



Nova Scotia Dietetic Association Standards of Practice

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Introduction

Background

The Nova Scotia Dietetic Association (NSDA) is the regulatory body for dietitians and nutritionists¹ in Nova Scotia. The government of Nova Scotia has delegated the responsibility for regulating the safe, competent, ethical practice of dietitians to NSDA through *The Professional Dietitians Act*.

As a regulatory body acting in the public's interest, NSDA is required to establish, maintain, and enforce standards of practice for the profession and ensure that registrants meet those standards. With the implementation of the Partnership for Dietetic Education and Practice (PDEP) Integrated Competencies for Dietetic Education and Practice (2013), the NSDA recognized the need to update its existing standards of practice. The process used to develop these present standards of practice is outlined in Appendix A.

Purpose of the Standards of Practice

Standards of practice fulfil a variety of purposes to different groups:

- Dietitians – Standards outline the minimal practice requirements that they must adhere to.
- Prospective dietitians – Standards inform prospective dietitians of the performance expectations of dietetic practice in Nova Scotia.
- Regulatory body (NSDA) – Standards can be used as a legal reference for dietitians' performance with regard to complaints and disciplinary actions.
- Public – Standards serve as a guide to public expectations about services provided by dietitians.
- Other health providers – Standards inform other health providers of the roles and responsibilities of dietitians, supporting interprofessional collaborative practice.
- Educators – Standards can contribute to and inform curriculum planning and development.
- Employers – Standards can assist in the development of job profiles and contribute to performance reviews.

Assumptions

The standards of practice are based on the assumptions that they:

- Support NSDA's primary professional obligation to protect and serve the public interest according to legislative requirements.
- Apply to the diverse professional roles of dietitians including but not limited to: assessment of nutritional requirements of individuals/groups; management of nutrition goals for population health, disease management and prevention; management of food nutrition services/programs; education of clients and others; development of nutrition related tools/communications; employment in industry and business; and contribution to research.² The standards are applicable to all dietitians regardless of their roles, responsibilities, and practice context.
- Represent the minimum practice performance of dietitians in delivering safe, competent, ethical services.
- Outline the mandatory performance expectations which must be adhered to by dietitians.
- Are one element of a continuum of documents such as legislation, codes of ethics, practice guidelines, and competency profiles that shape and guide the practice of the profession.

¹ The title of *dietitian* is used throughout the document and means an NSDA member who refers to them self with either of the profession's protected titles, *dietitian* or *nutritionist*.

² Adapted from Partnership for Dietetic Education and Practice. (2013). *The Integrated Competencies for Dietetic Education and Practice (ICDEP)*. Available at: http://www.pdep.ca/files/PDEP_Integrated_Competencies_for_Dietetic_Education_and_Practice_%5bICDEP%5d_%5b2013-April%5d.pdf

- Are to be considered as a comprehensive unit that dietitians are expected to be knowledgeable and conform to at all times.
- Exist within the context of legislative, regulatory, and organization/employer requirements.
- Refer to 'client' in its broadest perspective. In this document, 'client' can refer to an individual, family, substitute decision-maker, team members, group, agency, government, employer, employee, business, organization, or community who is the direct or indirect recipient(s) of a dietitian's expertise.³

Format of the Standards of Practice

The Standards are organized under the following headings:

- Standard Statement – outlines the expected performance of dietitians.
- Indicators – describe the specific activities demonstrated by dietitians complying with the standard. The Indicators are not listed in order of priority nor are they all inclusive.
- Practice Outcome – defines what clients and team members can expect from the professional services of dietitians.
- Related Standards – includes a list of additional standards providing more information.
- Resources – provide a list of references with background information related to the standard.
- Glossary – includes definitions of specific terms used in each standard. Items that appear in the glossary are bolded.

³ Adapted from College of Dietitians of Alberta. (2007). *Code of Ethics*. Available at: <http://collegeofdietitians.ab.ca/wp-content/uploads/2017/01/Code-of-Ethics-Master-revised-April-2008.pdf>

Standard 1. Advertising

Standard

Dietitians provide information and **advertise** their **professional services** and/or products in compliance with applicable legislative and regulatory requirements.

Indicators

To demonstrate this standard, dietitians will:

- a) Ensure that advertising is an honest and fair representation of professional services and/or products offered.
- b) Adhere to NSDA's *Code of Ethics for Professional Dietitians* and refrain from using advertising that directly or indirectly:
 - i. creates unjustified expectations about the results;
 - ii. compares the ability, quality, and/or cost of professional services with that of other dietitians;
 - iii. takes advantage either physically, emotionally or financially of **clients**; and
 - iv. endorses, promotes or recommends exclusive use of a product/brand used/sold as a component of professional services, unless supported by evidence.
 - v. Uses **client testimonials** to endorse professional services and/or products.

Practice Outcome

Clients can expect dietitians to advertise professional services and/or products in an accurate and ethical manner.

Related Standards

- Communication
- Conflict of Interest
- Professional Practice Obligations

Resources

- Advertising Standards Canada. (2017). *Canadian Code of Advertising Standards*. Available at: <http://www.adstandards.com/en/Standards/canCodeOfAdStandards.aspx>
- Partnership for Dietetic Education and Practice. (2013). *The Integrated Competencies for Dietetic Education and Practice (ICDEP)*. Available at: http://www.pdep.ca/files/PDEP_Integrated_Competencies_for_Dietetic_Education_and_Practice_%5bICDEP%5d_%5b2013-April%5d.pdf

NSDA Resources

- Nova Scotia Dietetics Association. (2006). *Nova Scotia Dietetic Association Code of Ethics for Professional Dietitians*. Available at: <https://nsdassoc.ca/images/media/documents/C%20of%20E%202007.pdf>
- Nova Scotia Dietetics Association. (2015). *Guidelines for Self-Employed Dietitians and Nutritionists*. Available at: [https://nsdassoc.ca/images/media/documents/EditedPrivate%20Practice%20Information%20Sheet_NSDA_May%202015%20\(1\).pdf](https://nsdassoc.ca/images/media/documents/EditedPrivate%20Practice%20Information%20Sheet_NSDA_May%202015%20(1).pdf)
- Nova Scotia Dietetics Association. (2016). *Position Statement on the Sale, Endorsement and Recommendation of Products*. Available at: https://nsdassoc.ca/images/media/documents/Recommendation%20of%20Products%20and%20Services_final.pdf

Standard 2. Assessment and Interventions

Standard

Dietitians competently select and interpret **assessment data**, develop goals/plans, and implement appropriate interventions in the delivery of **client-centred, professional services**.

