

A Guide to NSNZ Mentorship and Private Practice Supervision



Welcome to professional mentoring and supervision

Contents

Purpose of these guidelines.....	3
A summary of mentor and supervision requirements.....	4
Mentoring.....	7
What is mentoring?	7
Mentoring definition:	7
Who needs mentoring?.....	8
Clinical supervision needs of Associate Nutritionists working in personalised nutrition practice	9
The mentorship process.....	9
Supervision.....	10
Supervision definition:	10
What you may cover in your sessions:	11
How do mentoring and supervision differ?.....	12
Who needs mentoring and how often?	13
Who needs supervision and how often?.....	13
What type of supervision do I need?.....	13
What is clinical practice supervision?.....	13
What is peer supervision?	14
Who can be your mentor or supervisor?.....	14
What makes a great mentor?	16
What makes a great supervisor?	17
Getting the most out of your supervision	18
Addressing cultural competence and safety in supervision and mentoring sessions.....	20
Recommended mentors and supervisors database	28

Purpose of these guidelines

Kia ora

This document provides a guide to mentoring or supervision needs for current and potential Registered Nutritionists, depending on their role, workplace, and stage on the Registered Nutritionist journey.

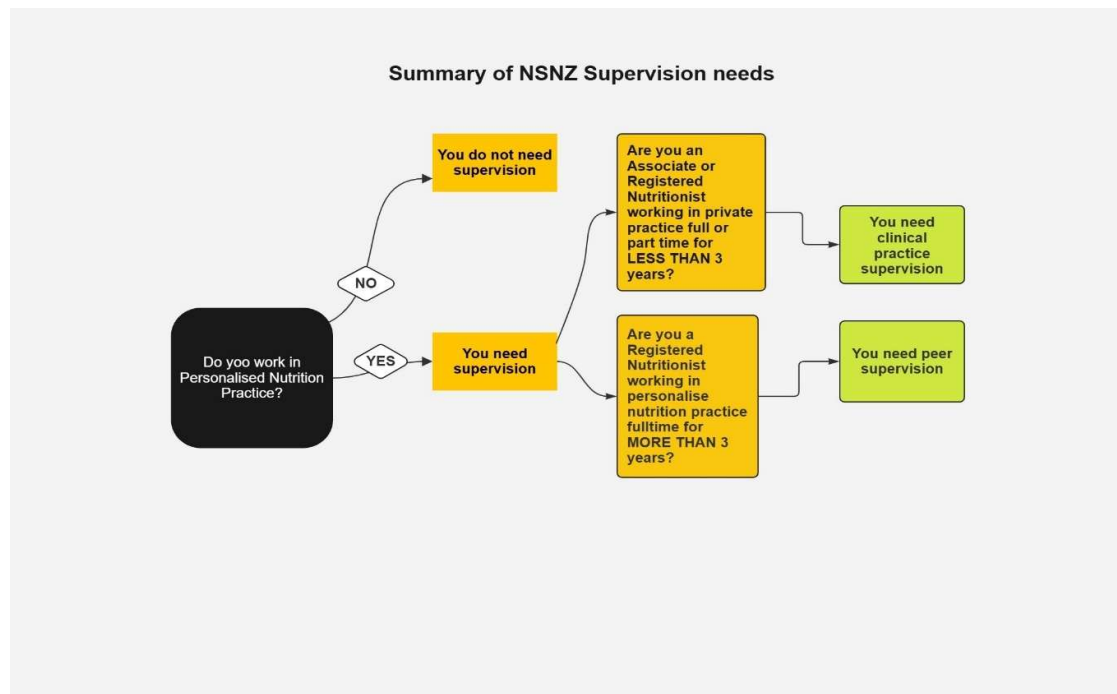
Although mentoring differs from supervision, there is a natural progression from a mentoring relationship for Associate Registered Nutritionists to supervision for working nutritionists and in some cases, there may be a need for both mentoring and supervision. Hence the reason a guide for effective mentoring in a range of public-facing and clinical contexts is also included in this document.

NSNZ registration recognises nutritionists who have relevant qualifications, work experience, a high standard of professional conduct and a commitment to continued professional development. In light of this, mentoring and/or ongoing supervision is required for all our Registered Nutritionists working in practice and all Associate Registered Nutritionists.

A client has the right to expect delivery of safe, competent, and contemporary health care services always. Appropriate mentoring and supervision provide assurance to the NSNZ Council and the community that the registrant's practice is safe and is not putting the public at risk. We also want to ensure you are adequately supported by an experienced practitioner to maintain or develop knowledge and competency, grow confidence and ensure public protection and safety.

These guidelines set out the principles the Registration Panel considers central to safe and effective mentoring and supervision in a range of public-facing and clinical contexts.

A summary of mentor and supervision requirements



* Personalised Nutrition practice means targeted nutrition services through the application of Nutrition Practice by Practicing Nutritionists, for the purposes of optimising health for individuals that is specific to their needs in a formal manner (e.g., consultation). This includes nutritionists in any kind of public facing role (webinars, social media, online and face to face consultations, green health, health coaching, personal trainers and so forth)

Advice includes but not limited to supporting optimal good health, health remediation and recovery, and improving human performance, based on genetic, phenotypic, medical, nutritional, and other relevant information about individuals or groups of individuals, or populations.

