

268 CMR 5.00: PROFESSIONAL STANDARDS AND ETHICAL CODES

Section

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5.01: Appropriate Standards of Practice and Activities

(1) Food and Nutrition: In the area of food service, food safety, nutrient composition of foods, nutrition and supporting sciences, examples of appropriate standards and activities include, but are not limited to, the following:

- (a) Evaluating, interpreting, and applying the science of food, food components, nutrients, vitamins, and nutraceuticals to nutrition care plans;
- (b) Understanding the nutrient composition of foods and food components as it is applied to human nutrition in individuals and populations;
- (c) Understanding and applying the current principles of food safety as they apply to individuals, groups and communities.

(2) Nutrition Services - Community/Clinical: In the area of nutrition screening, assessment, implementation and documentation, normal nutrition/health promotion/disease prevention, and medical nutrition therapy, examples of appropriate activities include, but are not limited to, the following:

- (a) Providing, facilitating and promoting quality services based on client needs and expectations, current knowledge, and professional experiences;
- (b) Developing and implementing plans of nutritional care for individuals, including oral, enteral, and parenteral nutrition, based on assessment of nutritional needs;
- (c) Recommending diet prescriptions and methods of feeding;
- (d) Developing criteria for nutrition screening;
- (e) Directing and coordinating nutrition assessment activities;
- (f) Collecting and evaluating clients' diet histories and nutrition care, and communicating data collected through written record systems;
- (g) Collaborating with clients to assess needs, background, and resources, and to establish mutual goals. Monitoring progress towards client goals and outcomes;
- (h) Developing individualized education programs;
- (i) Recognizing visual and behavioral symptoms of nutritional deficiencies and conditions requiring nutrition interventions;
- (j) Collaborating with physicians and allied health personnel as the provider of nutritional care using tools and procedures such as, but not limited to, diet histories, calipers, BMI tables, finger stick blood-sugar measurements, blood pressure, vital sign assessment and oral cavity assessment;
- (k) Communicating appropriate actions, evaluating resources and implementing options, monitoring the implementation process, and making appropriate adjustments; documenting activities related to nutrition care;
- (l) Negotiating revisions to the care plan with the client and health care team when appropriate, and evaluating new tools, techniques, and strategies contributing to the evaluation of nutrition care plan;
- (m) Providing consultation and nutritional care to community groups, and identifying and evaluating needs to establish priorities for community nutrition programs; identifying populations at nutritional risk; monitoring client populations to assess prevalence of nutrition problems; compiling data on nutrition and health indicators for populations and developing objectives for community nutrition program service; promoting public understanding of nutrition; managing nutrition services in state/local agencies; evaluating the quality and effectiveness of community programs;
- (n) Implementing quality practice by following policies, procedures, legislation, licensure, practice guidelines, standards of professional practice and Code of Ethics;
- (o) Continuously acquiring knowledge and developing skills to maintain accountability to the public; licensee should conduct self-assessments at regular intervals to identify professional strengths and weaknesses, target areas for professional development, seek continuing professional education, and document professional development activities.

