

IMPECD Survey Report O4 + O5

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Situation within IMPECD project

O4/A1: Research pedagogical training materials

- preparation of survey on the use of reflective templates for portfolio and/or accreditation (aimed at students, dietitians and NDAs)
 - ⇒ *Milestone 4b: survey reflective templates*

O4/A5: Evaluation of the MOOC

- survey about peer learning methods: feedback and follow-up of needs of peers (students and dietitians) (survey and follow-up of discussion platform)
 - ⇒ *Milestone 4g: survey analysis*

O5/A4: Evaluation of evaluative tools (months 9-10, 21-23, 30-32)

- survey about the quality and needs/ intentions to use for this evaluation tools (for students and dietitians)
 - ⇒ *Milestone 5h: analysis of survey*

Introduction to the survey

The performed survey dealt with the needs and requirements for the tools that will be developed. Participation was voluntary. The survey can be found in appendix and dietitians, dietetic students, National Dietetic Associations (NDA) or Higher Education Institutions (HEI) were targeted to complete this survey.

The questionnaire was anonymous and the outcomes will be used only for the IMPECD project objectives. Respondents' privacy and confidentiality was guaranteed during analysis and reporting of the outcomes.

1. Methodology

A questionnaire was developed, inspired by existing similar questionnaires from other (para)medical disciplines and EFAD. The IMPECD consortium had opportunity to test and feedback to the questionnaire. Afterwards the questionnaire was constructed digitally in Limesurvey (*LimeSurvey Project Team / Carsten Schmitz (2015). / LimeSurvey: An Open Source survey tool / LimeSurvey Project Hamburg, Germany. URL <http://www.limesurvey.org>*)

The survey was sent out through:

- EFAD mailing to NDA's, Dietitians and HEI's
- EFAD Facebook
- ENDietS mailing and bulleting
- ENDietS Facebook

Analyses are performed with IBM SPSS 22. Descriptive statistics expressed as n (%) for frequencies and mean \pm SD for continuous variables.

2. Respondents characteristics

The current analysis is based on those 79 respondents who almost fully completed the survey. On the other hand, 80 respondents started the questionnaire but dropped out after the first set of questions and are therefore excluded from analyses. As completing the survey was not time consuming, it could be assumed that these non-responders represent those who are less or not familiar with the terminology and use of reflective practices.

Table 1 gives an overview of the respondents functions.

Dietitian	32 (41%)
Student of dietetics	32 (41%)
President/Board member of a National Dietetic Association (NDA)	2 (3%)
Teacher at a Higher Education Institution (HEI) for dietetic students	18 (23%)
- Responsible for curriculum development	12 (15%)
Teacher/educator, not specifically teaching to dietetics students	2 (3%)
Other	5 (6%)
- development of LLL for NDA	
- nutritionist (2x)	
- PhD student	
- researcher	

Table 1: Respondents function (n=79) (multiple answers possible), n (%)

Students and dietitians were asked for their city or name of university in order to check their sample representativity. We were able to identify 40 different institutions and only five times more than one respondent came from the same HEI, which indicates that inclusion of double information is strongly reduced in the survey and analysis.

The dietitians who participated (n=32) were working on average $9,6 \pm 9,6$ yr as a dietitian, with a range of 0-31 yr. 25 (78%) of them were member of a NDA. The distribution of their working field can be found in **Table 2**. Most dietitians were working independently or in the clinical field.

Independent	13
Clinical	11
Community or Public Health	3
Administrative, food service	4
Food industry	2
Research	9
Other	6
- Education / teaching (4x)	
- First line care setting	
- Infraligne	

Table 2: Fields of work of dietitians who participated (n=32) (multiple answers possible), n(%)

Respondents were professionally active in 20 different countries (see **Table 3**). Highest response came from Spain, Belgium, Portugal and the Netherlands.

