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604.736.2016 or toll free within BC: 1.877.736.2016

Email: info@collegeofdietitiansbc.org

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Registration Statistics

CDBC registration statistics, as of January 30, 2009:

- 1026 full/grandparented
- 9 Temporary
- Restricted Activities: A - 577; B - 296; C - 240; D - 0

Chair's Message

The beginning of a new year is always a great time for reflection and as I reflect on CDBC's accomplishments since April 1, 2004, we have much to be proud of as a profession. Working towards our mandate of public protection we have implemented a Code of Ethics with an accompanying Interpretation Guide, Standards of Practice, a Continuing Competence Program and Essential Competencies for Dietetic Practice. All four of these initiatives have been implemented and are effectively serving the CDBC, particularly when handling complaints against registrants.



In addition, CDBC is working with other Colleges to develop inter-disciplinary protocols to enhance access to dietetic care including a guide to assist with workplace scope of practice, role issues and practice clarity. CDBC is collaborating with other health professions to support the registration of all applicants. With financial support from the provincial and federal governments, we're also enhancing the registration processes for international applicants to increase transparency, effectiveness and efficiency.

CDBC is also working closely with other dietetic regulatory bodies to meet new labour mobility requirements outlined in the BC/Alberta "Trade, Investment and Labor Mobility Agreement" (TILMA) and the federal "Agreement on Internal Trade" (AIT), which helps ensure Registered Dietitians in good standing can move across Canada and practice their profession without further assessment or upgrading.

CDBC is well positioned to ensure we meet our current legislated mandate. As federal and provincial legislation evolves, so too will the CDBC.

All the best in 2009,

-3 certifications for the insertion of feeding tubes

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

2008/2009 Board of Directors

Glenn Kissmann, Chair, elected registrant, 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 representative, Victoria; Peter Lam, elected registrant, Fraser region; Joyce Statton, appointed public representative, Vancouver; and Robin Watt, elected registrant, Interior/North region. On April 1, 2009 two new public representatives will be appointed by the government to replace Jane Darville and Joyce Statton whose current terms end March 31.

Is your email address in the database correct?

Notice of registration renewal will be sent to your email address in the database. Please check your profile by logging in through the website to ensure your email address is correct. Please note: it's a legal requirement to keep your contact information current.

Registration Renewal

The online registration renewal process will be available to registrants in early March. You will be sent a personalized email informing you when the 2009/2010 online form is active. As stated in the CDBC bylaws, registrants are required to keep their profile information current. If you do not have your User ID and password recorded so you can access your profile and renew your registration online, please contact CDBC. The \$500 annual fee and \$25 Restricted Activities fees have not been

Registrar's Message

Since June 2008, I have met in-person or by tele or videoconference with approximately 350 Registered Dietitians in 34 cities, towns and facilities to discuss workplace practices that make it difficult to effectively provide full scope of practice services. A sincere "thank you" to all who openly and articulately shared their experiences.



Before outlining the four areas of practice issues that arose during the liaison sessions, a quick word about scope of practice. The practice parameters for Dietitians are set in legislation. The practice of "dietetics" is broadly defined in the Dietitians Regulation and health authorities, facilities and employers have the authority to narrow the scope through policies. If you encounter a restriction like this, you could begin investigating the process for policy review and change.

1. Some Dietitians reported restrictions that, on further investigation, turned out to be perceived barriers to practice - procedures that dietitians have always believed they weren't allowed to do but may. Examples include finger pricks, taking blood pressure and recommending "unscheduled" vitamins and minerals (for more information, please refer to the article on Vitamins and Minerals). These are in the public domain and may be performed by anyone.
2. Dietetic practice within the Dietitian's scope of practice may be restricted by facility policy or personal competence. For example, there are no legal restrictions on dietitians accepting and recording telephone orders from physicians for matters relating to dietetic services. However, there may be a policy in your facility that disallows this practice. Other examples include recording dietetic records in the "doctors' orders" section of the client's chart and recommending an adjustment in insulin dosage for diabetes self-management instruction. Before changing your practice, you need to check the facility's policies. If restrictions are in place, you must comply. Competence issues are

changed since the CDBC's inception. All fees are due by midnight March 31, 2009. If your practice requires Restricted Activities, (Appendix 2) Verification of Current Competence to Practice Restricted Activities must be received by CDBC by the March 31st deadline, by fax or email. The form is available through the website or you can access it through the link on the online renewal application.

