“That is beyond your scope of practice.” What exactly does this statement mean? One explanation is that some people have a narrow view of the meaning of “scope of practice” even as it relates to the system of controlled acts. For example, there are circumstances in which a dietitian can prescribe a drug even though to some any prescribing appears to be outside of a dietitian’s scope of practice.

The problem is that the phrase “scope of practice” has at least three common meanings. People often think that there is only one meaning to the term which, obviously, leads to confusion. The three common meanings are as follows:

1. The area of expertise of dietitians as a profession. This reflects what dietitians are trained to do through their educational programs and, to a lesser extent, the evolution of the profession as its role develops.

2. The activities that dietitians as a profession are legally permitted to do under the Dietetics Act and the Regulated Health Professions Act.

3. An individual dietitian’s area of competence.

In this article we are talking about the scope of practice of the profession as a whole and, therefore, will focus on the first two definitions.

AREA OF EXPERTISE

The first meaning, area of expertise, is the broadest most inclusive, and it is supported by section 3 of the Dietetics Act, which reads as follows:

Scope of practice

3. The practice of dietetics is the assessment of nutrition and nutritional conditions and the treatment and prevention of nutrition related disorders by nutritional means.

This provision is descriptive only. It does not restrict dietitians to the activities described there. It sets out in a broad way the kinds of things dietitians normally do. Keep in mind that the scope of practice of the profession evolves over time. What may not have been within the expertise of dietitians in 1993 (when the provision was originally enacted) may now be part of their knowledge, skill and judgment. The best way of seeing the evolution of the
expertise of the profession is to look at the curriculum of the educational programs of dietitians and to review dietetic professional literature. In keeping with this approach to the scope of dietetic practice, the College uses a broad definition of professional liability insurance coverage and counting hours of practice for the purposes of demonstrating current knowledge, skill and judgment.1

The Dietetics Act does not prevent dietitians from doing things outside of the language of section 3. So, for example, even if the prescription of drugs does not constitute “treatment …by nutritional means”, there is no rule preventing dietitians from doing things outside of the boundaries of this language. It would be incorrect to say that dietitians have no expertise or authority to prescribe drugs because of section 3 of the Dietetics Act. Dietitians may well have that expertise in relation to certain drugs frequently used in the dietetic context.

LEGALLY PERMITTED ACTIVITIES

The second meaning often attributed to the scope of practice of dietetics refers to the activities dietitians are authorized to do under the Dietetics Act. Some try to argue that this means dietitians can only perform public domain activities plus skin pricking because no other controlled acts are specifically assigned to dietitians.

However, that argument is flawed because dietitians are authorized by the Regulated Health Professions Act to perform other controlled acts where,

1. It falls within an exception (e.g., assisting a person with their routine activities of living);
2. It falls within an exemption under the Minister’s regulation (e.g., acupuncture, at least for now); or
3. It is done under delegation (e.g., prescribing a drug under the authority of a medical directive).

So while the “scope of practice” of dietitians prevents them from prescribing drugs on their own authority, it is within the scope of practice of dietitians to prescribe drugs under the authority of a delegation often contained within a medical directive.

CONCLUSION

So whichever of the two general meanings you ascribe to “scope of practice”, neither of them prevents a dietitian from prescribing drugs under the authority of a delegation.

Of course, any dietitian doing so would have to comply with professional standards (e.g., ensure personal competence to do so, conduct an appropriate assessment, monitor the client and document appropriately). But that is to concede that prescribing drugs can, in some circumstances, be within the scope of practice of the dietetic profession.

A proper response to someone who says “that is beyond your scope of practice” when you are trained and competent to do the controlled act and have a medical directive authorizing you to do it would be to say: “dietitians are trained to do this and in keeping with the Regulated Health Professions Act, I am delegated to do it”.

1. For the purposes of needing insurance coverage and hours of practice for currency purposes, the College defines the practice of dietetics as follows: “Dietetic Practise is paid or unpaid activities for which members use food & nutrition-specific knowledge, skills and judgment while engaging in:
   • the assessment of nutrition related to health status and conditions for individuals and populations;
   • the management and delivery of nutrition therapy to treat disease;
   • the management of food services systems; building the capacity of individuals and populations to promote, maintain or restore health and prevent disease through nutrition and related means; and
   • the management, education or leadership that contributes to the enhancement and quality of dietetic and health services.”

Click here to test your knowledge about the RD Scope of Practice.