Australia	1 (1,3%)
Austria	2 (2,5%)
Belgium	9 (11,4%)
Czech Republic	2 (2,5%)
England, UK	4 (5,1%)
Germany	6 (7,6%)
Greece	2 (2,5%)
Italy	2 (2,5%)
Libya	1 (1,3%)
Poland	2 (2,5%)
Portugal	9 (11,4%)
Republic of Ireland	1 (1,3%)
Romania	3 (3,8%)
Scotland, United Kingdom	1 (1,3%)
Spain	11 (13,9%)
Sweden	5 (6,3%)
Switzerland	6 (7,6%)
The Netherlands	9 (11,4%)
Turkey	3 (3,8%)
United States	1 (1,3%)

Table 3: Origin of respondents professional activity by country (n=79) (one double answer is both included) n(%)

3. Results Reflection - professional

Reflection is a mechanism to maintain and improve the own professional practice.

Reflecting on learning situations or specific situations on the job helps to get a better understanding of one's own competences and find out what kind of improvement is possible.

A “reflection template” is a document with a set of structured questions to help the user to reflect.

The profile of a dietitian mentions “the ability to reflect on dietetic experiences and demonstrate reflection in action” (ref: European Academic and Practitioner Standards For Dietetics. EFAD, 2005)

Table 4 indicates that most of the respondents are familiar with reflection. About half of them reflect in a formal way. Only 15,2% reported not the reflect at all.

Yes, it is mandatory to demonstrate reflection in a formal way	27	(34,2%)
Yes, I voluntarily use reflection in a formal way	14	(17,7%)
Yes, but I don't reflect in a formal way	26	(32,9%)
No, I don't reflect	12	(15,2%)

Table 4: Do you use “reflection” in your own current situation? (n=79)

Those respondents that reflect in a formal or non-formal way were asked to describe how they reflect on their own professional practice ? **Table 5** gives an overview of all answers.

Dietitians
written format
Speaking with the students Talking to my colleagues
Notes
I reflect by collecting data on my work and put this in grafics at the end of the year. This I discuss with my supervisors and colleagues.
- Critical Thinking - Evaluation - Monitoring
I use different methods to develop my work as protocols of mesuring , protocols of weighting, protocols of changing menus,prtocols of how to ask my patients their food habits. protocols of how to ask my patients for their activity habits.
For eg thinking what went out well and not so well during a lecture, writing it down and try to improve the next time.

The students fill in course evaluations for every course and those I can also use to get tips on how to improve.
Trough a Plan Do Check Act cyclus.
I like to reflect on the approach taken in consultation with the patient , in order to improve .
circle of Korthagen (teacher and professional)
I think about my actions everyday and I try to think What can I do Better to achieve my goals as dietitian.
I'm just thinking about my working style e. g. the time efficiancy and how I can improve my work but just in my mind. I'm only writing something when I have fixed ideas for a change.
education, talking and sharing experiences with colleagues, read on topics of how to work best with other healthcare professionals, revising my own tools, ...
Courses
Nutrition Care Process
Problem-solving
Reflection is something that happens naturally and sometimes, when it's about a topic that's important for the job, iwrite it down
Intervision with colleagues
By using a professional portfolio
I check every month if my clinical practice its in accordance with recommendations
reflection
Formally: questionnaire for the "yearly employee talk". Otherwise, I usually reflect my teaching and my consultations at the end of the respective day, e.g. just while walking at home. Furthermore, I reflect on every situation that was difficult in any way. I try to think about the why and meaningful reactions in the situations and I reflect on my part in the talk and potential other handlings.
I don't really understand the question. (french)
Students of dietetics
I compare the example given to me, with what I have seen in theory.
just write down what I think was/was not good, what I can improve next time, what I won't do again, how I felt in specific situations;
I try to sum up the experiences I have got during the day in my head in the evenings. Sometimes I rewrite notes to form a better structure. Would like to be better at reflecting i order to improve my studying skills.
As student, we have a specific form to fill in for two: clinical (after each consult and weekly) and community (weekluy) (out of three placements)
Mostly I think about recent situations and patients and analyse the problems I had, what could I do better and what I did right. I Think about it all so I can do better next time with another patient.
-Written critical reflections, some of which are shared with placement supervisors. -Formal university assessments. -Verbal reflection with supervising dietitians, academic staff, classmates, and friends/family.
to show how ideal meal should looks like Composition of menu using Food Pyramid To show how wholegrain bread looks like
sharing my experience and focusing on solutions

