



Dietetic Code of Ethics

Ethical Expectations

Ethical practice is an integral part of the professional commitment dietitians make to the health and well-being of their clients. The Code of Ethics for Dietitians in British Columbia is a statement of values, behaviours, and responsibilities that guide interactions and fair decision-making in any professional situation and work environment.

The Code of Ethics was developed collaboratively and through partner consultation by the College of Dietitians of British Columbia, the Saskatchewan College of Dietitians, the College of Dietitians of Manitoba, the Nova Scotia College of Dietitians and Nutritionists, the New Brunswick Dietitians Association, and the College of Dietitians of Newfoundland and Labrador, to articulate the following five (5) ethical standards.

All dietitians in BC have a legal requirement to protect the public under the [Health Professions Act](#). The CHCPBC holds dietitians accountable for adhering to the Code of Ethics and upholding the public's trust in the profession. In the event of any concerns or allegations of a breach, the CHCPBC will investigate allegations of a breach in conduct.

The Code of Ethics is not a stand-alone document and should be applied with other relevant legislation, regulations, standards, policies, guidelines, and the Code of Ethics Interpretive Guide. At times, ethical standards may overlap with dietetic-specific regulations, bylaws, and standards, as requirements may be both legal and ethical.

Definitions are found at the end of this document and may be province-specific. Some definitions may have a narrower interpretation in other regulatory policy documents that are specific to the nutrition care relationship between a dietitian and an individual client.

The Code of Ethics is a living document that is subject to change from time to time, as dietetic practice and health professional regulations evolve.



Ethical Standards

A dietitian will practice ethically by ensuring that they:

1. Provide Services in the Best Interest of Clients

- a. Maintain objectivity when exercising professional judgement.
- b. Present information in a way that is easy to understand and is adapted to the client's context.
- c. Obtain informed consent from a client for services, including any changes, refusal and/or withdrawal of services.
 - i. Take all reasonable steps to ensure client consent is not given under conditions of intimidation or undue pressure.
 - ii. If a client lacks capacity, obtain consent for planned services from a substitute decision maker.
 - iii. Encourage the substitute decision maker to honour the client's previously expressed wishes, or when unknown, act in the client's best interest.
- d. Respect the client's right to refuse treatment and/or obtain a second opinion.
- e. Discuss choices with, and support clients to make decisions for services.
- f. Use an evidence-based and evidence-informed approach to meet client needs.
- g. Respect and maintain client privacy and confidentiality.
 - i. Refer to standards of record keeping and privacy guidelines.
 - ii. Confidential client information should only be disclosed with client consent or when the failure to disclose confidential information would cause significant harm to the client or others.
- h. Advocate for clients, families, and other caregivers when appropriate.
 - i. Do not discriminate against clients or anyone with whom dietitians interact (See list in Human Rights Code).
 - ii. Provide client-centred care that recognizes cultural safety and humility, respects diversity, and is fair and inclusive.
 - iii. Explore solutions and use all reasonable resources to supply quality services which meet the needs of both client and employer.
- i. Supply services until care is no longer needed, the client requests discontinuation, or care is transferred to another dietitian or health professional.
- j. Be sensitive to your position of power as a dietitian.

2. Communicate Effectively

- a. Communicate in a civil, respectful, accurate manner, adhering to college requirements including health records, advertising, and media.
- b. Do not make false, misleading, or derogatory statements or claims.
- c. Do not verbally, physically, emotionally, or sexually harass in any communication.
- d. Manage conflict by applying conflict management strategies.



3. Collaborate Effectively

- a. Collaborate with clients, interprofessional colleagues, workplace leaders, client's family, caregiver, guardian, or substitute decision maker to provide quality services.
- b. Recognize and respect other health professionals' scope of practice.
- c. Collaborate with others in the development and revision of policies to support ethical and quality healthcare services, lead policy change, engage with others in policy development/revision, implement and monitor impact of these initiatives.
- d. Support learning within the profession when there are opportunities to teach students and mentor colleagues.

4. Practice Safely and Competently

- a. Recognize and practice within the limits of individual competence and dietetic scope of practice.
 - i. Act as a credible and reliable source of evidence-based food and nutrition information.
 - ii. Provide safe, client-centered services using knowledge, skills, judgment, and professional attitude.
 - iii. Refer to other members of the interprofessional team if needed service is beyond the dietitian's skill, knowledge, and BC legal scope of practice.
- b. Reflect on current practice to determine knowledge, skills, and ability development needed to ensure safe, competent, and ethical practice.
- c. Uphold professional boundaries.
 - i. Do not engage in sexual relationships with any clients.
 - ii. Where possible, refer client(s) to another dietitians when a relationship exists or could be perceived to exist that would compromise a dietitian's objective decisions and actions toward the client(s).
 - iii. If professional boundaries cannot be kept due to geographical, workforce, and/or resource limitations:
 1. Identify, disclose, and mitigate risks of engaging in a professional and personal relationship.
 2. Re-establish boundaries as soon as reasonably possible.
 - iv. Balance the ability to remain objective with compassion regarding issues of sensitivity and/or personal trauma that arise during treatment.
- d. Be risk aware. Identify any potential type of harm, mitigate the risk of harm, and apply preventative measures when practicing dietetics.
- e. Recognize and engage in trauma-informed practice.
- f. Do not act in a way that negatively affects the reputation of the profession.

5. Be Honest and Responsible

- a. Recognize and resolve ethical situations by applying critical thinking skills in problem solving and decision making.
- b. Avoid conflict of interest.



