Diabetes Specialist Dietitian

Your contribution

The diabetes specialist dietitian is an advanced dietetic role with expert knowledge and skills within all aspects of diabetes care. This role is a core clinical position that supports people living with diabetes (PWD) as part of the Diabetes Integrated Team (DIT). This role will specifically work with people aged 15 years and over who are living with diabetes and their families/whanau. Predominantly this will be Type 1 diabetes, diabetes in pregnancy and complex type 2 diabetes. This job description should be read alongside the Taranaki Diabetes Service Integrated Team – Operational Framework, and Te Kawenata. This is a new role and as we work to develop an integrated approach, the role may evolve and change over time.

The DIT is delivered by a collaborative of providers in the Taranaki region who are committed to improving health outcomes and health equity for people living with diabetes and their support people/whānau. The multi-organisational collective includes:

- Ngāruahine Iwi Authority
- Ngāti Ruanui Tahua Ltd
- Pinnacle Midlands Health Network
- Taranaki District Health Board
- Tui Ora Ltd

The collective is embarking on a new integrated service delivery model that has been co-designed by a wide range of stakeholders including PWD across the Taranaki region with one common goal that is to improve the experience and outcomes of those living with diabetes.

Your key focus

Optimum patient management and care

- You will provide dietetic assessment, intervention and education that is effective and responsive to the holistic needs of the patient and their family/whanau and incorporates cultural safety into practice.
- The focus of all interactions you have with patients and their family/whanau will be evidence based with the patient voice remaining central in their journey towards self-management.
- You will implement nutrition interventions that are evidence based and link to national standards of care and guidelines such as the Dietitians NZ Diabetes Mellitus specific Standards of Care (T1, T2, GDM)
- Understand Māori models for health and wellbeing including Mahi a Atua, Te Whare Tapa Whā, Te Wheke and incorporate these into your daily practice with patients seen.
- You will work with your patients and their family/whanau on care planning that is holistic and is shared with other health professionals who you are jointly working with.
- Your delivery of group education sessions will meet the specific nutritional needs of patients and their family/whanau and result in those you are presenting to having a good understanding of the changes they need to make to better self-manage their condition.

Service Delivery

- You will demonstrate an effective integration of medical nutrition therapy, practice and experience along with an increasing degree of autonomy in your judgements and interventions for people with diabetes.
- You will meet agreed programme objectives, work plan and reporting requirements in line with the Taranaki Diabetes Service specification.
- As a DIT member you will participate in MDT meetings, combined clinics, practice education, collegial support and peer review based on need.
- You will provide clinical advice and education to the DIT, hospital services, Pinnacle Midlands Health Network (PMHN) extended care team, general practice teams and the health provider community, enhancing their understanding of effective nutrition intervention for people with diabetes.
- You will provide cover during times of planned/unplanned leave where practicable, to your Diabetes Specialist Dietitian colleague(s) that may be employed by another organisation but fulfil the same role.
- Work in partnership with the DIT and other key stakeholders to understand the health literacy needs of the population, and then design and deliver with the DIT appropriate health literacy options. This includes the review and development of resources which are culturally appropriate for patients and their whanau.
- Continuous quality service improvement will underpin the service that you provide. You will work on projects that drive improvement in best practice dietetic support for people with diabetes, striving for a sustainable and effective dietetic service that results in positive outcomes for patients. You will also contribute to quality improvement initiatives as led by the DIT.

Communication

- Records of your assessment, education and monitoring of patients under your care will be accurate, clear and concise.
- You will communicate accurately, effectively and in a timely manner with referrers including the DIT, hospital services, general practice, PMHN extended care team and community based providers.
- Developing and maintaining effective relationships with the DIT, hospital services, PMHN extended care team, general practice teams and community based services is a key focus area to ensure cohesion in the service and co-ordination appropriate for patients receiving your care.

Self-development

- You will use the National Integrated Knowledge, Skills and Career Framework for Diabetes Dietitians as a basis for your learning and development objectives, to become competent in all areas within the Specialist Diabetes Dietitian level.
- You will engage in and complete the NZ Continuing Competency Programme for Dietitians through the Dietitians Board in order to maintain competency and attain your Annual Practising Certificate.
- Attend relevant conferences, teleconferences, seminars or workshops to support continuing competency in diabetes and related conditions.

