

Ethics and Standards:
The underpinnings of quality
professional practice

A discussion Paper for Action

From
The Board of Directors
International Confederation of
Dietetic Associations
2007

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Introduction

In 2000 in Edinburgh when all delegates of the International Confederation of Dietetic Associations met, we voted to change our name from the International Committee of Dietetic Associations to a Confederation, and to adopt a new constitution. This means that we have matured as a truly international group of dietetic organisations, doing more than just organising the International Congress of Dietetics. You voted for your Board of Directors to move forward – to try to advance dietetics across the world.

We, the Board of Directors, have listened to your ideas , and have been trying to advance dietetics in many ways. We have been developing a communication strategy that we can use to promote dietetics in as many ways as we can. We would now like to see if we can move forward on getting agreement on some of ideas that are the basis of practice in all countries. Over the last three years we have surveyed you all and have collected information on codes of ethics, codes of conduct and standards of practice and education. We have run a trial workshop in

Canada to tests some ideas. At our meeting in May of 2004 we held further workshops, one for delegates of each country and then a more open event, for any ICD attendees who wished to attend an open forum where the outcomes of the delegates workshop were open to comment.

We have now brought together your ideas and comments into this document. We are hoping that you will all help us move forward another step in this important area. We are asking you to:

- Alert members to the discussion paper which is on the ICDA website
- Making sure this paper gets to as many of your members as you can within your Association
- Conduct discussion of the materials in whatever ways you think can be done but perhaps
 - as part of professional development activities
 - perhaps a write in or on line discussion
- Provide us with formal feedback on your views by the end of September 2007

The next steps for us are:

1. Collate replies from you – the member Associations in late 2007.
2. Modify or change the document
3. Send to member Associations for acceptance early 2008.
4. The final document will be discussed and accepted at our next meeting of members in Yokohama, Japan in September 2008.

The Process to Date

In early 2004 we distributed materials to all member Associations and asked members to review these prior to the formal meeting and workshop in Chicago on May 27th, 2004. We then held a workshop with the following goals

Goals for National Dietetic Associations (NDA) delegates:

1. to learn more about the education and work of dietitians around the world and how this relates to "dietetic standards" used by dietetic associations.
2. an increased appreciation of the value of developing an international focus on the basic values and standards of dietetics across the world
3. to contribute to the advancement of the profession at an international level

Goals for ICDA and its member associations and the Board of Directors

1. To determine how much common ground there is between dietetic associations across the world
2. To give the Board a mandate to move forward on the development of value statements that can be used to advance dietetics internationally

3. To help learn about the common language we can use to describe dietetics
4. To determine if we have a mandate to look at minimum education standards for dietetics

The outcome of the workshop is summarised in appendix 1 with the comments of members grouped into themes (see Tables 1 and 2).

Recommendations adopted by the member associations:

1. That the following be accepted as the ICDA definition of a dietitian:
“a dietitian is a person with a qualification in nutrition and dietetics, recognised by national authority(s). The dietitian applies the science of nutrition to the feeding and education of individuals or groups in health and disease”
2. That there is no need to define specific categories of dietitian at this time, but that it is recognised that there are many settings and work functions in which dietitians operate.
3. That the ICDA should develop a code of ethics identifying core values, as a priority. The core values should encompass ideas of integrity, competence, objectivity and respect.
4. That ICDA develop standards of practice which are broadly focussed and brief as a second priority. These should be broad enough to allow individual NDAs to use them as a framework to develop their own standards.
5. That the ICDA promote standards as useful to all dietitians
6. That the ICDA accepts the minimum level of education of a dietitian as a bachelors degree and a period of supervised professional practice of at least 500 hrs.
7. That ICDA develop as a priority a model of core competence that can assist NDAs in developing their specific competencies.

Definitions

We need to use a common language so that we are clear what we mean when we are talking together. The materials included below lists some definitions. You may wish to look at these, as we have found that there are many ways to speak about ethics and standards.

What do we mean by the terms “code of ethics”, “code of conduct” and “standards of practice”?

Ethics is a study of good, bad, right, wrong and attempts to draw together ideas and words into statements and principles that guide us in deciding what to do and how to act morally. There is no one way that ethics can be written or expressed as it depends on the context, however there are some general principles and guidelines that can be used.

