Standards of Proficiency
for the
Modern Nutrition Profession

25 February 2008
STANDARDS OF PROFICIENCY FOR REGISTERED NUTRITIONISTS

Introduction

This document sets out the Standards of Proficiency for safe and effective practice that we expect registrants to meet. We also expect registrants to uphold our Code of Ethics and Statement of Professional Conduct (latest edition, published separately).

The standards explain the key obligations that UKVRN expects of you. Occasionally, we have pointed out specific elements of those key obligations. We have not attempted to create exhaustive lists of all the areas that each generic standard covers. We highlighted specific elements where we think this will help you to understand what we require of you.

If you are a student, or an associate registrant (Assoc Nutr., and Assoc PHNutr.) you may only have practised under supervision, not independently. Nonetheless, you must be confident that you will be able to meet these standards and can work as a professional with more autonomy, consistent with full registration as a nutritionist. Sometimes the standards relate to ongoing practice. By the time you apply for full registration, you will have had the opportunity to demonstrate your proficiency, normally, at work, including during work-based learning.

A note about our expectations of you

The standards of proficiency play a central role in how you can gain admission to, and remain on, the Register and thereby gain the right to use the title of your profession, currently, for example Registered Nutritionist (R Nutr.) or Registered Public Health Nutritionist RPHNutr. If you are an associate registrant and can show that you meet these standards, then you can apply to transfer to become a full registrant. You will be required to provide evidence to show that you are proficient, and proficiency is normally expected after 3 years' initial qualification, during your professional work.

We do recognise, though, that your professional work or practice will develop over time. Thus the practice of experienced registrants may become progressively more focused and specialised than that of newly registered colleagues, because it relates to a particular client group, branch of nutrition science, practice environment, including academia, education and training, other employment sector or occupational role. Sometimes it becomes broader in scope for example among senior managers, leaders and consultants. Your particular scope of practice or the level of your work may mean that you are unable to demonstrate that you continue to meet each of the standards. For instance, if you work with animals, either in practice or in research then any standards that relate to work with humans will not apply to your work. These standards are indicated in the section listing the “Underpinning knowledge and understanding” required of a Registered Nutritionist”. As long as you stay within your scope of practice and make reasonable efforts to stay up to date with the standards as a whole, this will not cause you a problem.

However, if you want to move outside your scope of practice, you must be certain that you are capable of working safely and effectively. This includes undertaking any necessary practice-based training or experience. If we have good reasons for believing that you may not meet the standards, we will investigate.

We will keep these standards under continual review, and we will update them to take into account changes in practice. We will inform you periodically about this, highlighting all the changes we make to the standards, so you will be able to see what has changed. We will always draw attention to any changes we make to the standards. We will publish notices on our website and inform any relevant professional body/bodies and stakeholders.
Standards of Proficiency

Expectations of a Registered Nutritionist

Professional accountability and autonomy

A Registered Nutritionist must:

1) Practise within the legal and ethical boundaries of their profession.
   a) Meet the requirements of their Code of Ethics and Statement of Professional Conduct

2) Promote people’s equality, diversity and rights and practise in a non-discriminatory manner.

3) Maintain confidentiality and security of client information consistent with legislation, professional and organisational policies and obtain informed consent.

4) Exercise a professional duty of care
   a) Help to establish and maintain a safe working environment for themselves and others that conforms to health and safety legislation and organisational policies and minimises risk.

5) Know the limits of their practice and when to seek advice.
   a) Know how to assess a situation, identify the nature and severity of a problem and exercise personal initiative to initiate the solution of the problem.

6) Recognise the need for effective self-management of workload and be able to practise accordingly
   a) Prioritise their workload and manage their time and resources efficiently.

7) Understand the obligation to maintain fitness to practise.
   a) Understand the importance of caring for themselves including maintaining their health.

8) Be proactive in, and take responsibility for, keeping up to date and developing and improving their own competence through continuing professional development.
   a) Maintain a personal development portfolio which identifies their learning and development needs and the steps they have taken to meet these needs.

