



Winnipeg Regional Health Authority
 Office régional de la santé de Winnipeg
 Carina for Health À l'écoute de notre santé
 Nutrition & Food Services Services de diététique et d'alimentation

Registered Dietitian Order Writing Privileges

OPERATIONAL GUIDELINE

Approval Signature:

[Handwritten Signature]

Practice Guideline #:

Page: 1

Date:

July 2, 2015

Supercedes:

1.0 PURPOSE:

- 1.1 To guide order writing privileges for Registered Dietitians in WRHA facilities within scope of practice, competency, credentials and role on healthcare team according to the WRHA policy Entries into Health Records 75.00.060. (see link <http://home.wrha.mb.ca/corp/policy/files/75.00.060.pdf>)¹
- 1.2 To facilitate timely delivery of nutrition care.
- 1.3 To facilitate effective lines of communications among healthcare staff.

2.0 DEFINITIONS:

- 2.1 **RD Order Writing Privilege** is the ability of a Registered Dietitian to write nutrition orders relating to nutrition care into the chart of a patient to be carried out without the co-signature of a physician.²
- 2.2 **Competency** is described as verification that required skills, processes, or concepts are done/understood correctly as determined by an expert.³
- 2.3 **Dietetic Intern** refers to an individual that has received a baccalaureate degree majoring in human nutritional sciences, in a university program approved by the College of Dietitians council; and is registered in a dietetic internship program approved by the College of Dietitians council. (as per the College of Dietitians of Manitoba Professional Practice Guideline 16.0 – Supervising Students by Registered Dietitians 16.4).⁴

- 2.4 **Nutraceuticals** is a product isolated or purified from foods that is generally sold in medicinal forms not usually associated with foods. A nutraceutical is demonstrated to have a physiological benefit or provide protection against chronic disease.⁵
- 2.5 **Order** is an instruction that is given to direct an individual member of the health care team or a department to do something, such as perform a procedure or provide a treatment.²
- 2.6 **Prescribe** to provide a written or verbal order.⁶
- 2.7 **Privilege** when a competent individual practitioner is granted authority and responsibility to make independent decisions to diagnose, initiate, alter, or terminate a health care regimen.²
- 2.8 **Registered Dietitian/Dietitian/Graduate Dietitian** is a person who is registered as a dietitian under The Registered Dietitians Act (2004). This also includes those persons registered as temporary members under the Act.⁷

3.0 **PRACTICE GUIDELINES:**

- 3.1 Registered Dietitians must practice within scope of practice and competency while considering philosophy of care, financial, operational and human resource impact to the WRHA and patient/residents. The dietitian is responsible for life-long learning to ensure continued competence in her/his area of practice.⁸
- 3.2 Dietitians must carry adequate liability protection. The College of Dietitians of Manitoba requires liability coverage to a minimum of \$5,000,000 for all dietitians engaged in the practice of dietetics.^{6,9}
- 3.3 Dietitians must be aware of their prescribing responsibilities within their own facility/program.⁶

- 3.4 Dietitians supervising Dietetic Interns are responsible for the quality of care provided by the Dietetic Intern and are accountable to the client (as per the College of Dietitians of Manitoba Professional Practice Guideline 16.0 – Supervising Students by Registered Dietitians 16.4).⁴
- 3.5 Order writing privileges not requiring delegation of function may include but are not limited to:
 - 3.5.1 Diet Orders
 - 3.5.1.1 Diet changes – therapeutic diets, texture modifications, fluid restrictions (excludes diet progression from NPO/ Clear Fluid to Standard without consultation with Physician/ Designate), diet progression.
 - 3.5.1.2 Modification of macronutrient composition of a therapeutic diet
 - 3.5.2 Initiate, change or discontinue oral supplements,
 - 3.5.2.1 Change oral supplement schedule regime, dosage, concentration or frequency
 - 3.5.3 Anthropometric measurements including height/lengths, weights and head circumference.
 - 3.5.4 Calorie counts for evaluation of energy and nutrient intake
 - 3.5.5 Feeding assistance or adaptive feeding equipment
 - 3.5.6 Indirect calorimetry/metabolic cart assessment
 - 3.5.7 Consultation with any allied health professional
 - 3.5.8 Enteral formulas (including type rate, volume, advancement and water flushes)
 - 3.5.8.1 Change enteral formula schedule regime, dosage, concentration or frequency
 - 3.5.8.2 Discontinue enteral formula