Here are some definitions for these terms.

“In general, ethics is concerned about what is *right, fair, just* or *good*; about what we ought to do, not just about what is the case or what is most acceptable or expedient”. Preston, N. (1996) *Understanding Ethics*, Sydney: The Federation Press.

The World Book Dictionary (1986) defines ‘ethical’ as “the part of philosophy that deals with morals, duty and judgement”. (The World Book Dictionary, 1986).

For those members with access to the internet who would like to read about ethics more generally, there is a good section on ethics at <http://en.wikipedia.org/wiki/Ethics>

Principles that underpin ethics

No matter what definition is used, there are some general ideas that form part of ethical behaviour. These general ideas include

- *Autonomy*. The basic idea that independent actions and choices of the individual should not be constrained by others. Dietitians should not be forced to do specific things but should make their own decisions about how to act.
- *Non-Maleficence (Do not harm)*. The idea that one has a duty not to inflict evil, harm, or risk of harm on others. Dietitians should not deliberately do anything that they know will harm someone – for example, fail to ensure enough water so a person becomes dehydrated,
- *Beneficence*. The principle that one has a duty to help others by doing what is best for them. Dietitians would ensure that menus were consistent with dietary standards and not just made up of popular foods.
- *Confidentiality*. The principle that when information is given to you by another that it will not be revealed to any other person without permission.
- *Distributive Justice*. The principle that good and bad outcomes should be distributed equitably, that resources (especially scarce resources) ought to be allocated fairly. An example for dietitians is that they need to make sure that food and nutrition services are available to everyone and not just the wealthy.

- *Truth Telling (Honesty, Integrity)*. The idea not just of honesty but that information that is provided is accurate.

Modified from: Edge, R. and Grove, J.R. (1994) *The Ethics of Health Care: A Guide for Clinical Practice*, New York: Delmar Publishers Inc.

Furrow, B., Johnson, S., Jost, T. and Schwartz, R. (1991) *Bioethics: Health Care Law and Ethics*, USA: West Publishing Co.

Codes of conduct/standards of practice

Codes of conduct attempt to set minimum national or international standards for practice and place boundaries on the way that professions undertake their work.

“Codes of conduct are intended to be supplements to the code of ethics. Their function is to be more specific and to list behaviours, which if not followed, amount to misconduct. The code of ethics proclaims the ideals of the profession (an aspirational code) while the code of conduct is the ‘lowest common denominator’ code.”

Coady, M., Bloch, S. (1996) *Codes of Ethics and the Professions*, Melbourne: Melbourne University Press.

A Code of Conduct may be thought of as a type of quality assurance, outlining an expected standard of care that is uniform across the profession.

The Code of Conduct provides professionals with an outline of ethical work to which these values apply. Hence the Code of Conduct/Code of Professional Standards is a “natural complement” to a profession’s ethical code

A code of conduct is different from a code of ethics because:

- It is a more prescriptive document, which provides detailed information about how people are required to act in particular situations; and
- It usually includes disciplinary proceedings or sanctions for failure to follow its prescriptions.

The code of conduct/standard of practice is not designed to be so large and specific that it tells a professional what to do in every circumstance, but it is meant to give ideas for *how* to practice. It gives *ideals*. For example, a code for dietitians might include statements that the dietitians will act ethically, that the dietitians will be up-to-date in their knowledge, that the dietitian will not do something for which they are not trained, and other similar statements.

If professionals follow their code of conduct, then they are more likely to be working correctly.

Functions of codes and standards

Codes of conduct and ethics or values are usually thought to serve the following functions:

1. To establish high ethical standards of the profession
2. To inform members of the profession of their fundamental moral commitment to the profession
3. To inform members and the public of the minimum standards they can expect and therefore increase confidence and trust in the profession.
4. To provide guidance in professional decision making
5. To provide the profession with a basis for identifying poor practice

What benefits are there for having international codes and standards?

We feel that having some statements that identify the underlying worth and value of dietetics is a key feature of a communication strategy for “marketing” and promoting dietetics in many ways. They can

- serve the functions listed in the previous section,
- provide additional benefits if we have a group of international statements in addition to any specific national ones.
- help identify the common ground we share, and therefore reduce the difference that we often think separates us.
- help newer associations and groups when they are getting started or in promoting changes.
- help in general to advance the profession.