RDs and the media

Two Registered Dietitians were recently interviewed by one of the television stations and it was exciting to hear them introduced as "Dietitians". Most often the person being interviewed is introduced as a "nutritionist" and, unless you know the person, you're left wondering if he/she is a RD. Please use your legal credential whenever possible. It's critical to educate the public if dietitians are going to be recognized as a member of their public's inter-professional health care team.

Criminal Record Re-checks

Amendments to the Criminal Records Review Act require registrants who registered in the College's first year, 2004/2005, to re-do their Criminal Record Check (CRC). The deadline was February 1. Thank you for complying with the government's requirement. Next year, registrants who initially registered in 2005/06 will be required to re-do their CRC.

Full (Grandparented) registrants

As of April 1, 2009, Full (Grandparented) registrants will have their registration status converted to Full Registration. The main purpose is to clarify registration classes for labour mobility purposes. Please contact the office if you'd like to receive a new Full Registration certificate at

self-imposed restrictions supported by the CDBC Code of Ethics.

3. Restrictions on dietetic practice based on the legislation of our health care colleagues is a major focus for the CDBC. For example, Dietitians may legally design a parenteral diet that is ordered by another health professional and dispensed by the facility pharmacist. The Dietitian can legally re-design (or adjust) the diet but pharmacists cannot accept the Dietitian's adjustment to the pre-approved diet because Dietitians are not included in Pharmacists' list of prescribing practitioners. This also includes requests for vitamin and mineral supplements as well as for adjustments to previously established enteral and renal formulas, and self-managed insulin dosages. In addition, Dietitians may legally order dietetic lab tests but Laboratory Technicians are restricted from filling tests ordered by Dietitians. In order for health professionals to practice collaboratively, Inter-professional Protocols need to be developed between regulatory colleges. Work has already begun on this exciting initiative!

4. Employment and human resource matters have been referred to Dietitians of Canada.

Further information will be relayed through future Monthly Updates and Newsletters.

Fern Hubbard, DDH, BA, MEd
Registrar

Continuing Competence Program (CCP) Update

The Continuing Competence Program (CCP) completed its second round of Professional Development Plan submissions on October 31, 2008.

Reminder: Professional Development Plan (PDP) re-submissions for the 2009 Group (former cohort 2) are due by February 6, 2009. Please email your plan to mj@collegeofdietitiansbc.org.



Results of the 2008 Group (former cohort 1) submissions

Here are interesting results from the 2008 Group:

- 87% of Professional Development Plans were

no cost.

College calendar - Meetings and Events

January, 19-20, national regulators meeting - Agreement on Internal Trade (Montreal)

January 30, Registration Committee

February 2, Patient Relations Committee

February 10, Alliance teleconference

February 13, Board of Directors

February 16, Quality Assurance Committee

February 17, Executive Directors and Regulators of BC

March 11, Health Regulators Organization of BC

Thank you!

Several registrants answered our call for [potential CDBC committee members](#). If you're interested but haven't yet responded, please email a short note of interest and a current resume by [February 6](#). Please contact Fern Hubbard, Registrar, if you'd like additional information.

"Restricted Activities"

New provincial legislation includes a change of terminology from "Reserved Acts" to "Restricted Activities". All CDBC forms are being updated.

"Delegation" and "transfer of function"

Did you know that "Delegation" and "transfer of function" are not included in Dietitians' current legislation? The terms were commonly used in the past and no longer apply to Dietitians. Dietitians are legally able to provide services

complete upon initial submission

- 99% of Professional Development Plans were complete by March 31, 2008, in time for registration renewal
- 1% of Professional Development Plans were incomplete due to extenuating circumstances such as retirement and removal from the register
- The most popular standards of practice selected for learning goals were:
 - o Standard 3: Current evidence-based practice
 - o Standard 2: Communication
 - o Standard 1: Professional practice
 - o Standard 4: Clinical care, including Restricted Activities
- On average, registrants chose 4 learning goals
- The most popular learning activities were (in order of importance):
 - o Literature review/ reading
 - o Workshops, lectures, conferences, seminars, journal club
 - o Intra/ interprofessional interaction (consulting, training, shadowing colleagues and/ or other health professionals)
 - o Integration of new knowledge/ skill to practice

CCP sessions are available to groups of at least 10 registrants on an on-going basis. Please contact the office if you'd like me to make a presentation to your local RD group. You may also email your CCP questions to mj@collegeofdietitiansbc.org.

Mélanie Journoud, MSc, RD
Practice Advisor

Current Updates

New "Partnership for Dietetic Education and Practice" (PDEP)

A new [Partnership between the Alliance, Dietitians of Canada and national dietetic educators](#) was initiated during a December 4-5, 2008 meeting in Toronto.