Indicators

To demonstrate this standard, dietitians will:

- a) Obtain **clients' consent** for professional services.
- b) Obtain, review, and interpret relevant assessment data.
- c) Collaborate and communicate with clients to determine goals/plans and interventions.
- d) Implement, coordinate, and document the delivery of client-centred interventions.
- e) Monitor, evaluate, and document the impact of interventions in achieving identified outcomes, proposing alternative interventions if goals have not been achieved.
- f) Continue to offer professional services until either the client is transferred, discharged, self-managing, declines care, another provider has assumed responsibility, or the dietitian determines further services are not required.

Practice Outcome

Clients can expect that dietitians assess relevant data, develop goals/plans, implement, and evaluate client-centred interventions.

Related Standards

- Client-Centred Services
- Collaborative Practice
- Communication
- Competence
- Consent
- Evidence-Informed Practice
- Record Keeping

Resources

- Dietitians of Canada. (2012). *Canadian Perspectives on Nutrition Care Process and International Dietetics and Nutrition Terminology*. Available at: <https://www.dietitians.ca/Downloads/Public/NCP-and-IDNT-Statement-Eng.aspx>
- Partnership for Dietetic Education and Practice. (2013). *The Integrated Competencies for Dietetic Education and Practice (ICDEP)*. Available at: http://www.pdep.ca/files/PDEP_Integrated_Competencies_for_Dietetic_Education_and_Practice_%5bICDEP%5d_%5b2013-April%5d.pdf

NSDA Resources

- Nova Scotia Dietetics Association. (2006). *Nova Scotia Dietetic Association Code of Ethics for Professional Dietitians*. Available at: <https://nsdassoc.ca/images/media/documents/C%20of%20E%202007.pdf>
- Nova Scotia Dietetic Association (2018). *Jurisprudence Handbook*. Available at: <https://nsdassoc.ca/dietitians/competency-program/jurisprudence-handbook?showall=&start=7>
- Nova Scotia Dietetic Association. (2015). *Documentation Guidelines*. Available at: https://nsdassoc.ca/images/media/documents/EditedDocumentation%20Guidelines_Sept.pdf

Standard 3. Boundaries

Standard

Dietitians maintain clear and appropriate **professional boundaries** with **clients** and **team members**.

Indicators

To demonstrate this standard, dietitians will:

- a) Be sensitive to their position of relative power or influence in professional relationships and not use this status to take physical, emotional, sexual or financial advantage of clients and team members.
- b) Establish and maintain appropriate professional boundaries in relationships with clients and team members.
- c) Respect, establish, and manage effectively, the boundaries that separate their personal and professional relationships/roles in all contexts (e.g., face to face, **virtual dietetic practice**, social media).
- d) Obtain **consent** prior to touching a client.
- e) Refrain from entering professional relationships when current or previous personal, financial, employment, and/or legal affiliations would compromise **professional services** or integrity.
- f) Ensure that **boundary crossings** that cannot be avoided (e.g., treatment of family/friend in specialized or rural practice) are reported to the appropriate authority (e.g., manager, team leader) and strategies to manage are documented (e.g., in the client file, record).
- g) End professional relationships with clients, transfer care when professional boundaries cannot be maintained, and document, as required, how the situation was managed.

Practice Outcome

Clients can expect dietitians to maintain clear and appropriate professional boundaries at all times.

Related Standards

- Assessment and Interventions
- Client-Centred Services
- Conflict of Interest
- Consent
- Professional Practice Obligations

Resources

- College of Dietitians of British Columbia. (2012). *Professional Boundaries in Therapeutic Relations – Where's the Line?* Available at: <http://collegeofdietitiansofbc.org/home/documents/2012/Prof-Boundaries-final-Jan-24-12.pdf>

NSDA Resources

- Nova Scotia Dietetics Association. (2006). *Nova Scotia Dietetic Association Code of Ethics for Professional Dietitians*. Available at: <https://nsdassoc.ca/images/media/documents/C%20of%20E%202007.pdf>

Standard 4. Client-Centred Services

Standard

Dietitians provide **professional services** that recognize and respect the unique needs, goals, values, and circumstances of **clients**.

Indicators

To demonstrate this standard, dietitians will:

- a) Acknowledge and respect the rights, dignity, and uniqueness of each client (e.g., ethnic/cultural background, religion, age, gender, social status, marital status, sexual orientation, political beliefs, physical/mental ability, corporate mission, and values).
- b) Collaborate with clients to identify and develop goals, plans, and interventions to meet their unique needs.
- c) Acknowledge and respect clients' rights to autonomy and decision making over their own health.
- d) Advocate on the client's behalf when required.

Practice Outcome

Clients can expect that their goals and values will be incorporated into the dietitian's delivery of **client-centred services**.