3.5.8.3 Addition of modular nutrients (protein powder/ liquid, MCT oil, fibre, glucose polymer etc.)

3.6 Order writing privileges requiring delegation of function as per 3.10 include:

3.6.1 Initiate, change or discontinue vitamin and mineral supplements

3.6.1.1 multiple vitamin and mineral supplements

3.6.1.2 single vitamin and mineral supplements (please specify)_____

3.6.2 Initiate, change or discontinue specific medications affecting nutrition care in designated areas i.e. insulin, antihyperglycemics, phosphate binders and pancreatic enzymes. (please specify)_____

3.6.3 Initiate enteral formula - Initial order for tube feeding regime

3.6.4 Lab work to monitor nutritional status and refeeding syndrome

3.6.4.1 Including but not limited to levels of sodium, potassium, urea, creatinine, calcium, phosphate, magnesium, CBC, hemoglobin A1C, lipid profile, prealbumin, albumin, glucose level, zinc, vitamin D, vitamin B12, ferritin, iron, TIBC, eGFR, PTH.

Note: All lab work must be ordered on behalf of physician in compliance with Diagnostic Services of Manitoba Provincial Documents 100-10-06 – Reporting of Critical Values¹⁰ and 10-50-04 – Authorization to Order Diagnostic Tests¹¹.

3.6.5 TPN prescription and TPN related blood work in designated areas

3.7 As per section 3.5 of the Entries into Health Records Policy 75.00.060

(<http://home.wrha.mb.ca/corp/policy/files/75.00.060.pdf>)¹:

What is ordered by each Legislated Health Professional shall be determined by the Clinical Program/designate responsible for the standard of care provided to the patient and shall stipulate those orders:

- That require approval by the Provider of Record prior to implementation
- That do not require approval by the Provider of Record prior to implementation.

3.7.1 Registered Dietitians are able to enter orders, as determined by the Clinical Program/designate responsible for the standard of care provided to the patient, directly on physician's order sheets/ electronic charts without a co-signature. All Telephone Orders and Verbal Orders shall be co-signed by the Legislated Health Professional who gave the order.

3.8 Under the physician's discretion any nutrition order may be modified or discontinued at any time.¹²

3.9 Dietetic Interns are able to write orders that do not require delegation of function as per section 3.4 of the WRHA Entries into Health Records Policy 75.00.060 (see link <http://home.wrha.mb.ca/corp/policy/files/75.00.060.pdf>)¹ as long as the supervising Registered Dietitian has confirmed that this is their role on the team. Orders not requiring delegation of function can be implemented prior to co-signature. The supervising Registered Dietitian must co-sign within 24 hours. As per WRHA Entries into Health Records Policy 75.00.060 section 3.5.5. (see link <http://home.wrha.mb.ca/corp/policy/files/75.00.060.pdf>)¹

3.10 DELEGATION OF FUNCTION- All Registered Dietitians who wish to order from the orders listed in Appendix A1/A2, must obtain a delegation of function

from each physician they are working with in order to proceed. In order for the physician to provide a delegation of function the patient or resident must be in their care. It is the responsibility of the Registered Dietitian to obtain a delegation of function agreement from each physician.