An Interim Steering Committee was struck with 3 representatives from each partner group and they met in Montreal on January 15-16, 2009. The role of the Interim Steering Committee is to establish the structure for the PDEP and initiate work on identified joint projects, the first being an alignment of the

within their scope of practice - they do not need a physician's "delegation" or "transfer of function." If a physician wants to delegate a procedure that is not within the Dietitians' scope of practice, the Dietitian cannot legally perform it with or without the physician's delegation or transfer of function. Also, the liability insurance dietitians are required to carry under the Health Professions Act generally does not cover practices that are outside the dietitians' legal scope of practice. If you practice a procedure not legal for dietitians and something goes awry, you will likely be held personally liable for damages even if you were "delegated" the task by a physician and you believed you were practicing competently.

Are you planning on moving to another province?

Major changes to labour mobility requirements come into effect across Canada in all professions and trades on April 1, 2009. As a Registered Dietitian in good standing (no active disciplinary action or practice restrictions), you are eligible to move to any province without further assessment or examination. The only exception is moving to Quebec - depending on your background, you may be required to meet the province's French language requirement. "Gaps" in your registration history are no longer considered and you will not be required to write or re-write the Canadian Dietetic Registration Examination at any time. Please call Fern Hubbard, Registrar, if you have any questions.

regulatory, education and accreditation competencies. Fern Hubbard, who has experience teaching at UBC and the University of Manitoba, as a curriculum consultant, and with accreditation, has agreed to be one of 3 Alliance representatives on the competencies Committee.

The development of the Partnership is a major accomplishment and should result in better intra-professional relations as well as solve the problem for dietetic educators of differences between the "Essential Competencies for Dietetic Practice" approved by the CDBC Board and Dietitians of Canada's accreditation standards.

Government-funded Projects

The "Enhancing Practical Training Capacity" project is being developed in collaboration with Langara College, UBC and Dietitians of Canada. Although the project is aimed at the expansion of sites for international applicants who are required to update their practical training through Langara College's Dietetic Canadian Experience Program (DCEP) or complete a full internship program through their Gerontology Nutrition Society (GNS) Internship Program, identifying expanded sites will also benefit the UBC dietetics program. The goal of the project is development of a comprehensive practical training site database and an action plan for expanding the province's capacity for the practical training/internship portion of dietitians' education. The project is intended to help fulfill the pending shortage of dietitians in BC by increasing the number of CDBC Registered Dietitians.

The "Essential Competencies Registration Project - Phase 2" is a continuation of a project initially funded in 2007/2008. Phase 1 resulted in a paper-based Competency Self-Assessment (CSA) form that will be used by international and lapsed practice applicants to self-assess their knowledge, skills and abilities against the "Essential Competencies for Dietetic Practice". Phase 2 involves conversion of the paper form to an electronic form with the capacity for applicants to include examples from formal education or practice experience that demonstrate their competence with the ECs. Processes are also being developed to validate the applicants' self-assessment. The process will advance the College from a "credential based" assessment system (transcripts, course descriptions, etc) to a validated "competency based" assessment process and will result in a more efficient and accurate applicant assessment process.

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.

The following question has been revised since its first publication in spring 2008. The CDBC consulted with the College of Pharmacists of BC regarding drug recommendations relating to dietetic practice. In addition, the College of Pharmacists of BC published updated drug schedules in October 2008.

Q: Is it appropriate for me to recommend vitamin and mineral supplements and insulin adjustments to clients?

A: Under the current federal and provincial laws, schedule 3 and unscheduled drugs, which include vitamin and mineral supplements not intended for enteral or parenteral use, may be recommended to clients as they relate directly to the practice of dietetics. Exceptions include drugs or supplements listed under schedule 1, 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 per dosage form or where the largest daily dosage shown on the label would, if consumed by a person, exceed 10 000 IU per day, and
- Vitamin B12 with intrinsic factor concentrate.

Under the current federal and provincial laws, schedule 2 drugs, which do not require a prescription, may be recommended to clients as they relate directly to the practice of dietetics. However, schedule 2 drugs may only be distributed to clients at the pharmacist's discretion and may require consultation with the client and/or their health professional(s). Examples of schedule 2 drugs related to therapeutic diets:

- Human insulin and insulin
- 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.
 - Sodium chloride (single ingredient solution in concentrations exceeding 0.9%)

For more information, please refer to an updated list of drug schedules on the College of Pharmacists of BC's website at www.bcpharmacists.org/library/D-Legislation_Standards/D-4_Drug_Distribution/5012-Drug_Schedules_Regulation.pdf

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

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