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Abstract

UTILIZATION OF DIETETIC TECHNICIANS IN HOSPITALS

by Elmer Beck

There is a shortage of educationally qualified dietetic technician personnel in the health care industry. The job opportunities for dietetic technicians exceed the supply. Because of this shortage and the need to deliver high quality nutritional care to individuals and groups, dietitians should function at the highest level of professional competency. To accomplish this goal requires delegating certain routine task functions to the dietetic technician.

The purpose of this research was to determine the degree of change between 1973 to 1977 in the willingness of dietitians to delegate task functions to the dietetic technician. The instrument used to collect data in this research was a questionnaire which was distributed to the 123 hospitals in the sample utilized in the research by Lumsden (1973).

Dietetic technicians as respondents were included in this research in order to find out whether or not they were performing the task functions dietitians claimed were delegated to them. The technicians were asked to indicate task functions they were performing and to answer the question "Do you feel adequately trained to perform these task functions?".

Findings from this research indicated that dietitians who perform both administrative and clinical functions were more willing to delegate task functions than those who performed only one of these roles. Those who performed only clinical functions were also more willing to delegate task functions than those who performed only administrative functions. The administrative dietitians reported in Lumsden's research (1973) were more willing to delegate task functions than the administrative dietitians responding in this research.

None of the technicians who responded to the questionnaire in this research were graduates from programs approved by the American Dietetic Association. On the whole dietetic technicians felt adequately trained to perform many of the task functions which were included in the questionnaire.

The concensus of opinion gathered from the comment summary of the dietitians responding is that dietetic technicians need more training and experience before more can be delegated to them.

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Graduate School

UTILIZATION OF DIETETIC TECHNICIANS IN HOSPITALS

by

Elmer Beck

A Thesis in Partial Fulfillment
of the Requirements for the Degree
Master of Science in the Field of Food Administration

June 1978

Each person whose signature appears below certifies that this thesis in his opinion is adequate, in scope and quality, as a thesis for this degree Master of Science.

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INTRODUCTION AND PURPOSE

Professionals in health care are being required to function in very specific and highly technical roles for patient care. It continues to be questioned if the professional is utilizing his education and skills most effectively.

Increasing demands for more detailed information pertaining to the management functions of all departments in the hospital result in additional pressures on the administrative department heads. Such pressures include minimizing labor costs including delegating more of the routine task functions to supportive personnel. Delegation is a well-established principle of good management and strengthens the various levels of operation in an organization if adequate upgrading of personnel is provided.¹ The dietetic technician is being educated to fill the role of supportive personnel for the dietitian.

The need to delegate certain task functions in the health care professions in order to extend professional skills and reduce health care costs is clearly recognized. Physicians are utilizing physician assistants, dentists the dental assistants, nurses licensed vocational nurses, and dietitians the dietetic technicians. By delegating certain task functions to qualified technicians, the health professional will have more time to deal with those problems

for which his training and expertise are required. Utilizing dietetic technicians can also help to relieve the current manpower shortage in the dietetics profession. Dietetic personnel requirements in hospitals over the next five to ten years will reflect the type of education provided for the dietetic technicians.

The salary levels of dietitians must be justified by the performance of task and services equivalent to their level of education and expertise. Powers² points out that the development of the paraprofessional (supportive personnel) in many areas of our society is related to a change in the nature of work. In order to provide educationally qualified dietetic technicians for health care need, the American Dietetic Association has established educational requirements for dietetic technicians which include an associate degree in academic programs and practical learning experiences.

The concern now is whether dietitians will use dietetic technicians in a supportive role or whether they will feel threatened by them. Lumsden³ (1973) reported research on the willingness of dietitians to delegate certain task functions to dietetic technicians. Data from the research indicated that dietitians were willing to delegate two-thirds of the task functions as identified on the questionnaire. There was no significant difference in the willingness to delegate between administrative and clinical dietitians.

PURPOSE OF THIS RESEARCH

This research was designed to provide a comparison with the data from Lumsden's research (1973) on the willingness of dietitians to utilize dietetic technicians, and to determine if there has been a change in willingness to delegate in the period of time from 1973 to 1977. Secondly, it was designed to determine to what extent the dietetic technicians were actually being utilized in the performance of specific task functions. Thirdly, it was designed to determine if the dietetic technician felt adequately trained to perform their specific task functions.

LITERATURE REVIEW

Manpower shortages in health care are due to population growth, more spendable income and other factors which result in a greater demand for health services. This demand is legitimized and supported by legislation which makes comprehensive health care a right for many individuals formerly unable to afford it.⁴ The use of supportive personnel increases to fill the need. The qualified dietetic technician must fill the recent demands for administrative sophistication, function as an effective member of the health care team, apply pragmatic problem-solving techniques and skills to the operation of the physical health care system, and learn to apply the skills of a dietetic professional in preventive health care.⁵

To offset the manpower shortage in the health care profession, duties must be delegated to assure that the professional capacities of dietitians are used to the greatest extent.⁶ The well educated dietetic technician is an asset to any program delivering nutritional care.⁷

There is minimal information in the literature on the delegation of duties by dietitians to supportive personnel, and very little is reported as to the duties supportive personnel perform. The overwhelming fact is that manpower shortages must be compensated for from some source to ensure more high quality care while utilizing lesser trained personnel.⁸ The delegation of tasks to lesser trained

personnel has become a necessity which, with the provision of comprehensive health services as envisioned in many of the health care delivery proposals being considered by the U.S. Congress, obviously will require the talents of a large variety of health care personnel. The development of the dietetic technician's role may be seen as a part of this change in trained manpower needs.

Lumsden (1973) reported that 62.1 per cent of administrative and 76.3 per cent of clinical dietitians were willing to delegate at least two-thirds of the identified task functions to the dietetic technician, and that there was no difference in the willingness of administrative and clinical dietitians to delegate these functions. Dietetic technicians need to be educationally qualified if they are expected to perform.

METHODS

Since a primary interest in this research was to compare the results of this research with the data from Lumsden's research in 1973, the same hospitals were selected. These hospitals all fulfilled the criteria of the research which included the following:

- (a) Membership in the American Hospital Association
- (b) Provision of general medical and surgical services
- (c) Short-term average occupancy of less than thirty days
- (d) Voluntary, non-profit, or non-profit governmental operations
- (e) A bed capacity of 150 or more
- (f) Employment of a qualified dietitian (member of the American Dietetic Association), or persons with a bachelors degree responsible for direction of the dietary department
- (g) Geographic location within the continental United States.

The same questionnaires listing task functions utilized by Lumsden (1973) were repeated and sent to dietitians as well as technicians to verify if:

1. Clinical and administrative dietitians were indeed delegating functions to clinical and administrative technicians, and

2. Administrative and clinical technicians felt adequately trained to assume these delegated functions.

Task functions selected for this research were those used in Lumsden's research (1973) and are listed in Appendix A. Task functions selected were those considered less likely to be delegated by dietitians to dietetic technicians. For each task function, the questionnaires for the dietitians asked: (a) As a dietitian, do you now do or have you done the following task functions? (b) Please categorize each function as to who should ideally perform it: dietitian, dietetic technician, or either the dietitian or dietetic technician? (c) Would it be practical to delegate these functions to a trained dietetic technician? For each task function, the questionnaire for the dietetic technicians asked: (a) As a dietetic technician, do you now do, or have you done the following task functions? (b) Please categorize each function as to who should ideally perform it: dietitian, dietetic technician, either the dietitian or dietetic technician? (c) Do you feel you have been adequately trained to do this duty?

The questionnaire for the administrative dietitians and dietetic technicians contained 24 task functions. The one for the clinical dietitians and dietetic technicians contained 27 task functions. Three task functions in the areas of planning, coordinating and controlling were included as validity checks. It was felt that a dietitian who checked

that he or she would be willing to delegate all three functions might have failed to read the question thoroughly.

The validity checks for the administrative questionnaires were: (a) Prepare budgets for both salaries and equipment; (b) Initiate departmental management by objectives program; (c) Communicate with hospital administration concerning policies and procedures for department operation. For the clinical questionnaires these were: (a) Prescribe diets for patients; (b) Direct nutritional research; (c) Hold conferences with medical team.

All questionnaires included demographic data such as age, education, A.D.A. membership and years of professional employment. The administrative dietitians' questionnaire included these questions: (a) Number of administrative dietitians, clinical dietitians, administrative dietetic technicians and clinical dietetic technicians on staff in 1973; (b) Number now on staff when survey was done (1977); and (c) Number that will be needed in 1980.

Survey Procedure

An introductory letter was sent to all hospitals in the survey. This was followed by the questionnaires: one for the chief administrative dietitian, one for the chief clinical dietitian, 2-4 questionnaires for the administrative dietetic technicians as well as clinical dietetic technicians depending on hospital size since all technicians

were to be surveyed in the sampled hospitals. The questionnaires, along with a cover letter, were sent to the director of dietary services to be distributed to all concerned. The questionnaire gave instructions that if one person was responsible for both functions, that is administrative as well as clinical, that person should complete both questionnaires.

The initial mailing was followed by telephone calls to the hospitals which did not respond within the given time. Additional questionnaires were sent, followed by another telephone call. Sixty-two of the 123 hospitals surveyed responded giving a response rate of 50.4 per cent.

Responses to the questions "Total number of administrative dietetic technicians now employed," and "Total number of clinical technicians now employed," showed that there were 15 administrative dietetic technicians and 47 clinical dietetic technicians employed in 1977 by the hospitals which responded. This gives the response rate for the technicians in hospitals that responded to the survey as follows:

- (a) Administrative dietetic technician $14/15 = 93.3\%$
- (b) Clinical dietetic technician $42/47 = 89.36\%$

It should be noted that due to the low response rate the results should be interpreted with a certain measure of caution.

RESULTS AND DISCUSSION

Delegation

The percentages of dietitians who felt it would be practical to delegate specific task functions to dietetic technicians are shown in Tables 1 and 2. A comparison with Lumsden's research is also shown. Included in these tables are the per cent responses from the technicians. The task functions are ranked from the highest to the lowest according to the current research.

The number of administrative and clinical dietitians who were willing to delegate task functions are shown in Figures 1 and 2. The average percentage delegation score for administrative dietitians was 52.6% of task functions. The average percentage delegation score for clinical dietitians was 64.4% of task functions.

The dietitians were divided into three groups--namely:

- (a) Those who filled out the administrative dietitian's questionnaire only,
- (b) Those who filled out the clinical dietitian's questionnaire only,
- (c) Those who filled out both the administrative and clinical questionnaires.

Independent t-tests were done between the groups to determine which of the groups was more willing to delegate task functions. These tests were done between the groups

Table 1. Percentage of administrative dietitians willing to delegate--current research vs. Lumsden's research; and percentage of administrative technicians actually performing vs. adequately trained to perform.

Task Function Number	Task Function ¹ Description	Current Research Per Cent Dietitians Willing to Delegate	Lumsden's Research Per Cent Dietitians Willing to Delegate	Current Research Per Cent Technicians Actually Performing	Current Research Per Cent Technicians Adequately Trained to Perform
18	Develop labor times for production of food items (work schedules)	92	92	57	86
11	Attend workshops and other continuing education programs	92	72	86	86
12	Evaluate effectiveness of patient meal service	92	*	100	86
17	Plan food production time tables	88	93	29	86
6	Delegate duties to competent individuals	83	83	100	100
24	Develop and keep up-to-date job descriptions and job specifications for all positions	83	80	50	57
16	Purchase food, equipment, and supplies according to specifications	83	72	43	86
15	Assist in the development of specifications for food, small equipment and supplies to assure quality and cost control	80	74	71	100

Task Function Number	Task Function Description	Current Research Per Cent Dietitians Willing to Delegate	Lumsden's Research Per Cent Dietitians Willing to Delegate	Current Research Per Cent Technicians Actually Performing	Current Research Per Cent Technicians Adequately Trained to Perform
5	Assist in developing plans for operation under emergency conditions	79	79	29	50
8	Utilize the ability to identify a problem, research the knowledge related to it, and make decisions about solutions	76	66	100	100
20	Develop programs for maintaining acceptable standards of safety, sanitation, maintenance and security	76	83	100	100
10	Maintain an up-to-date knowledge of subject matter through reading, classes, and interaction with technical and professional personnel	75	67	71	57
13	Participate in research studies in food management	75	71	29	71
7	Serve on department and/or hospital committees	71	84	71	71
14	Plan and evaluate acceptable menu patterns in accordance with objectives of the institution and/or department	68	67	57	100
21	Maintain effective inter-departmental relations through appropriate communications	67	*	86	86

Task Function Number	Task Function Description	Current Research Per Cent Dietitians Willing to Delegate	Lumsden's Research Per Cent Dietitians Willing to Delegate	Current Research Per Cent Technicians Actually Performing	Current Research Per Cent Technicians Adequately Trained to Perform
25	Interview and select dietetic personnel	60	48	40	67
3	Maintain a departmental operational manual. Recommend changes in policies to update	58	67	71	67
27	Recommend appropriate salary and wage increases based on performance records and evaluation	57	37	60	67
2	Establish standard procedures to carry out activities of the department in order to implement previously established policies	56	56	86	83
23	Determine staffing needs	50	37	33	57
26	Be responsible for discipline and termination when required	48	*	50	71
1	Assist in the establishment of an efficient and effective organization which integrates the long and short range goals of the department	40	25	71	83
22	Review cost control records, payroll reports, personnel records, and other pertinent reports and recommendations necessary for action	39	29	57	71

¹Task functions are ranked according to percentage of dietitians in current research willing to delegate.