Note *1 full time equivalent = 40 hours a week. Part time equivalent = 0.5 FTE = less than 20 hours a week

Mentor or supervision?	When and how many sessions?	Mentor/Supervisor requirements	Format
Mentor options			
Mentor All Associate Registered Nutritionists	Approved Associate Registered Nutritionists must undergo one year of mentorship if studying or working full time, or two to three years if studying or working part time *1 (A minimum of 6 one-hour sessions over 1, 2 or 3 years)	A Registered Nutritionist, Registered Dietitian, or nutritionist recognised and respected in the nutrition field who can maximise mentees potential, develop their skills and improve their performance. They must be able to provide clinical nutrition advice if the Associate is working in personalised nutrition practice. Ideally your Mentor has experience in the field of nutrition you are planning on pursuing e.g. research, public health, health communications, education, food industry, personalised nutrition practice.	One -on -one or group sessions either face to face, or online
Supervision options			
Clinical practice supervision is compulsory for the following practitioners: <ul style="list-style-type: none"> All Associate Nutritionists working in personalised nutrition practice All Associate Nutritionist or Registered Nutritionist in any kind of public facing role (webinars, social media, online and face to face consultations, green health, health coaching, personal trainers and so forth) All newly trained Registered Nutritionists working in personalised nutrition practice in their first three years of practice 	Associate Registered Nutritionists. Working full time ten one-hour sessions a year Working part time *1 Between 4 to 6 one-hour sessions a year Registered Nutritionists Working full time *1 10 one-hour sessions a year Working part time *1 Between 4 to 6 one-hour sessions a year	A Registered Nutritionist or Dietitian with over 5 years of experience in the field of nutrition who can provide clinical nutrition advice, maximise mentees potential, develop their skills and improve their performance. It is strongly encouraged that professionals interested in becoming a supervisor have received at least 2 years supervision themselves as a supervisee.	One-on-one or group sessions either face to face, or online At least 30% of your sessions must be one-to-one with your supervisor

<ul style="list-style-type: none"> all overseas trained nutritionists for their first year of practising in NZ nutritionists returning to personalised nutrition practice after a break of 3 years or more nutritionists changing their area of practice nutritionists working in personalised nutrition practice with identified competence deficits 			
Supervision options (<i>continued</i>)			
<p>Peer supervision (which may or may not include clinical practice discussion) is compulsory for the following practitioners:</p> <ul style="list-style-type: none"> all Registered Nutritionists working in personalised nutrition practice after their first three years of practice 	<p>Registered Nutritionists</p> <p>Working full time *1</p> <p>Minimum of 4 one-hour sessions a year</p> <p>Working part time *1</p> <p>Minimum of 2 one-hour sessions a year</p>	<p>A Registered Nutritionist or Dietitian with over 5 years of experience in the field of nutrition and who has ideally received recognised supervision training.</p> <p>OR</p> <p>Another allied health professional who has received recognised supervision training.</p> <p>(see https://www.alliedhealth.org.nz/ for a list of allied health professionals)</p> <p>We also strongly encourage professionals interested in becoming a supervisor to have received at least 2 years supervision themselves as a supervisee.</p> <p>Note: A Registered senior nutritionist is less likely to need to work with a nutritionist or dietitian. Hence supervisors without nutrition training such as Counsellors, or other allied health professional supervisors will be acceptable for our more senior nutritionists who have been working in the industry for more than 3 years</p>	<p>All your sessions must be one-to-one with your supervisor</p>
<p><small>* Personalised Nutrition practice means targeted nutrition services through the application of Nutrition Practice by Practicing Nutritionists, for the purposes of optimising health for individuals that is specific to their needs in a formal manner (e.g., consultation). This includes nutritionists in any kind of public facing role (webinars, social media, online and face to face consultations, green health, health coaching, personal trainers and so forth). Advice includes but not limited to supporting optimal good health, health remediation and recovery, and improving human performance, based on genetic, phenotypic, medical, nutritional, and other relevant information about individuals or groups of individuals, or populations.</small></p>			

Mentoring

What is mentoring?

The purpose of mentoring is to connect an individual who has a lot of knowledge and experience with someone who hasn't gained the same knowledge or experience—yet.

Mentoring definition:

Mentoring, for the purpose of NSNZ guidelines, is a relationship in which the mentor facilitates the personal and professional growth and development of other nutritionists (mentees).

It is an **informal** process to support and encourage people to manage their own learning in order that they may maximise their potential, develop their skills, improve their performance, and become the person they want to be.

It is a teaching-learning process where the mentor is considered a teacher, guide, or tutor of the mentee. Mentors are role models who also act as guides for students' personal and professional development. In many cases, mentors also provide emotional support and encouragement.



Who needs mentoring?

At NSNZ we expect all our Associate Registered Nutritionists to undertake a year of mentoring to provide you with guidance and support that **may** cover the following:

All Associate Registered Nutritionists

- ✓ Explore and decide on different career pathways and make steps towards getting a job or working towards developing the skills and experience needed for that specific role
- ✓ Develop specific skills or further build on your nutrition knowledge
- ✓ Knowledge transfer
- ✓ Problem solving
- ✓ Network opportunities
- ✓ To be your cheerleader and keep you going when things get tough
- ✓ Enhance business skill development
- ✓ To build your business – The 4 P's product, price, place, promotion. From helping with marketing and promotion to setting up processes and finances
- ✓ To provide advice and guidance to continuing competency and professional development opportunities
- ✓ Mentoring may also be relevant where a practitioner is changing their scope of practice

Associate Registered Nutritionists intending on working in practice

- ✓ Ensure you are working within your scope of practice when you do start working
- ✓ Work through real clinical cases and questions

*Mentoring does **not** cover discussions about individual clients as there is no formal contract detailing confidentiality*

Clinical supervision needs of Associate Nutritionists working in personalised nutrition practice

All Registered Associate Nutritionists who are working in personalised nutrition practice undertake supervision. Your mentor and supervisee may be the same person so long as they have the required qualifications.