Related Standards

- Assessment and Interventions
- Collaborative Practice
- Communication
- Consent
- Professional Practice Obligations

Resources

- Health Sciences Education and Research Commons. (2017). *Interprofessional Learning Pathway Competency Framework*. Available at: <http://hserc.ualberta.ca/Resources/CurricularResources/InterprofessionalLearningPathw.aspx>
- Partnership for Dietetic Education and Practice. (2013). *The Integrated Competencies for Dietetic Education and Practice (ICDEP)*. Available at: http://www.pdep.ca/files/PDEP_Integrated_Competencies_for_Dietetic_Education_and_Practice_%5bICDEP%5d_%5b2013-April%5d.pdf
- Truth and Reconciliation Commission of Canada. (2017). *Truth and Reconciliation Website*. Available at: <http://www.trc.ca/websites/trcinstitution/index.php?p=3>

NSDA Resources

- Nova Scotia Dietetics Association. (2006). *Nova Scotia Dietetic Association Code of Ethics for Professional Dietitians*. Available at: <https://nsdassoc.ca/images/media/documents/C%20of%20E%202007.pdf>

Standard 5. Collaborative Practice

Standard

Dietitians partner with **clients** and **team members** in the collaborative and coordinated delivery of **professional services**.

Indicators

To demonstrate this standard, dietitians will:

- a) Contribute professional knowledge to discussions and interactions with clients and team members.
- b) Clarify and explain their professional roles and responsibilities in discussions with clients and team members.
- c) Respect clients' and team members' perspectives and responsibilities, while acknowledging overlapping roles and scopes of practice.
- d) Consult with and/or refer as required, when the client's needs may be more appropriately met by another dietitian or team member.
- e) Effectively manage conflict with clients and team members.
- f) Communicate clearly and respectfully with clients and team members, at all times to facilitate **collaboration**.

Practice Outcome

Clients can expect dietitians to provide collaborative, professional, **client-centered services**.

Related Standards

- Assessment and Interventions
- Boundaries
- Client-Centred Services
- Communication
- Privacy/Confidentiality

Resources

- Canadian Interprofessional Health Collaborative. (2010). *A National Interprofessional Competency Framework*. Available at: http://www.cihc.ca/files/CIHC_IPCompetencies_Feb1210.pdf
- Partnership for Dietetic Education and Practice. (2013). *The Integrated Competencies for Dietetic Education and Practice (ICDEP)*. Available at: http://www.pdep.ca/files/PDEP_Integrated_Competencies_for_Dietetic_Education_and_Practice_%5bICDEP%5d_%5b2013-April%5d.pdf

NSDA Resources

- Nova Scotia Dietetics Association. (2006). *Nova Scotia Dietetic Association Code of Ethics for Professional Dietitians*. Available at: <https://nsdassoc.ca/images/media/documents/C%20of%20E%202007.pdf>
- Alliance of Canadian Dietetic Regulatory Bodies. (2019). *The Competencies for Dysphagia Assessment and Management in Dietetic Practice*. Available at: https://nsdassoc.ca/images/media/documents/Dysphagia_Competencies_NSDA_January_2019.pdf

Standard 6. Communication

Standard

Dietitians communicate effectively, respectfully, and in compliance with applicable legislative and regulatory requirements when providing **professional services**.

Indicators

To demonstrate this standard, dietitians will:

- a) Be clear and respectful in all verbal, nonverbal, and written **communication**.
- b) Maintain **clients'** privacy and confidentiality in all forms of communication.
- c) Use strategies to promote effective communication (e.g., active listening, empathy).
- d) Adapt communication to the needs of clients and minimize barriers by incorporating relevant supports as available (e.g., interpreters, visual aids, technology, appropriate language, culturally appropriate resources).
- e) Use strategies to facilitate client comprehension and learning (e.g., opportunity for questions, teach back, appropriate literacy levels).
- f) Communicate with professional integrity and maintain appropriate boundaries in all communication formats at all times.
- g) Document professional communications accurately and in a timely manner as required.

Practice Outcome

Clients can expect dietitians to communicate respectfully and effectively.

Related Standards

- Assessment and Interventions
- Client-Centred Services
- Collaborative Practice
- Privacy/Confidentiality
- Professional Practice Obligations
- Record Keeping

Resources

- Partnership for Dietetic Education and Practice. (2013). *The Integrated Competencies for Dietetic Education and Practice (ICDEP)*. Available at: http://www.pdep.ca/files/PDEP_Integrated_Competencies_for_Dietetic_Education_and_Practice_%5bICDEP%5d_%5b2013-April%5d.pdf
- Practice-Based Evidence in Nutrition. (2017). *Health Literacy Web Resources*. Available at: <http://www.pennutrition.com/searchresult.aspx?terms=health%20literacy>

NSDA Resources

- Nova Scotia Dietetic Association. (2015). Documentation Guidelines. Available at: https://nsdassoc.ca/images/media/documents/EditedDocumentation%20Guidelines_Sept.pdf
- Nova Scotia Dietetic Association (2015). Position Statement: Social Media in Dietetic Practice. Available at: https://nsdassoc.ca/images/media/documents/EditedPosition%20Statement_Social%20Media_Oct%202015%200%281%29.pdf

Standard 7. Competence

Standard

Dietitians are responsible and accountable for their continuing competence in order to provide safe, ethical, **professional services**.

To demonstrate this standard, dietitians will:

- a) Provide professional services within the limits of their qualifications and personal level of competence.
- b) Evaluate their own practice and participate in continuing professional development to identify and address learning needs.
- c) Identify practice situations beyond their personal level of competence and consult, refer, and/or obtain further knowledge and skills to provide professional services.
- d) Maintain competence in present area(s) of practice, incorporating evidence into professional services.
- e) Acquire the knowledge and skills to practice competently in emerging practice areas as required.
- f) Comply with the NSDA continuing competence program, adhering to all applicable legislative and regulatory requirements.
- g) Voluntarily withdraw from practice if they self-identify that they are no longer able to provide safe, competent, ethical services (e.g., illness, substance abuse).