*Task functions not included in Lumsden's research.

Table 2. Percentage of clinical dietitians willing to delegate--current research vs. Lumsden's research; and percentage of clinical technicians actually performing vs. adequately trained to perform.

Task Function Number	Task Function ¹ Description	Current Research Per Cent Dietitians Willing to Delegate	Lumsden's Research Per Cent Dietitians Willing to Delegate	Current Research Per Cent Technicians Actually Performing	Current Research Per Cent Technicians Adequately Trained to Perform
16	Provide assistance in menu selection to new patients on normal diets or routine diet modifications	100	95	93	100
13	Determine food preferences through consultation with patient	97	95	96	100
26	Consult routinely with registered dietitian in the care of the patient	97	82	96	100
14	Instruct patient and family on routine diets	94	72	79	81
17	Observe patient's acceptance of diet and make notations on diet history	94	85	79	89
22	Supervise the preparation of special diet foods in quantity, quality, and accuracy of ingredients	94	89	43	68
23	Plan and supervise nourishments and between meal feedings	94	95	86	89
20*	Verify accuracy of diet as received by patients	94	90	86	89

Task Function Number	Task Function Description	Current Research Per Cent Dietitians Willing to Delegate	Lumsden's Research Per Cent Dietitians Willing to Delegate	Current Research Per Cent Technicians Actually Performing	Current Research Per Cent Technicians Adequately Trained to Perform
4	Participate in community activities	91	73	45	68
10	Take accurate and informative diet history	91	85	69	85
18	Maintain accurate and timely systems for transmission of patient diet orders and changes	90	91	93	93
7	Help coordinate general office management	88	88	75	81
2	Attend workshops and other continuing education programs	81	64	72	92
11	Interpret physician's routine diet orders and modify diet according to diet patterns	81	71	82	85
29	Consider the various ethnic and sociocultural groups, lifestyles and environment in planning for the nutritional needs of individuals, families or groups	81	65	44	65
27	Plan nutritious, attractive food combinations acceptable to various individuals, families or groups at different economic levels utilizing knowledge of food composition, flavors, colors, texture, temperatures, shape and consistency	81	68	60	74

Task Function Number	Task Function Description	Current Research Per Cent Dietitians Willing to Delegate	Lumsden's Research Per Cent Dietitians Willing to Delegate	Current Research Per Cent Technicians Actually Performing	Current Research Per Cent Technicians Adequately Trained to Perform
9	Participate in departmental or staff meetings	77	70	75	88
19	Assist in the establishment of accurate and timely food delivery systems	77	91	75	78
28	Utilize knowledge of food composition in designing dietary plans for meeting the physiological needs of individuals and groups throughout the life cycle	74	57	48	62
6	Serve on department and/or institutional committees	72	68	43	63
8	Utilize the ability to identify a problem, research the knowledge related to it, and make decisions about solutions	69	58	68	72
30	Maintain an up-to-date knowledge of subject matter through reading, classes, and interaction with technical and professional personnel	68	67	81	81
5	Organize and direct community nutrition programs	59	*	0	31
3	Participate in research studies in nutritional care	56	49	14	57

Task Function Number	Task Function Description	Current Research Per Cent Dietitians Willing to Delegate	Lumsden's Research Per Cent Dietitians Willing to Delegate	Current Research Per Cent Technicians Actually Performing	Current Research Per Cent Technicians Adequately Trained to Perform
25	Participate with nursing service and special services in establishing and reviewing procedures relating to dietary	43	30	48	56
24	Evaluate effectiveness in nutritional care for patients	41	*	63	69
21	Plan and direct nutrition conference	26	*	11	22

¹Task functions are ranked according to percentage of dietitians in current research willing to delegate.

*Task functions not included in Lumsden's research.

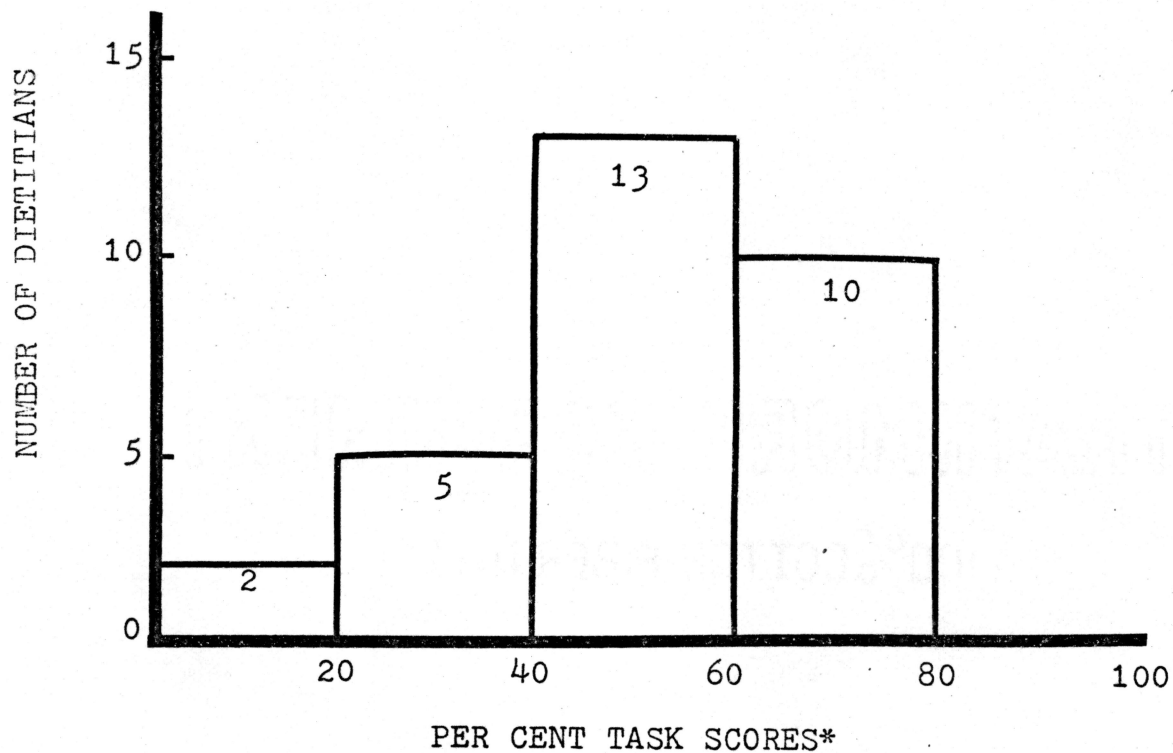


Figure 1. Distribution of task scores for administrative dietitians.

*Number of duties willing to delegate divided by total number of duties x 100.

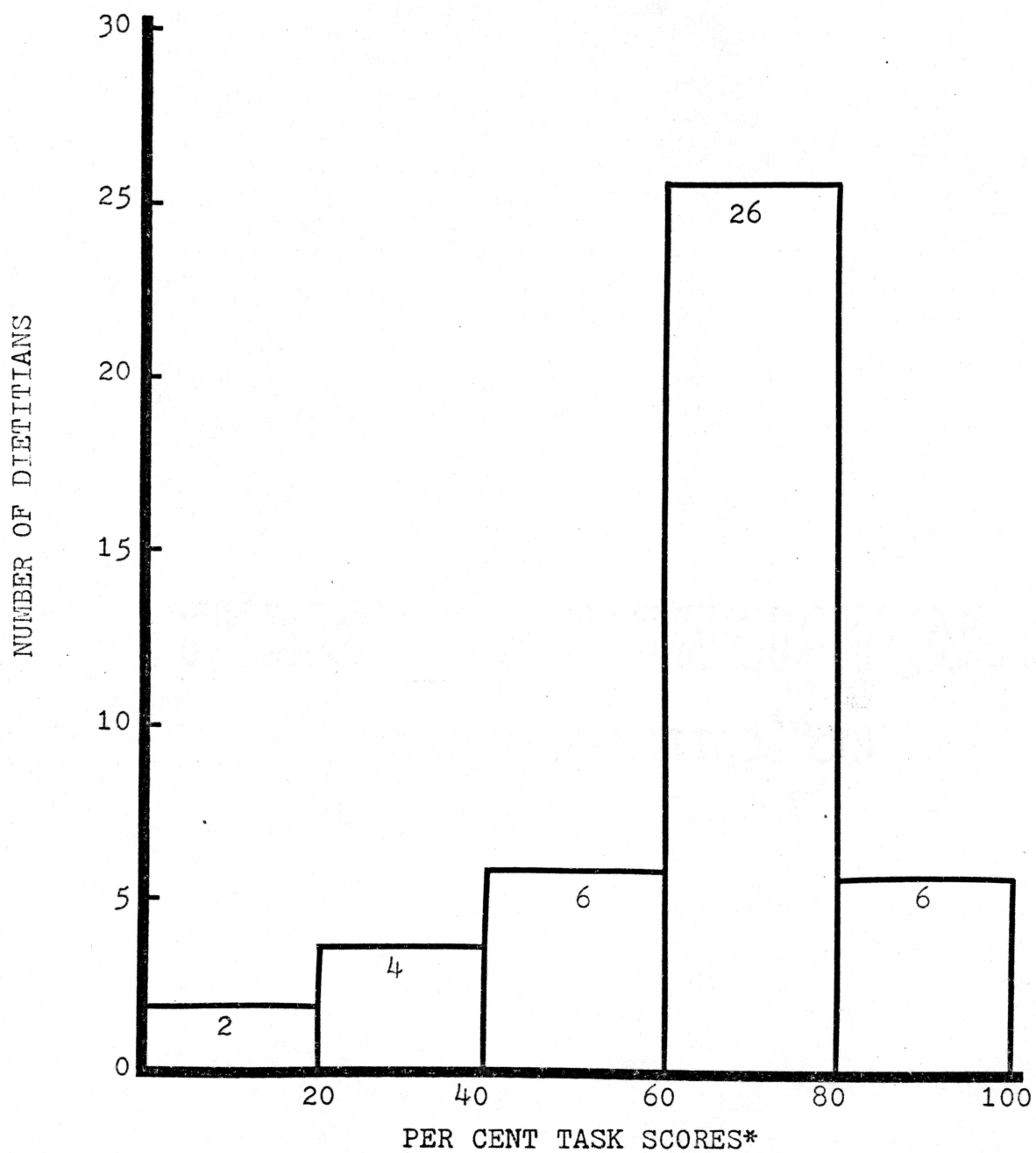


Figure 2. Distribution of task scores for clinical dietitians.

*Number of duties willing to delegate divided by total number of duties x 100.

as follows:

Case (1) Those who perform administrative task functions only with those who perform clinical task functions only.

Case (2) Those who perform administrative task functions only with those who perform both administrative and clinical task functions.

Case (3) Those who perform clinical task functions only with those who perform both administrative and clinical task functions.

Case (1) above had the mean delegation score for administrative dietitians of 52.6%, and that of the clinical dietitians 64.4% which means that clinical dietitians were more willing to delegate task functions than were administrative dietitians. These mean scores were significantly different at .05 level of significance.

Case (2) above had a mean delegation score for administrative dietitians of 52.6% and that of those who perform both administrative and clinical task functions of 63.6% which means that those dietitians who function in both the administrative and clinical areas were more willing to delegate task functions than those who function as administrative dietitians only. The mean scores were significantly different at .05 level of significance.

Case (3) above had a mean delegation score for those who function as clinical dietitians only of 64.4% and a

delegation score of 63.6% for those who function as both administrative and clinical dietitians. There was no significant difference between these scores at the .05 level of significance which means that of the two groups, neither was more willing to delegate task functions.

There were 8 administrative and 11 clinical dietitians who answered questionnaires in both Lumsden's and this research. These were removed in order to perform independent t-tests between the administrative dietitians of Lumsden's research and this research. The same procedure was followed in the case of the clinical dietitians.

Administrative dietitians in Lumsden's research had a mean delegation score of 62.1% and those in this research 51.7%, indicating that at the .05 level of significance administrative dietitians in Lumsden's research were more willing to delegate task functions than those who responded in this research.

Comparing the clinical dietitians of both researches, it was shown that in Lumsden's research the mean delegation score was 60.8% and in this research 64.8%, indicating that at the .05 level of significance there was no significant difference in the willingness to delegate task functions.

Paired t-tests were done between the 8 administrative and 11 clinical dietitians who answered questionnaires in both Lumsden's and in this research to see whether there

were changes in the willingness of dietitians to delegate task functions. These tests were done at the .05 level of significance, and no significant difference was found in the willingness of either group to delegate task functions.

Staffing trends are shown in Figures 3, 4, 5 and 6. The area with the largest projected need for 1980 is that of the clinical dietetic technician, and the area with the least projected need that of the administrative dietitian. There was, however, a projected need in all of the areas; but with a rather slow rate of growth. Due to the small sample size it was not possible to determine from this research any valid reasons for these trends.

It can be seen from Table 1, Administrative Task Functions, that task functions 11, 6, 24, 8, 20, 7, 21, 27 and 1 were task functions dietitians were more or less willing to delegate to dietetic technicians. The dietetic technicians claimed they were adequately trained and performing these task functions. On the other hand administrative dietitians were willing to delegate task functions 18, 17, 16, 15, 5, 13, 14, 25, 23 and 26 to technicians who felt adequately trained, yet were not actually performing these task functions. There was a reversal to this in task functions 12, 10, 3 and 2, where dietitians were willing to delegate, but the percentage of technicians who feel adequately trained was less than those who were actually performing these task functions.