9) Be assertive, creative and autonomous within own area.
   a) Lead others to carry out specific activities and tasks.
   b) Contribute effectively to change within own area of work.
   c) Identify and influence other people and agencies within own sphere of work to improve / protect health and wellbeing.
   d) Be able to show an ability to act as a credible advocate in situations where complexity is the norm and public confidence is critical.
   e) Act to show that they promote as well as “respect and reflect the balance and reliability of the scientific evidence that underpins their” professional practice. This includes promoting “objectivity in assessing” and using externally verifiable research evidence or information sources of high quality (Code of Ethics & Statement of Professional Conduct)
**Professional relationships**

A Registered Nutritionist must:

10) Understand their role and its scope and limits and know how to make referrals to other professionals.

11) Be able to build and sustain professional relationships both as an independent practitioner and as a member of a team.
   
a) Be able to work, where appropriate, in partnership with other professionals, support staff, individuals, groups, colleagues, commercial organisations, the media and stakeholders and communities.

b) Work in partnership with others to plan, implement and review actions, interventions or services for individuals and groups.

12) Contribute to the development of standards, policies and guidelines to improve the practice of their own and other professions.

13) Promote their profession by offering appropriate information about nutrition to individual clients, groups, clubs, professions, organisations, governing bodies, the media and commercial organisations.

**The skills required for the application of practice**

**Identification and assessment of health and social needs**

A Registered Nutritionist must:

14) Be able to gather appropriate information.

15) Be able to undertake appropriate assessment techniques.
   
a) Be able to undertake and record thorough, sensitive and detailed assessment of nutritional status, using appropriate techniques and equipment.

b) Be able to use markers of nutritional status and diet related health to identify health needs of specified individuals, groups, and communities, where appropriate.

16) Be able to arrange, or undertake and interpret investigations as appropriate.

17) Be able to analyse and evaluate the information collected.
   
a) Be able to analyse and evaluate food intake records, recipes and diets manually and using appropriate computer programmes.
Formulation and delivery of plans and strategies for meeting health and social needs

A Registered Nutritionist must:

18) Use research, reasoning and problem solving skills to determine appropriate action.
   a) Be aware of research and other developments in the evidence base for developing practice in nutrition.
   b) Demonstrate logical and systematic approaches to problem identification and/or problem solving.
   c) Critically evaluate research and other evidence to inform their own practice.

19) Draw on appropriate research or surveillance data and skills to reach reasoned conclusions and make professional judgements for effective nutritional practice.

20) Choose the most appropriate approach to influence food, dietary or lifestyle choice relevant to own scope of practice.

21) Be able to choose the most appropriate approach to influence policies and systems relevant to own scope of practice, and contribute to their planning and delivery.

22) Be able to make and implement specific and appropriate action plans including the setting of timescales.
   a) Assess an individual’s or group’s nutritional needs and preferences holistically using appropriate methods that are based on research evidence and best practice standards, guidelines and protocols.
   b) Interpret nutritional assessment information in relation to an individual’s or group’s goals and preferences and how to modify nutritional requirements to take account of occupation, lifestyle, age group, gender and physiological stage of life of the individual or group.
   c) Plan nutritional activities (interventions or programmes) in partnership with an individual or group that will enable them to reach their goals, that are appropriate to, and take account of, individual preferences, religious and cultural practices or proscriptions.
   d) Record an agreed plan using a format, language and terms that are clear and likely to be understandable to an individual or group client and any other individuals, professionals or groups that may need to access this information.
   e) Monitor, record and review the effectiveness of their activities (interventions or programmes) and refine these interventions and/or programmes to meet the changing needs and goals of client(s).

Communication and education to improve health

A Registered Nutritionist must:

23) Communicate effectively with individuals and groups using a range of methods and media to enable them to make informed choices about nutrition.

24) Present information clearly and succinctly in oral and written formats tailored to message and audience.

25) Contribute to the development of the knowledge and practice of others using a variety of teaching and learning methods.
26) Be able to use a wide range of communication and interpersonal skills when appropriate (including – advocacy, active listening, facilitation, negotiation, motivation or persuasion).

