Continuing Ethics Education for Registered Dietitians

The Academy of Nutrition and Dietetics Board of Directors voted to require that RDs and DTRs complete a minimum of 1 CEU of Continuing Professional Education in Ethics (Learning Need Code 1050) during each 5-year recertification cycle. This requirement was effective starting with the 5-year recertification cycle which begins June 1, 2012.

Objectives:
• Define ethics
• Discuss the importance of ethical decision making
• Review the current guiding principles of the current Code of Ethics for Dietitians (2009)
• Discuss the proposed changes to the Code of Ethics (draft 2017)
• Apply principles discussed through case studies

What is Ethics?

Ethics… is a branch of philosophy that involves systematizing, defending, and recommending concepts of right and wrong conduct. http://en.wikipedia.org/wiki/Ethics

What is Ethics?

• Ethics refers to… standards of right and wrong that prescribe what humans ought to do, usually in terms of rights, obligations, benefits to society, fairness, or specific virtues.
  • Ethical standards also include those that enjoin virtues of honesty, compassion, and loyalty. Such standards are adequate standards of ethics because they are supported by consistent and well-founded reasons.
  http://www.scu.edu/ethics/practicing/decision/whatisethics.html

Why do we care if RDNs are trained in Ethics?

• We all represent the profession, unethical behavior by one reflects on us all
• We are medically training professionals which means we have committed to the principle of “do not harm”, we need to know what that means
• It helps us keep the big picture in mind when making treatment decisions—are we serving the best interest of the patient? Of the family? Of society? If those are in conflict whose interests “win”?
Ethical Decision Making

• Usually easy choices between “right and wrong”
• Usually consistent with rules, laws, policies
• Usually consistent with social norms
• Usually consistent with religious values

BUT...

• What if... you are faced with a decision that isn’t obviously right or wrong? Isn’t consistent with rules, law or policy? Is against social norm or religious values?
• Then you have an ETHICAL DILEMMA.

Examples of Nutrition-Related Ethical Dilemmas

• Whether to promote a questionable product such as fast food? (ethical choices by one person defines the profession?)
• Whether or not to place a feeding tube as part of aggressive end of life treatment. (tradeoff of benefits between individual and community?)
• Choosing whether to promote a product or diet with questionable evidence that your clients may benefit from, but also may not benefit from, but it will help your bottom line of your private practice. (first do no harm?)

Other Examples of Nutrition-Related Ethical Dilemmas

• Whether to support an acute care treatment not tested in the population your client belongs to, but shown to be very effective in more acute cases. (an example may be bariatric surgery in a patient with a BMI=30, but with diabetes and sleep apnea).
• Choosing whether to counsel a patient with a suspected eating disorder when you have little training in that area, but the person has no other options for care (if you don’t know what you’re doing you could make it worse, but without any intervention they are likely to get worse...).
• Choosing whether to provide a lifestyle treatment with mixed evidence supporting its efficacy when your client has not gotten relief elsewhere. (an example would be the low fodmap diet).
• Choosing whether or not to support a client following a questionable dietary intervention. (examples might be following a diet eliminating night shades).

Guiding Principles of Medical Ethics

• Autonomy—people must make informed and voluntary decisions
• Beneficence—treatment must benefit the patient
• Nonmaleficence—do not intentionally cause harm
• Justice—fair distribution of scarce resources

Steps in Ethical Decision Making

1. Gather the facts.
2. Clearly state the ethical issue/conflict.
3. Identify all relevant factors (e.g., legal, religious, social, economic) that may influence the decision.
4. Identify key values (e.g., patient safety, individual rights, etc).
5. Identify the parties who will be affected by the decision and define your obligation to each.
6. Select ethical principles to guide the decision-making process.
7. Make a decision and justify it.
8. Evaluate the decision at a later time to decide whether to continue on that course should the situation arise again.