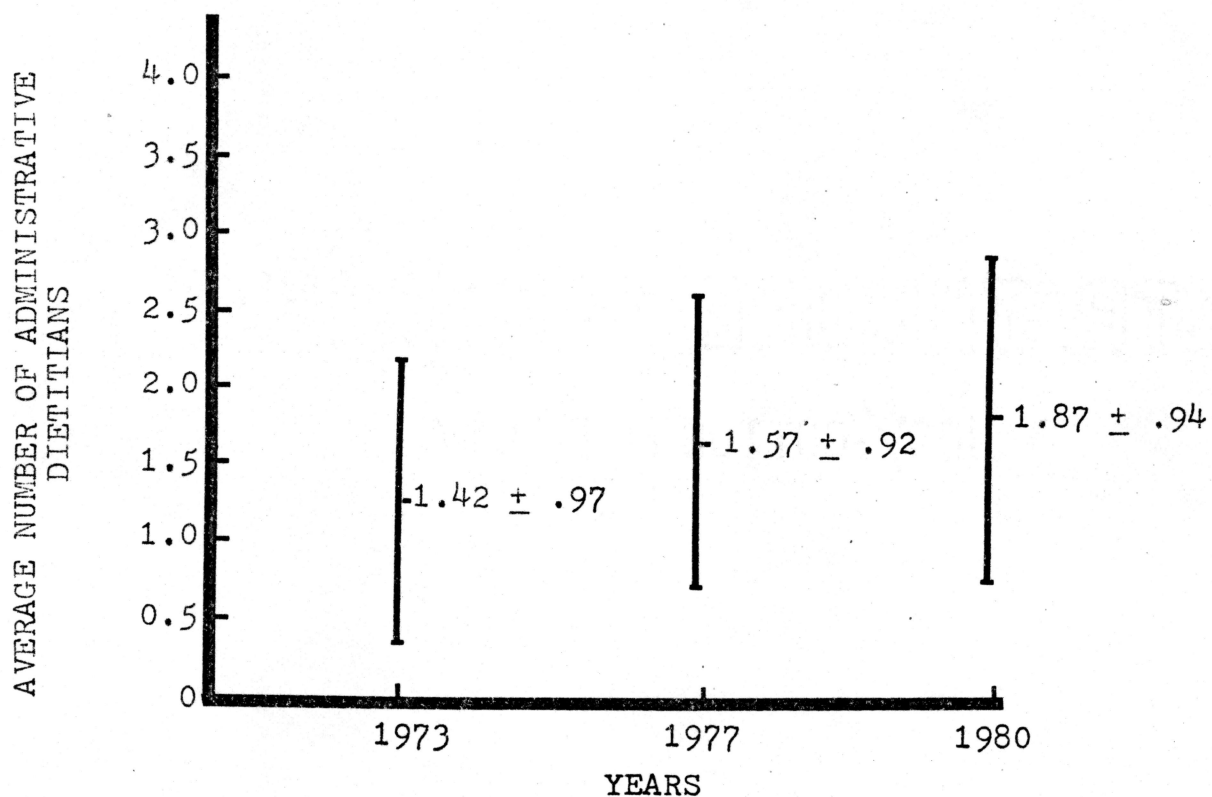


Figure 3. The trend of the average number of administrative dietitians per hospital as indicated by surveyed hospitals.

The vertical lines represent one standard deviation from the mean.

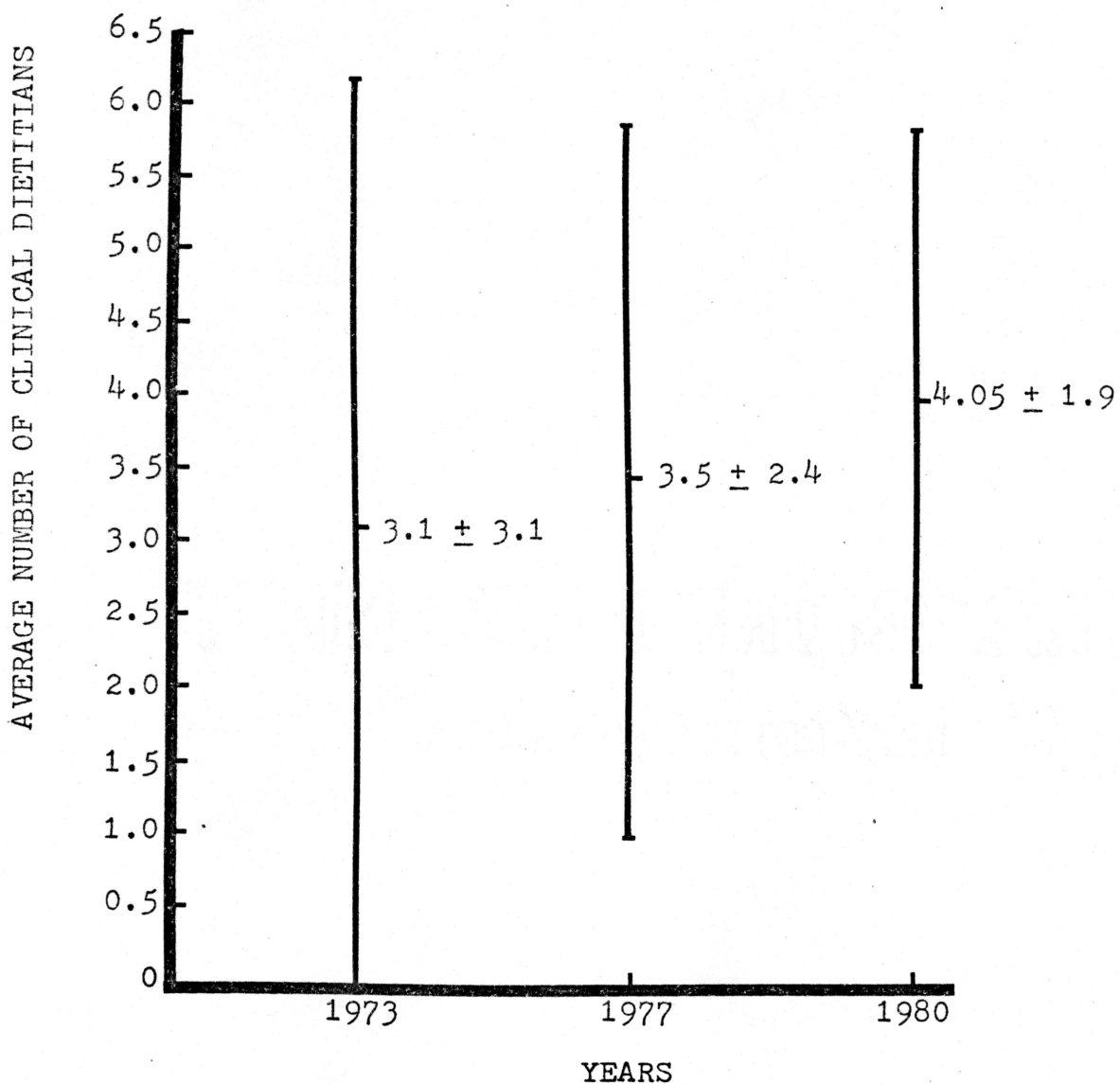


Figure 4. The trend of the average number of clinical dietitians per hospital as indicated by surveyed hospitals.

The vertical lines represent one standard deviation from the mean.

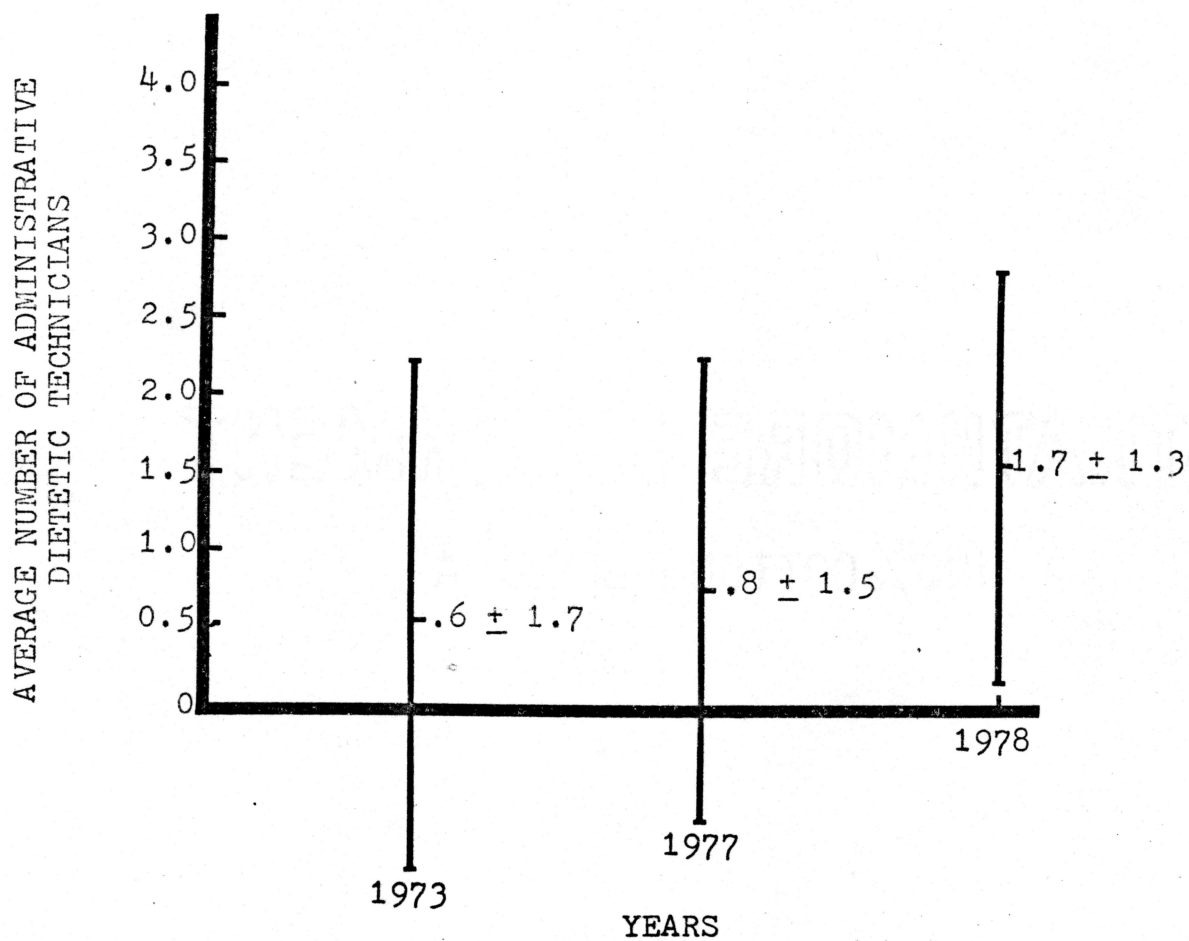


Figure 5. The trend of the average number of administrative dietetic technicians per hospital as indicated by surveyed hospitals.

The vertical lines represent one standard deviation from the mean.

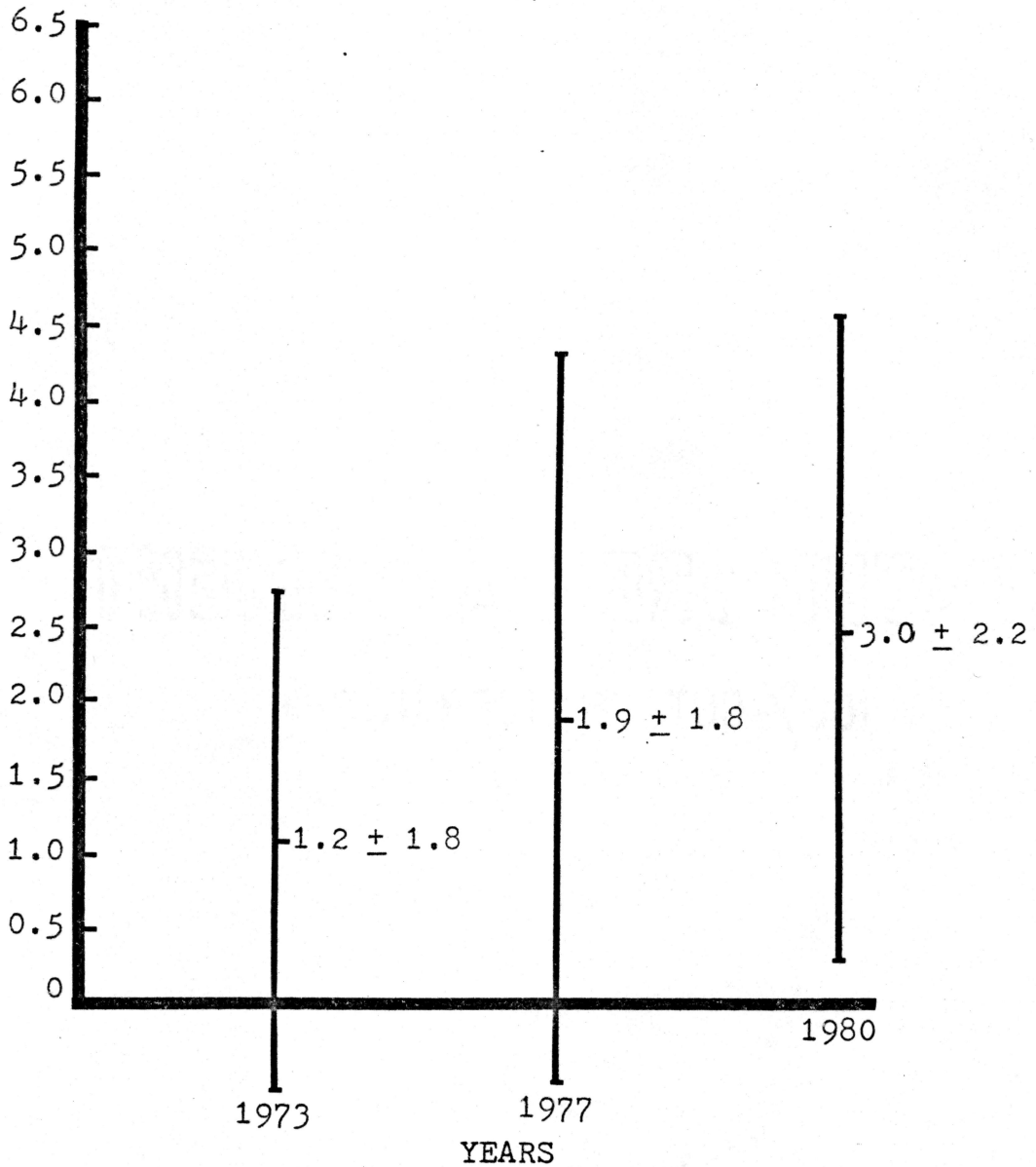


Figure 6. The trend of the average number of clinical dietetic technicians per hospital as indicated by surveyed hospitals.

