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Registration Statistic Milestone

In March 2008 the CDBC registered our 1000th registrant! We completed the year with 1001 registrants of which 992 were Full (including Grandparented) registrants and 9 were Temporary registrants. There's always some attrition at renewal (relocation, retirement, maternity and education leaves) and as of April 3, there were 961 registrants: 955 Full and 6 Temporary. As well as our upcoming new graduates, BC continues to attract dietitians from other

Chair's Message

Dear Colleagues,

On Friday, April 11, BC academic and internship dietetic educators (UBC and Langara College) and the CDBC Board of Directors met to discuss the new Essential Competencies for Dietetic Practice published by the Alliance, the national dietetic regulators, in December 2006.



The meeting was extremely productive and resulted in a plan to review the Essential Competencies and how they fit within the UBC dietetics curriculum. We meet again as soon as possible, hopefully in June, and as a group cross-match academic and internship curriculum to the Essential Competencies. Where the proficiency level of a Performance Indicator seems too high for a new graduate, an "interpretation" will be written that will be gathered as the first step in BC's Essential Competencies Review Process. At the end of the cross-match, educators and the College will know if the Essential Competencies are currently being addressed and whether, by the November 2009 CDRE examination, BC will be able to move forward to the new exam blueprint along with other provinces. As well, we also agreed to meet regularly to discuss common matters.

My sincere "thanks" to all the people who contributed to the successful day - BC academic faculty, internship coordinators and members of the CDBC Board of Directors and staff, and Lesley Bainbridge, facilitator. The CDBC is looking forward to an on-going productive working relationship with BC educators.

Regards,

Glenn Kissmann, RD, CDE, MHS
Chair, CDBC Board of Directors

provinces and applicants from various countries.

Dietitian Workforce

In order to be prepared to meet current and future needs for dietetic services, the CDBC is working with Dietitians of Canada (DC), educators, employers and Health and Human Resource government personnel to gather pertinent workforce data. Valuable data will be gathered from the recent Workforce Survey circulated by the Dietitians of Canada. The Board will also discuss the costs and benefits of adding questions to our online registration renewal form to gather information not currently available. Dietetic services are becoming increasingly important with our ageing population and changing health care needs of children and young adults and our profession needs to be well positioned to provide future needed services. We cannot meet our mandate of public protection if the public can't access a Registered Dietitian when needed.

Standards of Practice

After consulting with registrants via the website in winter, the Quality Assurance Committee and Board of Directors approved the Standards of Practice at the February 29, 2008 Board meeting. The Standards of Practice are no longer "interim" and are being submitted to the government as Schedule B of the CDBC bylaws. Click on [Standards of Practice](#) to review the final document.

Verification of RA Competence

Have you submitted your Verification of Competence? [You must be competent and registered with Reserved Acts before practicing them.](#) Appendix 2 is required if you're submitting signed verification of competence from two practicing colleagues (RDs, physicians, pharmacists or nurses only). Please check the Public Register on the website to ensure you have the correct Reserved Act registration.

Registrar's Message



Dietitians have an opportunity to change practice in order to meet the populations' health care needs. Honourable George Abbott, the Minister of Health, spoke with health registrars via teleconference a few days after the February 12, 2008 Throne Speech. Based on information gained from public Conversations on

Health, the Minister described the demographic shift to an older population, an increase in chronic disease, a current shortage of health care personnel, and projections of further shortages of health care personnel for the next thirty to forty years. The Ministry of Health's plan to meet current and future health care challenges is innovative and exciting. Public's protection is ensured when health care needs are met by qualified personnel. Three main public protection initiatives were discussed to ensure BC's health care needs are met by qualified personnel:

- Regulatory colleges are being asked to examine their existing scope of practice and reduce or eliminate workplace barriers that limit the services they provide. Most registered professionals are not practicing their full scope of practice for a variety of reasons and by removing practice barriers, the public is better served in a more timely, efficient manner by qualified personnel. Registrants are also being asked to identify new areas of practice that enhance the services they are already providing. Once identified, legislation changes will likely be needed to ensure registrants are appropriately educated to provide these services as a member of the client's interdisciplinary health care team, to ensure public protection.
- Registrants in one province transferring to another province need to be able to register immediately and begin practising. If new registrants don't have all the skills and knowledge required in the province, they would be granted a restricted registration until they have acquired the necessary competence to be granted Full Registration. Upgrading opportunities must be available. The public is protected by allowing professionals from another province to

Liability Insurance

A reminder - evidence of liability insurance for the April 1, 2008 to March 31, 2009 years is part of registration renewal. If you haven't already done so, please submit a scanned or faxed copy of your professional liability policy immediately or check with your employer to see if your name was included in a group submission from your facility.

