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# "If you are thinking of a career in an allied health profession, everything is achievable. You just need to seek the correct guidance and support to help you on your way."

Ashley left the army with only GCSE qualifications. But with support, encouragement and determination, he graduated with a BSc in dietetics and is now a senior dietitian.

## **Ashley Smith**

#### Senior dietitian

#### Employer or university

East Lancashire Hospitals NHS Trust Ashley Smith senior dietitian

### How I got into the role

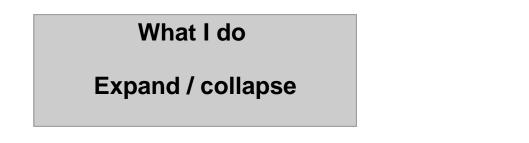
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I was previously a trainee electronics technician in the British Army. When I left in 2000, I didn't have a clear idea of what career would come next but I had a keen interest in sports, fitness and eating well; would it be possible to combine those interests into a future career?

In 2003, I was working in the NHS as a support worker for people with learning disabilities when a dietitian introduced me to the work of allied health professionals (AHPs). I went home that evening and googled dietitian and came across the world of AHPs!

With my highest qualifications being GCSEs, I knew I would have to find a way to get to university, without A-levels. With the help of my partner, I looked into alternative ways to get onto a degree course. I ended up enrolling onto an access course in science at North Trafford College which was a recognised pathway into higher education.

Work was really supportive and arranged my shifts around the days I wasn't at college. After completing the course, I undertook a BSc in dietetics at Leeds Metropolitan University and graduated four years later.



Day to day, I am a clinical lead critical care dietitian. I work within a multi-disciplinary team (MDT), consisting of doctors, nurses, pharmacists, physiotherapists and speech and language therapists.

I see adults on critical care with a life-threatening illness or injury. During critical illness, a patient's nutritional needs can change daily, and it is my job to ensure they receive the correct amount of nutrition to help their recovery. Most of the time, nutrition for these patients is delivered through a tube into a patient's stomach or blood supply.

On other days I will be attending patient MDT meetings, working on nutrition policies and protocols, or delivering training to other members of the MDT. I have recently been involved in an international research study, working closely with the research nurses.

### The best bits and challenges

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Being a dietitian is a really good career because it can be as varied as you would like it to be. One day, I will be seeing patients, the next I will be teaching nursing staff, junior doctors and other AHPs or involved in research projects.

Being a critical care dietitian, I see patients at their worst and help them through this period with nutrition support. There is nothing better than seeing them leave the critical care unit and working with them on their journey to recovery.

Managing time between clinical and non-clinical work is my biggest challenge. I always put my clinical work before non-clinical. However, some of the non-clinical work such as

guidelines, protocols and research projects are just as important and I need to be disciplined to make time to work on these.

At the time of writing this, my clinical work has been dominated by looking after Covid-19 patients. These have been challenging times. There have been lots of logistical changes such as wards becoming critical care units, redeploying non-ICU staff and upskilling them in a short space of time, big demand on enteral feeds (sterile nutritional liquid which is designed to be administered via a feeding tube) and pumps and wearing full personal protective equipment (PPE)!

Despite these additional pressures, our sole focus is our patients and supporting their recovery from the virus. I was involved in planning for the additional <u>parenteral</u> [1] feeds and feeding pumps we were likely to need. I had to quickly write a guide on critical care dietetics and delivered intensive training with identified team members to ensure they had the necessary knowledge and skills to look after a Covid-19 patient. And as clinical lead for making sure patients on ventilators are fed through a nasogastric tube, or intravenously, I was responsible for making the right decisions, with the support of the other acute clinical leads.

#### Life outside work

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Outside of work, I live with my wife, Catherine and three children, Martha, Florence and Seb, and am often stuck in my car dropping the kids off at dance, gymnastics or football! But when I am not being a chauffeur, my main hobby is running.

There is nothing better than getting my trainers on, getting up on the fells and exploring new trails. It really relaxes me and is my escape from my hectic life. We are an outdoorsy family and regularly go on family walks or bike rides. I am also a craft beer enthusiast and, when I get the chance, I drag Catherine to Manchester's latest brewery tap rooms.

### Career plans and top tips for others

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If you are thinking of a career in an allied health profession, everything is achievable. You just need to seek the correct guidance and support to help you on your way. Try to get experience shadowing AHPs to get a feel for the job and find out as much as you can about the profession.

I left the army with only GCSE qualifications. But with support, encouragement and the determination you get from the armed forces, I got to where I wanted to be. If I can do it, everyone else can too!

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Links

[1] https://www.healthcareers.nhs.uk/glossary#Parenteral