

# SMART GOAL SETTING IN CURRENT DIETETIC PRACTICE IN PRIMARY CARE IN THE NETHERLANDS: PRELIMINARY OBSERVATIONS OF THE DIEET STUDY

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## Background

Current developments drive dieticians in the primary care setting to demonstrate their effectiveness to both patients and stakeholders. Working with SMART (Specific, Measurable, Attainable, Realistic, Time-bound) goal setting may increase effectiveness.

This study describes the current dietetic practice in the primary care setting in The Netherlands with regard to goal setting.

## Methods

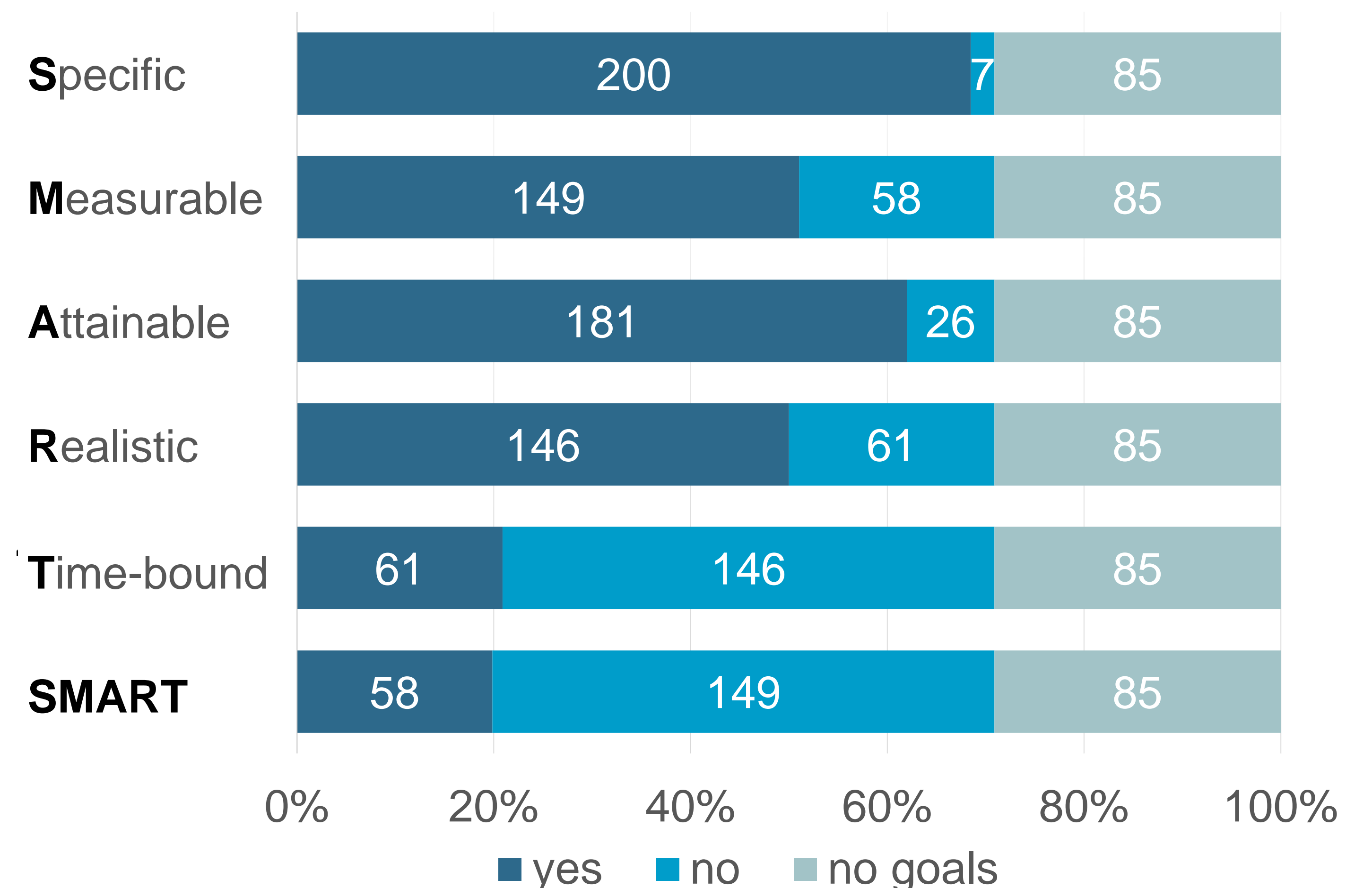
This observational study was part of the DIEET study (DIETetics: Effective and Towards a sustainable profession). Trained students performed structured observations during first dietetic consultations of patients with overweight (BMI  $\geq 25$  kg/m<sup>2</sup>), diabetes mellitus type 2, hypercholesterolemia, hypertension, or malnutrition in the primary care setting. Amongst numerous other factors, observations focused on (SMART) goal setting and nutritional assessment (NA). Chi-square tests were used to express associations between (SMART) treatment goals and NA.

## Results

For these analyses, 292 observations were performed in 113 male (39%) and 179 female patients (mean age  $56.9 \pm 14.4$  years) visiting 147 dieticians (2 male, 145 female; mean age  $43.8 \pm 10.9$  years). Primary diagnoses were: 43% overweight, 37% DM type 2, 11% hypercholesterolemia, 6% malnutrition, 3% hypertension.

In 207 (71%) consultations treatment goals were defined, of which 58 (20%) were SMART. Most treatment goals were Specific (97%) and Attainable (87%), but only 21% were Time-bound (Figure 1).

In 223 (76%) consultations NA was performed, including measurements of body weight (n=216; 74%), height (n=53; 18%), waist circumference (n=60; 21%), BIA (n=55; 19%), and skinfolds (n=1; 0%). Goal setting in general was related to performing NA (OR=2.6, 95%CI: 1.5-4.5, p<0.01), but SMART goal setting was only related to performing BIA measurement (OR=2.4, 95%CI: 1.2-4.6, p<0.01).



**Figure 1.** Frequency (n) of (individual items of) SMART goal setting during first dietetic consultation

## Conclusion

These preliminary results indicate that, in current practice, primary care dieticians define treatment goals in 71% of first consultations, but only 20% of dieticians set SMART goals.

The DIEET study will further explore whether SMART goal setting during the first consultation will result in higher effectiveness.

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**DIEET**

Diëtetik: Effectief en Toekomstbestendig