

Research Article: Changing roles and responsibilities of dietitians from diverse settings during the first three waves of the COVID-19 pandemic in Nova Scotia

Supplemental File 1.

Catalyzing Dietetics Survey

Start of Block: Introduction

Q100

Welcome to the Catalyzing Dietetics Questionnaire

Thank you for your participation!

INSTRUCTIONS: Select (click on) or enter your answer to each question then press the forward (->) button at the bottom of the screen to proceed through the survey. You may use the back (<-) button at any time to go back and change a previous answer.

Depending upon your answer certain questions may not be relevant to you and will be automatically skipped.

The progress bar at the top of the screen will indicate your progress through the survey. The survey must be completed in one setting. If you encounter any issues please contact the Research Assistant for assistance.

*Mr. Erik Vandenboer
Research Assistant
Phone: 902-580-0893
Email: evandenb@stfx.ca*

Start of Block: Block 1

Q1 How old are you?

- 20 to 29 years (1)
 - 30 to 39 years (2)
 - 40 to 49 years (3)
 - 50 to 59 years (4)
 - 60 to 69 years (5)
 - 70 years or more (6)
 - Prefer not to answer (7)
-

Q2 Which gender do you identify with?

- Male (1)
 - Female (2)
 - Gender diverse (3)
 - Prefer not to say (4)
 - Prefer to specify: (5) _____
-

Q3 Which health zone do you mainly work in?

- Northern (1)
 - Eastern (2)
 - Central (3)
 - Western (4)
-

Q4 How would you describe the community (communities) where you currently work? Select all that apply.

- large urban population centre (population of 100 000 or more) (1)
 - medium population centre (population of 30 000 to 99 999) (2)
 - small population centre (population of 1000 to 29 999) (3)
 - rural area (population of less than 1000) (4)
-

Q5 In addition to a dietetic internship/practicum (or professional certification), what is the highest level of formal education you have received?

- Bachelor's degree (1)
- Master's degree (2)
- Doctoral degree (3)
- Other: Please indicate (4) _____

Q6 How long have you been working as a dietitian under the following conditions: full-time, part-time, or occasional? Please indicate all that apply. For partial years please round up or down to the nearest number.

Full-time: _____ years (1)

Part-time: _____ years (2)

Casual or Occasional: _____ years (3)

End of Block: Block 1

Q7 Please indicate in which location(s) you have been employed in your career as a professional dietitian. Please select all that apply.

- Academics (1)
- Dietetic Education (2)
- Hospital or acute care (3)
- Industry (4)
- Long-term care (5)
- Primary health care: Community-based programming (6)
- Primary health care: Diabetes education centre (7)
- Primary health care: Collaborative family practice team (8)
- Private practice (9)
- Public health (10)
- Other: Please indicate (11)

Other: Please indicate (12)

Other: Please indicate (13)

Page Break

Q8 When the COVID-19 pandemic began in March 2020, which location would you consider your main area of employment?

- Academics (1)
- Community clinic or primary health (2)
- Dietetic Education (3)
- Hospital or acute care (4)
- Industry (5)
- Long-term care (6)
- Primary health care: Community-based programming (7)
- Primary health care: Diabetes education centre (8)
- Primary health care: Collaborative family practice team (9)
- Private practice (10)
- Public health (11)
- Non-dietetic area: Please indicate (12)
- Other: Please indicate (13) _____
- Other: Please indicate (14) _____
- Other: Please indicate (15) _____

End of Block: Block 2

Start of Block: Block 3

Q9 If you have worked in a health care facility since March 2020, did your facility prepare to admit COVID-19 cases?

- Yes (1)
- No (2)
- Not applicable (3)
- Unable to disclose (4)

Q10 If you have worked in a health care facility since March 2020, did your facility have any active COVID-19 cases?

- Yes (1)
- No (2)
- Not applicable (3)
- Unable to disclose (4)

Q11 If you have worked in a health care facility since March 2020, was your facility (or a unit within the facility) designated a COVID-19 unit?

- Yes (1)
- No (2)
- Not applicable (3)
- Unable to disclose (4)

Display This Question:

If you have worked in a health care facility since March 2020, was your facility (or a unit within... =
Yes

Q12 You stated that your facility (or a unit within the facility) was designated a COVID-19 unit. Were you assigned to work on the designated COVID-19 unit?