The mentorship process

Step 1. You name your mentor on the initial application through Gecco.

Step 2. Once you are accepted as an Associate Registered Nutritionist, the mentor will work with you, the applicant, to set 3 to 4 goals for your provisional year (or two) during the first few meetings. See **Associate registration goals sheet** on the NSNZ website <https://www.nutrition society.ac.nz/registration#supervision>

Step 3. Mentoring duration. If you are in part-time work or study, it may take 2 to 3 years for you to meet the criteria of one-year full-time work experience or study. Also, it may take you some time to find nutrition-related work. In this situation, the mentor would be expected to continue the mentoring relationship for longer.

*As a rule of thumb, the mentee must undergo one year of mentorship if working/studying full time, or two to three years if working/studying part time *1 with a minimum of 6 one-hour sessions over 1 or 2 years.*

Note. If the Associate is already working in personalised nutrition practice, they are also required to undertake **clinical practice supervision**. The mentor may also be the supervisor if they have the appropriate training.

Step 4. The mentor will complete a brief report (See **Mentor report template** [here](https://www.nutrition society.ac.nz/registration#supervision) (<https://www.nutrition society.ac.nz/registration#supervision>) at the end of the mentoring period – commenting on the progress that the candidate has made, the applicant's accountability and professional standing if applicable, any concerns they may have about the graduate, and whether they think the applicant should be considered to continue as an Associate Registered Nutritionist.

Step 5. Apply for full registration. It would be expected that an Associate Registered Nutritionist would apply for full registration within two to three years of gaining registration and must apply within 5 years.

Reimbursement of the mentor by the applicant is optional. However, if the mentor is also acting as your supervisor then expect to pay for their services.

Supervision

The purpose of supervision is to provide accountability and support and explore practice and performance.

Supervision definition:

Supervision for the purpose of NSNZ guidelines incorporates elements of directions and guidance. It is a **formal** process of professional support and learning, undertaken through a range of activities, which enables individuals to develop knowledge, confidence and competence, assume responsibility for their own practice, and ensures public protection and safety.



What is supervision?

For the purpose of the NZNZ guidelines we have used the terms “clinical and peer supervision”.

This is because supervision may follow a different model depending on the developmental stage of the supervisee. A student or new graduate might experience more direct structured clinical or practice coaching or teaching in supervision (which we will call clinical practice supervision) compared to an experienced practitioner's facilitated reflection on practice (which we will call peer supervision). The model of supervision changes as the supervisee becomes more experienced. Howard, Burns and Waitoki succinctly describe the variants of supervision as existing as part of a continuum:

The many variants of supervision range from formal pre-registration or 'training' supervision to peer consultancy (supervisee seeks non-binding advice from a consultant). Each could be considered as being located on opposite ends of a continuum where dimensions such as level of accountability and responsibility of supervisor, extent of evaluation, and power difference between supervisor and supervisee vary, these being typically high in training supervision and lower in peer consultancy.

Supervision allows space and time on a regular basis for facilitated, in-depth reflection on practice from an experienced practitioner. Supervision empowers the supervisee to achieve, sustain, and creatively develop a high quality of practice through means of focused support and development.

Professional supervision promotes safe and competent practice, supports professional development and new learning, extends expertise, improves professional identity, and enables reflection on practice. Professional supervision benefits the Registered Nutritionist, the reputation of the profession, and the clients and community through providing quality assurance.

What you may cover in your sessions:

- ✓ Seeking solutions, creating ideas, dreaming possibility
- ✓ Reflective practice
- ✓ Clinical case studies you bring to your session (for those undertaking Clinical practice supervision. This may not be covered in peer supervision)
- ✓ Workplace challenges
- ✓ Emotional support
- ✓ Clinic processes
- ✓ Continued competency for recertification
- ✓ Career change and professional development opportunities
- ✓ Cultural competence and safety
- ✓ Working within your scope of practice

How do mentoring and supervision differ?

There can be an overlap between supervision and mentoring, in which supervision may incorporate elements of teaching and guiding. This will depend on where you are at in your nutrition career journey: a Registered Nutritionist with years of experience under their belt will have differing needs to a new graduate.

Supervision and Mentoring can both provide valuable opportunities for learning and growth. However, they also differ in several ways. The main ways that supervision and mentoring differ are:

- Supervision is typically more formal than mentoring and operates within clear boundaries contained in a written agreement between supervisor and supervisee.
- Supervision is an activity to be engaged in throughout the career span of the nutritionist and engagement with a supervisor can span many years. Mentoring is typically more short term. For example, mentoring on the NSNZ Associate Registered Nutritionist programme is required to be completed within a 1 to 3-year period.
- Supervision is dedicated to incorporating reflection as a principal learning modality. The emphasis on reflective practice enables supervision to facilitate a depth of learning not typically experienced in mentoring.
- Becoming a supervisor typically requires a minimum level of experience and training.
- Supervision observes a responsibility to maintain professional standards of conduct and clinical skill of the supervisee within the scope of supervision practice.