Practice Outcome

Clients can expect dietitians to be competent to provide safe, ethical, professional services.

Related Standards

- Assessment and Interventions
- Evidence-Informed Practice
- Professional Practice Obligations

Resources

- Partnership for Dietetic Education and Practice. (2013). *The Integrated Competencies for Dietetic Education and Practice (ICDEP)*. Available at: http://www.pdep.ca/files/PDEP_Integrated_Competencies_for_Dietetic_Education_and_Practice_%5bICDEP%5d_%5b2013-April%5d.pdf

NSDA Resources

- Nova Scotia Dietetics Association. (2006). *Nova Scotia Dietetic Association Code of Ethics for Professional Dietitians*. Available at: <https://nsdassoc.ca/images/media/documents/C%20of%20E%202007.pdf>
- Nova Scotia Dietetics Association. (2019). *Continuing Competency Program Toolkit*. Available at: <https://nsdassoc.ca/images/media/documents/2018-CCP-Toolkit.pdf>

Standard 8. Conflict of Interest

Standard

Dietitians will avoid real or perceived **conflicts of interest** in which professional integrity, professional independence or the provision of **professional services** could be compromised. Conflicts of interest which cannot be avoided must be disclosed and managed.

Indicators

To demonstrate this standard, dietitians will:

- a) Recognize any situations in which a conflict of interest could have an impact on their professional judgment.
- b) Avoid any conflict of interest in which professional services could be compromised.
- c) When a conflict of interest cannot be avoided, disclose to the appropriate authority (e.g., manager, team leader), manage the situation, and/or discontinue professional services.
- d) Document any conflict of interest, the efforts to manage it, and the outcome(s).
- e) Provide options for the provision of services and/or products when a conflict of interest exists.
- f) Refrain from accepting personal incentives (e.g., gifts, donations, funding, recruitment/referral fees) from service and/or product sponsors when the dietitian stands to profit personally and/or financially.
- g) Refrain from offering incentives to **clients** that places the dietitian's personal gain above their professional responsibilities.

Practice Outcome

Clients can expect dietitians to provide professional services that are in the client's best interests and to disclose and manage any conflicts of interest.

Related Standards

- Advertising
- Boundaries
- Client-Centred Services
- Professional Practice Obligations
- Record Keeping

Resources

- Advertising Standards Canada. (2017). *Canadian Code of Advertising Standards*. Available at: <http://www.adstandards.com/en/Standards/canCodeOfAdStandards.aspx>
- Partnership for Dietetic Education and Practice. (2013). *The Integrated Competencies for Dietetic Education and Practice (ICDEP)*. Available at: http://www.pdep.ca/files/PDEP_Integrated_Competencies_for_Dietetic_Education_and_Practice_%5bICDEP%5d_%5b2013-April%5d.pdf

NSDA Resources

- Nova Scotia Dietetics Association. (2006). *Nova Scotia Dietetic Association Code of Ethics for Professional Dietitians*. Available at: <https://nsdassoc.ca/images/media/documents/C%20of%20E%202007.pdf>
- Nova Scotia Dietetic Association (2018). *Jurisprudence Handbook*. Available at: <https://nsdassoc.ca/dietitians/competency-program/jurisprudence-handbook?showall=&start=8>
- Nova Scotia Dietetics Association. (2015). *Guidelines for Self-Employed Dietitians and Nutritionists*. Available at:

[https://nsdassoc.ca/images/media/documents/EditedPrivate%20Practice%20Information%20Sheet_NSDA_May%202015%20\(1\).pdf](https://nsdassoc.ca/images/media/documents/EditedPrivate%20Practice%20Information%20Sheet_NSDA_May%202015%20(1).pdf)

Standard 9. Consent

Standard

Dietitians obtain appropriate **client consent** in the delivery of **professional services**.

Indicators

To demonstrate this standard, dietitians will:

- a) Provide clients with complete and objective information regarding the risks, benefits, and options for treatment and/or professional services.
- b) Obtain client consent prior to the delivery of services and document as required.
- c) Inform clients in a timely manner of proposed changes to the agreed-upon intervention plan and/or provide new information relevant to consent.
- d) Respect the client's right to: make choices, consult, and request additional information; refuse proposed interventions; and withdraw previously provided consent at any time.
- e) Obtain approval from the appropriate research ethics board and consent from clients participating in research studies.

Practice Outcome

Clients can expect dietitians to obtain consent in the delivery of professional services.

Related Standards

- Assessment and Interventions
- Client-Centred Care
- Communication
- Evidence-Informed Practice
- Record Keeping

Resources

- College of Dietitians of Ontario. (2017). *Unpacking Consent: Professional & Regulatory Obligations for Dietetic Practice*. Available at: <https://www.collegeofdietitians.org/Resources/Document-Type/E-Learning-Modules/Consent-Learning-Modules.aspx>
- Canadian Medical Protective Association (2016). *Consent: A Guide for Canadian Physicians*. Available at: <https://www.cmpa-acpm.ca/en/advice-publications/handbooks/consent-a-guide-for-canadian-physicians>
- College of Physicians and Surgeons (2017). *Policy on Informed Consent and Determining Capacity for Consent*. Available at: <https://www.cps.sk.ca/iMIS/Documents/Legislation/Policies/POLICY%20-%20Informed%20Consent%20and%20Determining%20Capacity%20to%20Consent.pdf>

Nova Scotia Resources

- Nova Scotia Dietetics Association. (2006). *Nova Scotia Dietetic Association Code of Ethics for Professional Dietitians*. Available at: <https://nsdassoc.ca/images/media/documents/C%20of%20E%202007.pdf>
- Nova Scotia Dietetic Association (2018). *Jurisprudence Handbook*. Available at: <https://nsdassoc.ca/dietitians/competency-program/jurisprudence-handbook?showall=&start=7>

Standard 10. Evidence-Informed Practice

Standard

Dietitians provide **professional services** using an **evidence-informed** approach.