By using a template provided by the school, included Smart goals, structured questions etc.
First I think it's important to know the people who is in front of you and after asking about his problem and try to find a solution. Make a suggestions about a good food habits to try that the guy knows what is wrong and good when he or she eats. The objective is educate.
Many, many, many methods and reports STARR for instance Setting up SMART-goals for myself
I just make notes
Discuss with co-workers/students Evaluate at the end of the day Course-Evaluations at the end of a course
Written pieces
Problem ethiology symptomd
Assessing how much time I have spend on learning and how much I have actually learned.
using a diary
Reflective Logs, a minimum of 2 to be completed per week of training. Usually a page long. Discussed with supervising dietitian at end of week assessment.
Written reflections. Reflecting by setting aside time to think about practice.
President/Board member of a National Dietetic Association (NDA)
By means of NIAZ accreditation, via evaluation questionnaire by my personel(dietitians), by follow up of results of nr of consults, by means of intervission with the dietitians, by means of jobevaluation
Surveys, Checklists
Teacher at a Higher Education Institution (HEI) for dietetics students
Continuous evaluating your own actions and thoughts
Case based data collection, than evaluation and adapting to Dietitina needs, teaching my students and challenge them to debate and reaching feed-back from them at the end. Also developing new dietetic guides that are missing in our country, based on the EFAD and Romanian experience and communities requirements.
Students have
Each semester every teacher has to fill in a form for each subject were reflection about performance, academic results and compliance with the teaching guidelines are assessed. In that form we also have to suggest improvement technics whenever necessary. Also every three years we have to fill a report about our pedagogical, research and administrative performance. Peers assess the report and we receive detailed ponctuation in each item. I use these results to guide my improvement in the following three years.
We use the STARR method and PDCA
feedback from students
feedback students/colleagues

-first and foremost it's in conversations with other staff of the dietetics department - in Curricula Meetings - yearly feedback from and to my supervisor
Essay/Report of the Treatment of a Patient according to the German Nutrition Care Process
Practical cases (original: mediante casos prácticos)
Others
reflective reports, drafts, references (by a developer of LLL for NDA)
colleagues (by a nutritionist)

Table 5: How do you reflect on your own professional practice ? Please describe all methods of how you reflect. Answers from respondents belonging to different categories are only included once from top do down in the table (i.e. these answers are included only once under “dietitians”)

Furthermore, respondents that reflect in a formal or non-formal way were asked to describe what tools, instruments or documents for reflection they use in their current situation, and by whom they are provided. **Table 6** gives an overview of all answers.

Dietitians	
Kolb cycle, Gibbs model	they are available in the internet... there are many books and many more models
The German- Nutrition Care Process The ICF- Model	our teachers
professional I use my own protocols which where elaborated from my studies in order to have a good clinical anamnesis of my patients. Instruments : calipers, estadiometer, Impedance machine, compueter, computer programs to elaborate diets, computer program to elaborate recipes. Documents: I hand in a binder/folder to my patients with their weekly diet, personal portions,dietetic recommendations also mentioned in the consultancy and recipes,body mesurements, included, their clinical anamnesis, posible food products to use that are available in the market.I also hand to my patients triptics with useful information. ex Christmas, summer, excercise..	The measurement tools basically form internet companies. I developed most of my documents and protocols from my studies.
Plan Do Check Act cyclus.	Our HEI
Personal development plan (teacher and professional)	training head
Studies	Internet