College Calendar - Meetings and Events

April 11, UBC/CDBC liaison session
April 15, Executive Directors and Registrars of Professional Organizations of BC meeting
April 28, CDBC Patient Relations Committee meeting
May 3, CDBC Registration Committee meeting
May 8, CDBC Quality Assurance Committee meeting
May 10, Canadian Dietetic Registration Examination
May 21 - 23, national regulators meeting (Winnipeg)
May 30, Board of Directors meeting.

Are you interested in being an Investigator for the College's Inquiry Committee?

The CDBC needs to train an additional investigator to assist the Inquiry Committee with the investigation of complaints. The selected applicant will be current with dietetic practice, particularly clinical practice, and ideally will be registered with Reserved Acts A, B and C. Training will occur during a 3-day course. Please contact Fern Hubbard, Registrar, if you'd like additional information.

Digital photographs of client records

At times it may seem practical and time efficient to take a digital photograph of a client's record for easy future reference.

practice the scope of practice they are competent with while at the same time, acquiring knowledge and skills to practice BC's full scope of practice.

- There's been good progress expediting the registration of international registrants but regulators need to do more. Knowledge, skills and abilities acquired through work experience must be recognized and regulatory colleges must register qualified applicants as quickly as possible in a transparent, objective and fair manner. International professionals are choosing to move to BC in large numbers. Regulators need to find ways to more quickly assess their competence to BC standards, direct them to readily available academic courses and practical experience programs to fill in their education "gaps", and register them to practice. As with inter-provincial applicants, the public is protected by ensuring international applicants meet Canadian standards for practice.

The Board discussed the implications of these initiatives for dietitians during the February 29, 2008 meeting and agreed that the registrants need to identify areas for enhanced dietetic practice and barriers that need to be reduced or eliminated in order to serve the BC public safely and more effectively. The Quality Assurance and Patient Relations Committees have been working for some time on Practice Guidelines for insulin adjustment, vitamin/mineral adjustments for renal patients, orders for parenteral and enteral nutrition and dysphagia assessment. These are some of the practice areas the CDBC would like to discuss with the Ministry of Health.

In order to gather information from registrants, employers, educators, interdisciplinary colleges and the public, I will be planning province-wide liaison sessions between now and the fall. The College wants and needs to hear from you. ***What legislative or workplace practices make it difficult for you to practice effectively within your complete scope of practice?*** Please contact me if the dietitians in your area are planning a meeting in your area - I would be pleased to attend. Also, I'd appreciate receiving email examples of workplace barriers from your practice experience. Please email directly to me at fhubbard@collegeofdietitiansbc.org.

The government's new focus provides a great

However, this practice conflicts with Principle 6 of the CDBC Code of Ethics which states "Dietitians respect privacy and confidentiality." A digital photograph is not safe from uncontrolled viewing by others and the client's confidentiality cannot be ensured. Patient records are being converted to electronic documents in some health care centres but confidentiality is ensured through a well-established, safe network of employee access levels and passwords. Digital photographs stored at home do not have the same security. For ethical reasons, you need to refrain from this practice.

Registration Renewal 2008/09

As the CDBC begins our 5th year of operation, we've experienced four years of online registration renewal. Marilyn Elliott, Executive Assistant, coordinated renewal again this year and reported regularly throughout March how smoothly the process was going. There are a number of reasons for this:

- registrants are more familiar and comfortable with the online process and only 12 registrants (just over 1%) requested a paper renewal form
- approximately 94% used credit card payment rather than cheques
- all registrants in Group 1 completed their Continuing Competence Program (CCP) requirements and were eligible for renewal
- fewer registrants called the office for misplaced passwords and difficulties with the website.
- the College invested in easier to navigate, visually clearer screens
- reminders were clearly worded and timely

We hired Anita, a temporary staff member, for three weeks to assist with renewal. Because she was not as busy as expected, Anita was available to assist with other needed office work. All in all, Marilyn reports renewal was "a breeze" compared to past years. Thank you registrants! Our online renewal participation rates are the envy of many colleges!

