

# Specialist Oncology Training for Dietitians: Championing a New International Standard (SpOT-RD)

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## Description of the initiative

**Background / context** Cancer is the 2<sup>nd</sup> most common cause of death and morbidity in Europe and the number of people living with and beyond cancer is growing. This aging, multimorbid patient group are at the highest risk of malnutrition of any major patient group. Despite representing a large proportion of those requiring medical nutrition support, there is a severe shortage of oncology specialist dietitians internationally and few are truly embedded in the multidisciplinary team. The 2023 Irish Malnutrition Awareness Week Survey found 1 in 5 inpatients had a cancer diagnosis, of which 44% were at risk of malnutrition according to routine screening, versus 31% in those without cancer (Sullivan & Rice, 2024). Although 85% of ambulatory oncology patients experience cachexia, sarcopenia or low muscle quality (Sullivan et al., 2023), malnutrition screening misses many of these (Ní Bhuachalla et al., 2018), with only 1 in 3 patients ultimately being referred to an RD (Sullivan et al., 2021), likely due to severe shortages in RD capacity (Sullivan et al., 2020). Nutritional issues such as taste changes, difficulty swallowing, weight gain and malabsorption require expert management, such as dietary counselling, oral nutrition support or tube feeding. Nutrition education is important for all people with cancer, as widespread misinformation causes stress and leads to the use of complementary and alternative therapies (Sullivan et al., 2021). Timely intervention by an oncology dietitian who is equipped to manage their diverse and changing needs is essential to prevent poor quality of life, adverse clinical outcomes and frailty (Ryan & Sullivan, 2021). Key stakeholders such as ESPEN and ENHA have called for this in line with the Beating Cancer Action Plan, but more educational opportunities are required to ensure skilled dietitians are available to fill these roles.

**Rationale for the initiative** Of 1,308 Registered Dietitians (RDs) in Ireland (CORU, 2023), only 33 WTE posts are specialised in oncology (INDI, 2022). Given the fast-moving developments in oncology nutrition, it is essential that these complex, multimorbid patients are receiving nutrition care from suitably qualified specialists. However, there are no formal speciality training opportunities and RDs depend on local training to develop competency, which is limited by the small number of existing specialists. With major shortages of oncology RDs in Ireland, the UK and the US, this project would be proof-in-principle for the feasibility of post-registration training which could be adapted for use internationally.

**Objectives and scope** We will develop an RD speciality training programme intended to enhance equitable access to evidence-based, patient-centred care in oncology. As a secondary effect, improved career development opportunities may attract more RDs to enter and stay in the discipline. The programme would include core oncology teaching on the different cancer diagnoses and treatments, as well as nutrition screening & assessment skills, muscle-focussed nutrition interventions, case studies in nutrition support and symptom management, complemented by up-to-date standards of care for different clinical scenarios.

## Planned activities & deliverables

**Outline the steps to be taken** 1. A workforce needs assessment exploring current oncology workforce, local training requirements and dietitian learning needs across Ireland and the UK (mapping exercises & surveys); 2. Public-patient involvement (PPI)/Co-production of outline curricula with patients and healthcare professionals; 3. Roundtable & formal stakeholder consultation on draft curriculum; 4. Course development & pilot; 5. Implementation and national roll-out of online training programme; 6. Stakeholder engagement to explore UK and EU implementation.

**What are the concrete deliverables of the project?** 1. Scientific papers describing the results of our surveys and co-design process (current practice, learning needs, stakeholder input); 2. Consultation report and revised curriculum; 3. Implementation & national roll-out of programme.

**What achievements are possible in the next 12 and 24 months?** 12m: Publication of scientific paper & consultation on draft curriculum; 24m: Development, piloting (n=10 RDs) and roll-out (initially advertising the programme via oncology interest groups (270 members)).

## Resources & enablers

**Describe personnel, financial needs** The project lead (PI 0.1 WTE x 24 months) will supervise a research assistant (RA 0.2 WTE x 14.5 months) to complete data collection & analysis. PPI representatives will be paid for their contributions (20 half-days). €40,000 will fund the entire cost of the project. Advertisement of studies and outputs via professional bodies and learned societies will also be funded by the grant.

**Specify how the grant will be spent** Personnel (PI: €18,361.54; RA: €18,185.18). PPI (€1,927.82). Adverts & Dissemination (€1,403.45).

**What factors will make it successful?** The project team includes dietitians from varied backgrounds, lead by an experienced academic cancer research dietitian. Our team brings expertise in research, service development, clinical practice, health professions education, advocacy and policy. The project leverages established multi-sector collaborations and builds on our momentum in developing eLearning provisions for the Irish Nutrition & Dietetic Institute Cancer Nutrition Network (INDI CNN) with no additional costs for online hosting of the course. Funding for the researcher time will allow us to intensify our ongoing work on this project and ensure the programme is evidence-based, not only in its content, but in terms of its delivery. Our project's alignment with the national advanced practice framework promotes buy-in from decision-makers. We have formal endorsement from the Irish Cancer Society, Irish Society for Medical Oncology, Irish Society for Clinical Nutrition & Metabolism and INDI, and continue to seek further endorsements from bodies responsible for health service standards, advocacy and commissioning.

## Results/outcomes & expected impact

**How will the findings be implemented?** The research findings will be immediately implemented in the design and piloting of a training programme. The piloting will be followed up by a roll-out of the programme via the INDI CNN, reaching up to 300 members.

**How will this project advance patient care / contribute to optimal nutritional care?** By standardising oncology dietetics practice and ensuring access to evidence-based, patient-centred care from the point of diagnosis, through to treatment, survivorship and palliative care, we aim to improve patient outcomes throughout the cancer continuum (Erickson & Sullivan et al., 2023).

**What makes the project innovative?** Without formal training programmes for oncology specialist dietitians or RDs who encounter oncology patients in other settings, patients with complex, variable needs often receive delayed, or inconsistent, confusing advice (Sullivan et al., 2020). This programme will increase capacity of skilled RDs to competently and confidently provide the right care, in the right place, at the right time.

**Will the project be likely to influence national nutrition policy?** Informed by this research, we will advocate for funded post-registration training opportunities as part of the National Health & Social Care Professions Policy and minimum staffing of specialist RDs in cancer centres in our submission to the 2025 National Cancer Strategy. We will also work toward standards of care for food & nutrition provision in cancer centres.

**Is the project transferable to other settings / countries?** The programme development model could be used immediately across specialties in Ireland and the UK. We will also consult with the ESPEN Education Committee as a key stakeholder, proposing a working group on speciality training standards, which could be incorporated into the ESPEN guideline series.



**Please tick to confirm the PEN letter of endorsement is attached.  
Incomplete submissions will not be considered.**