- Yes (1)
- No (2)
- Other: Please indicate (3) _____
- Unable to disclose (4)

End of Block: Block 3

Start of Block: Block 4

Q13 When the pandemic began in March 2020 were you:

- Working part-time (or casual) with one employer (1)
- Working part-time (or casual) with multiple employers (2)
- Working full-time with one employer (3)
- Working as a full-time equivalent, with multiple employers (4)
- Self-employed (5)
- Not working (6)
- Other: Please indicate (7) _____

Q14 When the pandemic began in March 2020, what roles did your main area of employment involve? Please select all that apply.

- Administrative (1)
- Communications (2)
- Educational or training (3)
- Food provision (4)
- Health promotion (5)
- Management (6)
- Nutrition care (client care) – Outpatient (7)
- Nutrition care (client care) – Inpatient (8)
- Community nutrition (client care) (15)
- Public health (9)
- Sales and marketing (10)
- Non-dietetic area: Please indicate (11)
- Other: Please indicate (12)

Other: Please indicate (13)

Other: Please indicate (14)

Q15 Did your employment status or compensation change because of the COVID-19 pandemic? Please select all that apply.

- No (1)
 - Yes, my contract was terminated (2)
 - Yes, my contract was extended (3)
 - Yes, my work hours were reduced (4)
 - Yes, my work hours were increased (5)
 - Yes, I received additional financial incentives (6)
 - Yes, I was promoted to a leadership position (7)
 - Other: Please indicate (8)
-

Page Break

Q16 What other challenges did the COVID-19 pandemic present to your work? Please select all that apply.

- Shift work (1)
- Long hours (2)
- Transition to working from home (3)
- Changes in childcare situation (4)
- Changes in home life (5)
- Changes in work expectations (6)
- Additional stress or anxiety (7)
- Rapidly evolving safety protocols (8)
- Inconsistency in or contradictory safety protocols (9)
- Isolation from co-workers (10)
- Physical distancing rules impacting provision of care (11)
- Refusal of some health care providers to provide in-person care (12)
- Not applicable (16)
- Other: Please indicate (13)
- Other: Please indicate (14)
- Other: Please indicate (15)

Q17 Did you have any added responsibilities in your work role due to the COVID-19 pandemic?

Yes: Please explain (1) _____

No (2)

Not applicable (3)

End of Block: Block 4

Start of Block: Block 5

Q18 Did your main work setting change because of the COVID-19 pandemic (such as redeployment to another setting, facility or area of practice)?

- Yes (1)
- No (2)
- Not applicable (3)

Display This Question:

If Did your main work setting change because of the COVID-19 pandemic (such as redeployment to another... = Yes

Q19 To what setting(s) were you redeployed because of the COVID-19 pandemic? Please select all that apply.

- Academics (1)
- Dietetic Education (2)
- Hospital or acute care (3)
- Industry (4)
- Long-term care (5)
- Primary health care: Community-based programming (6)
- Primary health care: Diabetes education centre (7)
- Primary health care: Collaborative family practice team (8)
- Private practice (9)
- Public health (10)
- Other: Please indicate (11) (12) (13)

Display This Question:

If If To what setting(s) were you redeployed because of the COVID-19 pandemic? Please select all that apply.<o:p></o:p> q://QID22/SelectedChoicesCount Is Not Empty

Q20 Please indicate if this change in setting was:

- Voluntary (1)
- Mandatory (2)
-

Display This Question:

If Please indicate if this change in setting was: = Voluntary
Or Please indicate if this change in setting was: = Mandatory

Q21 Please indicate the date when this change in setting started and when it ended. Please enter 'ongoing' for an end date if the change in setting is still ongoing. If changes occurred over multiple dates please indicate in the 'Multiple changes' option (e.g. March 2020 - June 2020, April 2021 - Ongoing)

- Start date: Please indicate: (1)

- End date: Please indicate: (2)

- Multiple changes: Please indicate: (3)

End of Block: Block 5

Start of Block: Block 6

Q22 Did your work role (or tasks) change because of the COVID-19 pandemic?