- i. Identify and manage potential situations that may lead to conflict of interest, including financial interest in products and services that are recommended.
- ii. Refrain from accepting gifts or services, which may influence or give the appearance of influencing professional judgement.
- c. Assume responsibility for services provided by those under your supervision.
- d. Maintain transparent, accurate, and truthful financial records.
 - i. Inform clients of all fees and methods of payment prior to delivering services.
 - ii. Ensure fees are based on fair market price.
 - iii. Allow your name and registration number to be used for the purpose of verifying professional services rendered only if you provided or supervised the provision of those services.
- e. Be accountable for your actions when practicing dietetics.
 - i. Disclose and apologize to the client for any mistake made during the client's care, which causes or has potential to cause harm or distress.
 - ii. Propose solutions, alternatives, or referral, as appropriate.
 - iii. Withdraw from practice when circumstances arise that may impair judgment and prevent providing safe and effective services.
- f. Do not refuse to treat a client based on discrimination including, but not limited to, reasons in the [BC Human Rights Code](#).
- g. Only enter into agreements, assignments, or contracts that allow you to abide by this Dietetic Code of Ethics and Standards of Practice.
- h. Give fair and objective performance evaluations, when needed.
- i. Fulfil reporting obligations.
 - i. Bring forward concerns about unsafe practice and unethical conduct by dietitians and other health care professionals to the appropriate supervisor, and/or regulatory body of which that health professional is a registrant.
 - ii. Report incidents as per employer policy and/or [WorkSafe BC](#).
- j. Present your professional qualifications and credentials accurately.



Definitions

Advertisement: Any publication or communication in any medium with any client, prospective client or the public generally in the nature of an advertisement, promotional activity or material, a listing in a directory, a public appearance or any other means by which professional services or products are promoted or marketed, including contact with a prospective client initiated by or under the discretion of a registrant.

Client: An individual, family, substitute decision-maker, team members, group, population, agency, government, employer, employee, business, organization, or community, who is the direct or indirect recipient of the dietitian's skill and knowledge.

Collaborative Practice: Two or more individuals working cooperatively to achieve the common professional goal of delivery of the highest level of care. Dietitians work in partnership with nutrition, dietetic, interprofessional and/or intersectoral clients and other partners.

Conflict of interest: When a dietitian's personal, business, commercial, political, academic, or financial interests, or the interests of the dietitian's family or friends, interfere with the dietitian's professional responsibilities or a client's best interests.

A conflict of interest may exist whether or not the competing interest actually influences a dietitian. The conflict of interest may affect dietitians in any practice setting. A conflict of interest can be actual, potential, or perceived, and promotes (or is perceived to be promoting) a competing interest; instead, the results of which may or may not lead to negative client outcomes and service delivery.

Cultural Safety: An outcome based on respectful engagement that recognizes and strives to address power imbalances inherent to health care relationships. It results in an environment free of racism and discrimination, where people feel safe and supported to access, receive, and make informed decisions about their health care.

Cultural Humility: A process of self-reflection to understand personal and systemic biases and to develop and maintain respectful processes and relationships based on mutual trust. Cultural humility involves humbly acknowledging oneself as a learner when it comes to understanding another's experience.

Equity: refers to a process where every client has a fair opportunity to access dietetic health care and be subject to treatment free from bias and discrimination. A dietitian's understanding of the diversity among clients within their practice is essential to delivering personalized, client-centered, and data-informed care. **Population health equity** refers to a process where when everyone, regardless of sex, gender, income, race or other socio-demographic characteristics, has the fair opportunity to reach their optimal health ([Canadian Institute for Health Initiatives](#))

Evidence-based dietetic practice involves evaluating the validity, applicability, and importance of research and subsequently integrating the most reliable and available research evidence with dietetic expertise and client values into the nutrition care process.

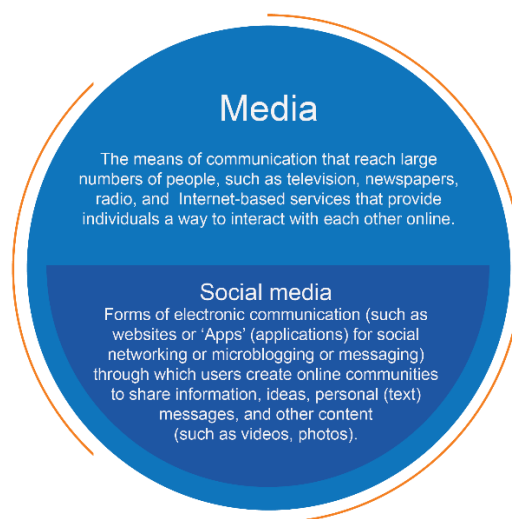


Evidence-informed dietetic practice involves balancing the evidence, data, and professional judgment with client interests, preferences, context, risks related to the client’s care, needs for best care, and available resources in the decision-making process.

Inclusion: refers to the intentional effort of a dietitian to facilitate a respectful environment where the client can feel safe, heard, and a part of their own healthcare journey and treatment plan.

Risk: In dietetics, a risk can be defined as a situation or action that involves exposure to danger, physical or mental harm (including financial), or loss to a client and/or to the dietitian.

Media: The means of communication that reach large numbers of people (the public), such as television, newspapers, radio, flyers and brochures, and Internet-based services that provide individuals a way to interact with each other online. Media includes social media, which encompasses a wide variety of web-based platforms, applications, and text messages.



Substitute Decision Maker: A person who helps make or makes decisions on behalf of another adult, when the adult is unable to make them. This definition is not reflective of a child/parent/guardian relationship. ([BC Ministry of Health](#))

Trauma-informed practice: Strengths-based framework grounded in an understanding of and responsiveness to the impact of trauma. It emphasises physical, psychological, and emotional safety for everyone, and creates opportunities for survivors to rebuild a sense of control and empowerment. ([BC Ministry of Health](#))



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