At the moment not all dietetic associations have standards or codes of practice. We feel that standards and the way people do their work is very important and is linked to the way that the whole profession grows or develops. It can also make a difference to the way the profession is thought of by the public. It can make a difference if the public knows about their rights and can make comments on the standards of dietetic practice.

Summary of ethics and standards

There is no single way that ethics and standards can be described. But there are common values which underpin dietetics across the world. This is an opportunity for us to take a step forward together. We can focus on our common ground rather

than our differences. This issue is complex but together we can work towards developing some common statements and possibly standards

Proposed International Code of Ethics for Dietetics

The profession of Nutrition and Dietetics commits to the following:

We practice in a just and equitable manner to improve the nutrition of the people of the world by

- Being competent, objective and honest in our actions
- respecting all people and their needs
- collaborating with others
- ensuring positive nutrition outcomes for people
- doing no harm
- adhering to the standards of good practice in nutrition and dietetics

Proposed International Standards of Good Practice in Nutrition and Dietetics

1. Provision of Service and application of knowledge

- Provide high quality, cost efficient services in nutrition and dietetics
- Provide services based on the expectation and needs of the community or client
- Competently apply the knowledge of nutrition and dietetics and integrate this knowledge with other disciplines in health & social sciences
- Work co-operatively with others to integrate nutrition and dietetics into overall care/service regardless of context.
- Work in partnership with clients and users of the service

2. Developing practice and application of research

- Develop a unique body of knowledge
- Have an in-depth scientific knowledge of food & human nutrition
- Develop practice based on evidence
- Generate, participate in, interpret and apply research to enhance & develop practice

3. Communication

- Communicate effectively through nutrition education, education and training, development of policy and programs
- Advocate for nutrition and dietetics, the alleviation of hunger and the value of services
- Advance and promote the dietetic profession

4. Quality in practice

- Systematically evaluate the quality of practice and revise practice on the basis of this feedback
- Strive to improve services and practice at all times
- Maintain continued competence to practice

5. Continued competence and professional accountability

- Ensure accountability to the public
- Accept responsibility for ensuring practice meets legislative requirements
- Maintain continued competence by being responsible for lifelong learning.
- Engage in self development to improve knowledge and enhance competence to practice

Appendix 1

Results of the workshops held in Chicago May 27th and May 30th 2004

Ethics

Table 1. Summary of responses

Statement	Summary result
I think that the ethical basis of the profession is very important to our success	All agreed with this
Codes of ethics do not really make a difference to the way that dietitians do their work	All disagreed with this
There are basic beliefs and values that are held by all dietitians	There was general agreement but it was more variable than with other statements
If an international code of ethics was developed it should include statements about	
* integrity (being honest and true)	All strongly agreed with this
*competence (doing the job right)	All agreed with this
*collaboration (working with other people)	There was general agreement but more variable than other statements
*objectivity (not using personal feelings to make decisions)	All strongly agreed with this
* keeping up to date	All agreed with this
If an international code of ethics was developed	
*my national association should adopt it	All agreed with this
*every dietitian should be allowed to vote on it	General disagreement with this but some variation
*it should be in addition to those we already have	Ambivalence with this ranging from disagree to agree
Every dietitian needs a code of ethics	All agreed with this
Do you think the ICDA should try to make ethics and values a priority?	Yes as it will help individual associations develop ethics and values and promote common values. If not ethics then at least "guidelines" or common elements that could be used that would help those countries without ethics now. Could consider the WHO approach to developing standards.

<p>If we were trying to do something about ethics and values – where do you think we should start?</p>	<p>The survey was the start. We now should try to reach agreement on core values. Ask all member associations for responses to the core values, and try to get their priorities among these values. Share the commonalities of current codes among all the members to comment and review further.</p>
<p>What would you like to see the ICDA do about ethics and values in practical terms?</p>	<p>Communicate the ethics and values to all member associations (on web site) and make suggestions on how to apply them and market them to their members. Consider developing a logo/label to promote this. Work with education providers for their support. Communicate the ICDA values to other nutrition and dietetics associations around the world which are not ICDA members, and also organizations like the Asian Federation of Dietetic Associations, European Federation of Associations of Dietitians, AUSPEN, ASPEN, European Food Information Council. Some member associations require an “oath” at the end of the degree.</p>
<p>Can you try to put into some words some values that you all agree on?</p>	<p>Confidentiality, truth telling, evidence based practice, honesty, integrity, competence, objectivity, keeping up to date.</p>