Documents, tools and instruments concerning the NCP method, benchmarking	I participate in training courses, and I'm an active member of the association of dieticians
At our HEI, we have a sjabloon that we use to write it down, we also keep a portfolio about our function.	the HEI
journal, notebook	purchase them, I purchased them
Check list designed by be	See above
I mainly reflect my thinking about situation, I usually don't use a tool. Furthermore, I talk about situations a lot with people. As a teacher, I use evaluation tools.	the evaluation tools are used by the whole team
Students of dietetics	
see above: As student, we have a specific form to fill in for two: clinical (after each consult and weekly) and community (weekluy) (out of three placements)	university or supervisor of placement
-Gibbs reflective cycle for formal university assessments. -Handwritten or typed into MS Word for personal reflections, loosely using Gibbs cycle.	University recommended Gibbs cycle.
Pictures, pyramids	From pages about nutrition, like choose my plate, eat right
current technological material	myself or any association
Document provided by school	See above: By using a template provided by the school, included Smart goals, structured questions etc.
Many, many, many methods and reports STARR for instance Setting up SMART-goals for myself	School
online evaluations mostly informal verbal reflection	online evaluations from the university
Usually Gibbs' model of reflection	Suggested by University
Dieetbehandelingsrichtlijnen	Nederland
Anonymous assessment forms.	My institution and my teachers
diary	I provide this myself
Reflective log form	College, mandatory practice placement materials
President/Board member of a National Dietetic Association (NDA)	
as manager dietetics: evaluation questionnaire to check the staff satisfaction, Hospital Accreditation by means of NIAZ/Qmentum, evaluation forms of personal affairs department for job evaluation, as	evaluation of course via Kwaliteitsregister Paramedici Nederland (Quality Registration)

profesional: by means of registered courses/case studies as a teacher via evaluation questionnaires after each presentation/course.	site), NIAZ and evaluation form of personel satisfaction via my employer.
EFQM,	National Association
Teacher at a Higher Education Institution (HEI) for dietetics students	
Standards are european guides, questionnaires, hospital forms with patient's historical, anthropometric and laboratory data, recipes etc.	Tools were obtained from our Ministry of Health, National Institution of Public Health, hospitals, or we develop our own guides and forms to be used by Dietitians.
Form for subject assessment.	The tools were provided by Polytechnic Institute of Braganza.
Report for three year global assessment.	No idea
The same, STARR and Plan Do Check Act	
<ul style="list-style-type: none"> - protocol of yearly qualification interview with my Supervisor - in a broader sense all the material used for lectures are a reflection on practice because they have to be up to date and therefore you have to Research for new developments, reflect and adapt - Evaluations from students on the contents and conduct of the lectures 	the University: protocol for qualification interview and Evaluations from students myself: my own materials and certain more specific Evaluations from students
Essey/Report with a clear structure	self made
Others	
Tool C-O6b of the toolkit with personal changes (by a developer of LLL for NDA)	German translation is available on the VDD homepage

Table 6: . What tools, instruments or documents for reflection in your current situation? (left column)

How did you obtain these tools, or who provided them? (right column)

Answers from respondents belonging to different categories are only included once from top do down in the table (i.e. these answers are included only once under "dietitians")

Teachers of a HEI for dietetics was asked about the reflective practices of their students. They reported in 69% of the cases (11 out of 16 answers) that it is mandatory to demonstrate reflection in a formal way for their students during their studies and/or practice placement. In addition, 2 teachers indicated that their students voluntary use reflection in a formal way, and 3 teachers indicated that their students reflect but not in a formal way.

Table 7 gives an overview of how teachers indicate their students to reflect, and what tools, instruments or documents for reflection their students use to reflect during their studies and/or practice placement?

HOW DO STUDENTS REFLECT?	WHAT TOOLS?
We work using real clinical cases	clinical cases
"One minute paper method" after a class/lecture	Don't know
Debate cases, menu's recommended and lab test evaluation.	Hospitals forms, recipes, laboratory results, questionnaires, Romanian and European standards etc.
"During practical classes, field work and practice placements they have to report their performances and reflect on limitations and aspects to improve.	
The report include a written part and an oral part."	Reports, oral communication and debate.
also STARR and PDCA circle	The PPT from year 1 till 3 where the learn to reflect with both methods. Students use the methods during the whole curriculum
"Some learning activities eg clinical field practice includes reflection before and after e.g. patient visits together with the supervisor.	
All dietetic courses and different tasks for example an essay on the dietetic code of ethics also includes reflection on the role as a health care professional. "	No standardised tools.
They use the Plan Do Check Act cyclus in the minor, in the final practical placements and during writing their thesis.	Plan Do Check Act cyclus.
"STARR method	
PDCA cycle"	
"STARR method	
PDCA cycle"	
they have to reflect written down and they must keep them in a portfolio	they get templates with questions to fill in.
"different modules provide with different qualification methods, e.g. in communication and counseling modules, they have to write papers and	