Who needs mentoring and how often?

Approved Associate Registered Nutritionists must undergo one year of mentorship if working full time, or two years if working part time ***1** (A minimum of 6 one-hour sessions over 1, 2 or 3 years) ***1**

Who needs supervision and how often?

Supervision may follow a different model depending on the developmental stage of supervisee. A student or new graduate might experience more direct structured clinical coaching or teaching in supervision (**clinical practice supervision**) compared to an experienced practitioner's facilitated reflection on practice (**peer supervision**). The model of supervision changes as the supervisee becomes more experienced.

What type of supervision do I need?

Clinical practice supervision is compulsory for the following practitioners:

- all newly trained Registered Nutritionists **working in personalised nutrition practice** in their first **three** years of fulltime practice.
- all overseas trained nutritionists for their first year of practising in NZ.
- nutritionists returning to personalised nutrition practice after a break of 3 years or more.
- nutritionists changing their area of practice.
- nutritionists with identified competence deficits who wish to start or are already working in private practice.

What is clinical practice supervision?

Clinical practice supervision is primarily focused on learning to develop and improve practise and ensuring safe practice. It also provides an opportunity to discuss individual cases in depth. It may also involve assessment by the supervisor of the supervisee.

Peer supervision is compulsory for the following practitioners:

- all Registered Nutritionists **working in personalised nutrition practice** ongoingly after their first three years of fulltime practice.

Personalised Nutrition practice means targeted nutrition services through the application of Nutrition Practice by Practicing Nutritionists, for the purposes of optimising health for individuals that is specific to their needs in a formal manner (e.g., consultation). Advice includes but not limited to supporting optimal good health, health remediation and recovery, and improving human performance, based on genetic, phenotypic, medical, nutritional, and other relevant information about individuals or groups of individuals, or populations.

What is peer supervision?

Peer supervision does not necessarily involve reflection on clinical practice but on professional behaviour, interactions with others and outcomes, keeping up with developments in the profession, identifying professional training and continuing development needs, and ensuring the practitioner is working within professional codes of conduct and boundaries.

Who can be your mentor or supervisor?

	Skills and experience	Qualifications
Mentor	<ul style="list-style-type: none"> ✓ A mentor is a Registered Nutritionist, Registered Dietitian or nutrition expert who is recognised and respected in the field of nutrition, with at least 5 years work experience. ✓ They have a passion for the profession and are committed to guiding new graduates. ✓ The applicant selects their own mentor. ✓ It is recommended to find a mentor who has experience or at least an interest in the applicant's field/s of interest. It is preferable that your mentor is not your boss. ✓ You may be expected to pay for mentoring 	Degree or postgraduate qualification in the field of nutrition
Clinical Practice Supervisor Clinical practice supervision is compulsory for the following practitioners: <ul style="list-style-type: none"> • all newly trained Registered Nutritionists in their first three years of practice • All Associate Nutritionist or Registered nutritionist in any kind of public facing role (webinars, social media, online and face to face consultations, green health, health coaching, personal trainers and so forth) 	<ul style="list-style-type: none"> ✓ A Registered Nutritionist or Registered Dietitian with over 5 years of experience in the field of nutrition and who has ideally received recognised supervision training. ✓ The supervisor should be someone who listens, inspires, challenges, and is a role model and who supports growth and development of the individual. She/he may provide oversight of nutrition, management and communication issues, skill/technique, decision making and problem solving. ✓ We also strongly encourage supervisors to have received at least 2 years supervision themselves as a supervisee. ✓ You will be expected to pay for supervision. 	Degree or postgraduate qualification in the field of nutrition A supervision qualification or supervision experience

<ul style="list-style-type: none"> all overseas trained nutritionists for their first year of practising in NZ nutritionists returning to personalised nutrition practice after a break of 3 years or more nutritionists changing their area of practice nutritionists working in personalised nutrition practice with identified competence deficits 		
<p>Peer supervisor</p> <p>Professional supervision is compulsory for the following practitioners:</p> <ul style="list-style-type: none"> All Registered Nutritionists ongoingly after their first three years of personalised nutrition practice 	<p>✓ A Registered Nutritionist or Registered Dietitian with over 5 years of experience in the field of nutrition and who has received recognised supervision training.</p> <p>OR</p> <p>✓ Another allied health professional who has received recognised supervision training. (see https://www.alliedhealth.org.nz/ for a list of allied health professionals).</p> <p>✓ We also strongly encourage supervisors to have received at least 2 years supervision themselves as a supervisee.</p> <p>✓ You will be expected to pay for supervision.</p> <p>✓ <i>Note: A Registered Senior Nutritionist is less likely to need to work with a Nutritionist or Dietitian. Hence, we feel that supervisors without nutrition training such as Counsellors, or other allied health professional supervisors will be acceptable for more senior nutritionists who have been working in the industry for more than 5 years.</i></p>	<p>Degree or post grad qualification</p> <p>A supervision qualification or supervision experience.</p>

What makes a great mentor?