Standards/Codes of Practice

Table 2 Summary of responses

Statement	Summary result
I am aware of the standards set down by my national association	No agreement – responses ranged from strongly disagree to strongly agree
I refer to the standards regularly	No agreement
All countries need standards for practice	All agreed with this
International standards would improve the standing of the profession generally	There was general agreement but the response was variable
Dietetics is similar everywhere so it is possible to have common standards of practice	No agreement – responses ranged from agree to disagree
The ICDA should develop international standards of dietetics	All agreed with this
Any international standards can be quite short	There was no agreement with this- responses ranged from strongly agree to strongly disagree
I would accept international standards	There was general agreement but the response was variable
Do you think the ICDA should try to make standards of practice a priority?	Yes it should be a priority. Standards are the basis for moving forward and will form the basis for the education process. Important to differentiate between standards of practice and standards of performance. We need to work toward getting legal recognition for dietitians. Any standards would need regular review by ICDA, suggest through regular surveys.
If we were trying to do something about standards of practice – where do you think we should start?	Start with the materials used at the workshop as a basic concept as this is a good summary. (see appendix 1). Needs to be transparent to the public. Put discussion document on website with final acceptance in 2008 in Japan. Include the definition of a dietitian.
What would you like to see the ICDA do about standards of practice in practical terms?	Develop a document of the basic minimum standards. We would like to see a short code with broad categories that each country can adapt and develop to suit their situation. Promote the document as

	being useful for dietitians in their daily practice.
Can you try to put into some words some standards that you all agree on?	Competent to practice, continuing professional development, accountable. Use the 5 categories that were in the workshop materials (see appendix 1)

The workshop then developed recommendations which were considered at an open workshop where any attendees at the ICD could offer additional information. The results of this workshop were as follows.

Table 3 Results of Open Workshop 275 participants

Statement/issue	Summary Result and comments to consider
Audience was asked to comment on the adopted definition of a dietitian.	<p>Comment that the definition of dietitian is determined within each country WHO staff – we want dietetics recognized by international organizations also, and these are not a national authority. We need to consider those countries where there is no national recognition. Include the idea of creating the science, not just applying the science The definition may prove too restrictive as it does not reflect broader dimensions or views – more than the science of nutrition (e.g. hunger, malnutrition) Beyond Science – dietitians are the scientist, advocate, activist, expand to say applies the “art and science” of ...</p>
After being presented with the results of our survey on ethics	<p>Use Delphi technique with national dietetic associations to identify or verify the most important concepts/words within a code of ethics Each concept needs a context, for example several speakers seemed to think ICDA was moving into the regulatory environment, which is beyond the ICDA mandate Dietitians should endorse evidence based products in the marketplace; this cannot be left to less qualified persons Add on-discriminatory, anti-oppressive or promoting equality i.e. use words to create more positive positioning of what we do</p>
I think the ethical basis of the profession is very important to our success.	Unanimous agreement
If an international code of ethics was developed my national association should adopt it.	<p>Undecided. Not full agreement with this statement, yet Stronger agreement shown for use of Guidelines or Principles rather than a “Code”. National dietetic associations can further develop the Guidelines or Principles according to national needs</p>
If an international code of ethics was developed it should be in addition to any that we currently have.	No agreement, but more agreement than with the previous statement
What concepts should be in a code of	Audience commentary