Yes (1)

No (2)

Display This Question:

If Did your work role (or tasks) change because of the COVID-19 pandemic? = Yes

Q23 Please select all of the new roles or tasks you were assigned to because of the COVID-19 pandemic? If your tasks changed within your current dietetics area (e.g. Management) please describe these in the 'Other' option.

- Administrative (1)
- Communications (2)
- Educational or training (e.g. upskilling of other health professionals or workers) (3)
- Food provision (4)
- Health promotion (5)
- Management (6)
- Nutrition care (client care) – Outpatient (7)
- Nutrition care (client care) – Inpatient (8)
- Procurement of supplies (9)
- Provincial COVID-19 protocol development (10)
- Public health: general (11)
- Public health: COVID-19 specific tasks (contract tracing, screening, case monitoring) (12)

- Resource development (13)
- Sales and marketing (14)
- Non-dietetic area: Please indicate (15)
-
- Other: Please indicate (16)
-
- Other: Please indicate (17)
-
- Other: Please indicate (18)
-

Display This Question:

If Please select all of the new roles or tasks you were assigned to because of the COVID-19 pandemic... = Administrative

And Please select all of the new roles or tasks you were assigned to because of the COVID-19 pandemic... = Administrative

Or Please select all of the new roles or tasks you were assigned to because of the COVID-19 pandemic... = Communications

Or Please select all of the new roles or tasks you were assigned to because of the COVID-19 pandemic... = Educational or training (e.g. upskilling of other health professionals or workers)

Or Please select all of the new roles or tasks you were assigned to because of the COVID-19 pandemic... = Food provision

Or Please select all of the new roles or tasks you were assigned to because of the COVID-19 pandemic... = Health promotion

Or Please select all of the new roles or tasks you were assigned to because of the COVID-19 pandemic... = Management

Or Please select all of the new roles or tasks you were assigned to because of the COVID-19 pandemic... = Nutrition care (client care) – Outpatient

Or Please select all of the new roles or tasks you were assigned to because of the COVID-19 pandemic... = Nutrition care (client care) – Inpatient

Or Please select all of the new roles or tasks you were assigned to because of the COVID-19 pandemic... = Procurement of supplies

Or Please select all of the new roles or tasks you were assigned to because of the COVID-19 pandemic... = Provincial COVID-19 protocol development

Or Please select all of the new roles or tasks you were assigned to because of the COVID-19 pandemic... = Public health: general

Or Please select all of the new roles or tasks you were assigned to because of the COVID-19 pandemic... = Public health: COVID-19 specific tasks (contract tracing, screening, case monitoring)

Or Please select all of the new roles or tasks you were assigned to because of the COVID-19 pandemic... = Resource development

Or Please select all of the new roles or tasks you were assigned to because of the COVID-19 pandemic... = Sales and marketing

Or Please select all of the new roles or tasks you were assigned to because of the COVID-19 pandemic... = Non-dietetic area: Please indicate

Or Please select all of the new roles or tasks you were assigned to because of the COVID-19 pandemic... = Other: Please indicate

Or Please select all of the new roles or tasks you were assigned to because of the COVID-19 pandemic... = Other: Please indicate

Or Please select all of the new roles or tasks you were assigned to because of the COVID-19 pandemic... = Other: Please indicate

Q24 Please indicate if this change in work role (or tasks) was:

Voluntary (1)

Mandatory (2)

Display This Question:

If Please indicate if this change in work role (or tasks) was: = Voluntary

Or Please indicate if this change in work role (or tasks) was: = Mandatory

Q25 Please indicate the date when this change in work role started and when it ended. Please enter 'ongoing' for an end date if the change is still ongoing. If changes occurred over multiple dates please indicate in the 'Multiple changes' option (e.g. March 2020 - June 2020, April 2021 - Ongoing)

Start date: Please indicate: (1)

End date: Please indicate: (2)

Multiple changes: Please indicate: (4)

Display This Question:

If Overall, how prepared did you feel you were to take on this new role(s) or tasks? = Very prepared

Or Overall, how prepared did you feel you were to take on this new role(s) or tasks? = Somewhat prepared

Or Overall, how prepared did you feel you were to take on this new role(s) or tasks? = Neither prepared nor unprepared

Or Overall, how prepared did you feel you were to take on this new role(s) or tasks? = Somewhat unprepared

Or Overall, how prepared did you feel you were to take on this new role(s) or tasks? = Very unprepared

Q28 Do you feel that you had sufficient education and training (dietetic or otherwise) to perform your new work role(s) or tasks?