**Critical evaluation of the impact of, or response to, the registrant's actions**

A Registered Nutritionist must:

27) Monitor, evaluate and review the ongoing effectiveness of planned activity and modify it accordingly.
   
   a) Use evaluative techniques or procedures and record the decisions and reasoning appropriately.
   
   b) Participate in or contribute to monitoring activities or programmes, where appropriate.

28) Be aware of the role of audit and review in quality management, including quality control, quality assurance and the use of appropriate outcome measures.

29) Continually reflect on and evaluate their own practice.
   
   a) Review their own practice against best practice standards, guidelines and protocols and improve their practice in the interests of clients.

**Underpinning knowledge and understanding**

Three of the listed principles relate exclusively to the practice of human nutrition. These are marked with an asterisk.

A Registered Nutritionist must:

**Know and understand the scientific principles of bio-scientific and behavioural sciences which are relevant to their professional practice**

30) The structure and function of the body, relevant to their practice, together with a knowledge of health, disease, disorder and dysfunction; specifically digestion, absorption, excretion, respiration, fluid and electrolyte balance, cardiovascular system, neuro-endocrine system, movement and the musculoskeletal system, immunity; allergy and intolerance; thermoregulation; fertility, reproduction and lactation.

31) Mechanisms for the integration of metabolism, at molecular, cellular and whole body levels; specifically:

32) Control of appetite, food intake; and choice, including barriers and other factors affecting access; bio-availability and utilisation; nutrient balance; nutrient essentiality, conditional essentiality, and dispensability, nutrient limitation; nutrient turnover and storage; nutrient-gene interactions; homeostasis and homeorrhesis; adaptation and its limits.

33) The nature and extent of the metabolic demand of an organism for nutrients, the effects of altered supply and demand of each nutrient.

34) The principles and methods of measurement and estimation of energy balance; energy expenditure, fitness and physical activity; body mass; body composition; how body mass and energy balance are controlled.

35) The theory and methods of investigating the dietary and nutrient patterns of the general population and sub groups of the population.
36) The scientific basis of the safety and health promoting properties of nutrients (including water and alcohol) based on knowledge of the metabolic effects of nutrients, anti-nutrients, toxicants, additives, pharmacologically active agents (drugs); nutrient-nutrient interactions, ‘nutraceuticals’, functional foods, and beneficial non-nutrients and other metabolically active constituents of foods and the diet.

37) The scientific basis for the measurement and estimation of nutritional requirements, dietary reference values and recommended dietary allowances for the general population.

38) The strengths and limitations of the general principles and standard methods of assessment of nutritional status including anthropometric, dietary, biochemical, physiological, and functional methods.

39) The theoretical basis for, and methods of investigation of, the metabolic effects, the efficacy, health, safety, and legal aspects of foods, drinks and supplements.

40) The nature of common conditions that require dietary manipulation or can affect physical activity, such as obesity, diabetes, hypertension and coronary vascular heart disease.

41) The effects of disease processes upon
   a. diet, nutrition and health, and
   b. capacity for physical activity.

42) *Factors that affect nutritional needs and practices, including religious and cultural beliefs and practices, lifestyle, social inequalities and other factors act as barriers or otherwise influence food choice, nutrition, health.

43) Principles of communication.

44) *Principles of public health, health and social care policy and programme planning and delivery.

45) *Theories of health promotion, behaviour and change.

46) Principles of learning, communities, organisations and groups.

47) Principles and methods of scientific enquiry, quantitative and qualitative research design, and research process including approaches to the measurement of efficacy and effectiveness, analytical and statistical techniques used in research.

48) Legal context of nutrition practice in national, supranational and international contexts, other regulatory frameworks concerned with food and nutritional labelling; health claims supplementation and/ or fortification with vitamins and minerals.

49) Food system including food production, supply, access; sources of nutrients and other major dietary components, including toxins and anti-nutrients; patterns of food, meal and dietary consumption of groups, regions and populations; influences on food choice, access and consumption.

50) Food hygiene for safe handling, storage, processing, preparation and serving of foods.

51) Ethics and values and roles of professions in food, nutrition and health.