<p>ethics? The ICDA board should develop the core values and seek agreement from the NDA</p>	<p>Do not move into regulations Create an image with a commitment behind it An advocate for the vulnerable Describe what brings us together is “to work on behalf of the people of the world” Start at higher order principles – Do No Harm, Respecting the autonomy of our “clients”, promoting justice and equity, Do good. We are not working at quite the right level, Codes are a lower level than these broader principles More work is needed on finding common ground at the higher level of principles</p>
<p>Integrity [honesty] Respect [Patience Competence/Keeping up to date Objectivity [evidence/scientific based] /confidentiality/justice/discrimination, etc] Define/direction on the limits of professional practice – reinforce between clients/colleagues</p>	<p>Audience commentary: Core values are not equivalent to ethics; core values of the profession generate ethical issues “competence”, “objectivity”, “respect” are not specific enough – these statements do not make us different from physicians, pharmacists, and other health professions. These very general statements would be common to all health professions Caring and compassion need to be reflected in core values</p> <p>moderator concluding statement: These are a starting point for discussion – we see some support here And, we see more support for adding the higher level principles And, we see support for making the values more specific to the contributions (value) of the profession</p>
<p>Are there other things about ethics that you want to include</p>	<p>Do not move too fast Need to identify what makes us “different”</p>
<p>Provision of service</p>	<p>Audience Too oriented towards clinical dietetics Caution that the “client” might be a problem, for example, government might be the client and this client might not be supporting population health. Explicit Quality is too explicit, we should reflect a responsibility for “improving quality” Delete the first point “Provide service based</p>

Do you agree with this as a standard	on client expectation and needs” Include a public health focus as well. Strong agreement for service as a standard
Developing practice and application of research Do you agree with this as a standard	No comments on this standard Agreement for standard
Communication and application of knowledge Do you agree with this as a standard	✓Disagreement. Combine with standard #1. Keep communication as separate or as a core value Perhaps this needs to be clearer that this is about advocacy or collaboration with others (separate from collaboration with clients) More work is needed on proposed standard
Quality in practice Do you agree with this as a standard	Not unanimous but most agreed
Continued competence and professional accountability Do you agree with this as a standard	Almost unanimous agreement
International standards would improve the standing of the profession generally	Very strong support for this statement
Dietetics is similar everywhere so it is possible to have common standards	Suggested it is possible to refer to a “professional standard” rather than common standards Strong agreement that it is possible
I would be happy to accept these 5 standards for myself	Very strong agreement (99%) that the members of the audience felt they could accept the standard(s) for themselves Suggestion to try to include concepts of improving health and well-being
General	Include “health” in standards Need to include material that supports our love of people and desire to care for them. Need a political/advocacy flavour to promote our worth. Need to acknowledge diversity

Appendix 2 – International survey of member Associations

Between August and October 2002 we sent a survey to all 31 members of ICDA at that time asking about codes of professional conduct, standards and ethics. We received information from 21 countries. The list of those who answered is:

- 1.Australia
- 2.Austria
- 3.Canada
- 4.Chile
- 5.Denmark
- 6.Finland
- 7.France
- 8.Germany
- 9.Greece
- 10.India
- 11.Israel
- 12.Italy
- 13.Japan
- 14.NetherLand
- 15.Pakistan
- 16.South Africa
- 17.Sweden
- 18.Switzerland
- 19.Turkey
- 20.UK
- 21.USA

9 of these countries reported having a code of ethics and 7 having them under preparation. 13 countries reported having set down written professional standards.

In many ways the codes that have been developed are similar but there are some differences. Sometimes ethics and standards are mixed together in one code of conduct and in other countries they are separate statements.

Comparison of codes across the dietetic association members of ICDA

Not every country separates ethics, professional conduct and professional standards into three separate areas. Sometimes they are put together into a single set of statements, and sometimes the professional code will commence with a

statement concerning ethics. We are seeking to get agreement about aspects of this.

Ethics –

There seems to be two areas where there is currently agreement and which are included in all codes of ethics

- To practice in accordance with the ethical guidelines of the profession
- Competence and compliant with legislation if relevant

Overall though there are many more concepts expressed. There are 11 main concepts that appear in the codes provided. Each of these appears in most of the codes:

- Behaving with Integrity
- Using scientific principles, current information
- being objective
- being accountable for your own behaviour and competent
- Collaboration with other members of the profession and other professionals
- Seeking informed consent when relevant
- maintaining confidentiality
- No discrimination
- Undertaking performance Evaluation
- providing public Information
- maintaining high Standards.

Some countries have additional concepts in their codes such as avoiding conflict of interest, avoiding product endorsement, needing to represent qualifications and credentials correctly and accurately and striving for excellence

Standards or codes of practice

There is less agreement and more variation in the standards of practice that have been reported. These are harder to summarise and may reflect that practice varies across the world.