Other Important Questions

• What would I do if it were me or a loved one in this situation?
• What would be the impact of this decision if it were published in the media?
• How does this decision fit into the mission and goals of the facility?
Our Tool Kit: The RD Code of Ethics

• Draft revision up for review summer 2017
• Last update was 2009

2009 Dietetics Code of Ethics

• Core principles: the RD conducts themselves with honesty, integrity, and fairness
• The RD promotes high standards of professional practice

Document details responsibilities under 5 categories
• Fundamental principles
• Responsibilities to the public
• Responsibilities to clients
• Responsibilities to the profession
• Responsibilities to other colleagues and professionals

2009 Code: Responsibilities to the Public

3. The dietetics practitioner considers the health, safety, and welfare of the public at all times.
   - Report inappropriate treatment of clients/pts

3. The dietetics practitioner complies with all laws and regulations

4. The dietetics practitioner provides professional services with objectivity and with respect for the unique needs and values of individuals.
   - No discrimination of clients
   - Sensitive to cultural differences
   - Does not sexually harass others

2009 Code: Responsibilities to the Public

6. The dietetics practitioner does not engage in false or misleading practices or communications.
   - Does not engage in false or deceptive advertising of his or her services
   - Promotes or endorses specific goods or products only in a manner that is not false and misleading.
   - Provides accurate and truthful information

2009 Code: Responsibilities to the Public

7. The dietetics practitioner withdraws from professional practice when unable to fulfill his or her professional duties and responsibilities to clients and others.
   - Engaged in abuse of a substance such that it could affect his or her practice
   - Has been adjudged by a court to be mentally incompetent
   - Has a condition that substantially impairs his or her ability to provide effective service
### 2009 Code: Responsibilities to Clients

8. The dietetics practitioner recognizes and exercises professional judgment within the limits of his or her qualifications and collaborates with others, seeks counsel, or makes referrals as appropriate.

9. The dietetics practitioner treats clients and patients with respect and consideration.
   - provides sufficient information to enable clients and others to make their own informed decisions.
   - respects the client’s right to make decisions regarding the recommended plan of care, including consent, modification, or refusal.

10. The dietetics practitioner protects confidential information and makes full disclosure about any limitations on his or her ability to guarantee full confidentiality.

11. The dietetics practitioner, in dealing with and providing services to clients and others, complies with the same principles set forth in “Responsibilities to the Public”.

### 2009 Code: Responsibility to the Profession

14. The dietetics practitioner assumes a life-long responsibility and accountability for personal competence in practice, consistent with accepted professional standards, continually striving to increase professional knowledge and skills and to apply them in practice.

15. The dietetics practitioner is alert to the occurrence of a real or potential conflict of interest and takes appropriate action whenever a conflict arises.
   - makes full disclosure of any real or perceived conflict of interest.
   - takes such other action as may be necessary to eliminate the conflict, including recusal from an office, position, or practice situation.

16. The dietetics practitioner permits the use of his or her name for the purpose of certifying that dietetics services have been rendered only if he or she has provided or supervised the provision of those services.

17. The dietetics practitioner accurately presents professional qualifications and credentials.
   - Uses correct identification of CDR credentials, maintains the credentials.
   - Does not help others represent themselves as having a CDR credential that they do not have.

18. The dietetics practitioner does not invite, accept, or offer gifts, monetary incentives, or other considerations that affect or reasonably give an appearance of affecting his/ her professional judgment.
   - shall not preclude from accepting gifts of nominal value, attendance at educational programs, meals in connection with educational exchanges of information, free samples of products, or similar items, as long as such items are not offered in exchange for or with the expectation of, and do not result in, conduct or services that are contrary to the practitioner’s professional judgment.
2009 Code: Responsibilities to Colleagues and other Professionals

19. The dietetics practitioner demonstrates respect for the values, rights, knowledge, and skills of colleagues and other professionals.
   - does not engage in dishonest, misleading, or inappropriate business practices that demonstrate a disregard for the rights or interests of others
   - provides objective evaluations of performance for employees and coworkers, candidates for employment, students, professional association memberships, awards, or scholarships, making all reasonable efforts to avoid bias in the professional evaluation of others.

Summing up the 2009 Code

- Very long and specific
- Geared toward clinical setting and private practice/outpatient
- Does not give guidance on new delivery issues such as telehealth
- No mention of use of social media/marketing
- Very limited guidance on newer practice settings such as corporate wellness
- Very limited guidance on including things like sales of products
- Barely mentions being evidence-based and basing guidance on scientific research
- No mention of our environmental or sustainability responsibilities
- Does not adequately address how to interact with each other over disagreements

Draft Updated Code

- Circulated in 2017 for comment. No word yet on changes to draft based on feedback or potential adoption date.
- Much shorter document (2 pages)
- Outlines broad principles making it more adaptable to situations not imagined yet.