Yes (1)

No (2)

Display This Question:

If Do you feel that you had sufficient education and training (dietetic or otherwise) to perform you... = Yes

Q29 What aspects of your education and training were particularly useful in preparing you for this new work role(s) or tasks?

End of Block: Block 6

Start of Block: Block 7

Q30 During the COVID-19 pandemic, in what areas of practice would you have benefited from professional development? Select all that apply.

- Communications (1)
- Contact tracing (2)
- Critical care (3)
- Daily monitoring of COVID-19 cases (4)
- Determinants of health/health equity (5)
- Dysphagia management (6)
- Emergency preparedness (7)
- Epidemiology (8)
- Immunology (9)
- Infection prevention & control and environmental health (10)
- Information technology to support clients accessing virtual care (11)
- Information technology to support clinicians providing virtual care (12)
- Microbiology (13)
- Nutrition support (14)
- Screening related to COVID-19 (15)
- Screening related to other risk factors (e.g. isolation, social determinants) (16)

- Testing or laboratory analysis (17)
 - Training and education (18)
 - Vaccine/Immunization programs (19)
 - Virtual facilitation skills for individuals (e.g. counselling) and groups (20)
 - Other: Please indicate (21)
-
- Other: Please indicate (22)
-
- Other: Please indicate (23)
-

End of Block: Block 7

Start of Block: Block 8

Q31 Overall, how well supported by your employer(s) did you feel during the COVID-19 pandemic:

- Very supported (1)
- Somewhat supported (2)
- Neither supported nor unsupported (3)
- Somewhat unsupported (4)
- Very unsupported (5)

Page Break

Q32 Which of the following supports were provided by your employer during the COVID-19 pandemic? Please select all that apply.

- Adequate information (1)
- Timely information (2)
- Adequate consultation regarding work changes (3)
- Sufficient professional development (4)
- Childcare (5)
- Catering or meals provided (6)
- Team check-in (12)
- Individual check-in (13)
- Transit (7)
- Mental health supports (8)
- Other: Please indicate (9)

- Other: Please indicate (10)

- Other: Please indicate (11)

Page Break

Q33 How was your role as a preceptor for dietetic students or interns affected by the COVID-19 pandemic? Please select all that apply.

- I do not take dietetic interns as part of my current role (1)
- Placements were cancelled (2)
- Placements were delayed (3)
- Placement duration was decreased (4)
- Placement duration was increased (5)
- I took fewer students than usual (6)
- I took more students than usual (7)
- There were fewer opportunities for in-person client care experiences (8)
- There were more opportunities for in-person client care experiences (9)
- Other: Please indicate (10)

- Other: Please indicate (11)

- Other: Please indicate (12)

Page Break

Q34 During the COVID-19 pandemic, were any of your skills or expertise not fully utilized in your work?

Yes: Please explain (1) _____

No (2)

Q35 During the COVID-19 pandemic, did you need to learn new knowledge and/or skills?

Yes: Please explain (1) _____

No (2)

Q36 During the COVID-19 pandemic, did you experience opportunities for career advancement?

- Yes, temporary advances (1)
- Yes, permanent advances (2)
- No (3)
- Other: Please indicate (4) _____

Q37 In your opinion, did the COVID-19 pandemic create new roles for dietitians?

- Yes: Please explain (1) _____
- No (2)
- I don't know (3)

Q38 In your opinion, what insights from your practice during the COVID-19 pandemic should be incorporated into dietetics education?

Q39 Is there anything else that was missed that you think is important to share about your work experience during the COVID-19 pandemic?

Q49 This is the end of the survey. Thank you very much for your participation. Please press the forward (->) button to submit your answers. You will be taken to the Catalyzing Dietetics Website.

End of Block: Block 8