reflect on Tools they use or counseling sessions they had. Dito in other moduls e.g. in clinical moduls they write formal reflections on case studies etc.	
Each practice Placement is evaluated formaly by the students.	
oral Evaluation of different Topics in mentoring Meetings	
each lecture should invite to reflect orally, which is done on a daily basis"	"Practice placement evaluation form
mentoring meeting templates	
different standard templates for texts "	
They are asked to reflect after each consultation done with our standardised clients. Furthermore, there are several exams including reflective aspects.	A tool developed by our HES
Report/Essey about the practical palcement	Report /Essey
en la resolución de casos prácticos	

Table 7: How do your students reflect? Please describe all methods of how they reflect or how you encourage (left column). What tools, instruments or documents for reflection do your students use to reflect during their studies and/or practice placement? (right column)

4. Results Reflection – IMPECD and EFAD

Respondents were given a short explanation of IMPECD’s objectives and asked for the preferential tools to support them reflecting on these cases. As shown in **Table 8**, more than half of the respondents had a preference for using pre-structured short questions and discussion group. Open field (essay-style) reflective templates are not supportive for most of them.

Template with pre-structured short questions	54 (68,4%)
Template with open field / essay style	20 (25,3%)
Digital folder to collect previous reflection documents (comparable to a portfolio)	31 (39,2%)
Discussion group with peers / colleagues	41 (51,9%)
Lesson evaluation / tests about content	36 (45,6%)
Other:	1 (1,3%)
- structured according to the Nutrition Care Process or similar structure	

Table 8: In the European project IMPECD an online course offering 10 different clinical cases for training on dietetic care will be provided. For reflecting the own work on solving the cases, what tools would you think would support you/students/colleagues to reflect the own dietetic care on these cases in the online course? (n=79) (multiple answers possible) n(%)

EFAD distributes through their website a toolkit for reflection that was made during the DIETS2 project. **Table 9** shows that most respondents are not familiar with the toolkit for reflection that was made during the DIETS2 project and provided by EFAD. Those who were familiar with the EFAD toolkit were asked about the positive and negative aspects of it (**Table 10**)

Yes	11 (15,1%)
No	62 (84,9%)

Table 9: EFAD provides a ‘Guide to Lifelong Learning for Dietitians in Europe’, consisting of tools in order to “help the healthcare professional to construct a portfolio and demonstrate commitment to lifelong learning (LLL)”. Are you familiar with this document? (n=73) (%)

POSITIVE ASPECTS	NEGATIVE ASPECTS
all	
I use it to check my professionalism	
variety of tools, free access on the homepage of the German NDA VDD for members in mother language	access on the EFAD homepage:1 tools are not linked since the change from DIETS2 to EFAD

	homepage, it is on work 2. must be more obvious,3. more translations are necessary, as people just use it mother language,4. easy access via app, more empowering activities like webinars to bring it to the people and to talk about good/active use
The sistematization of the LLL process.	First of all I believe more countries, associations and professional boards should adopt it.
A possibility to check knowledge and see how other dietitians may coping with exact problem/case	-
The tool for documenting the conferences and congresses	The LLL toolkit has a lot of functions... for me it was too much, I didn't wanted to read everything
the Tools for planning professional development as well as the Tools for action	Tools for Evaluation could be more extensive. Evaluation on single cases, reflection or case Portfolio e.g as a collection of documents according to the tools of Action etc.

Table 10: What aspects of this EFAD toolkit do you experience positively? (left column)

What aspects of this EFAD toolkit could be improved? (right column)

Furthermore, EFAD developed standards for dietetics such as the “European Dietetic Competences and their Performance Indicators” . **Table 11** shows that most respondents are not familiar with this document. From those who are familiar with it, all but one (20 out of 21) reported that those EFAD competences and performance indicators could be used as reference for reflective templates. Those who are familiar with this document were asked what competence and performance indicators they consider of high importance to be used in the IMPECD course (**Table 12**).

