

Early Dietetic Careers Case Study

My name is Patricia and I'm a Community Dietitian working within a CAMHS Eating Disorder Service in West London NHS Trust, a mental health trust.

I started my current role in July 2022 to form part of the Intensive Community Treatment Pathway being rolled out by my trust which is a multidisciplinary team (MDT) approach to intensifying community support in an effort to avoid admission to a specialist eating disorder unit (SEDU).

I joined the workforce in January 2022 as a Development Paediatric Dietitian in Essex and I found that I loved the experience of working with kids. Throughout my placement, most of my encounters were with the adult population, but I was lucky enough to do my B Practice-based Learning (placement) with the Paediatric Dietitians at Guy's and St Thomas' Hospital and spend time with the Paediatric HEF Dietitian in Lewisham.

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I applied for the role during my final Practice-based Learning and had a job offer lined up before I had even graduated. I used my experience from this and transferable skills from other roles (private tutor, mentor for SEN children and working alongside product developers) to apply for the job. This role then saw me giving dietetic support in an oncology MDT, developing proficiencies in working with simple allergy patients, fussy eating, and any conditions that led to a child or young person being admitting to the Children's Ward.

I applied for my current role after just under 6 months of working in a district general hospital. A large reason for moving from acute to community was to get a better work-life balance as a person with disabilities, and one positive from the changes sparked by the pandemic was that I gained the ability to do more remote work which meant I would be travelling less,



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Dietetic
Workforce Development
Programme

could schedule appointments in a manner that best suits me, and still got to do something I love. My job does include forming meal plans, however, I also consider when having a rigid meal plan is inappropriate for patients and work with families to restore weight with intake and then normalise eating when indicated. I have been networking with the help of the Head of AHPS in CAMHS and have made some great links to work on various projects or give some insight during meetings.

My best practice example from early on in my career is the work I've done on ADHD medication and diet, and I am looking to expand this to cover more learning difficulties as this is something I am hugely passionate about! With my last Trust, I worked on a resource booklet to better support children starting on or already taking medication and their parents with common experiences such as reduced appetite, dry mouth and sleep issues. I've taken this further since moving Trusts, and am working with our Neurodevelopmental Team and the Head of AHP CAMHS to create a resource to support the team as they currently don't have a Dietitian working directly with them.

This is important to me as I want to ensure that more people get to know the amazing work dietitians do in mental health, and this feels like the perfect place to start! I am hoping to do more projects like this and create more opportunities to help expose dietetic students to the various types of work available to them and feel more confident in applying for jobs in mental health. I also think branching out to support other teams is important to showcase the need for more dietitians in mental health as there are several areas where we can make a difference to the quality of life a patient has, and want to be a part of that work.

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