Your key skills and experience

Education / training

- NZ Registered Dietitian with current annual practising certificate – NZ Dietitians Board
- Dietitian Prescriber Endorsement (or working towards this)
- Masters of Dietetics, Postgraduate Diploma in Dietetics or equivalent as recognised by the NZ Dietitians Registration Board
- Current full drivers' licence
- Actively involved in NZ Continuing Competency Programme for Dietitians

Experience

- Minimum 5 years' post-graduate experience
- Experience in clinical, primary care and community settings
- Recent clinical knowledge of diabetes and best-practice guidelines in Medical Nutrition Therapy (MNT) related to Type 1 diabetes, Type 2 diabetes on insulin, other complex Type 2 diabetes cases, youth and young adults, diabetes in pregnancy, advanced carbohydrate counting, insulin pump therapy and glucose monitoring technology.
- Service development/process improvement/change management

Knowledge / skills

- Diabetes related clinical knowledge, practice and expertise
- Excellent communication, problem solving, judgement and reasoning skills
- Ability to develop and maintain key relationships within a multidisciplinary team and with external agencies
- Effective time management, ability to independently prioritise and manage a varied workload
- Confidence in public speaking, educating health professionals and patients in groups
- Proficiency with Microsoft packages and competency using video conferencing (e.g. Teams, Zoom)

Organisational citizenship responsibilities

Cultural responsiveness

- Inclusive of all cultures and respect diverse beliefs, protocols and practices.
- Commitment to the values, concepts, and principles of Tikanga Māori.
- Understanding and relevant knowledge of Te Tiriti o Waitangi.
- A commitment to achieving health equity.

Health, safety and wellbeing

- We all work together to make sure we have a safe and productive environment for all employees, contractors and visitors. As a Pinnacle employee, you are expected to:
    - immediately report any unsafe work conditions, accidents, injuries or near misses to your manager and liaise with admin to complete the corresponding documentation
    - be aware of and abide by all health and safety policies and emergency procedures
    - take reasonable care of your own health and safety and ensure that your actions don't cause harm to yourself or others
    - cooperate and encourage all employees to create and maintain a healthy and safety work environment.

Quality and continuous improvement

- Actively participate in continuous quality improvement and risk management, both at a professional and team level, by consistently seeking ways to continually improve processes and procedures and identifying opportunities to minimise risks.

Ko wai mātou

Who we are – Strong and growing

Kia hauora te katoa, kia puaawai te katoa - Everyone healthy, everyone thriving.

Pinnacle Incorporated is the parent in a group of not-for-profit primary care focused organisations. We're a network of forward-thinking general practices that manage the healthcare of nearly half a million people enrolled with 86 practices in Tairāwhiti, Taranaki, Rotorua, Taupō-Turangi, Thames-Coromandel and Waikato.

We are committed to becoming a bi-cultural organisation.

Pinnacle Midlands Health Network is the operational arm of the group, designed to deliver PHO functions and support all Pinnacle general practices to thrive.

Takohanga

Our responsibility – We are committed

E hara i te mea, he kotahi tangata nana i whataara te po - It is not for one person but for everyone to take responsibility.

Our strategy is aligned to international, national and local priorities including the United Nations Sustainable Development Goals, the New Zealand Health Strategy, Te Tiriti o Waitangi and Whakamaua: Māori Health Action Plan 2020-2025.

We have made an explicit commitment to Māori and our communities to improve equity of health and wellbeing, in accordance with Te Tiriti o Waitangi. We have also made an equity commitment to our Pasifika population.

The individual and whānau experience is of fundamental importance. People in our communities have different levels of privilege and therefore different levels of ability to access the health care they need. We recognise different approaches are needed to ensure equitable health outcomes for all.

We are powerful advocates for primary care services that support people and communities to thrive. We recognise the role of general practice as a hub and shelter within the community – a place to seek help, receive ongoing care from a team that knows you and take action to live well.
We can't do this alone. We are committed to partnership, to collaboration, to integration and to walking alongside others for the collective good.

Our shared commitment

At the time of commencing in the role, your manager will discuss this position description with you to help you better understand your place in the organisation. As part of this process you will also be set key objectives which align to our strategic goals. By accepting this role, you commit to delivering on our responsibility and demonstrating who we are and what we believe in.

We acknowledge that due to the nature of the work here, a position may change its focus from time to time. At times we need to adapt to our changing environment. Therefore, this position description is a living document and may be updated to reflect additional or different needs. Accordingly, you commit to undertaking any other duties you are able to do as agreed.

Signed _____ Date _____

Manager Signed _____ Date _____