- A mentor is a Registered Nutritionist, Registered Dietitian or nutrition professional who is recognised and respected in the field of nutrition, with at least 5 years work experience. They have a passion for the profession and are committed to guiding new graduates. It is recommended to find a mentor who has experience in the applicant's field/s of interest. It is preferable that your mentor is not your boss.
- If the applicant works in practice, they must find a mentor who is also qualified to supervise, and be experienced in providing dietary advice to clients. In this case your mentor also becomes your clinical practice supervisor. If this is not possible, the applicant will also need to find a supervisor as well. You will be expected to pay for supervision sessions.
- Mentors will have a wealth of knowledge, expertise, and experience that enables them to support and guide the new graduate's development along their career pathway, whether that is higher education or entry into the work force.
- The mentor could be in paid work, voluntary work, or retired.
- Their role is to provide guidance, to ask questions, to challenge, and to facilitate exploration, cultural competency, risk taking, and professional growth in an environment that is safe, encouraging, supportive, and affirming. They will also act as role models.
- Although mentoring is less formal than supervision, it should cover the goals of the candidate, continuing competency, cultural competency, issues faced at work or study and solutions. The mentor and candidate should document the outcome of each meeting.

What makes a great supervisor?

- They have the qualifications, skills, and experience to support you wherever you are at on your career pathway.
- They treat others as they would like to be treated.
- They are a great at building cultural competence and safety to enable us to create fair, diverse practitioners, and reflect the diverse communities we serve. It will also enable NSNZ Registered Nutritionists to engage meaningfully, and to design and deliver services that meet the needs of all New Zealanders, now and into the future.
- Successful supervisors have high integrity. They exude honesty, sincerity, consistency, and credibility regardless of whether they may potentially displease someone or experience some uncomfortable conflict or negative consequences. They say what they mean and follow through on their actions.
- They set the example. Along the same lines, successful supervisors walk the talk each and every day. They comply with policies and procedures, set an example of leadership, and exude all the behaviours and attitudes they expect of their supervisees.
- They listen and communicate well.
- They encourage the best in people. Outstanding supervisors look for and encourage the best in their people and identify your unique talents
- They lead supervisees to the right answers and solutions. They point you to resources you need to complete a task, suggest people to talk to for guidance, and provide clear instructions and information necessary to do the task. They make themselves available for questions, coaching, and additional support. When you encounter roadblocks, they give advice on how to improve.

Getting the most out of your supervision

What it is	What it is not
<ul style="list-style-type: none"> ✓ A negotiated, formal, professional relationship in which each person has a role to play, rights, and responsibilities ✓ Accountable to the supervisee's employing organisation, and the profession of the supervisee ✓ About providing the best possible service to clients ✓ Ethical ✓ Confidential, within limits ✓ Regular and ongoing ✓ A safe space for the supervisee – culturally and otherwise ✓ Focused on the supervisee's agenda & learning ✓ Educative, but not directly educational ✓ Managerial in the sense that it pays attention to organisational standards ✓ A respectful relationship where learning can go both ways? ✓ Supportive but not 'therapy' 	<ul style="list-style-type: none"> ✗ A chat or gossip session ✗ Counselling or therapy ✗ Management ✗ Performance appraisal ✗ For the supervisor to discuss his/her own issues

Adapted from Davys, A. (2007). Active participation in supervision: a supervisee's guide. (p. 26-42) Wepa, D. (Ed). Clinical supervision in Aotearoa/New Zealand: A health perspective. Pearson Prentice Hall: Auckland.

Useful supervision is characterised by	Useless supervision is characterised by
<ul style="list-style-type: none"> ✓ Empathy, non-judgemental, validation, and encouragement ✓ Is solution focused and plays to the supervisee's strengths ✓ Decreasing anxiety because of supervisor normalising struggles as part of development and learning ✓ Gaining increased insight and self-awareness, and ability to handle more complexity ✓ Management of risk ✓ Management of authority & power ✓ Facilitating safe expression of emotions 	<ul style="list-style-type: none"> ✗ Emphasis on shortcomings ✗ Supervisor being distracted by other activities, falling asleep, watering flowers, answering emails or the phone ✗ Limiting supervisee's autonomy unnecessarily ✗ Cold, aloof or hostile participants ✗ Contributing to workplace stress

Continuing Competency and Re-registration

Registered Nutritionists are required to re-register every 3 years and provide evidence of continuing competency. Each Registered Nutritionist is responsible for determining their continuing competency requirements. There are no set criteria. Each application will be considered on its own merits by the Registration Panel.

To provide evidence of meeting Continuing Competency requirements you can use the documents found on the NSNZ website to guide you on the expectations of what and how to undertake this.

All records are now collated on GECCO, for your own records and for the Registration panel to review.

Addressing cultural competence and safety in supervision and mentoring sessions

All health professionals are expected to provide culturally competent care to people and their whānau or families. Your mentor/supervision sessions should address cultural diversity and learning to function effectively and respectfully when working with and treating people of different cultural backgrounds. All Nutrition Society members must honour the Te Tiriti o Waitangi.

Cultural competence requires an awareness of cultural diversity and the ability to function effectively and respectfully when working with and treating people of different cultural backgrounds. Cultural competence means a healthcare professional has the attitudes, skills and knowledge needed to achieve this.



Mauri Ora defines cultural competence in the following way:

"Individual values, beliefs and behaviours about health and wellbeing are shaped by various factors such as race, ethnicity, nationality, language, gender, socioeconomic status, physical and mental ability, sexual orientation and occupation. Cultural competence in healthcare is broadly defined as the ability of health practitioners to understand and integrate these factors into the delivery of healthcare practice."

Another definition that attempts to capture this more contemporary complex understanding of cultural competence comes from the Medical Council of New Zealand:

“Cultural competence requires an awareness of cultural diversity and the ability to function effectively, and respectfully, when working with and treating people of different cultural backgrounds. Cultural competence means a doctor has the attitudes, skills and knowledge needed to achieve this.”

