

Your Professional Practice Questions

Therapeutic Diet Orders

The *College of Dietitians of Ontario* receives many calls from dietitians with questions regarding therapeutic diet orders. A therapeutic diet order is a prescription for a therapeutic diet or a change in diet which “can apply to an individual client by means of a direct order or to more than one individual by means of a medical directive”.¹ Here are some of the questions you have asked:

- Can I accept a phone order and, if so, from whom?
- Can I write an order in the orders section of the patient chart?
- Do I need to have a physician co-sign all changes I make to an initial order?
- Are the rules regarding orders different if I work in a long-term care facility?
- Is it always necessary to have a doctor’s order before I provide care for a patient?

These questions cannot be answered by a simple “yes” or “no”. Dietitians must have an understanding of the limits and the flexibility of laws as they relate to their scope of practice to answer them. Without this understanding and depending on where they work, they may unduly restrict their practice and prevent themselves from offering the best care possible to their clients. This article will provide a framework that will help dietitians explore options for diet orders in view of the law, facility policy and medical directives.

Facility Specific Legislation

Both the Regulated Health Professions Act (RHPA) and the Dietetics Act (1991)² allow dietitians to recommend diets and set treatment plans. They can order therapeutic diets based on a complete assessment of a client’s nutritional status and needs because this is not a controlled act. It is well within the scope of practice for dietitians to do this unless other legislation specific to work

settings or employer policies state otherwise. In settings such as public hospitals and long term care facilities, for example, other rules apply.

Public Hospitals Act

The *Public Hospitals Act*, Regulation 965, states that orders should be in writing, dated and authenticated by the physician, dentist or midwife giving the order. Dietitians in public hospitals, therefore, cannot legally order therapeutic diets without final approval by a physician, dentist or midwife through verbal order, written order or cosigning of an order. This regulation provides for an exception where the order may be given by telephone to a person designated by the administrator to take such orders. An order may even be implemented before it is co-signed by a physician, dentist or midwife, but it must be authenticated within a certain time period.

A growing number of hospitals have adopted policies or medical directives that authorize dietitians to order therapeutic diets and/or to implement them without obtaining a physician signature on each occasion. Dietitians must be familiar with the policies specific to their facility.

In some hospitals, although not supported by policy or medical directive, dietitians write orders for therapeutic diets and have them implemented before a physician or person authorized to do so co-signs the order. However, it is best to have this practice supported by a hospital policy or a directive. Policies and medical directives could stipulate what type of therapeutic diet needs orders, what orders can be written by dietitians and, if required, the time period during which co-signature by a physician is needed. It is important to note that a formal “delegation” is not necessary in this case because ordering therapeutic diets is not a controlled act.³

Long Term Care Act, 1994

The *Long Term Care Act* does not require orders as outlined by the *Public Hospitals Act*. However, it does specify requirements for meals, menus and dietetic services.

Homes for the Aged and Rest Homes Act

This Act provides information on the legal rights of residents and gives requirements for written plans of care which include provisions for diets. In addition, it stipulates that the care plan should be reviewed quarterly by the dietitian or food service supervisor. There is no requirement for orders.

Nursing Homes Act

Nursing homes also require a plan of care for each resident. Nutritional care requirements for residents are stipulated in the *Nursing Homes Act*, Section, 75 (1) (c);

“Every administrator shall ensure that, where modified and therapeutic diets and nutritional supplements are ordered in writing by a physician attending a resident, the diets and supplements ordered are provided to the resident”.⁴

This provision of the Act suggests that therapeutic diets can be ordered by the physician in attendance to the patient and must be implemented when ordered by a physician. The provision does not prevent dietitians from prescribing therapeutic diets, but it also does not give them the full force and effect as a therapeutic diet ordered by a physician. There are examples of nursing homes using facility-specific policies and directives granting dietitians the power to order therapeutic diets in cases where physicians do not visit frequently. The purpose is to improve client care by accelerating the implementation of their therapeutic diets. Dietitians working in facilities without such policies or directives may have an opportunity to improve client care by participating in a process to create them.

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Your Professional Practice Questions cont'd.