The vertical lines represent one standard deviation from the mean.

Task functions 12, 10, 3 and 2 seemed not to have been clearly understood by the dietetic technicians. There was some ambiguity in the task function description. For example task function 12, "Evaluate effectiveness of patient meal service." No definition was given for effectiveness. To maintain an up-to-date knowledge of subject matter through reading, classes, and interaction with technical and professional personnel, task function 10 could not be truly delegated, as knowledge cannot be delegated. The dietetic technicians may have done this on their own initiative. The same would be true for task function 3, "Maintain a departmental operational manual, recommend changes in policies to up-date" could have been interpreted to mean any policy change recommendation made by the dietetic technician would fulfill the requirements for this task function. "Establish standard procedures to carry out activities of the department in order to implement previously established policies," task function 2 had the identical problem as task function 3. Even though the input may be in one small area, it would accomplish the requirements of the task function.

A clarification of task functions was needed in order to obtain more selective and specific responses.

Similar results were found in the clinical section of task functions listed in Table 2. Clinical dietitians were willing to delegate task functions 16, 13, 26, 14, 17, 23, 4, 10, 18, 7, 11, 27, 9, 19, 8, 30, 25, 24 and 21 to

dietetic technicians who felt adequately trained, and who were actually performing these tasks. Clinical dietitians were also willing to delegate task functions 22, 4, 2, 29, 28, 6, 5 and 3 to dietetic technicians who felt adequately trained, but who are not actually performing these task functions. It could be that the workload was not sufficiently heavy to warrant delegation of task functions. Reversal of this is seen in task function 20 where 94 per cent of clinical dietitians were willing to delegate, 93 per cent of dietetic technicians were actually performing this task function.

The varied responses to this may have been due to its ambiguity. The task function, "Verify accuracy of diet as received by patients," could be interpreted three ways: first, are the food items on the patient's tray the same as those marked on the patient's menu? Second, does this diet as received by the patient meet the criteria of the diet prescribed by the physician? for example, soft, puree or general? Third, are the caloric levels the same? Here the dietetic technician must calculate the total number of calories received by the patient and verify it against the level prescribed by the physician. Because the task function was not clearly stated, the meaning of the task function could have been interpreted in three different ways.

In checking the comments from Lumsden's research, there were some favorable statements made regarding dietetic technicians, but the concensus indicated a need for additional training. Comments included "They can help but cannot be responsible," "Not sufficient background," "No depth of understanding," "Will need much supervision," to quote a few. The same response was evident in the current research. On the other hand the concensus of dietetic technicians, both administrative and clinical, was that they were inadequately trained, but with training and experience they could perform the task functions (Comment Summary, Appendix B).

Task functions 4, 9 and 19 which were the validity checks for administrative dietitians were removed before compilation of comments. An in-depth evaluation of the comments written by the administrative dietitians in this current research revealed the following: (a) Comments were written on 24 of the task functions. Task functions 5, 6 and 7 received no comments, leaving a total of 21 task functions with comments. (b) Of these 21 task functions, 12 stated that the dietetic technicians did not have sufficient background, had inadequate knowledge, had insufficient experience, or had inadequate training. Detailed comments which could throw some light on how administrative dietitians feel about the training of dietetic technicians were (for task functions 3, 15, 24): "Not enough experience

or training as a base," "They have not had adequate training and experience in these areas." For task functions 3 and 29, the comments were: "These duties have not been given to a dietetic technician because they have not had adequate training and experience in these areas." In the case of task functions 1, 2, 8, 10, 14, 16, 20, 21, 25, 26 and 27, administrative dietitians felt they definitely were not to be delegated. These are seen as being part of the role of the administrative dietitian. .

There were two primary comments among those of the administrative dietetic technicians as follows: "I definitely believe all these duties and the knowledge of handling them will come in time." The complete opposite was the other comment, "I was not trained for these duties." There was the possibility that these comments were written by individuals who had no technician training, or who were doing a job unrelated to their training.

Task functions 6, 17 and 20 which were validity checks for clinical dietitians were removed before compilation of comments. The chief clinical dietitians responded with more comments. Of the 27 task functions, comments on 17 were received. The responses included the following: (a) "Inadequate background," "Lack of experience," "Beyond capability," or "Not qualified educationally." (b) A closer look at a few specific task functions and the comments were: Task

function 11, "Too much responsibility is involved for one not specifically trained, and not having authority to be held responsible." Task function 21, "I do not feel that the level of their training is sufficient to equip them for decisions and planning necessary for these functions." Task function 27, "Requires a more thorough knowledge of human nutrition which a technician does not have; or the chemical, physiological and medical background cannot be totally covered in two years."

These comments all seem to point out the need to have the task functions clarified, and/or stated more specifically.

The clinical dietetic technicians were quite similar to the administrative dietetic technicians in their comments. Namely, "Not enough background in nutrition;" "Emphasis of training placed on nutritional care of the patient, not food service;" "No training in the preparation of food." Clinical dietetic technicians do feel inadequately trained for the role in which they function.

From these comments one fact was evident--dietitians, clinical or administrative, would not be willing to delegate task functions to inadequately trained dietetic technicians.

SUMMARY

Questionnaires were sent to 123 hospitals in the continental United States. These were the hospitals utilized in Lumsden's research (1973). Findings from this research indicated that dietitians who perform both administrative and clinical functions were more willing to delegate task functions than those who performed only one of these roles. Those who performed only clinical functions were also more willing to delegate task functions than those who performed only administrative functions. The administrative dietitians reported in Lumsden's research (1973) were more willing to delegate task functions than the administrative dietitians responding to this research.

Staffing trends showed a slow upward movement with the largest increase in the area of the clinical dietetic technician, and the area of least growth that of administrative dietitians.

The majority of dietetic technicians indicated they felt adequately trained to do the task functions indicated but are not performing all of them. Dietitians indicated a willingness to delegate specific task functions, yet dietetic technicians were not given the responsibility for them.

A closer look must be taken at the educational programs for training dietetic technicians in which the level of competency is critically evaluated. The task functions

should be reexamined in depth to determine whether the level of competency required to perform the task is too high. The removal of ambiguities in task function descriptions is suggested. Continuing education programs and in-service training in the form of workshops and seminars should be offered routinely by the professional organization in order to keep the dietetic technician's level of competency upgraded and at the desired level.

Research should be continued to determine how dietetic technicians view themselves and their role as members of the health care team. Additional research should also be done to determine how the dietetic technician is viewed by the dietitian with the main purpose of discovering what the dietitian expects from the dietetic technician with regards to educational background, training, experience and level of competency.

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APPENDIX A

Exhibits 1 and 2

Exhibit 1: Proposed job description, dietetic technician in food service management.

Job Summary

A technical level position under the direction of a registered dietitian, or an administrator and a consulting registered dietitian. He plans, organizes, directs and controls activities related to the management of food service in health care facilities, educational institutions, or industry.

Work Performed

I. Department Organization

- *1. Assist in the establishment of an efficient and effective organization which integrates the long and short range goals of the department.
2. Develop and maintain organization charts of the department showing responsibility and authority of all personnel.
- *3. Establish standard procedures to carry out activities of the department in order to implement previously established policies.
4. Participate in department or staff meetings.
- *5. Maintain a departmental operational manual. Recommend changes in policies to update.
6. Plan and promote an effective merchandising program for all food service.
- *7. Assist in developing plans for operation under emergency conditions.
8. Maintain effective inter- and intra-departmental communication patterns.
- *9. Delegate duties to competent individuals.
10. Serve on department and/or hospital committees.
11. Participate in community activities.

Proposed Job Description
Dietetic Technician in Food Service Management

12. Help coordinate general office management.
13. Study food service practices and facilities and make recommendations for improvement and replacement of equipment.
- *14. Utilize the ability to identify a problem, research the knowledge related to it, and make decisions about solutions.
- *15. Maintain an up-to-date knowledge of subject matter through reading, classes, and interaction with technical and professional personnel.
- *16. Attend workshops and other continuing education programs.
- *17. Participate in research studies in food service management.

II. Department Operation

A. Menu Planning:

- *1. Establish acceptable menu patterns in accordance with objectives of the institution and/or department.
2. Plans nutritious, attractive food combinations utilizing knowledge of food composition, flavor, color, texture, temperature, shape, consistency and quality and cost control.
3. Participate in menu evaluation.
4. Define procedure to control menu changes.
5. Maintain menu acceptability records:
 - a. By questionnaire
 - b. By plate waste

B. Purchasing and Storage:

1. Develop program for
 - a. Testing food products and packaging
 - b. Determining quality and cost

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Dietetic Technician in Food Service Management

- *2. Assist in development of specifications for food, small equipment and supplies to assure quality and cost control.
- *3. Purchase food, equipment and supplies according to specifications.
4. Receive and inspect deliveries in accordance with specifications and quantity.
5. Maintain storage standards.
6. Determine and requisition daily food requirements and supplies to each unit.
7. Maintain inventory, storeroom and purchase records for food, equipment and supplies.

C. Food Production:

1. Implement volume food production system to insure quality and cost control.
2. Develop and maintain recipe standardization program.
- *3. Plan food production time tables.
- *4. Develop labor times for production of food items (work schedules).
5. Maintain approved standards for food preparation.
6. Plan for utilization of held-over foods.
7. Withdraw goods when spoilage is suspected.

D. Sanitation, Safety and Maintenance:

- *1. Develop programs for maintaining acceptable standards of safety, sanitation, and maintenance and security.
2. Develop procedures to achieve standards.
3. Schedule work assignments and personnel.

Proposed Job Description
Dietetic Technician in Food Service Management

4. Maintain standards of employee dress, appearance and personal habits.
5. Establish guidelines for safety programs:
 - a. Safety committee
 - b. Safety procedures
 - c. Training programs

E. Financial Management:

1. Maintain records for budget and cost control.
- *2. Review cost control records, payroll reports, personnel records, and other pertinent reports and recommendations necessary for action.
3. Determine units of service performed for past periods are based on labor hours and food production records.
4. Compare supplies, labor, and units of service for time period prior to the immediate past period and account for differences.
5. Establish a pricing system for all food sales.
6. Determine charges for special meal or function.

F. Personnel Selection and Utilization:

- *1. Determine staffing needs.
- *2. Develop and keep up-to-date job descriptions and job specifications for all positions.
3. Establish procedures for effective personnel utilization.
4. Work with administration to establish an equitable salary and wage structure.
- *5. Interview and select dietetic personnel.
6. Evaluate performance of department personnel.
- *7. Recommend appropriate salary and wage incentives based on performance records and evaluation.

Proposed Job Description
Dietetic Technician in Food Service Management

8. Prepare and coordinate work and time schedules for dietetic personnel.
9. Develop rapport with all personnel to improve labor relations.
10. Maintain time and/or attendance records.
11. Provide competent supervision to assure each task is performed.
12. Conduct in-service training program for dietetic personnel to improve job performance and impart new knowledge.

G. Nutritional Care Program:

1. Write routine modified diets according to established patterns.
2. Visit with patients.
3. Plan and supervise nourishments, and between meal feedings.
4. Provide assistance in menu selection to new patients on house diets.
5. Maintain a system for the transmission of patients' diet orders and changes.
6. Consult routinely with Registered Dietitian responsible for the therapeutic diet modifications.
7. Participate with nursing service and special services in establishing and reviewing procedures relating to dietary.

The functions of a Dietetic Technician are likely to vary according to their successful employment in preliminary positions, the type and size of the institution, and the needs of the food service department. In a broad sense, his duties reflect the extent of the supervision he receives, in particular, whether it is direct or general.

Qualifications: The satisfactory completion of an associate degree program which meets the standards established by the

Proposed Job Description
Dietetic Technician in Food Service Management

American Dietetic Association.

Supervised by: Registered Dietitian, or Administrator and
Consulting Dietitian.

*Task functions selected for questionnaire

Exhibit 2: Job description for dietetic technician in nutritional care.

Job Summary

A technical level position under the direction of a registered dietitian or nutritionist who will participate in a program of nutritional care of individuals, families, or groups, and in the treatment of patients requiring diet modifications.