Indicators

To demonstrate this standard, dietitians will:

- a) Access and critically appraise current and applicable evidence.
- b) Incorporate current evidence, using critical thinking and professional judgment, when providing professional services.
- c) Initiate and/or participate in evaluation and health service **quality** improvement activities (e.g., client questionnaires, chart audits, population health data review) to assess new and/or ongoing professional services, products, and programs.
- d) Use the feedback obtained from health service quality improvement activities to improve professional services.
- e) Contribute to new knowledge, by participating in data collection and practice-based research as feasible, conforming to applicable research ethics guidelines and processes.

Practice Outcome

Clients can expect dietitians to use an evidence-informed approach in the delivery of professional services.

Related Standards

- Assessment and Interventions
- Client-Centred Services
- Collaborative Practice
- Communication
- Competence
- Consent

Resources

- International Confederation of Dietetic Associations. (2010). *Evidence-based Dietetics Practice*. Available at: <http://www.internationaldietetics.org/International-Standards/Evidence-based-Dietetics-Practice.aspx>
- Partnership for Dietetic Education and Practice. (2013). *The Integrated Competencies for Dietetic Education and Practice (ICDEP)*. Available at: http://www.pdep.ca/files/PDEP_Integrated_Competencies_for_Dietetic_Education_and_Practice_%5bICDEP%5d_%5b2013-April%5d.pdf
- Practice-based Evidence in Nutrition. (2017). *Practice-based Evidence in Nutrition Website*. Available at: <http://www.pennutrition.com/index.aspx>

NSDA Resources

- Nova Scotia Dietetics Association. (2006). *Nova Scotia Dietetic Association Code of Ethics for Professional Dietitians*. Available at: <https://nsdassoc.ca/images/media/documents/C%20of%20E%202007.pdf>

Standard 11. Fees and Billing

Standard

Dietitians ensure that fees and billing for **professional services** and/or products are fair, transparent, and in compliance with legislative and regulatory requirements.

Indicators

To demonstrate this standard, dietitians will:

- a) Be responsible and accountable for all billing under their registration number.
- b) Ensure that fees charged for professional services and/or products are fair, reasonable, and justifiable.
- c) Disclose fee schedules for all applicable professional services and/or products including accepted methods of payment, potential additional fees (e.g., cancellation fees, photocopying, mailing), and the process for fee dispute resolution, prior to provision of professional services.
- d) Maintain comprehensive records regarding the delivery of professional services and/or sale of products.

Practice Outcome

Clients can expect that the fee and billing practices of dietitians are fair and transparent.

Related Standards

- Client-Centred Services
- Conflict of Interest
- Consent
- Privacy and Confidentiality
- Professional Practice Obligations
- Record Keeping

Resources

- Dietitians of Canada. (2016). *Consulting Dietitians Fees, Expenses, & Income Guidelines*. Consulting Dietitians Network. Available at: <http://networks.dietitians.ca/main.aspx?o=8 - /home>
- Dietitians of Canada. (2017). *Best Business Practice Characteristics for Dietitians Working in a Private Practice*. Consulting Dietitians Network. Available at: <http://networks.dietitians.ca/main.aspx?o=8 - /home>
- Partnership for Dietetic Education and Practice. (2013). *The Integrated Competencies for Dietetic Education and Practice (ICDEP)*. Available at: http://www.pdep.ca/files/PDEP_Integrated_Competencies_for_Dietetic_Education_and_Practice_%5bICDEP%5d_%5b2013-April%5d.pdf

NSDA Resources

- Nova Scotia Dietetics Association. (2006). *Nova Scotia Dietetic Association Code of Ethics for Professional Dietitians*. Available at: <https://nsdassoc.ca/images/media/documents/C%20of%20E%202007.pdf>
- Nova Scotia Dietetics Association. (2015). *Guidelines for Self-Employed Dietitians and Nutritionists*. Available at: [https://nsdassoc.ca/images/media/documents/EditedPrivate%20Practice%20Information%20Sheet_NSDA_May%202015%20\(1\).pdf](https://nsdassoc.ca/images/media/documents/EditedPrivate%20Practice%20Information%20Sheet_NSDA_May%202015%20(1).pdf)

Standard 12. Privacy/Confidentiality

Standard

Dietitians uphold and protect **clients'** rights to privacy and confidentiality of information collected during the delivery of **professional services** by complying with applicable legislative and regulatory requirements.

Indicators

To demonstrate this standard, dietitians will:

- a) Ensure client **consent** is obtained prior to collecting or disclosing personal, organizational, and/or business information, unless **duty to report** obligations is required.
- b) Access and collect only the client information that is essential to carry out the delivery of safe, competent, ethical services.
- c) Use physical, technical, and administrative safeguards (e.g., locked filing cabinets, passwords) to protect paper-based, audio, video, electronic or other client information.
- d) Avoid conversations about clients and/or professional services provided that can be overheard and/or breach privacy and confidentiality.

Practice Outcome

Clients can expect dietitians to keep their information private and secure.