Yes	21 (28,8%)
No	52 (71,2%)

Table 11: EFAD adopted the “European Dietetic Competences and their Performance Indicators attained at the point of qualification and entry to the profession of Dietetics” in 2009. Are you familiar with this document? (n=73) (%)

2.0 in the document should be developed first.
Evidenced dietetic practice - how to prove adherence of the patient
All of it, to sustain the Document and also to explain and disseminate the indicators in Europe in order to be used in the same way that authors thought.
Dietetic process and reasoning and evidence based dietetic practice
Reflection on dietetic practice via case studies including NCP
Information on changes in legislation, news in the field of research and guidelines

<p>consumer and actual topics on the open press Health Care professionalism will be a consequence if people use online course.</p>
<p>Taking initiatives and pro active organisational talent, working together in team including the physicians, personal approach of patients, creativity in realisation of diets/advising patients, teaching skills, good listening and verbal skills, selfreflection. Eager to learn and follow new developments. Openminded motivational coaching</p>
<p>competences Advising, Reporting, Coaching,</p>
<p>tests, time from start til end of one case, quizzes</p>
<p>Learning new and get more handy concrete nutritional advises connected to the cases. Learn about the factors that can make one advice work in one country but not in others. For example acceptance of different products etc. Sharing experiences is important. Gaining new knowledge is important. Recall what the session/case has given you.</p>
<p>Its a very wide plan but we should have standarized protocols of how to work with a patient to have at least the same work quality in what questions to ask a patient and what not to depending in their disease, illness, depending if its clinical/hospital,consultancies etc</p>
<p>Advicing, counseling, communication</p>
<ul style="list-style-type: none"> - considering all aspects of patient' situation (from biochem to social), - assessing carefully patient with PESS - improving patient medical condition with dietetics/nutrition with feasible means to maintain/preserver QOL
<p>Documentation, Assessment (in clinics you often do it on a paper and later have to type it again into the online documenting system) - ways to improve the Assessment. Dietetic Care Process in clinical practice.. the G-NCP as good aspects but is very detailed.. it is not possible to do everything when you work in a hospital where the time for one patient is limited!</p>
<p>Clinical, coaching</p>
<p>Treating patients</p>
<p>dietetics process and professional reasoning for all dietitians and for the clinical and Public Health dietitian</p>
<p>Evidence base in dietetics Autonomy, accountability and quality in dietetic practice</p>
<p>all the ones that relate to single cases meaning that e.g. reasearch design doesn't apply</p>
<p>listening to patients, giving the right advice, individual recommendations</p>
<p>Opened questions.</p>
<p>at present the "Competeny Statement" is under revision</p>
<p>Assess research findings and have the ability to integrate nutrition, dietetic, social science and education research into practice Be especially skilled in interpersonal communication, including oral and written communication with professionals and service users, in group work and interdisciplinary teamwork with health and social care professionals.</p>
<p>nutrition care process</p>

none is relevant, because the dietitian role in the rest of EU is too clinical

Table 12: What competence and performance indicators do you consider of high importance to be used in our online course to be developed?

5. Results Professional Recognition and Accreditation

EFAD's "Strategy for Lifelong Learning" recommends National Dietetic Associations (NDAs) and/or their education providers to establish a system for rewarding learning (professional development and Life Long Learning).

In the following questions, this system of formal recognition of continuous professional development will be referred to as 'accreditation'. Such accreditation might be a requirement to be registered as a dietitian in certain countries.

Table 13 indicates that not all countries have official requirements for Life Long Learning.

Yes	25 (37,9%)
I don't know	22 (33,3%)
No	19 (28,8%)

Table 13: Are Life Long Learning activities in your country officially required for any purpose? (n=66) (%)

When Life Long Learning was officially required, the respondent was asked to indicate by whom it is required and for what purpose this recognition is required. An overview of the answers can be found in **Table 14**.