Work Performed

A. General

- *1. Plans nutritious, attractive food combinations acceptable to various individuals, families or groups at different economic levels utilizing knowledge of food composition, flavors, colors, texture, temperatures, shape and consistency.
- *2. Utilizes knowledge of food composition in designing dietary plans for meeting the physiological needs of individuals and groups throughout the life cycle.
- *3. Considers the various ethnic and socio-cultural groups, life styles and environment in planning for the nutritional needs of individuals, families or groups.
- *4. Maintains an up-to-date knowledge of subject matter through reading, classes, and interaction with technical and professional personnel.
- *5. Attend workshops and other continuing education programs.
- *6. Participates in research studies in nutritional care.
- *7. Participates in community activities.
- *8. Serves on department and/or institutional committees.
- *9. Helps coordinate general office management.

Job Description
Dietetic Technician in Nutritional Care

- *10. Utilize the ability to identify a problem, research the knowledge related to it, and make decisions about solutions.
- *11. Participates in departmental or staff meetings.

B. Health Care Facilities

- *1. Take accurate and informative diet history records.
- *2. Interpret physician's routine diet orders and modify diet according to diet patterns.
- *3. Determine food preferences through consultation with patient.
- *4. Instruct patient and family on routine diets.
- *5. Provide assistance in menu selection to new patients on normal diets or routine diet modifications.
- *6. Observe patients' acceptance of diet and make notations on diet history.
- *7. Maintain accurate and timely systems for transmission of patient diet, orders and changes.
- *8. Assist in the establishment of accurate and timely food delivery system.
- *9. Verify accuracy of diet as received by patients.
- *10. Supervise the preparation of special diet foods in quantity, quality, and accuracy of ingredients.
- *11. Plan and supervise nourishments and between meal feedings.
- *12. Participate with nursing service and special services in establishing and reviewing procedures relating to dietary.
- *13. Consult routinely with registered dietitian in the care of the patient.

C. Community Health Care

- 1. Instruct the individual, family or group in normal

Job Description
Dietetic Technician in Nutritional Care

nutrition, food buying and food preparation.

2. Support the Public Health Nurse and Nutritionist in a community health program.
3. Prepare and use visual aids in the instruction on normal nutrition or routine diet modifications.
4. Utilize techniques of psychology to overcome resistance of individuals or groups to community nutrition programs.
5. Refer individuals to local food assistance programs, nutrition clinics, and other programs in order to maintain an adequate level of nutrition as an individual, family or group.
6. May work with public school systems to bring educational programs in nutrition to the students.

The functions of a Dietetic Technician are likely to vary according to the successful employment in preliminary positions, type or size of the institution, and the needs of the institution or community. In a broad sense, his duties reflect the extent of the supervision he receives; in particular, whether it is direct or general.

Qualifications

Satisfactory completion of an associate degree program which meets the standards established by the American Dietetic Association.

Job Relationships

Because the work covers a variety of functions, the technician needs to be aware of his role in relation to people in his and in other departments and agencies.

Supervised by: Registered Dietitian or Nutritionist

Supervise: Dietetic workers, clerks, community volunteers

Duties may: Be in specific areas, or in a combination of areas, depending upon the size of the

Job Description
Dietetic Technician in Nutritional Care
institution or program.

*Task functions selected for questionnaire

APPENDIX B
Comment Summary

CHIEF ADMINISTRATIVE DIETITIAN

Question 18, Assist in the establishment of an efficient and effective organization which integrates the long short-range goals of the department.

Requires strong background in all areas of dietetics.

All policies and procedures should be set by the department head.

Assist with, however ultimate responsibility for department goals cannot be delegated.

Not practical, most are first line supervisor, not within their background to initiate massive program.

Initially the department head should meet with personnel on goal planning.

May not have enough knowledge of total department for management input.

Technician may not have adequate knowledge.

I consider these tasks are responsibility of the administrative dietitian and should not be delegated.

All of these decisions require background not really given to the technician. In some rare cases, I have known students who would be able to accomplish these tasks, but they were experienced in my opinion.

Question 19, Establish standard procedures to carry out activities of the department in order to implement previously established policies.

All of these decisions require background not really given to the technician.

May not have enough knowledge of total department for management input.

Appointment and policy development cannot be delegated.

All policies and procedures should be set by the department head.

Are tasks that should be done by the one in charge of the department.

Question 20, Maintain a departmental operational manual. Recommend changes in policies to update.

Are tasks that should be done by the one in charge of the department.

Not enough experience or training as a base. Not all technicians as sharp and able as some. Might change my mind should the individual warrant it.

These duties have not been given to a dietetic technician because they have not had adequate training and experience in these areas.

Not practical, most are first line supervisor, not within their background to initiate massive program.

Dietetic technician could assist.

Question 21, Prepare budgets for both salaries and equipment.

All of these decisions require background not really given to the technician.

This is always done by department head with the administration.

I consider these tasks are responsibility of the administrative dietitian and should not be delegated.

Entire budget, no; because of confidentiality of information.

I feel that the department head should develop the budget with suggestions from subordinates as to items that need to be purchased.

Responsibility lies with dietitian.

May not have enough knowledge of total department for management input.

The chief dietitian should plan budget with help of others in department, but she should be in charge--better educated for this activity.

Department heads have all the information necessary to make final budgetary decision.

These duties have not been given to a dietetic technician because they have not had adequate training and experience in these areas.

Budget and staffing needs, main responsibilities lie with department head.

Not enough experience or training as a base. Not all technicians as sharp and able as some.

Are tasks that should be done by the one in charge of the department.

Could assist.

Budget too detailed for technician to write.

Question 25, Utilize the ability to identify a problem, research the knowledge related to it, and make decisions about solutions.

I consider these tasks are responsibility of the administrative dietitian and should not be delegated.

Question 26, Initiate departmental Management by Objectives program.

All of these decisions require background not really given to the technician.

In my opinion, Management by Objectives needs to be initiated at the very top in order to be effective.

I consider these tasks are responsibility of the administrative dietitian and should not be delegated.

Responsibility of department head.

Managers should decide management philosophy.

May not have enough knowledge of total department for management input.

Management by Objectives program should be initiated by director of department.

Administrative dietitian has better background in management techniques.

These duties have not been given to a dietetic technician because they have not had adequate training and experience in these areas.

All policies and procedures should be set by the department head.

Are tasks that should be done by the one in charge of the department.

Question 27, Maintain an up-to-date knowledge of subject matter through reading, classes, and interaction with technical and professional personnel.

Are tasks that should be done by the one in charge of the department.

Maintaining knowledge cannot be delegated.

Both should do this.

Question 28, Attend workshops and other continuing education programs.

Both should do this.

Question 29, Evaluate effectiveness of patient meal service.

These duties have not been given to a dietetic technician because they have not had adequate training and experience in these areas.

Question 30, Participate in research studies in food service management.

Dietetic technician would not have background in small institution.

Question 31, Plan and evaluate acceptable menu patterns in accordance with objectives of the institution and/or department.

These duties have not been given to a dietetic technician because they have not had adequate training and experience in these areas.

Responsibility lies with dietitian.

Insufficient training.

All of these decisions require background not really given to the technician.

Question 32, Assists in development of specifications for food, small equipment and supplies to assure quality and cost control.

Not enough experience or training as a base. Not all technicians as sharp and able as some.

All of these decisions require background not really given to the technician.

Question 33, Purchase food, equipment and supplies according to specifications.

Better background and better preparation for this responsibility.

Responsibility lies with dietitian.

Question 34, Plan food production time tables.

Need more experience in production.

Question 35, Develop labor times for production of food items (work schedules).

Not practical, most are first line supervisor not within their background to initiate massive program.

Need more experience.

Question 36, Communicate with hospital administration concerning policies and procedures for departmental operation.

Hospital administration don't have time for everyone to be sending policy information to them.

Role of department head.

Administration wants to deal with the higher management positions as a rule. Technicians could be sent as a representative on occasion.

Department head should know what is going on.

These duties have not been given to a dietetic technician because they have not had adequate training and experience in these areas.

Responsibility of director to communicate with administration. They can't listen to everyone.

Dietitian should be responsible for this because of organization chart.

I feel this type of interaction should come from a higher level of management.

Dietitians must be totally familiar with this, to run department efficiently.

I consider these tasks are responsibility of the administrative dietitian and should not be delegated.

Technicians directly responsible to director--director responsible to administration.

Question 37, Develop programs for maintaining acceptable standards of safety, sanitation, maintenance and security.

All policies and procedures should be set by the department head.

Question 38, Maintain effective interdepartmental relations through appropriate communications.

Maintaining relations cannot be delegated.

The department head should be responsible for good communication in department.

Do not view this as technicians' role.

Question 39, Review cost control records, payroll reports, personnel records, and other pertinent reports and make recommendations necessary for action.

Technicians could review and make recommendations, but the dietitian can only make the final decisions as to plan of action.

Department head should know what is going on.

Portions of this are too confidential to share carte blanche.

These records should be kept by chief dietitian.

Should be responsibility of food service director.

I feel that payroll and personnel records should be seen only by department heads. There is less chance of stories being spread to other employees about a particular employee.

This is confidential information.

Question 40, Determine staffing needs.

Cannot delegate staffing decisions, same as budgetary.

Question 41, Develop and keep up-to-date job descriptions and job specifications for all positions.

Not enough experience or training as a base. Not all technicians as sharp and able as some.

Question 42, Interview and select dietetic personnel.

I feel that this type of interaction should come from a higher level.

Better background and chief dietitian is responsible for all activities in department--so should make personnel decision.

Want control over who does work.

Questionable--whoever hires should terminate or discipline.

Question 43, Be responsible for discipline and termination when required.

Termination is a last resort act and cannot be delegated to anyone but the dietitian.

Questionable--whoever hires should terminate or discipline.

Discipline can be delegated; termination must include the director.

Better background and chief dietitian is responsible for all activities in department so should make personnel decision.

Higher level of management.

The dietitian should support the recommendations of the technicians, but her's should be final.

Could recommend but should be finalized by dietitian in conjunction with personnel department.

Question 44, Recommend appropriate salary and wage incentives based on performance records and evaluation.

Less risk of favoritism.

Responsibility should rest on dietitian's shoulders.

May not have enough knowledge of total department for management input.

The final determination should be made by food service director.

Not enough experience or training as a base. Not all technicians as sharp and able as some.

Final decisions regarding salary to be established by a dietitian to give balance to all salary scales.

CHIEF CLINICAL DIETITIAN

Question 6, Prescribe diets for patients.

Doctor prescribes diets.

R.D's. having problems in some areas with this--they need to get in first.

Do not feel that the level of their training is sufficient to equip them for decisions and planning necessary for these functions.

Not sufficient knowledge or training.

I am not convinced that the dietitians should take over this responsibility.

We are just now beginning to do this as dietitians, mal-practice problems.

Dietitians should do it--responsibility should not be delegated.

I feel at this time recommended changes in diet are more appropriate than prescribing. Although if we could instruct and advise, this too can be delegated in time.

Dietitians should do. Technicians wouldn't have enough background.

I wouldn't question the educational preparation for handling these tasks.

Believe dietitians have more training for this.

A thorough medical knowledge would seem to be inadequate.

Requires a person with considerable advanced training who can associate disease states and nutrition requirements.

These all involve major responsibilities, which I do not feel should be delegated as one needs more training and experience than a technician has.

You need a trained background to do this and to date many dietitians are not doing this.

Background training may not be comprehensive enough to prescribe diets--may make recommendations.

Any prescribing of diet should be the function of the dietitian or doctor only.

Background inadequate.

Not enough knowledge in depth.

Not enough background or education.

Lacking educational background.

Could not be delegated to a dietetic technician. Additional courses are needed, not a diploma--but four years of related work should be mandatory before the diet technician can effectively perform these duties.

Function not even part of dietitian realm yet. Hardly think medical team would accept order from dietitian.

Too technical and involved.

Only physician do this, perhaps a dietitian in the future.

The technician is not adequately trained to prescribe diets for the patient, but is the dietitian?

Question 7, Attend workshops and other continuing education programs.

Both have to attend their own.

Either could be involved, but not delegated.

Depends on subject matter.

Question 8, Participate in research studies in nutritional care.

Do not feel that the level of their training is sufficient to equip them for decision and planning necessary for these functions.

No facilities at present.

I would question the educational preparation for handling

these tasks.

Either could be involved, but not delegated.

Question 10, Organize and direct community nutrition programs.

Do not feel that the level of their training is sufficient to equip them for decisions and planning necessary for these functions.

Professional person with more background better choice.

Problems of acceptance at present.

Dietitians should do, technicians wouldn't have enough background.

I wouldn't question the educational preparation for handling these tasks.

Requires a dietitian to coordinate the requirements of the community and the recipients in order to satisfy both and to plan teaching methods.

Rather complicated--unless adequately trained.

This is a function only carried out by a dietitian.

Could assist but not direct.

On large scale needs someone who has had more experience--education.

While a technician can be involved with these programs, the director requires organizational and management skills more thoroughly covered in four year program.

Perhaps some technicians would be capable of organizing and directing community nutrition programs.

Question 11, Serve on department and/or institutional committees.

Problems of acceptance at present.

Dietitians should do it--responsibility should not be delegated.

Dietitian should represent department.

From limited experience--not acceptable to other personnel.

Question 12, Help coordinate general office management.

Beyond techs area of expertise.

Question 13, Utilize the ability to identify a problem, re-search the knowledge related to it, and make decisions about solutions.

Either could be involved, but not delegated.

Seems unclear to what extent.

Comes a degree of responsibility, not appropriate to technician.

These all involve major responsibilities, which I do not feel should be delegated as one needs more training and experience than a technician usually has.

Depends on background and experience as well as nature of problems.

Time could be better used.

Would have to be selective in type of decision making.

For inexperienced technicians this is different. For someone who has years of experience, she can do it.