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- (3) Education and Research: In the area of counseling, education, training, and research, examples of appropriate activities include, but are not limited to, the following:
- (a) Planning, conducting and evaluating educational programs relating to nutritional care;
 - (b) Counseling and educating individuals, families, and groups in nutritional principles, meal patterns and plans, insulin administration, food selection, food and drug interactions, and economics, as appropriate;
 - (c) Collaborating with clients to develop goals, objectives, evaluation criteria, and strategies for nutrition counseling plans;
 - (d) Planning, conducting or participating in current research related to nutritional care, or interpreting and evaluating pertinent research findings for utilization in nutritional care;
 - (e) Publishing and evaluating of technical and lay food and nutrition publications for all ages, socioeconomic and ethnic groups;
 - (f) Selecting, adapting, and developing of nutrition education materials to reach specific client markets and to use with individuals;
 - (g) Participating in or generating research to enhance practice;
 - (h) Reviewing research findings for their application to dietetics practice and basing practice on sound scientific principles, research, and theory;
 - (i) Promoting research through alliances and collaboration with other professionals and organizations, and contributing to the development of new professional knowledge and research;
 - (j) Collecting measurable data and documenting outcomes within the practice setting, and sharing research data and activities through various media;
 - (k) Planning, conducting and evaluating dietary studies, and participating in nutritional epidemiological studies;
 - (l) Formulating research questions, designing and conducting research projects that may include collecting, recording and summarizing data according to protocols, conducting statistical analyses, interpreting results, preparing written reports and evaluating others' research proposals or publications.
- (4) Foodservice Systems: In the areas of menu planning, foodservice purchasing, production, distribution and service, safety and sanitation, facility layout, and management, examples of appropriate activities include, but are not limited to, the following:
- (a) Planning, developing, controlling and evaluating food service systems;
 - (b) Establishing and maintaining standards of food production, service, sanitation, safety, and security;
 - (c) Developing menu patterns and evaluating such for nutritional adequacy;
 - (d) Planning layout designs and determining equipment requirements for food service facilities;
 - (e) Developing specifications for the procurement of food and food service equipment and supplies.
- (5) Management: In the area of human resources, finance and materials, marketing of products and services, functions and characteristics, and quality improvement, examples of appropriate activities include, but are not limited to, the following:
- (a) Coordinating and integrating clinical and administrative aspects of professional to provide quality food service and nutrition care;
 - (b) Negotiating contractual agreements, implementing and evaluating quality assurance measures, handling staffing issues, performing cost/benefit analyses, developing standards of professional care, and determining departmental missions, goals and objectives;
 - (c) Utilizing measurable resources such as personnel, monies, equipment, guidelines, protocols, reference materials, and time in the provision of professional services;
 - (d) Conducting market research, determining primary and secondary market segments, developing messages that communicate the features and benefits of products or services to intended markets; and
 - (e) Tracking marketing response and evaluating marketing strategy; understanding products and services from the consumer's perspective; and developing, modifying, and assessing products and services in order to make them more marketable.

5.02: Code of Ethics

268 CMR 5.02 is applicable to and governs the practice, standards and conduct of all Licensed Dietitians and Nutritionists and Applicants certified and regulated by the Board.

(1) Professional Representation and Responsibilities: Licensees shall conduct themselves with honesty, integrity and fairness:

- (a) Licensees shall practice based upon scientific principles and current information.
- (b) Licensees shall assume responsibility and accountability for personal competence in practice, continually striving to increase professional knowledge and skills and to apply them to practice. Services rendered should be evaluated to determine effectiveness. If not effective, and benefit cannot reasonably be expected to accrue, professional services should not be initiated or continued. Licensee shall take all reasonable precautions to avoid injuring persons in the delivery of professional services.
- (c) Licensees shall recognize and exercise professional judgment within the limits of their qualifications and collaborate with others, seek counsel, or make referrals as appropriate. Licensees shall not provide any services beyond the scope of their practice or for which they are not appropriately licensed.
- (d) Licensees shall not misrepresent their qualifications, credentials, affiliations, educational background, or experience to the public, to colleagues, or to other individuals or institutions.
- (e) Licensees shall fully inform persons served of the nature, possible effects, and limitations of services rendered or to be rendered. Licensees shall not make any false or misleading claims about the efficacy of any services, products, or methods of treatment.
- (f) Licensees shall explain in full to the person being served those activities engaged in for experimental or teaching purposes. Written consent must be obtained prior to providing such services.
- (g) Licensees shall permit the use of their name for the purpose of certifying that professional services have been rendered only if they have provided or supervised the provision of those services.
- (h) Licensees shall maintain knowledge and skills required for continuing professional competence.
- (i) Licensees shall not abuse or become dependent upon alcohol or drugs in a manner that detrimentally affects the provision of professional services and shall immediately and voluntarily withdraw from professional practice under any, but not limited to, the following circumstances:
 1. engaging in any substance abuse that could affect practice;
 2. receiving a judgment by a court of mental incompetence; or
 3. suffering from emotional, mental or physical disability affecting practice in a manner that could harm a client or others.
- (j) Licensees shall not make any false, misleading or deceptive claims in any advertisement, announcement, or in competitive bidding. The following advertising practices are considered fraudulent, false, deceptive, or misleading and are prohibited:
 1. advertising that contains a misrepresentation of facts or false statement regarding the licensee's professional achievements, degrees, trained skills and qualifications;
 2. advertising that makes only a partial disclosure of relevant facts; and
 3. advertising that contains any representation, statement or claim that the Board determines is misleading or deceptive to the public.
- (k) Licensees shall not aid or abet, directly or indirectly, the practice of dietetics/nutrition by any person not duly authorized under the laws of Massachusetts.
- (l) Licensees shall at all times conduct professional activities in conformity with federal, state and municipal laws, ordinances and/or regulations, including 268 CMR 1.00 through 6.00.
- (m) Licensees shall comply with all applicable laws and regulations and are subject to disciplinary action by the Board under the following circumstances and as further provided for by 268 CMR 6.02: *Grounds for Discipline:*
 1. conviction, or submission to the facts, of a crime that is a felony or misdemeanor, which reasonably call into question the moral character of the licensee or may be related to the practice of the profession as determined by the Board;
 2. discipline by any jurisdiction with at least one of the grounds for the discipline expressed in 268 CMR 6.02, or substantially equivalent to, any of said principles;