The following summarise the common threads between Dietitians of Canada, the American Dietetic Association and the British Dietetic Association in terms of standards of practice. Some of these appear on the standards of other countries as well. The list is not meant to be the only list and it is not meant to be what “should” be:

1. Provision of Service

- Provide service based on client expectation and needs
- To use a client centered approach to provide effective service
- •Developing client focused service
 - Screening referral, developing and implementing a plan of nutrition care

- Developing & implementing a plan of nutrition care
 - Providing a nutritionally adequate diet
 - Quality -responsible for an explicit quality of service
2. Developing practice and application of research
 - Application of research
 - Applies, participates in or generates research to enhance practice
 - Unique body of knowledge
 - To have an in-depth scientific knowledge of food & human nutrition
 - Developing practice based on evidence
 - To generate & interpret research to enhance & develop practice
 3. Communication and application of knowledge
 - Applies knowledge & communicate with others
 - To competently apply the knowledge & integrate this knowledge with other disciplines in health & social sciences
 - Working co-operatively with others to integrate dietetics into over all care/service
 - Communicating
 - Effective communication –nutrition education resource
 - Effective communication – education & training
 - Advancing and promoting the dietetic profession
 - To be committed to and promote the profession
 4. Quality in practice
 - Systematically evaluate the quality in practice & revised practice
 - Continued competence to practice
 - To engage in self development to improve knowledge and enhance competence to practice
 5. Continued competence and professional accountability
 - Professional responsibility and accountability
 - Accountable to the public & responsible for ensuring our practice meets legislative requirements
 - Continued competence
 - Responsible for lifelong learning to ensure competence of practice

The correct management and use of resources is sometimes also included in standards of professional practice.

There is considerable variation in the way some of the concepts are expressed or put together, yet they may mean similar things. Examples of areas of difference or where issues are expressed differently or different terms are used are below. This is not all the examples but just a short list to try to describe the variation that is happening.

1. Utilization and management of resources
2. Guideline for the daily practice of a dietitian (Greece) (this includes statements very similar to codes of professional conduct or standards of practice).
3. Guideline for the daily practice (Germany) includes statement of working in the kitchen and acting as a consultant
4. Professional Standards (Switzerland) includes ethical basis, quality-management, working areas and sanctions
5. Responsibilities (Italy) grouped as professional and social, responsibility to patients and to other professions and colleagues

Appendix 3 Examples from other organisations

There is variation among organisations. The table below is a very small comparison between organisations in different countries. All of these have codes of ethics but the other codes vary in terminology and content.

	<u>Code of Ethics</u>	<u>Code of Professional Conduct / Standards of Practice</u>
Canadian Medical Association	√	X / Clinical Practice Guidelines
World OT Federation	√	X / X
Australian Nursing Council	√	√ / X
Canadian Psychologists Association	√	X / √
Hospital Pharmacists Society of Australia	√	X / √
Dietitians Association of Australia	√	√ / √
American Dietetic Association	√	X / √

Source:

Society of Hospital Pharmacists of Australia
Standards of Practice (number of documents)

Code of ethics

Competency Standards

<http://www.shpa.org.au/frame.htm>

➤ http://www.shpa.org.au/documents/competency_oct2001.pdf

Australian Nursing Council

Code of Ethics

Code of Professional Conduct

National Competency Standards

➤ <http://www.anc.org.au/02standards/>

World Federation of Occupational Therapists

Code of Ethics

Constitution and Standing Orders

Minimum standards of Education

Definitions of Occupational Therapy

➤ http://www.wfot.org/Document_Centre/default.cfm

Dietitians Association of Australia

Code of Ethics

Code of Professional Practice

Charter of patient's rights

Professional standards as the broad topic, includes above three documents

Canadian Psychologists Association

Code of Ethics

Competency standards

National Standards - Presidents message indicates that the CPA has "provided leadership in the development of national standards and ethical principles"

Does have a document talking about ethics and standards PSWAIT

➤ <http://www.cpa.ca/welc.html>

American Dietetic Association

Code of Ethics

Professional Standards of Practice

(http://www.eatright.org/Public/GovernmentAffairs/98_9468.cfm)

Canadian Medical Ass.

Code of Ethics

Policy Statements

Practice Guidelines

➤ www.cma.ca