Question 14, Participate in departmental or staff meetings.

Dietitians should do it--responsibility should not be delegated.

Either could be involved, but not delegated.

Comes a degree of responsibility, not appropriate to technician.

Question 16, Interpret physician's routine orders and modify diet according to diet patterns.

I would question the educational preparation for handling these tasks.

Too much responsibility is involved for one not specifically trained, and not having the authority to be held responsible.

Question 17, Direct nutrition research.

Do not feel that the level of their training is sufficient to equip them for decisions and planning necessary for these functions.

Not sufficient knowledge or training.

I feel this would require a person with more credentials than a technician.

We haven't trained to perform this function and I interpret directing as a task that should not be delegated.

Perhaps technicians could direct, but not plan.

I would question the educational preparation for handling these tasks.

Believe dietitians have more training for this.

Seems beyond technicians' capabilities.

Requires a person with considerable advanced training who can associate disease states and nutrition requirements.

Directing or organizing is a function of dietitians only.

Inadequate background.

Need more education and preparation.

Could not be delegated to a dietetic technician. Additional courses are needed, not a diploma--but four years of related work should be mandatory before the diet technician can effectively perform these duties.

See function as assisting rather than directing.

Too much responsibility is involved for one not specifically trained and not having the authority to be held responsible.

They do not have educational background to direct.

While a technician can be involved with these programs, the director requires educational and management skills more thoroughly covered in four year program.

This is usually someone with a masters degree.

The scientific background is not sufficient for the technicians to direct nutrition research.

Total care of patient should be under dietitian.

Someone with more formal education needed.

Question 20, Hold conferences with medical team.

Do not feel that the level of their training is sufficient to equip them for decisions and planning necessary for these functions.

Not qualified educationally.

The dietitians aren't even doing much of this yet.

Dietitians should not delegate this.

I wouldn't question the educational preparation for handling these tasks.

Dietitians should represent department.

Seems beyond technicians' capabilities.

These all involve major responsibilities which I do not feel should be delegated as one needs more training and experience than a technician usually has.

I feel the person in charge of the department should do this.

Should be done by a professional staff member only.

Inadequate background.

Time could be better used.

The dietitian who is part of the medical team should handle this--better knowledge.

Could participate but lacking in knowledge to direct and make decisions.

M.D.'s would probably not accept what technicians would have to say.

Could not be delegated to a dietetic technician.

Additional courses are needed, not a diploma--but four years of related work should be mandatory before the diet technician can effectively perform these duties.

Greater degree of rapport with dietitian likely.

This is usually head of the department. Should not involve technician's job.

Technician can be present but dietitian should direct research.

Question 24, Assist in the establishment of accurate and timely food delivery system.

Either could be involved, but not delegated.

Seems beyond technician's capabilities.

These all involve major responsibilities, which I do not feel should be delegated as one needs more training and experience than a technician usually has.

Question 25, Verify accuracy of diet as received by patients.

Seems beyond technician's capabilities.

Rather complicated unless adequately trained.

Question 26, Plan and direct nutrition conferences.

Do not feel that the level of their training is sufficient to equip them for decisions and planning necessary for these functions.

Not qualified educationally.

Beyond technician's area of expertise.

Someone with more formal education needed.

Dietitians should do. Technicians wouldn't have enough background.

I wouldn't question the educational preparation for handling these tasks.

Either could be involved, but not delegated.

Seems beyond technician's capabilities.

Requires someone with broad overview to select areas of interest to all factions in the conference.

Rather complicated unless adequately trained.

These all involve major responsibilities which I do not feel should be delegated as one needs more training and experience than a technician usually has.

Usually this would be part of the dietitian's work.

Planning, directing of nutrition should be carried out by dietitian only.

Depends on whom the conference is for.

Dietitian has better knowledge of the peer group, and their needs and wishes in educational activities.

Plan or co-plan fine. But direct not enough educational background.

Could not be delegated to a dietetic technician. Additional courses are needed, not a diploma--but four years of related work should be mandatory before the dietetic technician can effectively perform these duties.

Depends on level of conference.

Should be job of dietitian.

Technician would not have authority to make changes required making her initial work impractical.

While a technician can be involved with these programs, the director requires organizational and management skills more thoroughly covered in four year programs.

More training and experience necessary.

I believe that technician does not have sufficient management background.

Question 29, Evaluate effectiveness of nutrition care for patients.

Not qualified educationally.

Beyond technician's area of expertise.

Someone with more formal education needed.

Technicians gather information, dietitians evaluate.

I wouldn't question the educational preparation for handling these tasks.

Either could be involved, but not delegated.

Seems beyond technician's capabilities.

Others in the department better trained for administrative activities.

These all involve major responsibilities, which I do not feel should be delegated as one needs more training and experience than a technician usually has.

Educational background.

Too much responsibility is involved for one not specifically trained and not having the authority to be held responsible.

They do not have educational background to direct.

I do not believe the chemical, physiological and medical background can be totally covered in a two year program.

Concept probably more meaningful for dietitian.

Total care of patient should be under the direction of dietitian; the technician can assist her.

Question 30, Participate with nursing service and special services in establishing and reviewing procedures relating to dietary.

R.D's. responsibility to change systems.

I wouldn't question the educational preparation for handling these tasks.

Either could be involved, but not delegated.

Seems beyond technician's capabilities.

Others in the department better trained for administrative activities.

These all involve major responsibilities, which I do not feel should be delegated as one needs more training and experience than a technician usually has.

Interdepartment problems should be dietitian's responsibility.

Participate with dietitian making final decision.

Not if dietitian available.

Job of dietitian or department head.

Dietitian would have better overall view of services.

Question 32, Plan nutritious, attractive food combinations acceptable to various individuals, families or groups at different economic levels utilizing knowledge of food composition, flavors, colors, texture, temperatures, shape and consistency.

Requires a more thorough knowledge of human nutrition which a technician does not have.

I wouldn't question the educational preparation for handling these tasks.

These all involve major responsibilities, which I do not feel should be delegated as one needs more training and experience than a technician usually has.

I do not believe the chemical, physiological and medical background can be totally covered in a two year program.

Question 33, Utilize knowledge of food composition in designing dietary plans for meeting the physiological needs of individuals and groups throughout the life cycle.

These all involve major responsibilities, which I do not feel should be delegated as one needs more training and experience than a technician usually has.

Question 34, Consider the various ethnic and socio-cultural groups, life styles and environment in planning for the nutritional needs of individuals, families or groups.

These all involve major responsibilities, which I do not feel should be delegated as one needs more training and experience than a technician usually has.

Others in the department better trained for administrative activities.

Question 35, Maintains an up-to-date knowledge of subject matter through reading, classes, and interaction with technical and professional personnel.

Others in the department better trained for administrative activities.

ADMINISTRATIVE DIETETIC TECHNICIAN

Question 8, Maintain a departmental operational manual. Recommend changes in policies to update.

I definitely believe all these duties and the knowledge of handling them will all come in time. For the little time I have worked as an administrative dietetic technician, I have learned a great deal.

Question 9, Prepare budgets for both salaries and equipment.

Little training in budget and equipment specification. Mid-state tech program was designed for the dietetic technician to assist therapeutic dietitian.

I definitely believe all these duties and the knowledge of handling them will all come in time. For the little time I have worked as an administrative dietetic technician, I have learned a great deal.

Question 10, Assist in developing plans for operation under emergency conditions.

I was not trained for these duties at all.

I definitely believe all these duties and the knowledge of handling them will all come in time. For the little time I have worked as an administrative dietetic technician, I have learned a great deal.

Question 11, Delegate duties to competent individuals.

I was not trained for these duties at all.

I definitely believe all these duties and the knowledge of handling them will all come in time. For the little time I have worked as an administrative dietetic technician, I have learned a great deal.

Question 13, Utilize the ability to identify a problem, research the knowledge related to it, and make decisions about solutions.

I definitely believe all these duties and the knowledge of

handling them will all come in time. For the little time I have worked as an administrative dietetic technician, I have learned a great deal.

Question 14, Initiate departmental Management by Objectives programs.

I definitely believe all these duties and the knowledge of handling them will all come in time. For the little time I have worked as an administrative dietetic technician, I have learned a great deal.

Mid-state tech program was designed for the dietetic technician to assist therapeutic dietitian.

I was not trained for these duties at all.

Question 16, Attend workshops and other continuing education programs.

I was not trained for these duties at all.

Question 20, Assist in development of specifications for food, small equipment and supplies to assure quality and cost control.

I definitely believe all these duties and the knowledge of handling them will all come in time. For the little time I have worked as an administrative dietetic technician, I have learned a great deal.

Question 24, Communicate with hospital administration concerning policies and procedures for departmental operation.

I definitely believe all these duties and the knowledge of handling them will all come in time. For the little time I have worked as an administrative dietetic technician, I have learned a great deal.

Methods of writing purpose, policies, procedures not stressed.

Question 25, Develop programs for maintaining acceptable standards of safety, sanitation, maintenance and security.

I was not trained for these duties at all.

Question 28, Determine staffing needs.

Mid-state tech program was developed for the dietetic technician to assist therapeutic dietitian.

Question 29, Develop and keep up-to-date job descriptions and job specifications for all positions.

Mid-state tech program was developed for the dietetic technician to assist therapeutic dietitian.

CLINICAL DIETETIC TECHNICIAN

Question 6, Prescribe diets for patients.

My education is limited.

Not enough medical background for accuracy.

Lack sufficient knowledge in certain studies.

Lack of technical medical education.

Prescribing diets is against hospital policy.

I do not have the necessary medical background to make sound judgment on diet prescriptions.

I do not feel I have an adequate background in nutrition for these tasks.

I have been trained to distribute menus, assist patient in selection of food and correction of menus to suit ordered diet. I don't have the ability to prescribe diets nor any knowledge of indepth nutrition regulations.

Question 7, Attend workshops and other continuing education programs.

Have never been asked to participate, so I can't say if I feel inadequately trained.

Question 8, Participate in research studies in nutritional care.

Didn't have adequate administrative training.

Have never been asked to participate, so I can't say if I feel inadequately trained.

Question 9, Participate in community activities.

I don't feel I have an adequate background in nutrition for these tasks.

Have never been asked to participate, so can't say if I feel inadequately trained.

I have never had opportunity to.

Question 10, Organize and direct community nutrition programs.

Didn't have adequate administrative training.

I can assist the R.D. but don't feel qualified.

I have never had opportunity to.

Not a function of clinical technician.

Have never been asked to participate, so I can't say if I feel inadequately trained.

I don't feel I have an adequate background in nutrition for these tasks.

Question 11, Serve on department and/or institutional committees.

I have never had opportunity to.

Did not have any training in that part.

Have never been asked to participate, so I can't say if I feel inadequately trained.

Have not had intensive, interdepartment exposure.

Question 12, Help coordinate general office management.

I do not feel I have enough knowledge as to how the kitchen runs to be able to coordinate with the office management.

Didn't have adequate administrative training.

Question 17, Direct nutrition research.

Not enough knowledge.

I have never had opportunity to.

Lack of therapeutic nutritional education.

Lack of sufficient knowledge in certain studies.

I don't feel I have an adequate background in nutrition for these tasks.

I have never been asked to participate so I can't say if I feel inadequately trained.

Question 19, Instruct patient and family on routine diets.

Good nutrition background, but no format for teaching.

I don't feel I have an adequate background in nutrition for these tasks.

Question 20, Hold conferences with the medical team.

Never had a chance.

I do not feel I have enough knowledge as to how the kitchen runs to be able to coordinate with the office management.

Have never been asked to participate, so I can't say if I feel inadequately trained.

Lack of therapeutic nutritional education.

Lack of sufficient knowledge in certain studies.

Not enough medical background for accuracy.

Not enough knowledge.

Question 24, Assist in the establishment of accurate and timely food delivery system.

Not a function of clinical technician.

Didn't have adequate administrative training.

I do not feel I have enough knowledge as to how the kitchen runs to be able to coordinate with the office management.

Question 26, Plan and direct nutrition conferences.

Lack therapeutic nutritional education.

Didn't have adequate administrative training.

Did not have any training in that part.

Not enough knowledge.

I have never had opportunity to.

Have never been asked to participate, so I can't say if I feel inadequately trained.

Question 27, Supervise the preparation of special diet foods in quantity, quality, and accuracy of ingredients.

Did not have any training in that part.

I have never even gotten to observe how special dietary foods are prepared. Kitchen personnel seem somewhat separated from the dietitians and technicians. I don't feel we have enough opportunity to work together and this causes many misconceptions on the part of both parties. Consequently many barriers to communication occur.

I have never had opportunity to.

In our program the emphasis was placed on nutrition care of the patient, not food service.

Have never been asked to participate, so I can't say if I feel inadequately trained.

Question 30, Participate with nursing service and special services in establishing and reviewing procedures relating to dietary.

Did not have any training in that part.

Dietitian responsible for nursing service food service meetings.

APPENDIX C
Questionnaires

1 1
 1 2 3 4 5 6 7

CHIEF ADMINISTRATIVE DIETITIAN QUESTIONNAIRE

NOTE: This questionnaire is to be filled out by the chief administrative dietitian.