By whom?	n	Purposes
National Dietetic Association (NDA)	15 <ul style="list-style-type: none"> - Germany - Romania - The Netherlands - Australia - Switzerland - Republic of Ireland 	for achieving a LLL certificate / VDD to register as quality professional SVDE INDI
Department of Health	7 <ul style="list-style-type: none"> - Spain - Romania - Czech Republic - Austria - Belgium - England (UK) 	it gives you points to be able to work here To keep the registration of a dietitian To maintain professional registration
Department of Education	2 <ul style="list-style-type: none"> - Romania 	

	- Turkey	nutrition and dietetic
Health Insurance companies	7 - Germany - Belgium - The Netherlands	the LLL certificate you need as a freelancer dietitian to get a contracts with health insurance companies require a registered quality professional
Other	4 - Germany - United States - Republic of Ireland	Secondary schools / DGE and further more CDR: Commission of Dietetics Registration – USA HSCP Registration / CORU

Table 14: By whom is official recognition of such Life Long Learning activities required? (left column)

If possible, please indicate for what purpose this recognition is required (right column)

Half of the respondents indicated to think that the IMPECD course could be officially recognized in their country (**Table 15**).

Yes	33 (50,0%)
I don't know	26 (39,4%)
No (Czech republic, Belgium, Portugal, Poland, Spain) Comments: Unfortunately Because when we get our licence, the next courses that we follow are not recognize in our country. Not yet.	7 (10,6%)

Table 15: Do you think an online course to be developed in the IMPECD project will be officially recognized in you country? (n=66) (%)

Comments on previous question

Austria	Course are recognized inofficially by a proffesional body
Belgium	Adjacent to the courses in Dutch language, many Belgian dietitians don't feel comfortable in English communication. If it is translated it might help the dietetic association to introduce registered education

	Because when we get our licence, the next courses that we follow are not recognize in our country. Not yet.
Germany	Yes, our certificate allows a certain ammount of online activities. At the moment there is just one magazine offering that in German -as far as I know-, but in cooperation with the VDD and with a certificate of participation I see no problem
Portugal	Officiall recognition would depend on the recognition of a portuguese HEI. Unfortunately
Spain	I hope it will be a recognized course to support certified/ registered Dietitians
Sweden	I think it sounds like a great tool that may very well be implemented in education if successful. The students are expressing a wish for more case-examples. When there is something relevant for a administrative dietitian, yes.
Turkey	I want to be a lesson IMPECD

More than half (56,1%) keep track of own professional development by using a portfolio (**Table 16**).

Yes	37 (56,1%)
No	29 (43,9%)

Table 16: Do you use a portfolio for keeping track of your professional development? (n=66) (%)

Finally, in this part we asked to NDA's about the information one has to provide about an activity activity (such as our IMPECD course to be developed) to be recognized, besides a certificate of participation, a list of relevant educational objectives and their test results.

We received only the following answers:

- *"Translation in Dutch might be helpful. The federal government is evaluating the first draft to start registered continuing education in Belgium. The Flemisch association has given input and the French speaking association too. Currently the Federal government is evaluation this document. After introduction, the federal government is responsible for checking whether the diëtitian is meeting the registration requirements."*

6. Results Evaluation

The following questions were about "evaluation" during the IMPECD online course and implementation of the IMPECD online course in dietetic education.

In the survey, HEI's were asked how would it be possible to implement the material of this IMPECD course (to be developed) in their dietetics programme? An overview of the answers can be found in **Table 17**.