Related Standards

- Client-Centred Services
- Consent
- Professional Practice Obligations
- Record Keeping

Resources

- College of Dietitians of Ontario. (2017). *Unpacking Consent: Professional & Regulatory Obligations for Dietetic Practice*. Available at: <https://www.collegeofdietitians.org/Resources/Document-Type/E-Learning-Modules/Consent-Learning-Modules.aspx>
- Government of Canada. (2015). *Personal Information Protection and Electronic Documents Act (PIPEDA) website*. Available at: <https://www.priv.gc.ca/en/privacy-topics/privacy-laws-in-canada/the-personal-information-protection-and-electronic-documents-act-pipeda/>
- Partnership for Dietetic Education and Practice. (2013). *The Integrated Competencies for Dietetic Education and Practice (ICDEP)*. Available at: http://www.pdep.ca/files/PDEP_Integrated_Competencies_for_Dietetic_Education_and_Practice_%5bICDEP%5d_%5b2013-April%5d.pdf

Nova Scotia Resources

- Nova Scotia Department of Health and Wellness. (2013). *Toolkit for Custodians: A Guide to the Personal Health Information*. Available at: <https://novascotia.ca/dhw/phia/documents/PHIA-complete-toolkit.pdf>
- Nova Scotia Dietetic Association (2018). *Jurisprudence Handbook*. Available at: <https://nsdassoc.ca/dietitians/competency-program/jurisprudence-handbook?showall=&start=6>
- Nova Scotia Dietetics Association. (2006). *Nova Scotia Dietetic Association Code of Ethics for Professional Dietitians*. Available at: <https://nsdassoc.ca/images/media/documents/C%20of%20E%202007.pdf>
- Nova Scotia Dietetic Association. (2015). *Documentation Guidelines*. Available at: https://nsdassoc.ca/images/media/documents/EditedDocumentation%20Guidelines_Sept.pdf

Standard 13. Professional Practice Obligations

Standard

Dietitians protect the public by providing **professional services** in compliance with applicable legislative and regulatory requirements.

Indicators

To demonstrate this standard, dietitians will:

- a) Accept as their primary professional obligation, to protect and serve the public interest according to the NSDA Code of Ethics.
- b) Hold a valid license and practice in compliance with applicable legislative and regulatory requirements.
- c) Maintain a level of personal and professional conduct that upholds the integrity and dignity of the profession and sustains public confidence.
- d) Comply with **duty to report** requirements in accordance with applicable legislation, regulations, and/or organization/employer policies.
- e) Report abuse, incapacity, incompetence or unprofessional conduct to the appropriate authority, in accordance with applicable legislation, regulations, and/or organization/employer policies.
- f) Take responsibility and be accountable to practice within their personal level of competence.
- g) Provide supervision, mentoring, and direction to those under their supervision (e.g., students, nutrition practicum students, staff, volunteers).
- h) Accurately represent their professional qualifications, experience, knowledge, and skills.
- i) Voluntarily withdraw themselves from professional practice when circumstances exist that impair their professional judgment, impact competence, or that may cause harm to **clients**.
- j) Ensure they have the appropriate license to deliver services by **virtual dietetic practice**.
- k) Use provincially protected titles.

Practice Outcome

Clients can expect dietitians to provide professional services in compliance with legislative and regulatory requirements.

Related Standards

- Competence
- Conflict of Interest
- Consent
- Privacy/Confidentiality
- Safety and Risk Management

Resources

- Partnership for Dietetic Education and Practice. (2013). *The Integrated Competencies for Dietetic Education and Practice (ICDEP)*. Available at:
http://www.pdep.ca/files/PDEP_Integrated_Competencies_for_Dietetic_Education_and_Practice_%5bICDEP%5d_%5b2013-April%5d.pdf

NSDA Resources

- Nova Scotia Dietetics Association. (2006). *Nova Scotia Dietetic Association Code of Ethics for Professional Dietitians*. Available at:
<https://nsdassoc.ca/images/media/documents/C%20of%20E%202007.pdf>
- Nova Scotia Dietetic Association (2018). *Jurisprudence Handbook*. Available at:
<https://nsdassoc.ca/dietitians/competency-program/jurisprudence-handbook?showall=&start=0>
- Nova Scotia Dietetic Association (2019). *Virtual Practice Policy*. Available at:
https://nsdassoc.ca/images/media/documents/Virtual_Practice_Policy_2019_June.pdf

Standard 14. Record Keeping

Standard

Dietitians document and manage **client** records and /or other data in compliance with applicable legislative, regulatory, and/or organizational/employer requirements.

Indicators

To demonstrate this standard, dietitians will:

- a) Document, sign, and date complete, accurate, timely records related to **professional services**.
- b) Maintain, retain, share, transport, store, and dispose of all paper and/or electronic documentation and records in compliance with applicable legislative, regulatory, and organizational/employer requirements.
- c) Secure all personal client information through appropriate use of physical, technical, and electronic safeguards to protect the privacy and confidentiality of client information.
- d) Maintain complete and accurate financial records for all relevant professional services.
- e) Maintain equipment service records (e.g., preventative maintenance logs) according to applicable legislative, organizational/employer, and manufacturer recommendations.
- f) Plan for and ensure the transfer or disposition of records when leaving a position or ceasing to practice.

Practice Outcome

Clients can expect dietitians to document professional services clearly, accurately, in a timely manner, while maintaining privacy and confidentiality.

Related Standards

- Communication
- Privacy/Confidentiality
- Professional Practice Obligations

Resources

- Dietitians of Canada. (2017). *Best Business Practice Characteristics for Dietitians Working in a Private Practice*. Consulting Dietitians Network. Available at: <http://networks.dietitians.ca/main.aspx?o=8 - /home>
- Partnership for Dietetic Education and Practice. (2013). *The Integrated Competencies for Dietetic Education and Practice (ICDEP)*. Available at: http://www.pdep.ca/files/PDEP_Integrated_Competencies_for_Dietetic_Education_and_Practice_%5bICDEP%5d_%5b2013-April%5d.pdf

Nova Scotia Resources

- Nova Scotia Department of Health and Wellness. (2013). *Toolkit for Custodians: A Guide to the Personal Health Information*. Available at: <https://novascotia.ca/dhw/phia/documents/PHIA-complete-toolkit.pdf>
- Nova Scotia Dietetics Association. (2006). *Nova Scotia Dietetic Association Code of Ethics for Professional Dietitians*. Available at: <https://nsdassoc.ca/images/media/documents/C%20of%20E%202007.pdf>
- Nova Scotia Dietetic Association. (2015). Documentation Guidelines. Available at: https://nsdassoc.ca/images/media/documents/EditedDocumentation%20Guidelines_Sept.pdf

Standard 15. Safety and Risk Management

Standard

Dietitians adhere to occupational health and safety legislation, and infection prevention and control practices to provide safe, competent, ethical **professional services**.