- 8-9 1. _____ Number of dietetic technicians employed in your hospital.
- 10 2. Your responsibility is: (Check only one)
- ¹ [] Chief administrative and clinical dietitian
- ² [] Chief administrative dietitian
- ³ [] Chief clinical dietitian
- 11-12 3. Total number of administrative dietitians who were staffed in:
 _____ 1973
- 13-14 _____ Now employed
- 15-16 4. Total number of clinical dietitians who were staffed in:
 _____ 1973
- 17-18 _____ Now employed
- 19-20 5. Total number of administrative technicians who were staffed in:
 _____ 1973
- 21-22 _____ Now employed
- 23-24 6. Total number of clinical technicians who were employed in:
 _____ 1973
- 25-26 _____ Now employed
- 27-28 7. _____ Total number of administrative dietitians needed in your
 department by 1980.
- 29-30 8. _____ Total number of clinical dietitians needed in your department by 1980.
- 31-32 9. _____ Total number of administrative technicians needed in your
 department by 1980.
- 33-34 10. _____ Total number of clinical technicians needed in your department
 by 1980.
- 35-38 11. _____ Hospital bed size.
- 39 12. Teaching hospital? (Involved in an academic training program)
- ¹ [] Yes
- ² [] No
- 40 13. Your sex:
- ¹ [] Male
- ² [] Female
- 41-42 14. _____ Your age.

15. Your education: From which college did you graduate?

College or university	State	Degree received and major	Graduation date (year)
43-46	47-48	49-51	52-53

16. Are you a member of the American Dietetic Association?

54 Yes
 No

55-56 17. _____ How many years have you been employed as a professional dietitian? (If NONE, please write "none")

Following is a list of task functions of an administrative dietitian. Please indicate which you do, or have done, as a dietitian, and those you would be willing to delegate to a trained dietetic technician.

	As a dietitian do you now do, or have done, the following task functions?		Please categorize each function as to whom should IDEALLY perform it. (Check ONE)			Would it be PRACTICAL to delegate these functions to a trained dietetic technician?	
	Yes	No	Dietitian	Dietetic technician	Either the dietitian or dietetic technician	Yes	No
18. Assist in the establishment of an efficient and effective organization which integrates the long- and short-range goals of the department	¹ []	² []57	¹ []	² []	³ []64	¹ []	² []71
19. Establish standard procedures to carry out activities of the department in order to implement previously established policies	[]	[]58	[]	[]	[]65	[]	[]72
20. Maintain a departmental operational manual. Recommend changes in policies to update	[]	[]59	[]	[]	[]66	[]	[]73
21. Prepare budgets for both salaries and equipment	[]	[]60	[]	[]	[]67	[]	[]74
22. Assist in developing plans for operation under emergency conditions	[]	[]61	[]	[]	[]68	[]	[]75
23. Delegate duties to competent individuals	[]	[]62	[]	[]	[]69	[]	[]76
24. Serve on department and/or hospital committees	[]	[]63	[]	[]	[]70	[]	[]77

	As a dietitian do you now do, or have done, the following task functions?		Please categorize each function as to whom should IDEALLY perform it. (Check ONE)			Would it be PRACTICAL to delegate these functions to a trained dietetic technician?	
	Yes	No	Dietitian	Dietetic technician	Either the dietitian or dietetic technician	Yes	No
25. Utilize the ability to identify a problem, research the knowledge related to it, and make decisions about solutions		$\frac{2}{7}$					
26. Initiate departmental Management by Objectives programs	¹ []	² []	¹ []	² []	³ []	¹ []	² []
27. Maintain an up-to-date knowledge of subject matter through reading, classes, and interaction with technical and professional personnel	[]	[]	[]	[]	[]	[]	[]
28. Attend workshops and other continuing education programs	[]	[]	[]	[]	[]	[]	[]
29. Evaluate effectiveness of patient meal service	[]	[]	[]	[]	[]	[]	[]
30. Participate in research studies in food service management	[]	[]	[]	[]	[]	[]	[]
31. Plan and evaluate acceptable menu patterns in accordance with objectives of the institution and/or department	¹ []	² []	¹ []	² []	³ []	¹ []	² []
32. Assist in development of specifications for food, small equipment and supplies to assure quality and cost control	[]	[]	[]	[]	[]	[]	[]
33. Purchase food, equipment and supplies according to specifications	[]	[]	[]	[]	[]	[]	[]
34. Plan food production time tables	[]	[]	[]	[]	[]	[]	[]
35. Develop labor times for production of food items (work schedules)	[]	[]	[]	[]	[]	[]	[]
36. Communicate with hospital administration concerning policies and procedures for departmental operation	[]	[]	[]	[]	[]	[]	[]
37. Develop programs for maintaining acceptable standards of safety, sanitation, maintenance and security	[]	[]	[]	[]	[]	[]	[]

	As a dietitian do you now do, or have done, the following task functions?		Please categorize each function as to whom should IDEALLY perform it. (Check ONE)			Would it be PRACTICAL to delegate these functions to a trained dietetic technician?	
	Yes	No	Dietitian	Dietetic technician	Either the dietitian or dietetic technician	Yes	No
38. Maintain effective interdepartmental relations through appropriate communications	¹ []	² [] ⁴⁷	¹ []	² []	³ [] ⁵⁴	¹ []	² [] ⁶¹
39. Review cost control records, payroll reports, personnel records, and other pertinent reports and recommendations necessary for action	[]	[] ⁴⁸	[]	[]	[] ⁵⁵	[]	[] ⁶²
40. Determine staffing needs	[]	[] ⁴⁹	[]	[]	[] ⁵⁶	[]	[] ⁶³
41. Develop and keep up-to-date job descriptions and job specifications for all positions	[]	[] ⁵⁰	[]	[]	[] ⁵⁷	[]	[] ⁶⁴
42. Interview and select dietetic personnel	[]	[] ⁵¹	[]	[]	[] ⁵⁸	[]	[] ⁶⁵
43. Be responsible for discipline and termination when required	[]	[] ⁵²	[]	[]	[] ⁵⁹	[]	[] ⁶⁶
44. Recommend appropriate salary and wage incentives based on performance records and evaluation	[]	[] ⁵³	[]	[]	[] ⁶⁰	[]	[] ⁶⁷
45. For those duties you would not delegate to a trained dietetic technician, please state why you would not delegate:							

<u>Question number</u>	<u>Reason</u>

46. Comments regarding the questionnaire will be welcome:

PLEASE CHECK THE QUESTIONNAIRE TO MAKE SURE THAT YOU HAVE LEFT NO QUESTIONS BLANK WHICH SHOULD HAVE BEEN ANSWERED. THANK YOU VERY MUCH.

3 1
 1 2 3 4 5 6 7

ADMINISTRATIVE DIETETIC TECHNICIAN QUESTIONNAIRE

INSTRUCTIONS FOR COMPLETING QUESTIONNAIRE:

- a. Please fill in the enclosed questionnaire within one week.
- b. Return the completed questionnaire to your food service director in the enclosed envelope.
- c. Make sure the envelope is sealed before it is returned.

1. Your sex:

- ¹[] Male
²[] Female

2. _____ Your age

3. Your education: From which college did you graduate?

College or university	State	Degree received and major	Graduation date (year)
11-14	15-16	17-19	20-21

4. Are you a member of the American Dietetic Association?

- ¹[] Yes
²[] No

5. _____ How many years have you been employed as a professional dietetic technician? (If NONE, please write "none")

Following is a list of task functions that an administrative technician might do. Please indicate which you do, or have done, as a technician.

	As a technician do you now do or have done, the following task functions?		Please categorize each function as to whom should IDEALLY perform it. (Check ONE)			Do you feel you have been adequately trained to do this duty?	
	Yes	No	Dietitian	Dietetic technician	Either the dietitian or dietetic technician	Yes	No
6. Assist in the establishment of an efficient and effective organization which integrates the long- and short-range goals of the department	¹ []	² [] ²⁵	¹ []	² []	³ [] ²⁸	¹ []	² [] ³¹
7. Establish standard procedures to carry out activities of the department in order to implement previously established policies	[]	[] ²⁶	[]	[]	[] ²⁹	[]	[] ³²
8. Maintain a departmental operational manual. Recommend changes in policies to update	[]	[] ²⁷	[]	[]	[] ³⁰	[]	[] ³³

As a technician do you now do, or have done, the following task functions?

Please categorize each function as to whom should IDEALLY perform it. (Check ONE)

Do you feel you have been adequately trained to do this duty.

	As a technician do you now do, or have done, the following task functions?		Please categorize each function as to whom should IDEALLY perform it. (Check ONE)			Do you feel you have been adequately trained to do this duty.	
	Yes	No	Dietitian	Dietetic technician	Either the dietitian or dietetic technician	Yes	No
9. Prepare budgets for both salaries and equipment	<input type="checkbox"/>	<input type="checkbox"/> 34	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 46	<input type="checkbox"/>	<input type="checkbox"/> 60
10. Assist in developing plans for operation under emergency conditions	<input type="checkbox"/>	<input type="checkbox"/> 35	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 47	<input type="checkbox"/>	<input type="checkbox"/> 59
11. Delegate duties to competent individuals	<input type="checkbox"/>	<input type="checkbox"/> 36	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 48	<input type="checkbox"/>	<input type="checkbox"/> 60
12. Serve on department and/or hospital committees	<input type="checkbox"/>	<input type="checkbox"/> 37	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 49	<input type="checkbox"/>	<input type="checkbox"/> 61
13. Utilize the ability to identify a problem, research the knowledge related to it, and make decisions about solutions	<input type="checkbox"/>	<input type="checkbox"/> 38	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 50	<input type="checkbox"/>	<input type="checkbox"/> 62
14. Initiate departmental Management by Objectives programs	<input type="checkbox"/>	<input type="checkbox"/> 39	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 51	<input type="checkbox"/>	<input type="checkbox"/> 63
15. Maintain an up-to-date knowledge of subject matter through reading, classes, and interaction with technical and professional personnel	<input type="checkbox"/>	<input type="checkbox"/> 40	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 52	<input type="checkbox"/>	<input type="checkbox"/> 64
16. Attend workshops and other continuing education programs	<input type="checkbox"/>	<input type="checkbox"/> 41	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 53	<input type="checkbox"/>	<input type="checkbox"/> 65
17. Evaluate effectiveness of patient meal service	<input type="checkbox"/>	<input type="checkbox"/> 42	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 54	<input type="checkbox"/>	<input type="checkbox"/> 66
18. Participate in research studies in food management	<input type="checkbox"/>	<input type="checkbox"/> 43	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 55	<input type="checkbox"/>	<input type="checkbox"/> 67
+ 19. Plan and evaluate acceptable menu patterns in accordance with objectives of the institution and/or department	<input type="checkbox"/>	<input type="checkbox"/> 44	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 56	<input type="checkbox"/>	<input type="checkbox"/> 68
20. Assist in development of specifications for food, small equipment and supplies to assure quality and cost control	<input type="checkbox"/>	<input type="checkbox"/> 45	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 57	<input type="checkbox"/>	<input type="checkbox"/> 69

As a technician
do you now do,
or have done,
the following
task functions?

Please categorize
each function as
to whom should
IDEALLY perform
it. (Check ONE)

Do you feel
you have been
adequately
trained to do
this duty.

			Dietitian	Dietetic technician	Either the dietitian or dietetic technician		
	Yes	No				Yes	No
21. Purchase food, equipment and supplies according to specifications	¹ []	² [] 70	¹ []	² []	³ [] 9	¹ []	² [] 21
22. Plan food production time tables	[]	[] 71	[]	[]	[] 10	[]	[] 22
23. Develop labor times for production of food items (work schedules)	[]	[] 72	[]	[]	[] 11	[]	[] 23
24. Communicate with hospital administration concerning policies and procedures for departmental operation	[]	[] 73	[]	[]	[] 12	[]	[] 24
25. Develop programs for maintaining acceptable standards of safety, sanitation, maintenance and security	[]	[] 74	[]	[]	[] 13	[]	[] 25
26. Maintain effective interdepartmental relations through appropriate communications	[]	[] 75	[]	[]	[] 14	[]	[] 26
27. Review cost control records, payroll reports, personnel records, and other pertinent reports and recommendations necessary for action	¹ []	² [] 76	¹ []	² []	³ [] 15	¹ []	² [] 27
28. Determine staffing needs	[]	[] 77	[]	[]	[] 16	[]	[] 28
29. Develop and keep up-to-date job descriptions and job specifications for all positions	[]	[] 78	[]	[]	[] 17	[]	[] 29
30. Interview and select dietetic personnel	[]	[] 79	[]	[]	[] 18	[]	[] 30
31. Be responsible for discipline and termination when required	[]	[] 80	[]	[]	[] 19	[]	[] 31
32. Recommend appropriate salary and wage incentives based on performance records and evaluation	[]	[] 8	[]	[]	[] 20	[]	[] 32

33. For those performed duties listed above for which you feel inadequately trained, please explain in what way your training was inadequate:

Question number

How your training was inadequate

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

34. Comments on the questionnaire will be welcome:

PLEASE CHECK THE QUESTIONNAIRE TO MAKE SURE THAT YOU HAVE LEFT NO QUESTIONS BLANK WHICH SHOULD HAVE BEEN ANSWERED. THANK YOU VERY MUCH.

2 1
 1 2 3 4 5 6 7

CHIEF CLINICAL DIETITIAN QUESTIONNAIRE

8 1. Your sex:
 ¹ Male
 ² Female

9-10 2. _____ Your age

3. Your education: From which college did you graduate?

	<u>College or university</u>	<u>State</u>	<u>Degree received and major</u>	<u>Graduation date (year)</u>
11-14		15-16	17-19	20-21
	_____	_____	_____	_____

22 4. Are you a member of the American Dietetic Association?
 Yes
 No

23-24 5. How many years have you been employed as a professional dietitian?
 _____ years (If NONE, please write "none")

Following is a list of task functions of a clinical dietitian. Please indicate which you do, or have done, as a dietitian, and those you would be willing to delegate to a trained dietetic technician.

