DECISION TOOL FOR NEW ASPECTS OF DIETETIC PRACTICE

Saskatchewan College of Dietitians

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Dietitians are encouraged to reflect on emerging topics and new aspects of dietetic practice and determine if these are within the scope of dietetic practice and aligned with the SCD regulatory framework.

The following guiding questions and considerations form a decision tool to help Dietitians decide if it is appropriate for them to take on a new aspect of practice (e.g., new task, role). This resource was adapted from the College of Dietitians of British Columbia's Decision Tool for New Aspects of Dietetic Practice.

Guiding Questions and Informed Decisions

Is the new aspect of practice related to dietetic scope of practice?	The scope of practice of dietitians in Saskatchewan at entry to practice is defined in the SCD Scope of Practice Statement. This statement exists outside of legislation and is intended to be a statement to the public, employers and others of what dietitians "do." The entry to practice competencies (ICDEP) are also helpful for identifying what it is that dietitians are educated and trained to do. It is important to note that many of the activities included in the scope of practice statement are not exclusive to dietitians.
Are there any legal barriers? **Does it involve activities considered to be in the exclusive scope of practice of another profession or that require approval under specific legislation?**	Although the Dietitians Act in Saskatchewan does not identify a scope of practice statement that is exclusive to dietitians, it is important to note that other disciplines do have legislated scopes of practice statements that are exclusive and only be performed by registrants of that specific regulated profession. Dietitians must not only ensure they are working within their scope of practice, but must also make sure that they are not undertaking activities which are in the exclusive scope of practice of another discipline. For example, the Medical Profession Act specifies that only physicians can diagnose, treat, operate or prescribe for any human disease, pain, injury, disability or physical condition. In addition to profession specific legislation, consideration must also be given to provincial regulations that authorize groups of providers to perform specific tasks. For example, The Drug Schedule Regulations identifies categories of professions as being authorized prescribers for scheduled drugs including physicians, dentists, optometrists, veterinarians, pharmacist, registered nurses, midwives, podiatrists. The Medical Laboratory Licensing Regulations similarly specifies the qualifications for requesting medical laboratory tests (physicians, dentists, midwives, RN(NP), RN with additional authorized practice, podiatrists) and performing testing (physician, RN, RPN, LPN, CLXT, MLT, medical director, holder of bachelor/masters/doctoral degree in relevant chemical or biological science approved under the licence).

Is there a workplace policy that I need to create/follow for this aspect of practice?	Organizational policies and other healthcare related legislation may limit who can do what and under what conditions (e.g. an order or prescription). Dietitians are expected to abide by legislated requirements and collaborate with other health professionals who may share their scope of practice. Interprofessional healthcare must be delivered safely and collaboratively, in the interest of the client.
Do I have the knowledge, skills and judgement to take on this new aspect of practice safely, ethically and competently? **If not, how would I acquire these competencies?**	Consider your own personal scope of practice (knowledge, skills and judgement). Dietitians should consider how to acquire new competencies if it is in their clients' interest. Planning continuing education that may be needed to properly address new aspects of practice is an important part of the decision. Dietitians should also weigh the risk of saying "no" based on their existing competence and referring the client to another health professional versus taking on the new aspect of practice.
Will this new aspect require specific skills for the client that needs to be assessed and counseled?	Dietitians may need to provide education to their clients for them to access dietetic services or understand an aspect of care (e.g. virtual dietetic practice where clients need to know how to use software for remote counseling session.)

Are there guidelines, position papers or scientific literature available to guide my practice? **Do I have all the information to make an evidence-informed nutritional assessment and recommendation/plan?**	Dietitians are expected to provide evidence-informed practice that is based on review of factual and objective evidence. With emerging and new practices, there may often be insufficient, inconclusive and changing evidence available. Dietitians must ensure to take this into consideration and adapt their practice based on the latest and best evidence available. Dietitians are also expected to gather objective information about their client to make an informed assessment of the client's nutritional requirements. This responsibility requires interprofessional collaboration and communication as the Dietitian is often gathering objective information measured by another health professional.
Do I know who needs to be involved in the team to optimize the care and follow-up?	Dietitians should understand other regulated health professionals' scope of practice and know who to refer to /consult with in their client's interest.
Does the client have all the information necessary to make an informed decision and consent?	Dietitians may refer to the SCD Guideline on Consent to inform this decision.

Is there a potential conflict of interest involved in the task? Do I need to disclose it or recuse myself?	Dietitians are responsible for identifying and managing any real, perceived or potential conflicts of interest where their professional integrity could be interpreted as being compromised. Financial benefit is not necessary to establish a conflict of interest. The perception of engaging in self-serving actions may compromise the trust involved in a relationship between a Dietitian and a client. Conflict of interest is managed through DORM principle of disclosure, options, reassurance and modification described in the SCD Jurisprudence Manual.
Possible decisions:	Decisions on how to best address a new aspect of dietetic practice should be client-centric, taking into consideration: · dietetic scope of practice · legal and organizational requirements · competence and evidence-based information needs and, Interprofessional collaboration