Enhanced Practice, Reserved Acts and Limitations on Practice

opportunity to change dietetic practice in BC, in a safe and effective manner. We need to be prepared. I'm looking forward to meeting with you and hearing from you.

Fern Hubbard, DDH, BA, MEd
Registrar

Continuing Competence Program (CCP) Implementation

The College's new Continuing Competence Program (CCP) has completed its first cycle! Receiving this newsletter coincides with the publication of the revised [Professional Development Guide* \(PDG\)](#) on the College website. The PDG was carefully revised to include registrant comments received during the College's 2007/08 CCP workshop sessions:



- The guide is now broken down into its different sections for quicker access.
- The guide includes links to the different CCP topics. From the table of contents, simply click on the title of interest to skip to that section.
- [The Professional Development Plan and Progress Tracking form](#) was revised according to registrant suggestions:
 - The title was shortened to [Professional Development Plan](#).
 - Sections were organized as follows: learning goals, learning activities and contribution to practice.
 - A sample Professional Development Plan highlights the steps to successful completion of the plan according to the 2008/09 CCP criteria.
- The [2008/09 assessment criteria](#) for the Professional Development Plan reviews of the **2009 group** (originally cohort 2) were approved by the Quality Assurance Committee last February 4, 2008.
- **Cohorts** are now named **Groups**. As of April 1, 2008, **cohort 1** participants will begin a new three-year cycle and **will be** part of the **2011 group**. The former cohorts 2 and 3 are

Many dietitians are confused over the difference between enhanced dietetic practice and Reserved Acts.

-*Enhanced practice services* may legally be practiced by all RDs. They are considered within the dietetic scope of practice.

Enhanced practices, such as dysphagia assessments and working with renal and diabetic clients, are usually practiced by an experienced Registered Dietitian who has particular expertise in the practice area.

Even though all dietitians may legally practice "enhanced" services, they will ethically only be practiced by RDs who are competent. The CDBC Board has determined that Practice Guidelines and policies will not be developed for enhanced practice services but supports their practice within the dietitians' scope of practice.

-*Reserved Acts* are dietetic services outside the general scope of practice. The government considers these actions to be of higher risk of harm to the public. Legally, they have been separated from general scope of practice activities and are listed separately in section 5 of the Dietitians Regulation. Registrants must provide proof that they have "additional qualifications" before registering with Reserved Acts.

Reserved Acts are frequently shared among regulated professionals and dietitians share enteral and parenteral nutrition services (design, compound, dispense and/or administer) with Registered Nurses, Nurse Practitioners, Physicians and Pharmacists.

-Limitations on practice are restrictions to dietetic practice. The only limitation for RDs is the insertion of feeding tubes. In order to practice this activity, a RD must comply with section 6 of the Dietitians Regulation and act "under delegated authority of a medical practitioner... in accordance with standards" developed by the CDBC and approved by the Boards of the CDBC and the College of Physicians and Surgeons. An annual Declaration of competence must be submitted after specified training. On-going competence is monitored.

Some RDs are interested in expanding their scope of practice to include additional activities such as adjusting insulin levels and ordering parenteral and renal nutrition formula adjustments directly to a hospital

now the 2009 and 2010 groups and follow the same schedule as outlined in last year's guide.

- An updated [Schedule of Dates](#) (p. 5 of the PDG), for 2008-2011 is available.
- A new sample [Self Assessment and Professional Development Plan for a Consultant Dietitian](#) has been added.
- The [Declaration of Participation](#) to the CCP was simplified and added to the online registration renewal module.

*Although, the 2009 and 2010 groups (former cohort 2 and 3) participants were originally told to keep using the first edition of the PDG and other CCP forms, the College now encourages them to use the updated versions since the revisions reflect the new 2008/09 assessment criteria.

First edition versions of the Professional Development Plan will be reviewed as well, but should include all the information required by the 2008/09 assessment criteria.

The Quality Assurance Committee and Board of Directors would like to thank the many registrants who contributed to the program's revision. Their comments and suggestions were integral to the program's upgrade. The College welcomes your participation and feedback.

Information sessions will still be offered in 2008 and the Practice Advisor is available to answer CCP questions at mj@collegeofdietitiansbc.org.