	As a dietitian do you now do, or have done, the following task functions?		Please categorize each function as to whom should IDEALLY perform it. (Check ONE)			Would it be PRACTICAL to delegate these functions to a trained dietetic technician?	
	Yes	No	Dietitian	Dietetic technician	Either the dietitian or dietetic technician	Yes	No
6. Prescribe diets for patients	¹ []	² [] ₂₅	¹ []	² []	³ [] ₄₀	¹ []	² [] ₅₅
7. Attend workshops and other continuing education programs	[]	[] ₂₆	[]	[]	[] ₄₁	[]	[] ₅₆
8. Participate in research studies in nutritional care	[]	[] ₂₇	[]	[]	[] ₄₂	[]	[] ₅₇
9. Participate in community activities	[]	[] ₂₈	[]	[]	[] ₄₃	[]	[] ₅₈
10. Organize and direct community nutrition programs	[]	[] ₂₉	[]	[]	[] ₄₄	[]	[] ₅₉
11. Serve on department and/or institutional committees	[]	[] ₃₀	[]	[]	[] ₄₅	[]	[] ₆₀
12. Help coordinate general office management	[]	[] ₃₁	[]	[]	[] ₄₆	[]	[] ₆₁
13. Utilize the ability to identify a problem, research the knowledge related to it, and make decisions about solutions	¹ []	² [] ₃₂	¹ []	² []	³ [] ₄₇	¹ []	² [] ₆₂
14. Participate in departmental or staff meetings	[]	[] ₃₃	[]	[]	[] ₄₈	[]	[] ₆₃
15. Take accurate and informative diet histories	[]	[] ₃₄	[]	[]	[] ₄₉	[]	[] ₆₄
16. Interpret physician's routine orders and modify diet according to diet patterns	[]	[] ₃₅	[]	[]	[] ₅₀	[]	[] ₆₅
17. Direct nutrition research	[]	[] ₃₆	[]	[]	[] ₅₁	[]	[] ₆₆
18. Determine food preferences through consultation with patient	[]	[] ₃₇	[]	[]	[] ₅₂	[]	[] ₆₇
19. Instruct patient and family on routine diets	[]	[] ₃₈	[]	[]	[] ₅₃	[]	[] ₆₈
20. Hold conferences with the medical team	[]	[] ₃₉	[]	[]	[] ₅₄	[]	[] ₆₉

As a dietitian
do you now do,
or have done,
the following
task functions?

Please categorize
each function as
to whom should
IDEALLY perform
it. (Check ONE)

Would it be
PRACTICAL to
delegate these
functions to a
trained dietetic
technician?

	As a dietitian do you now do, or have done, the following task functions?		Please categorize each function as to whom should IDEALLY perform it. (Check ONE)			Would it be PRACTICAL to delegate these functions to a trained dietetic technician?	
	Yes	No	Dietitian	Dietetic technician	Either the dietitian or dietetic technician	Yes	No
21. Provide assistance in menu selection to new patients on normal diets or routine diet modifications	¹ []	² [] ⁷⁰	¹ []	² []	³ [] ⁹	¹ []	² [] ²¹
22. Observe patients' acceptance of diet and make notations on diet history	[]	[] ⁷¹	[]	[]	[] ¹⁰	[]	[] ²²
23. Maintain accurate and timely systems for transmission of patient diet orders and changes	[]	[] ⁷²	[]	[]	[] ¹¹	[]	[] ²³
24. Assist in the establishment of accurate and timely food delivery system	[]	[] ⁷³	[]	[]	[] ¹²	[]	[] ²⁴
25. Verify accuracy of diet as received by patients	[]	[] ⁷⁴	[]	[]	[] ¹³	[]	[] ²⁵
26. Plan and direct nutrition conferences	[]	[] ⁷⁵	[]	[]	[] ¹⁴	[]	[] ²⁶
27. Supervise the preparation of special diet foods in quantity, quality, and accuracy of ingredients	[]	[] ⁷⁶	[]	[]	[] ¹⁵	[]	[] ²⁷
28. Plan and supervise nourishments, and between meal feedings	¹ []	² [] ⁷⁷	¹ []	² []	³ [] ¹⁶	¹ []	² [] ²⁸
29. Evaluate effectiveness of nutrition care for patients	[]	[] ⁷⁸	[]	[]	[] ¹⁷	[]	[] ²⁹
30. Participate with nursing service and special services in establishing and reviewing procedures relating to dietary	[]	[] ⁷⁹	[]	[]	[] ¹⁸	[]	[] ³⁰
31. Consult routinely with registered dietitian in the care of the patient	[]	[] ⁸⁰	[]	[]	[] ¹⁹	[]	[] ³¹
32. Plan nutritious, attractive food combinations acceptable to various individuals, families or groups at different economic levels utilizing knowledge of food composition, flavors, colors, texture, temperatures, shape and consistency	[]	$\frac{2}{7}$ [] ⁸	[]	[]	[] ²⁰	[]	[] ³²

As a dietitian do you now do, or have done, the following task functions? Please categorize each function as to whom should IDEALLY perform it. (Check ONE) Would it be PRACTICAL to delegate these functions to a trained dietetic technician?

	As a dietitian do you now do, or have done, the following task functions?		Please categorize each function as to whom should IDEALLY perform it. (Check ONE)			Would it be PRACTICAL to delegate these functions to a trained dietetic technician?	
	Yes	No	Dietitian	Dietetic technician	Either the dietitian or dietetic technician	Yes	No
33. Utilize knowledge of food composition in designing dietary plans for meeting the physiological needs of individuals and groups throughout the life cycle	¹ []	² [] ₃₃	¹ []	² []	³ [] ₃₆	¹ []	² [] ₃₉
34. Consider the various ethnic and socio-cultural groups, life styles and environment in planning for the nutritional needs of individuals, families or groups	[]	[] ₃₄	[]	[]	[] ₃₇	[]	[] ₄₀
35. Maintains an up-to-date knowledge of subject matter through reading, classes, and interaction with technical and professional personnel	[]	[] ₃₅	[]	[]	[] ₃₈	[]	[] ₄₁

36. For those duties you would not delegate to a trained dietetic technician, please state why you would not delegate:

<u>Question number</u>	<u>Reason</u>

37. Comments regarding the questionnaire will be welcome:

PLEASE RECHECK THE QUESTIONNAIRE TO MAKE SURE YOU HAVE LEFT NO QUESTIONS BLANK WHICH SHOULD HAVE BEEN ANSWERED. THANK YOU VERY MUCH.

4 _____ 1
 1 2 3 4 5 6 7

CLINICAL DIETETIC TECHNICIAN QUESTIONNAIRE

INSTRUCTIONS FOR COMPLETING QUESTIONNAIRE:

- a. Please fill in the enclosed questionnaire within one week.
- b. Return the completed questionnaire to your food service director using the enclosed envelope.
- c. Make sure the envelope is sealed before it is returned.

1. your sex:

- 8 1 [] Male
 2 [] Female

9-10 2. _____ Your age

3. Your education: From which college did you graduate?

	College or university	State	Degree received and major	Graduation date (year)
	11-14	15-16	17-19	20-21

4. Are you a member of the American Dietetic Association?

- 22 1 [] Yes
 2 [] No

23-24 5. _____ How many years have you been employed as a professional dietetic technician? (If NONE, please write "none")

Following is a list of task functions that a clinical technician might do. Please indicate which you do, or have done, as a technician.

As a technician do you now do, or have done, the following task functions? Please categorize each function as to whom should IDEALLY perform it. (Check ONE)

Do you feel you have been adequately trained to do this duty?

	As a technician do you now do, or have done, the following task functions?		Please categorize each function as to whom should IDEALLY perform it. (Check ONE)			Do you feel you have been adequately trained to do this duty?	
	Yes	No	Dietitian	Dietetic technician	Either the dietitian or dietetic technician	Yes	No
6. Prescribe diets for patients	1 []	2 [] ²⁵	1 []	2 []	3 [] ³⁰	1 []	2 [] ³⁵
7. Attend workshops and other continuing education programs	[]	[] ²⁶	[]	[]	[] ³¹	[]	[] ³⁶
8. Participate in research studies in nutritional care	[]	[] ²⁷	[]	[]	[] ³²	[]	[] ³⁷
9. Participate in community activities	[]	[] ²⁸	[]	[]	[] ³³	[]	[] ³⁸
10. Organize and direct community nutrition programs	[]	[] ²⁹	[]	[]	[] ³⁴	[]	[] ³⁹

	As a technician do you now do, or have done, the following task functions?		Please categorize each function as to whom should IDEALLY perform it. (Check ONE)			Do you feel you have been adequately trained to do this duty.	
	Yes	No	Dietitian	Dietetic technician	Either the dietitian or dietetic technician	Yes	No
11. Serve on department and/or institutional committees	¹ []	² [] ⁴⁰	¹ []	² []	³ [] ⁵⁵	¹ []	² [] ⁷⁰
12. Help coordinate general office management	[]	[] ⁴¹	[]	[]	[] ⁵⁶	[]	[] ⁷¹
13. Utilize the ability to identify a problem, research the knowledge related to it, and make decisions about solutions	[]	[] ⁴²	[]	[]	[] ⁵⁷	[]	[] ⁷²
14. Participate in departmental or staff meetings	[]	[] ⁴³	[]	[]	[] ⁵⁸	[]	[] ⁷³
15. Take accurate and informative diet history	[]	[] ⁴⁴	[]	[]	[] ⁵⁹	[]	[] ⁷⁴
16. Interpret physician's routine diet orders and modify diet according to diet patterns	[]	[] ⁴⁵	[]	[]	[] ⁶⁰	[]	[] ⁷⁵
17. Direct nutrition research	[]	[] ⁴⁶	[]	[]	[] ⁶¹	[]	[] ⁷⁶
18. Determine food preferences through consultation with patient	[]	[] ⁴⁷	[]	[]	[] ⁶²	[]	[] ⁷⁷
19. Instruct patient and family on routine diets	[]	[] ⁴⁸	[]	[]	[] ⁶³	[]	[] ⁷⁸
20. Hold conferences with the medical team	¹ []	² [] ⁴⁹	¹ []	² []	³ [] ⁶⁴	¹ []	² [] ⁷⁹
21. Provide assistance in menu selection to new patients on normal diets or routine diet modifications	[]	[] ⁵⁰	[]	[]	[] ⁶⁵	[]	[] ⁸⁰
22. Observe patients' acceptance of diet and make notations on diet history	[]	[] ⁵¹	[]	[]	[] ⁶⁶	[]	[] ⁸⁰ ² ⁷
23. Maintain accurate and timely systems for transmission of patient diet orders and changes	[]	[] ⁵²	[]	[]	[] ⁶⁷	[]	[] ⁹
24. Assist in the establishment of accurate and timely food delivery system	[]	[] ⁵³	[]	[]	[] ⁶⁸	[]	[] ¹⁰
25. Verify accuracy of diet as received by patients	[]	[] ⁵⁴	[]	[]	[] ⁶⁹	[]	[] ¹¹

	As a technician do you now do, or have done, the following task functions?		Please categorize each function as to whom should IDEALLY perform it. (Check ONE)			Do you feel you have been adequately trained to do this duty?	
	Yes	No	Dietitian	Dietetic technician	Either the dietitian or dietetic technician	Yes	No
26. Plan and direct nutrition conferences	¹ []	² [] ₁₂	¹ []	² []	³ [] ₂₂	¹ []	² [] ₃₂
27. Supervise the preparation of special diet foods in quantity, quality, and accuracy of ingredients	[]	[] ₁₃	[]	[]	[] ₂₃	[]	[] ₃₃
28. Plan and supervise nourishments, and between-meal feedings	[]	[] ₁₄	[]	[]	[] ₂₄	[]	[] ₃₄
29. Evaluate effectiveness of nutrition care for patients	[]	[] ₁₅	[]	[]	[] ₂₅	[]	[] ₃₅
30. Participate with nursing service and special services in establishing and reviewing procedures relating to dietary	[]	[] ₁₆	[]	[]	[] ₂₆	[]	[] ₃₆
31. Consult routinely with registered dietitian in the care of the patient	[]	[] ₁₇	[]	[]	[] ₂₇	[]	[] ₃₇
32. Plan nutritious, attractive food combinations acceptable to various individuals, families or groups at different economic levels utilizing knowledge of food composition, flavors, colors, texture, temperatures, shape and consistency	¹ []	² [] ₁₈	¹ []	² []	³ [] ₂₈	¹ []	² [] ₃₈
33. Utilize knowledge of food composition in designing dietary plans for meeting the physiological needs of individuals and groups throughout the life cycle	[]	[] ₁₉	[]	[]	[] ₂₉	[]	[] ₃₉
34. Consider the various ethnic and sociocultural groups, life styles and environment in planning for the nutritional needs of individuals, families or groups	[]	[] ₂₀	[]	[]	[] ₃₀	[]	[] ₄₀
35. Maintain an up-to-date knowledge of subject matter through reading, classes, and interaction with technical and professional personnel	[]	[] ₂₁	[]	[]	[] ₃₁	[]	[] ₄₁

36. For those performed duties listed above for which you feel inadequately trained, please explain in what way your training was inadequate.

Question number

How your training was inadequate

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

37. Comments on the questionnaire will be welcome:

PLEASE CHECK THE QUESTIONNAIRE TO MAKE SURE THAT YOU HAVE LEFT NO QUESTIONS BLANK WHICH SHOULD HAVE BEEN ANSWERED. THANK YOU VERY MUCH.