A culturally competent doctor will acknowledge:

- that New Zealand has a culturally diverse population.
- that a doctor's culture and belief systems influence his or her interactions with patients and accepts this may impact on the doctor-patient relationship.
- that a positive patient outcome is achieved when a doctor and patient have mutual respect and understanding.

Cultural safety requires healthcare professionals and their associated healthcare organisations to examine themselves and the potential impact of their own culture on clinical interactions and healthcare service delivery. This requires individual healthcare professionals and healthcare organisations to acknowledge and address their own biases, attitudes, assumptions, stereotypes, prejudices, structures and characteristics that may affect the quality of care provided. In doing so, cultural safety encompasses a critical consciousness where healthcare professionals and healthcare organisations engage in ongoing self-reflection and self-awareness and hold themselves accountable for providing culturally safe care, as defined by the patient and their communities, and as measured through progress towards achieving health equity. Cultural safety requires healthcare professionals and their associated healthcare organisations to influence healthcare to reduce bias and achieve equity within the workforce and working environment”.

For more information check out:

<https://www.healthnavigator.org.nz/clinicians/c/cultural-competence/#Overview> or
<http://www.climatehealthaotearoa.org.nz/wp-content/uploads/2021/06/Te-Tiriti-o-Waitangi-based-Practice-in-Health-Promotion.pdf>

<https://mauriora.co.nz/about-mauriora/>. Please note the NSNZ currently subsidises this course. Please contact info@nutritionssociety.ac.nz

Honouring Te Tiriti o Waitangi

NSNZ recognises the importance of embedding **Te Tiriti o Waitangi in all aspects of mentorship and supervision**. This ensures that both practitioners and the clients they serve benefit from a system that actively removes barriers, upholds Māori decision-making, and fosters culturally safe practice.

Referring to Te Tiriti o Waitangi-based practice in health promotion

<http://www.climatehealthaotearoa.org.nz/wp-content/uploads/2021/06/Te-Tiriti-o-Waitangi-based-Practice-in-Health-Promotion.pdf> are working towards;

Kāwanatanga (Article 1)

- NSNZ has an opportunity to strengthen **Māori involvement in decision-making** around mentorship and supervision.
- Providing mentors and supervisors with **ongoing learning opportunities** in cultural safety and Te Tiriti-based practice would further support mentees to deliver **mana-enhancing care** to their clients.

Tino Rangatiratanga (Article 2)

- Ensuring that Māori practitioners have **clear, well-supported pathways** for kaupapa Māori mentorship and supervision will help uphold tino rangatiratanga.
- All practitioners—regardless of background—would benefit from **guidance on how to support Māori clients in ways that respect their authority over their own health** and wellbeing.
- There may be opportunities to **strengthen awareness of data sovereignty** to ensure that Māori knowledge, tikanga, and mātauranga Māori are recognised and valued appropriately within the supervision process.

Ōritetanga (Article 3)

- To support equitable access, NSNZ could explore ways to **reduce financial barriers** to mentorship and supervision, particularly for Māori and Pacific practitioners.
- Cultural safety training for mentors and supervisors could include a **stronger focus on anti-racism and bias reduction**, ensuring mentees are well-equipped to **provide equitable and culturally responsive nutrition services**.
- Embedding **feedback mechanisms led by Māori practitioners** could help ensure that mentorship and supervision processes are actively supporting equitable outcomes.

Wairuatanga (Article 4)

- Recognising the **holistic nature of Māori health** in mentorship and supervision would help ensure that practitioners can support clients in a way that aligns with Te Ao Māori perspectives.
- Exploring ways to **incorporate wairuatanga into supervision frameworks**—for both Māori mentees and those supporting Māori clients—could enhance practitioner wellbeing and client care.
- Providing guidance on **how mentors and supervisors can acknowledge wairua, whānau, and whenua** in nutrition practice may be a valuable addition to the existing framework.

Working with Diverse Populations in Supervision and Mentoring

In supervision and mentoring, it is essential to consider the unique needs of diverse populations, including neurodivergent individuals, those with ADHD, paraplegics, the blind, gender-diverse individuals, and the broader LGBTQ+ community. Effective practice requires an inclusive, person-centred approach that fosters psychological safety, accessibility, and equity.

Key Considerations in Supervision and Mentoring

1. Neurodivergent Individuals & ADHD

- Many neurodivergent individuals, including those with ADHD, experience challenges in traditional work and learning environments.
- Research shows that 63% of neurodivergent employees in New Zealand do not disclose their condition due to stigma (Diversity Works NZ, 2022).
- Supervisors should create a supportive space by offering flexible structures, clear communication, and recognising strengths-based approaches.

2. Disability Inclusion: Paraplegics & Blind Individuals

- Physical accessibility should be reviewed to ensure equitable participation.
- Consider alternative communication methods, assistive technology, and remote access options to accommodate different needs.

3. Gender-Diverse & LGBTQ+ Individuals

- Gender identity should be respected using correct names and pronouns.
- LGBTQ+ individuals may face workplace or social discrimination; supervision should provide a safe and affirming space.
- Emerging policies, such as the 2024 updates to New Zealand's transgender inclusion guidelines, reflect a shift toward greater equity in all sectors (Reuters, 2024).
- Supervisors should remain informed about legal protections and best practices for fostering inclusive environments.