Mélanie Journoud, MSc, RD
Practice Advisor

Latest Board and Committee Meeting Highlights

2008/2009 Board of Directors

Members of the Board for the 2008/2009 fiscal year include: **Glenn Kissmann, Chair**, elected registrant from the Interior/North region; **Heather Martin, Vice-chair**, elected registrant, Vancouver Coastal region; **Jane Darville**, appointed public representative, Abbotsford; **Marlyn Davis**, elected registrant, Vancouver Island region; **Maria Dedegikas**, elected registrant, Vancouver Coastal region; **Adrian Kershaw**, appointed public

pharmacist. These will be identified during province-wide liaison sessions with RDs, educators, employers and the public and will be pursued as new Reserved Acts or Limitations on practice in the Dietitians Regulation, if required.

representative, Victoria; **Peter Lam**, elected registrant, Fraser region; **Joyce Statton**, appointed public representative, Vancouver; and **Robin Watt**, elected registrant, Interior/North region.

Sincere thanks to **Laura Cullen**, elected registrant, Vancouver Coastal region, and **Carol Kline**, appointed public representative, for completing several terms on the Interim and legislated Board of Directors. Their contribution and leadership was invaluable!



Grants Received from the Ministry of Economic Development

The CDBC was recently awarded \$33,000 from the Ministry of Economic Development for two project proposals that will assist with the registration of international and out-of-practice applicants. The Registration Committee is overseeing the projects.

- \$15,000 was granted for review of online courses in community dietetic practice and food service administration to ensure appropriate courses are available to applicants who require academic upgrading in these two scope of practice areas. The courses need to be supportive of the applicants' learning needs and styles and of a suitable depth and breadth for upgrading. These projects complement the on-going CDBC funded project for review of clinical and advanced online nutrition upgrading courses. By only enrolling in online courses that have been reviewed and approved, applicants will be more consistently and appropriately prepared for the practical training portion of their upgrading.
- \$18,000 was awarded for development of assessment forms, processes and policies to assess international and out-of-practice applicants to the "Essential Competencies for Dietetic Practice." The process will include an online self-assessment that will help applicants determine if their education,

practical training and practice experience meets Canadian standards for registration. It will also enable the Registration Committee to assess applicants in a transparent, objective and fair manner, to current competencies.

You asked about...

This new Newsletter item features questions from registrants that have broad applicability and interest. Do you have a question? Please call the College or email your question to info@collegeofdietitiansbc.org.

Q: Is it appropriate for me to distribute **food supplements** as well as **vitamin and mineral supplements samples** to clients?

A: Under the current federal and provincial laws, unscheduled food supplements, and vitamin and mineral supplements (not intended for enteral or parenteral use) may be recommended, distributed or sold to clients as they relate directly to the practice of dietetics. Exceptions include supplements for which the active ingredient dosage exceeds those referred to in the Food and Drugs Act Drug Schedules and where a prescription is required:

- Vitamin A in oral dosage form of more than 10 000 IU or where the largest daily dosage exceeds 10 000 IU.
- Vitamin B12 with intrinsic factor concentrate.
- Vitamin D in oral dosage form of more than 1000 IU or where the largest daily dosage exceeds 1000 IU.
- Vitamin K (K1 or K2) in oral dosage form of more than 120 µg or where the largest daily dosage exceeds 120 µg.
- Vitamin K (K1 or K2) in oral dosage form of more than 120 µg or where the largest daily dosage exceeds 120 µg.
- Iron preparations with more than 30 mg elemental iron per solid dosage unit or 5 mL oral liquid (some prenatal supplements have 60 mg per tablet).
- Niacin in extended-release formulations.
- Potassium salts in oral dosage of more than 5 mmol per single dose.

For more information, please refer to the Food and Drugs Act at <http://laws.justice.gc.ca/en/F-27> and the College of Pharmacists of BC's website at www.bcpharmacists.org under Legislation/ Drug Distribution/ Provincial Drug Schedules.

Q: A physician recorded the following order in the client's record: "Dietitian to adjust insulin no more than _____ # units or by _____ %." Is a Registered Dietitian legally allowed to do this?

A: Registered Dietitians have no legal authority to accept a medical practitioner's delegation or transfer of function for any procedure, including specifying a dose of insulin for a client. Recommending or specifying a dose of insulin is outside the scope of practice for Registered Dietitians. RDs may legally teach the patient how to self-adjust insulin to lifestyle factors such as food, alcohol and exercise (teach appropriate carbohydrate:insulin ratio calculation) but not to adjust insulin directly for the patient. Refer the patient to their physician if they are unable to self-manage or if they require a new insulin prescription.

Email: admin@collegeofdietitiansbc.org
Web: <http://www.collegeofdietitiansbc.org>

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