Indicators

To demonstrate this standard, dietitians will:

- a) Comply with occupational health and safety legislation, best practices in infection prevention and control, and organization/employer policies and procedures.
- b) Maintain certification(s) related to infection prevention and control, and occupational health/workplace safety, as applicable.
- c) Contribute to and comply with **risk management** activities/requirements to promote a safe environment (e.g., working alone, environmental hazards, threats to personal safety).
- d) Comply with reporting and follow up procedures related to adverse events, emergency situations, and/or incidents involving workplace safety.
- e) Comply with food safety standards in the delivery of professional services.
- f) Participate, as required, in health service **quality** improvement activities to promote and support safe, competent, ethical professional services (e.g., questionnaires, chart audits).

Practice Outcome

Clients can expect dietitians to provide professional services in a healthy and safe environment.

Related Standards

- Assessment and Interventions
- Client-Centred Services
- Communication
- Competence
- Professional Practice Obligations

Resources

- Government of Canada. (2017). *Canadian Food Inspection Agency Website*. Available at: <http://www.inspection.gc.ca/eng/1297964599443/1297965645317>
- Government of Canada. (2017). *Hazardous Products Regulations*. Available at: <http://laws-lois.justice.gc.ca/eng/regulations/SOR-2015-17/>
- Health Canada. (2017). *Workplace Hazardous Materials Information System (WHMIS)*. Available at: <https://www.canada.ca/en/health-canada/services/environmental-workplace-health/occupational-health-safety/workplace-hazardous-materials-information-system.html>

NSDA Resources

- Nova Scotia Dietetic Association (2018). *Jurisprudence Handbook*. Available at: <https://nsdassoc.ca/dietitians/competency-program/jurisprudence-handbook?showall=&start=12>

APPENDIX A

Development of the Standards of Practice

This Standards of Practice (Standards) document is a collaborative effort of College of Dietitians of Alberta (CDA) and the Saskatchewan Dietitians Association (SDA). Over a one-year period the standards development included the following steps:

1. Development of Draft 1 based on review of key foundational documents and selected comparator organizations.
2. Establishment of a Standards of Practice Advisory Group (SPAG) with representation from diverse sectors of the profession from both CDA and SDA. The SPAG provided input into the Standards throughout all phases of development; SPAG members' efforts are acknowledged for this contribution.
3. Distribution of a stakeholder survey to CDA and SDA registered members to validate the Standards.
4. Creation of the final Standards document.

GLOSSARY

Advertise/advertising also includes the marketing of professional services and products.

Assessment data refers to the information collected during the client evaluation such as, but not limited to: history, food/nutrition data, anthropometric data, biochemical data, medical tests, procedures; community needs assessment; financial data; environmental scans; stakeholder feedback; and quantitative/qualitative information.

Boundary crossings occur when the behaviour of a dietitian deviates from the established boundaries of a professional – client relationship. Boundary crossings are often subtle, frequently beginning with an innocent or harmless action or behaviour that eventually becomes cumulatively significant. Dietitians must be aware of any actions or behaviours that fall outside of what is considered normal within the professional – client relationship. They must ensure that all of their actions and behaviours are directed towards meeting the established goals of the relationship, acting in accordance with the best interests of the client, and not promoting their own interests.¹

Client Testimonials refer to “a published endorsement by an individual patient about the skills and qualities of a regulated member. While typically positive, a testimonial can also be negative. Testimonials are a problem for several reasons, most notably because patient privacy is compromised and selection bias may lead to misconceptions by the public. While publication by an independent party of all feedback (good and bad) collected in a transparent and fair manner may be acceptable, publication of selected testimonials might not fairly reflect most patients’ experience.”²

Clients refer to an individual, family, substitute decision-maker, team members, group, agency, government, employer, employee, business, organization, or community who is the direct or indirect recipient(s) of the dietitian’s expertise.³

Client-centred services refers to the partnership between team members and client where the client retains control over their care and is provided access to the knowledge and skills of team members to arrive at a mutually agreed upon plan of care and access to resources to achieve the plan.⁴

Collaboration refers to interprofessional team process skills that lead to achievement of common professional goals.⁵

Communication refers to “a process by which information is exchanged between individuals through a common system of symbols, signs, or behavior.”⁶ Communication includes, but is not limited to, face to face interactions, email, and social media.

¹ Adapted from College of Dietitians of Alberta. (2014). *The Professional Practice Handbook for Dietitians in Alberta*. Available at: <http://collegeofdietitians.ab.ca/wp-content/uploads/2017/01/Professional-Practice-Handbook-for-Dietitians-in-Alberta-2014.pdf>

² College of Physicians and Surgeons of Alberta. (2015). *Advice to the Profession – Advertising*. Available at: <http://www.cpsa.ca/wp-content/uploads/2015/09/Advertising.pdf>

³ Adapted from College of Dietitians of Alberta. (2007). *Code of Ethics*. Available at: <http://collegeofdietitians.ab.ca/wp-content/uploads/2017/01/Code-of-Ethics-Master-revised-April-2008.pdf>

⁴ Adapted from Canadian Interprofessional Health Collaborative. (2010). *A National Interprofessional Competency Framework*. Available at: https://www.cihc.ca/files/CIHC_IPCompetencies_Feb1210.pdf

⁵ Adapted from University of Alberta Health Sciences Council. (2017). *Interprofessional Learning Pathway Competency Framework*. Available at: <http://www.hserc.ualberta.ca/Resources/CurricularResources/InterprofessionalLearningPathw.aspx>