Application in Supervision & Practice

- **Reflective Practice:** Encourage self-awareness regarding biases and assumptions.
- **Adaptive Mentorship:** Use individualized strategies that support accessibility, neurodiversity, and LGBTQ+ inclusion.
- **Policy & Best Practices:** Stay updated with inclusion-focused resources and legislation.

Further Learning & Professional Development

To remain effective and informed, supervisors and mentors should actively engage in ongoing training and self-directed learning in diversity, equity, and inclusion. Recommended actions include:

- Enrolling in relevant workshops and courses, such as those offered by **Diversity Works NZ** and **New Zealand Human Rights Commission**.

- Reading recent reports and guidelines, such as the **New Zealand Workplace Diversity Survey 2022** and **Stats NZ Diversity & Inclusion Report 2023**.
- Following updates on national policies and global best practices to ensure mentoring and supervision remain inclusive and relevant.

By integrating these principles and committing to continuous learning, professionals can foster an equitable and supportive environment for all individuals.

References

- Diversity Works NZ (2022). Neurodivergent Workers Overlooked in New Zealand. Retrieved from diversityworks.nz.org.nz
- Reuters (2024). New Zealand to Update Transgender Inclusion Guidelines. Retrieved from reuters.com
- Stats NZ (2023). Diversity & Inclusion Report. Retrieved from stats.govt.nz
- Public Service Commission (2024). Diversity, Equity, and Inclusion Plan 2024-2025. Retrieved from publicservice.govt.nz

Supervision session content checklist

Name of Supervisee:

Name of Supervisor:

This checklist aims to provide supervisors and supervisees with the types of topics and functions that may be useful to include in and make the most of your supervision sessions.

This list is a guideline only. What you decide to cover in your sessions will depend on the needs of each supervisee.

CPD requirements: Please ensure that the supervisee refers to the NSNZ website and GECKO to ensure you are meeting your CPD requirements to be able to Register or Reregister

Item	Examples of topics/functions you might cover	Date topic covered and some detail.
EDUCATIVE TOPICS/FUNCTIONS		
Clinical case studies and problem solving	<p>Success with a client (celebration) My client is struggling to meet the goals we have discussed. Do I need to take a different approach, what can I do differently to support this person?</p> <p>Working through a client case take</p> <p>A recording of oneself working with a client (for feedback) Working through the client action plan (for feedback)</p>	
Linking theory to practice	I understand FODMAPs now how do I take my client through the process?	
<p>Cultural competency and diversity</p> <p>Ensuring ongoing learning and growth re Te Tiriti o Waitangi and broader cultural diversity competence, including our Rainbow communities.</p>	<p>This is not a culture I have much knowledge about. What would be a normal / acceptable / appropriate in this culture?</p> <p>Explore strategies for promoting cultural competency and delivering culturally sensitive care.</p> <p>How do I ensure I am meeting the needs of NSNZ continuing competency in this space</p> <p>Support on identifying professional development opportunities in the diversity space?</p>	
Identifying certification	I wish to focus on sports nutrition, what extra qualifications or	

Item	Examples of topics/functions you might cover	Date topic covered and some detail.
and/or training needs and set goals accordingly	experience do I need? How or where can I get this?	
Identifying red flag areas and developing a plan	My client has been diagnosed as diabetic and would like to try unmedicated and food/lifestyle management at this stage My client wants help with curing his cancer through diet.	
Developing a professional referral network	This person seems to have an eating disorder. Who and how do I refer this person on?	
ADMINISTRATIVE TOPICS/FUNCTIONS		
CPD requirements	Working through NSNZ Continuing Professional Development (CPD) requirements for registration.	
Manage workload commitments	Learning to voice your needs with your boss. Managing your own time efficiently.	
Roles and responsibilities	Role confusion. What is their role/my role.	
I think I have mucked up	Finding solutions to a problem. Taking ownership – what happens when I make a mistake?	
Session timing	Developing processes and information sheets to save time. How much to cover in one session. Developing multi session packages.	
Link practice to professional codes and standards	Do I understand what codes I need to be aware of and how I link to my clients and practice? NZ Code of Health and Disability offers 3 x 30 min modules to help you to apply the code to practice and can be used towards CPD http://www.hdc.org.nz/education/online-learning/ Health promotion competencies for Aotearoa New Zealand https://hpfnz.org.nz/assets/Health-Promotion-Competencies-Final.pdf	
Examine ethics and ethical decision-	Am I working within the NSNZ Code of Ethics https://assets.nutritionociety.ac	

Item	Examples of topics/functions you might cover	Date topic covered and some detail.
making and link to practice	nz/Downloads/Code-of-Ethics.pdf Uncertainty how to proceed with an ethical dilemma.	
Professional approach to planning and documentation	How are you recording and keeping client records to ensure ease of follow up as well as client and practitioner safety?	
Professional indemnity insurance	Are you insured? Do you need to be?	
SUPPORTIVE TOPICS/FUNCTION		
Explore emotional reactions in relation to work	Explore an issue with a work mate or a client and how best to manage this. I am going through a lot at home and I'm not sure how I will be with clients	
Monitor supervisees stress and overall health	Ensuring the supervisee is managing themselves well and avoiding burn out	
Manage conflict and other difficult or distressing situations	Aggressive or pushy parent of your teen or child client Work conflict Pressure to do more hours/client hours	
Career/job change	I want to resign I don't feel valued	
PROFESSIONAL COLLABORATION:		
Explore further opportunities for professional collaboration with other healthcare providers, interdisciplinary teams, community organisations.	How can I connect with other nutritionists or health care professionals – NSNZ conference, regional groups, Facebook, volunteer for NSNZ... What support can I get to further my skills – contacting the New Zealand Heart Foundation, Diabetes NZ etc. Explore voluntary positions to help gain community connection	