Developing Policies and/or Directives for therapeutic diet orders

Dietitians are qualified to do comprehensive nutrition assessments, determine therapeutic diet needs and help their clients implement, monitor and evaluate their diets. In their own private practices, they do this without the need for orders. Facilities can realize enhanced patient care from such expertise by developing policies or directives authorizing dietitians to write and implement therapeutic diet orders. For instance, patients who should be fed immediately would not have to wait for a physician to cosign an order for diet.

However, because dietitians work in a variety of practice areas, issues of competence and risk should be addressed where policies and directives are being considered. Competence is closely related to risk. In order to minimize risk, dietitians must have the required competence and knowledge to write therapeutic diet orders where needed. A dietitian with many years of experience working in critical care, for example, would have no difficulty writing orders for, or implementing a policy or medical directive for Total Parenteral Nutrition (TPN) or Total

Enteral Nutrition (TEN) and, indeed would have the competence necessary for requisitioning laboratory tests related to the monitoring of TPN and TEN. Similarly, a dietitian experienced in diabetes care would have no difficulty ordering or recommending insulin adjustments for patients. However, it may be questionable whether either of these dietitians would have the competence necessary to write orders for the other's patients.

Other important steps in developing policies and medical directives for therapeutic diets includes engaging all relevant stakeholders in developing these policies and directives and including a communication plan to ensure that the policy is circulated to all relevant parties. The issue of informed consent is another important consideration in therapeutic diets. Clients need to understand that you are a registered dietitian, the reasons why you are ordering the diet, what it means for them in practical terms, the benefits expected from it and any material risks or side-effects that might be expected. Dietitians must answer any remaining questions and obtain the client's agreement to the proposed plan before implementing it.

Dialogue with members on this topic:

The *College of Dietitians of Ontario* would like to provide a more interactive venue to discuss this topic with members who are interested. On July 16th, 2003, 3-5 pm, Mary Lou Gignac, Registrar and Sue Behari, RD, Quality Assurance Manager, will be available by teleconference for a discussion of this topic. If this topic interests you please call the College at 416-598-1725 to reserve a space. Due to the teleconference medium, space is limited to 15 sites.

¹ College of Nurses of Ontario, "When, Why and How to Use Medical Directives" (Revised 2000), p 3.

² All regulations quoted in this article may be found on the College of Dietitians of Ontario website: www.cdo.on.ca <<http://www.cdo.on.ca/>> – Resource Room: Legislation.

³ For a discussion on developing policies and medical directives see, "Members Share Their Experience in Developing Policy and Procedures for the Prescription of Therapeutic Diets", résumé: Winter 2000, p. 3-4.

⁴ Nursing Homes Act - R.R.O. 1990, Reg. 832, Section, 75 (1) (c).

⁵ For steps in developing medical directives see, "Your Professional Practice Questions: Insulin Adjustments", résumé: Fall 2002, p. 5-7.

Get Ready for Privacy Legislation

On January 1, 2004, the *Personal Information Protection and Electronic Documents Act* comes into full force and effect. Right now it is limited to the federal private sector such as banks, telecommunications companies and cross-provincial border transfers of health information. Many health practitioners and organizations will be covered by the Act after that date.

The *Federation of Health Regulatory Colleges of Ontario* is sponsoring a seminar dealing with this issue on October 8, 2003, 9am to noon. It will be broadcast live by satellite to 7 locations throughout Ontario.

- London – 1680 Richmond Street (SilverCity Theatre)
- Ottawa – 3090 Carling Avenue (Coliseum Theatre)
- Sudbury – 355 Barrydowne Road (SilverCity Theatre)
- Thunder Bay – 850 North May Street (SilverCity Theatre)
- Toronto – 259 Richmond Street West at John Street (Paramount Theatre)

- Windsor – 4611 Walker Road (SilverCity Theatre)
- Vaughan – 3555 Hwy. 7 West (Woodbridge) at Hwy. 400 (Colossus, Theatre)

Presenters:

Richard Steinecke, lawyer and author of *The Complete Guide to the Regulated Health Professions Act*.

Julie Maciura, health lawyer and lead author of *The Annotated Statutory Powers Procedure Act*.

Registration: www.wdysevents.com/privacyseminar

Events Services Phone: (905)436-0375 Fax: (905)436-0892

Richard Steinecke has adapted specifically for dietitians an article he wrote about privacy legislation, "What Every Dietitian Needs to Know about Privacy Legislation." You may download a copy at www.cdo.on.ca > Home Page > Professional Practice.