2017 Draft: Competence and professional development in practice

- Nutrition and dietetics practitioners shall:
  - Practice using an evidence-based approach within areas of competence, continuously develop and enhance expertise, while recognizing limitations.
  - Demonstrate in depth scientific knowledge of food, human nutrition and behavior.
  - Assess the validity and applicability of scientific evidence without personal bias.
  - Interpret, apply, participate in or generate research to enhance practice, innovation, and discovery.
  - Make evidence-based practice decisions, taking into account the unique values and circumstances of the patient/client and community, in combination with the practitioner’s expertise and judgment.
  - Recognize and exercise professional judgment within the limits of individual qualifications and collaborate with others, seek counsel, and make referrals as appropriate.
  - Act in a caring and respectful manner, mindful of individual differences, cultural, and ethnic diversity.
  - Practice within the limits of their scope and collaborate with the inter-professional team.

2017 Draft: Integrity in personal and organizational behaviors and practices

- Nutrition and dietetics practitioners shall:
  - Disclose any conflicts of interest, including any financial interests in products or services that are recommended. Refrain from accepting gifts or services which potentially influence or which may give the appearance of influencing professional judgment.
  - Comply with all applicable laws and regulations.
  - Maintain and appropriately use credentials.
  - Respect intellectual property rights, including citation and recognition of the ideas and work of others, regardless of the medium (e.g. written, oral, electronic).
  - Provide accurate and truthful information in all communications.
  - Document and code to most accurately reflect the character and extent of delivered services.
  - Respect patient/client’s autonomy. Safeguard patient/client confidentiality and privacy according to current regulations.
  - Take appropriate measures to protect confidential information using appropriate encryption techniques.
2017 Draft: Professionalism

Nutrition and dietetics practitioners shall:
• Participate in and contribute to decisions that affect the well-being of patients/clients.
• Respect the values, rights, knowledge, and skills of colleagues and other professionals.
• Represent accurately and fairly the qualifications, views, and obligations of others.
• Refrain from communicating false, fraudulent, deceptive, misleading, disparaging or unfair statements or claims.
• Uphold professional boundaries and refrain from romantic relationships with any patients/clients, surrogates, supervisees, or students.
• Refrain from verbal/physical/emotional/sexual harassment.
• Provide objective evaluations of performance for employees, coworkers, and students and candidates for employment, professional association memberships, awards, or scholarships, making all reasonable efforts to avoid bias in the professional evaluation of others.
• Communicate at an appropriate level to promote health literacy.
• Contribute to the advancement and competence of others, including colleagues, students, and the public.

2017 Draft: Social responsibility for local, regional, national, global nutrition and well-being

Nutrition and dietetics practitioners shall:
• Collaborate with others to reduce health disparities and protect human rights.
• Promote fairness and objectivity with fair and equitable treatment.
• Contribute time and expertise to activities that promote respect, integrity, and competence of the profession.
• Promote the unique role of nutrition and dietetics practitioners.
• Engage in service that benefits the community and to enhance the public’s trust in the profession.
• Seek leadership opportunities in professional, community, and service organizations to enhance health and nutritional status while protecting the public.

Draft Code of Ethics Summary

• Much more general = more flexible
• Primary focus is on providing evidence-based advice
• Now includes an element of social justice
• Removes some sections redundant with legal standards

Case Studies

• A colleague was approached to promote a fast food chain. She wants to know if she should take the job?

PRINCIPLES OF ETHICS

Case Studies

Aggressive end of life care:
• A dementia patient in your facility has stopped eating and is losing weight, but the family wishes her to continue receiving nourishment.
  - What principles apply?

PRINCIPLES OF ETHICS

Case Studies

• Choosing whether to promote a probiotic with questionable evidence that your clients may benefit from, but also may not benefit from, but it will help your bottom line of your private practice

PRINCIPLES OF ETHICS
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