⁶ Adapted from Merriam-Webster. (2017). *Online Dictionary*. Available at: <https://www.merriam-webster.com/dictionary/communication>

Conflicts of interest refer to the “real or perceived situation in which a person has a private or personal interest sufficient to appear to influence the objective exercise of his or her official duties as a professional. In other words a conflict of interest occurs when a professional has an obligation to promote one interest, but promotes or is perceived to be promoting a competing interest instead. Most conflicts of interest arise when a person (or their friends, relatives or business associates) stands to profit personally/financially by promoting a competing interest.”⁷

Consent refers to “the consent or agreement of a client to undergo an assessment process or treatment intervention, after gaining an understanding of the relevant facts and risks involved.” Consent in this document refers to informed consent. Consent may be “implied” (by participating in a dialogue and agreeing to the continuation of a consultation, the client has implied their consent to treatment) or “expressed” (stated verbally or in writing) by the client.⁸

Duty to report refers to the dietitian’s legal responsibility to report in specifically defined situations (e.g., abuse of children and vulnerable individuals, individual poses a serious threat of harm to themselves or others).^{9, 10}

Evidence-informed dietetics practice refers to “asking questions, systematically finding research evidence, and assessing the validity, applicability and importance of that evidence. This evidence-based information is then combined with the dietitian’s expertise and judgment and the client’s or community’s unique values and circumstances to guide decision-making in dietetics.”¹¹

Professional boundaries “set limits and clearly define the therapeutic behaviour of dietitians from any other behaviours, well-intended or not, that could lessen the benefits of client care... They also ensure the safe interaction of professionals and clients within the professional client care relationship. Boundaries give each person in a relationship a sense of legitimate control and function to empower clients.”¹²

Professional services refer to “all actions and activities of a dietitian in the context of their professional practice.”¹³

Quality of health care services refers to the “acceptability, accessibility, appropriateness, effectiveness, efficiency, and safety”¹⁴ of the services provided.

⁷ College of Dietitians of Alberta. (2014). *The Professional Practice Handbook for Dietitians in Alberta*. Available at:

<http://collegeofdietitians.ab.ca/wp-content/uploads/2017/01/Professional-Practice-Handbook-for-Dietitians-in-Alberta-2014.pdf>

⁸ Adapted from College of Dietitians of Alberta. (2014). *The Professional Practice Handbook for Dietitians in Alberta*. Available at:

<http://collegeofdietitians.ab.ca/wp-content/uploads/2017/01/Professional-Practice-Handbook-for-Dietitians-in-Alberta-2014.pdf>

⁹ Adapted from College of Dietitians of Alberta. (2007). *Code of Ethics*. Available at: [http://collegeofdietitians.ab.ca/wp-](http://collegeofdietitians.ab.ca/wp-content/uploads/2017/01/Code-of-Ethics-Master-revised-April-2008.pdf)

[content/uploads/2017/01/Code-of-Ethics-Master-revised-April-2008.pdf](http://collegeofdietitians.ab.ca/wp-content/uploads/2017/01/Code-of-Ethics-Master-revised-April-2008.pdf)

¹⁰ Saskatchewan Dietitians Association. (2005). *Saskatchewan Dietitians Association Code of Ethics for Registered Dietitians*.

Available at: <http://www.saskdietitians.org/wp-content/uploads/2015/11/Code-of-Ethics-SDA.pdf>

¹¹ International Confederation of Dietetic Associations. (2010). *Evidence-based Dietetics Practice*. Available at:

<http://www.internationaldietetics.org/International-Standards/Evidence-based-Dietetics-Practice.aspx>

¹² College of Dietitians of Alberta. (2014). *The Professional Practice Handbook for Dietitians in Alberta*. Available at:

<http://collegeofdietitians.ab.ca/wp-content/uploads/2017/01/Professional-Practice-Handbook-for-Dietitians-in-Alberta-2014.pdf>

¹³ College of Dietitians of Alberta. (2007). *Code of Ethics*. Available at: [http://collegeofdietitians.ab.ca/wp-](http://collegeofdietitians.ab.ca/wp-content/uploads/2017/01/Code-of-Ethics-Master-revised-April-2008.pdf)

[content/uploads/2017/01/Code-of-Ethics-Master-revised-April-2008.pdf](http://collegeofdietitians.ab.ca/wp-content/uploads/2017/01/Code-of-Ethics-Master-revised-April-2008.pdf)

¹⁴ Health Quality Council of Alberta. (2005). *Alberta Quality Matrix for Health*. Available at:

https://d10k7k7mywg42z.cloudfront.net/assets/53288634f002ff214000014b/HQCA_Quality_Matrix_061713.pdf

Risk management refers to the “identification, assessment, and prioritization of risks followed by coordinated and economical application of resources to minimize, monitor, and control the probability and/or impact of unfortunate events.”¹⁵

Team members refer to members of the interprofessional health care team (regulated and unregulated) which has the client at the centre of care; can also refer to other dietitians, dietetic interns, students, and/or relevant others or members of the professional service team.

Virtual dietetic practice is defined as the provision of dietetic services (e.g., counselling, consultation, monitoring, teaching, etc.) which involve any type of intervention with a client who is remotely located from the dietitian providing the service. It can include videoconferencing, email, apps, web-based communication, and wearable technology. Virtual dietetic practice can occur within jurisdiction but also across borders within Canada.¹⁶

¹⁵ Hubbard, D. (2009). *The Failure of Risk Management: Why it is Broken and How to Fix it*. John Wiley & Sons. P. 46.

¹⁶ Alliance of Canadian Dietetic Regulatory Bodies. (2017). *Cross Border Dietetic Practice in Canada Position of Alliance of Canadian Dietetic Regulatory Bodies*. (in development).