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3. committing an act of misfeasance or malfeasance, which is directly related to the practice of the profession as determined by a court of competent jurisdiction, a licensing board, or an agency of a government body.
- (n) Licensees shall support and promote high standards of professional practice and accept the obligation to protect clients, the public, and the profession by upholding the Code of Ethics; and, each licensee has an affirmative duty to report any known, or reasonably suspected, violation of said Code to the Board.

5.03: Professional Relationship with Clients

- (1) Licensees shall make known to prospective clients the important aspects of the professional relationship, including fees and arrangement for payment, which might affect the client's decision to enter into the relationship. Licensee's fees must be commensurate with services rendered. Under no circumstances shall a licensee charge for services not rendered.
- (2) Licensees must guard against conflicts of professional interest. They shall not engage in commercial activities that conflict with responsibility to clients or to colleagues. Licensees shall not receive or give a commission or rebate or any other form of remuneration for the referral of clients for professional service. Licensees shall not accept fees, gifts, or other forms of gratuities for recommending a particular product or use of a particular referral source.
- (3) When a referral relationship exists, licensees shall provide ongoing communication with the licensed referring practitioner regarding changes in plans of care, treatment programs, and termination of services. Licensees shall take reasonable action to inform a client's physician and any appropriate allied health care provider in cases where a client's nutritional status indicates a change in medical status.
- (4) Licensees shall disclose to clients any interest in commercial enterprises that the licensee promotes for the purpose of personal gain or profit.
- (5) Licensees shall be alert to situations that might cause a conflict of interest or have the appearance of a conflict, and provide full disclosure when a real or potential conflict of interest arises.
- (6) Licensees shall provide professional services in a manner that is sensitive to cultural differences and does not discriminate against others on the basis of race, ethnicity, creed, religion, disability, gender, age, sexual orientation, or national origin.
- (7) A licensee shall not engage in, solicit, or otherwise attempt to engage in any form of sexual relationship or activity with a client.
- (8) Licensees shall not violate any provision of any federal or state statute relating to confidentiality of client communication and/or records. Unless required by law, the licensee shall not reveal to any unauthorized person any confidential information obtained from the individual that the licensee serves professionally without the client's expressed written permission.

5.04: Client Records; Employed or Private Practitioner

- (1) A Licensed Dietitian/Nutritionist, employed by a medical facility, educational institution, public or private corporation, shall adhere to all applicable federal, state and local laws or regulations pertaining to record keeping by such facilities, institutions or corporations.
A Licensed Dietitian/Nutritionist engaged by a facility, institution or corporation as enumerated in 268 CMR 5.04(1) as an independent contractor shall adhere to the record keeping standards enumerated in 268 CMR 5.04(2), (3) and (4).

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(2) A Licensee engaged in private practice, shall maintain a complete and accurate record for each client which meets the standards of usual and customary practice and which is adequate to enable the licensee to provide proper care and treatment of the client. Licensee shall maintain a client's record for a minimum of five years from the date of the client's last professional encounter with the licensee.

(3) Except as otherwise provided by law, a licensee engaged in private practice, shall permit inspection of records maintained for a client by such client or the authorized representative of the client, and upon request, and within a reasonable period of time, shall make a copy of such client's records available to such client or representative.

(4) A Licensee engaged in private practice, may charge a reasonable fee for the expense of providing the client's records to the client or authorized representative; however, the licensee may not require prior payment of the charges for prior professional services rendered to the client as a condition for making the records available.

REGULATORY AUTHORITY

268 CMR 5.00: M.G.L. c. 13, § 11D, c. 112, §§ 201 through 210.