

DDPG Leadership Interviews:

Education, Career Path, Advice

Janice MacLeod, MA, RDN, CDCES, FADCES:

1) Where did you obtain your degree in dietetics and nutrition? Is there anything you'd like to share about your schooling experience and internship program?

I received my B.S. in Dietetics and Biology at Eastern Mennonite University in Harrisonburg, VA which is known for having a strong dietetics program. I then completed my internship at Miami Valley Hospital in Dayton, OH including clinical, administrative and community nutrition.

I obtained my Master's in Psychology from Hollins University in Roanoke, VA in Psychology. I was fortunate to be able to take a year off to devote to my Master's program and chose to complete a master's program in a different discipline, Psychology to build on my nutrition skills. I would also encourage RD's to consider an MBA as this would also be very helpful to compliment the RDN as well.

2) Can you discuss your career path as a dietitian?

My first job was at Roanoke Memorial Hospital in Virginia as a Certified Diabetes Educator and Registered Dietitian. It was a great learning experience for a new dietitian-I was in the medical library every evening reading and studying. I worked in an inpatient program counseling patients on diabetes care and management and then moved to working with patients in an outpatient setting. We did training on diabetes education and management as well as intensive boot camp trainings. One of the most helpful aspects of the job was working on a multidisciplinary team with endocrinologists, nurses, psychologists, and physical therapists. I was able to learn a lot from the various disciplines which helped me be more effective as a Registered Dietitian. I worked as a clinical dietitian for 15 years and then moved into industry.

Throughout the years at the hospital I was always exposed to products related to diabetes from pharmaceutical reps. I then moved into the diabetes industry with Johnson and Johnson Diabetes Care first in a sales position for blood glucose monitors for LifeScan. I then moved into sales training and product development work on diabetes management software. I then moved to another Johnson and Johnson Company in a medical science liaison role to bring a first-in-class diabetes medication to market.

I then began working in diabetes management at the University of Maryland hospital system briefly before returning to industry.

I now work at Medtronic Diabetes doing clinical advocacy work with national and international thought leaders and professional organizations to promote optimal technology adoption and integration into practice as a standard of care. I manage advisory boards, train speakers, build educational content and conduct webinars, panels and symposia. I am involved in research and authoring publications. I serve in various leadership roles with several diabetes organizations including ADA, ADCES and the Time In Range Coalition, and am currently serving as Chair for the Diabetes Dietetics Practice Group with the Academy of Nutrition and Dietetics.

3) How did you become interested in diabetes nutrition?

My internship was at a large teaching hospital, where there were at least 15 other RDN's and in my undergraduate work and in my internship, I always seemed to be assigned projects on diabetes. This was my first main exposure to diabetes from a dietitian's perspective.

The years I spent at Roanoke Memorial Hospital in inpatient dietetics was a tremendous training ground. I specialized in diabetes from the outset of my professional career and have never left the field.

4) What is your current job position? Can you describe your job duties on a typical day?

I am the head of clinical advocacy for Medtronic Diabetes as part of the Global Professional Affairs and Clinical Education. In my role I spend a lot of time collaborating with global diabetes clinical leaders and global research. I conduct clinical education sessions, write papers, and lead advisory panels. My chief role is category development and advancing the field of diabetes care.

5) What do you think the future looks like for RDN's in the diabetes nutrition field?

I think technology is transforming things in a good way. I think we should embrace technology which will open doors and allow data driven practice models and evolving payment models to help our patients.

RDN's need to have collaborative relationships with patients to really allow for person-centered care. Conversations should be around problem solving for issues that patients face in their everyday lives.

Patients may not always need the most advanced technological sources but we should use our knowledge of technology to help patients and be educated in current advancements in the diabetes field. Knowing about the variety of options available will allow the RDN to make the best and most appropriate recommendations for the patient.

6) What advice do you have for students and interns interested in pursuing a career in diabetes nutrition?

Get involved early on with professional organizations; be a leader, be a voice, and learn what's going on in your field of interest. Be curious and be open to opportunities to learn. Take those opportunities and don't wait for permission. Be solution oriented, open minded and creative—but not territorial.

Be excellent at understanding medications and how they work. Be as good as a pharmacist. Have a depth of knowledge in diabetes and be prepared to manage medications; it is all possible within our scope of practice as dietitians. Understand their mechanism of actions and side effects; listen to patients and understand what is not working and be able to advocate for them.

It is also very important to understand the technology available to us and how it can help us serve and treat our patients better and more effectively.