new changes that had been made and I have been able to use this new knowledge in my day-to-day clinical work such as the new recommendations for the introduction of complimentary foods. Peer reviewing other colleagues sections of the article gave me to opportunity to up-date myself in those clinical areas. As this is the first time I have been involved in producing an article for an established clinical magazine I found the process a steep learning curve in terms of meeting deadlines for peer reviews/going to print and adapting to a user friendly writing style which still includes the clinical information you want to get across. Since being involved in writing the article and seeing it published I now feel much more confident in volunteering to do similar projects in the future.	1,2,3,4	4	Self reflection and copy of article

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# CCP Credit Summary for Audit

Registration Number:

Name:

<u>CATEGORY</u>	<u>Credits Assigned</u>
1 Continuing Education	
2 Practice Review	
3 Additional Prof/Personal Development	
<b>Total</b>	

## RECENCY of PRACTICE

I confirm I have worked a minimum of 100 working days or 750 hours in the last five years

**Signature:**

**Date:**

*Note: For dietitians who have not been practising for 5 years please work this out on a pro-rata basis.*

## **OPTIONAL** (highly recommended)

1. Credits have been reviewed and appear to accurately reflect the value of learning activities	Yes	No
2. Learning goals were reviewed with the participant	Yes	No

**Mentor Name:**

**Position:**

**Mentor's Signature:**

**Date:**

*NB: If you have named a Mentor, that person must sign this page*