Recommended mentor and supervisor database

Many of our supervisors and mentors are available for virtual sessions

Mentors

Name	Based	Field of Expertise	Special interest area(s)	Contact information
Maria Choukri Registered Nutritionist	Ōtautahi Christchurch	Education	Nutrition and mental health	maria.choukri@ara.ac.nz
Erina Korohina Registered Nutritionist	Tauranga Bay of Plenty	Scientific Research (Academic),	Kaupapa Māori approaches to nutrition	erina.korohina@thecentreforhealth.co.nz
Sharon Sutton Registered Dietitian	Ōtepoti Dunedin	Practice	Gut health and geriatric nutrition	sharon@purplecarrot.co.nz
Diana Anderson Registered Nutritionist	Tāmaki Makaurau Auckland	Public Health, Scientific Research (Academic), Practice	Diabetes and weight loss	anddiana@gmail.com
Jade Winter Registered Nutritionist	Hokitika, West Coast	Practice, Public Health	Reproductive health & early life, sports nutrition, coeliac disease/IBS	jade@jadewinternutrition.co.nz
Bek Parry Registered Nutritionist	Waitaha, Canterbury	Public Health		bek@bekparry.nz
Sarah Mitchell - Weston Registered Nutritionist	Tāmaki Makaurau Auckland	Scientific Research (Academic),		sarah@benutrition.co.nz 021 451 771
Sally Mackay Registered Nutritionist	Tāmaki Makaurau Auckland	Scientific Research (Academic),	Public Health	sally.mackay@auckland.ac.nz
Luke Stanaway Registered Nutritionist	Tāmaki Makaurau Auckland	Practice		luke@nourishapp.co.nz 021 029 65220
Megan O'Mara Registered Nutritionist	Paraparau, Kapiti Coast	Practice	Behavioural eating/emotional hunger, weight management, recreational sports nutrition, lifestyle disease management, IBS, menopause	megan@balancednutrition.co.nz
Sheena Hendon Registered Nutritionist UK trained Dietitian, NLP Practitioner	Tāmaki Makaurau Auckland	Practice	Women, child, and gut nutrition and health, hormonal health, metabolic health general health. Business management	sheenah@sheenahendonhealth.co.nz 021 316 677
Sara Richardson Registered Dietitian	Dunedin	Practice	Sports and performance nutrition, female athletes, disordered eating, gut, body composition, general health, adolescent/aging athletes	sara.richardson@hpsnz.org.nz 021329555

Supervisors who have undergone specific supervision training

Many of our supervisors and mentors are available for virtual sessions.

Name	Based	Field of Expertise	Special interest area(s)	Contact information
Sheena Hendon Registered Nutritionist (UK trained Dietitian), NLP practitioner	Tāmaki Makaurau Auckland	Practice	Women, child, and gut nutrition and health, hormonal health, metabolic health general health. Business management	sheenahe@sheenahendonhealth.co.nz 021 316 677
Rebecca Ward Registered Nutritionist	Ōtautahi Christchurch	Practice	Disordered eating, mental health, family and children's nutrition	beckwardnutrition@yahoo.co.nz 021 164 1391
Julie Carter Registered Dietitian	Tāmaki Makaurau Auckland	Public Health	Food security, food environments and food systems	Julie.carter@xtra.co.nz 027 441 4336
Sharon Erdrich Registered Nutritionist	Tāmaki Makaurau Auckland	Practice Research	Gut health, gut microbiome, functional GI disorders, holistic health approaches	sharon@houseofhealth.co.nz 09 846 5566
Nevedita Sharma Vij Registered Nutritionist	Tāmaki Makaurau Auckland	Practice, Public Health	Prevention and management of long term conditions, diabetes, heart health, pre- and post-natal nutrition, women's health, eating disorders	mnsconsultant@outlook.com 021 100 6585
Sara Richardson Registered Dietitian	Dunedin	Practice	Sports and performance nutrition, female athletes, disordered eating, gut, body composition, general health, adolescent/aging athletes	sara.richardson@hpsnz.org.nz 021329555
Jeni Pearce Registered Dietitian (with IOC and SDA qualifications)	Tāmaki Makaurau Auckland	Practice	Sports nutrition, disordered eating, general health, business management, female health	jenipearcentz@gmail.com 027 446 0346

Other supervisors without specific supervision training

Name	Based	Field of Expertise	Special interest area(s)	Contact information
Jade Winter Registered Nutritionist	Hokitika, West Coast	Practice, Public Health	Reproductive health and early life, sports nutrition, coeliac disease/IBS	jade@jadewinternutrition.co.nz
Luke Stanaway Registered Nutritionist	Tāmaki Makaurau Auckland	Practice		luke@nourishapp.co.nz 02102965220
Hayley Horne Registered Dietitian (non practising)	Wānaka, Otago	Public Health	Food systems	horne.s.hayley@gmail.com
Julianne Taylor Registered Nutritionist	Tāmaki Makaurau Auckland	Nutrition Communications	Nutrition for autoimmune disease and inflammatory conditions, particularly rheumatoid arthritis	juliannetaylor@xtra.co.nz 021 680 703