HEI's were also asked to explain if and how it would be possible in their dietetics programme to accreditate these ECTS points (**Table 18**)?

through a subject whose teacher considers it appropriate
Use the materials as homework assignments and discuss the assignments of the course in the classes
Participant will learn and use the knowledge in their activity. We, the teachers, can use the information in our Practical work from the curricula to disseminate info to our students and to apply as well.
As extra course units, after translation to Portuguese.
We could use the dietetic program, students can do parts of the course at home and we can discuss the result during classes. We have programs around Diabetes, Kidney, Cardiovascular diseases, etc etc
I don't know. Not in charge of planning the courses and programs.
To use it during a course like 'dietetic consult'.
to give it ECTS-credits
it depends on the kind of cases that will be chosen and on the kind of structure that is used to work through these cases. If they are according to our culture, it may be very useful. We work pretty much according to NCP although we have developed a slightly adapted model that aids the educational purpose
Difficult to say at the moment. Probably use it as teaching aids if they reflect our understanding of reflection
yes
como materia opcional

Table 17: How would it be possible to implement the material of this IMPECD course (to be developed) in your dietetics programme?

Offering this IMPECD course as an optional subject in elective ECTS Degree
By allowing teachers to check submission of the course assignments
Maybe included in our Practice from the last semester of the Dietetics programme (in our 3 years of bachelor programme the last semester has only practical work do to) or during the year of Practice we are asking to be done by our graduates before they will be accepted to Registered Dietetician exam.
It is possible for students to have extra ECTS points on their certificate. If the Polytechnic Institute of Braganza would recognize the IMPECD course, then these ECTS would appear as extra.
I have no idea, but maybe we could discuss about this.
When it's included / integrated in a course.
a module aspecially for international credits
that i dont know.
Currently, they would be add-on ECTS (above the 180 ECTS). But maybe the course could also become mandatory.
in an elective module
se puede solicitar oficialmente a la facultad

Table 18: Participating to this IMPECD course (to be developed) would give the participants the opportunity to earn ECTS points. Please explain if and how it would be possible in your dietetics programme to accreditate these ECTS points?

Considering evaluation methods, the most preferred methods are practical issues tests, whole case study tests and general theoretic principles. Nevertheless, the differences were small between the alternatives (**Table 19**).

Evaluation tests after each step in the case study	28 (35,4%)
Evaluation test after completing the whole case study	35 (44,3%)
Testing of general theoretic principles	33 (41,8%)
Testing of practical issues regarding a case study	44 (55,7%)
Decision-tree based testing (= the participant decides on a certain action to be taken in the dietetic care process which could lead to a positive or negative outcome for the patient)	32 (40,5%)
Multiple choice quiz	29 (36,7%)
Online live quiz with other participants (= webinar)	21 (26,6%)
Other: <ul style="list-style-type: none"> - combination of the above - Hard to tell, see comment (I think that the evaluation methods have to be chosen when the course objectives are set. Otherwise it is very hard to say what kind of evaluation method that is most suitable) - none of above, not my profession as a administrative dietitian - riddle, quizzes 	4 (5,1%)

Table 19: What evaluation methods would you like to use in an online course, where virtual case studies can be trained by dietitians?

Finally, respondents were given the opportunity to give any further comments or advice for the developers of the IMPECD online course (**Table 20**). 56 respondents to like to be informed about IMPECD activities and the online course.

No, but I appreciate your efforts
use a common process model
Its a good idea and we are interested to be part of it.
Maybe it would be helpful for some people to develop the online course in different languages/with subtitles.
Congratulations for the initiative.
"I would like to have in the future online case studies where we could learn (as I mentioned before) ways/protocols to better our professional quality as professionals, like how to handle specific weird illnesses like allergic or immune ones, pediatric cases, geriatric cases, sports cases, TCA/TCANE(food disorder transtorns).
A place/plataform where we could search information/cases , with scientific evidence, that supports us with dietetic recommendations,
Also a place where we can download (in different languages) sheets to hand to our patients with random recommendations. "
I think that the evaluation methods have to be chosen when the course objectives are set. Otherwise it is very hard to say what kind of evaluation method that is most suitable.
This is a great idea! cases study should be slightly changed regularly, should follow the trend of common conditions developing (T2DM + IBD, Crohn, Coeliac, etc, food allergies/intolerances combines with heart disease, hyperlipidaemia or have options for students/dietitians to select which combination they want to study
choose complicated cases for the case studies
It would help if participants could obtain some kind of credits associated with the course
You need to enlighten the proffesion of the administrative dietitian

Table 20: Do you have any further comments or advice for the developers of the IMPECD online course?

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