As per the College of Physicians and Surgeons of Manitoba¹³

1) PRINCIPLES OF DELEGATION

- a. The following principles apply to delegation of function:
 - i. The physician remains at all times accountable to the patient for the quality of the patient management program. The physician must be aware of what is included in the scope of the delegated function regarding relative liabilities.
 - ii. Other individuals may assume responsibility for performing specific functions within the management program when:
 1. The physician has ensured that the individual is appropriately trained to do so;
 2. The patient accepts care from the individual to whom delegation has been made;
 3. The individual accepts the responsibility and acknowledges the supervisory role of a specific physician.

The original copy of the Delegation of Functions must be maintained in the employees personnel file and a copy must be forwarded to Dr. Brock Wright (WRHA CMO) and Dr. Perry Gray Associate CMO, WRHA)

Appendix A 1

DELEGATION OF FUNCTION AGREEMENT:

I, _____, licensed to practice Medicine in the Province of Manitoba, delegate the function (as defined by the College of Physicians and Surgeons of Manitoba Statement No. 130 – see reverse) of *(please check below)*

- Initiate, change or discontinue multiple vitamin and mineral supplements*
- Initiate, change or discontinue single vitamin and mineral supplements Please specify: _____*
- Initiate, change or discontinue specific medications affecting nutrition care i.e. insulin, antihyperglycemics, phosphate binders and pancreatic enzymes. Please specify: _____*
- Enteral formulas -initial order for tube feeding regime*
- Lab work to monitor nutritional status and refeeding syndrome (circle all that apply) Including but not limited to levels of sodium, potassium, urea, creatinine, calcium, phosphate, magnesium, CBC, hemoglobin A1C, lipid profile, prealbumin, albumin, glucose level, zinc, vitamin D, vitamin B12, ferritin, iron, TIBC, eGFR, PTH. Other specify: _____*
- TPN prescription and TPN related blood work*

to: _____, RD

PRACTICE SITE(S). All approved functions may be performed for care of patients/clients located at _____

Date

Physician's Signature (Required)

Physician's Printed Name

Date

Registered Dietitian's Signature (Required)

Registered Dietitian's Printed Name

2) PRINCIPLES OF DELEGATION

- a. The following principles apply to delegation of function:
 - i. The physician remains at all times accountable to the patient for the quality of the patient management program. The physician must be aware of what is included in the scope of the delegated function regarding relative liabilities.
 - ii. Other individuals may assume responsibility for performing specific functions within the management program when:
 1. The physician has ensured that the individual is appropriately trained to do so;
 2. The patient accepts care from the individual to whom delegation has been made;
 3. The individual accepts the responsibility and acknowledges the supervisory role of a specific physician.

As per the College of Physicians and Surgeons of Manitoba¹³

3) PRINCIPLES OF DELEGATION

a. The following principles apply to delegation of function:

- i. The physician remains at all times accountable to the patient for the quality of the patient management program. The physician must be aware of what is included in the scope of the delegated function regarding relative liabilities.
- ii. Other individuals may assume responsibility for performing specific functions within the management program when:
 1. The physician has ensured that the individual is appropriately trained to do so;
 2. The patient accepts care from the individual to whom delegation has been made;
 3. The individual accepts the responsibility and acknowledges the supervisory role of a specific physician.

REFERENCES

- ¹ WRHA Regional Policy (2013) *Entries into Health Records 75.00.060. Section: Health Information Services*
- ² Silver, H., Skipper, A., Moreland, K. (2009). A comprehensive guide to obtaining nutrition order writing privileges. Helm publishing, Lake Dallas, TX
- ³ Diabetes care and Education (DCE) Dietetic Practice Group of the American Dietetic Association. (2007). *The role of the Registered Dietitian in teaching and in administration of injectable medications used in diabetes management.*
- ⁴ College of Dietitians of Manitoba (2012). *Professional Practice Guideline 16.0 - Supervising Students by Registered Dietitians 16.4*
- ⁵ Agriculture and Agri-food Canada (April 9, 2009). *What are functional foods and nutraceuticals?* Retrieved on April 7, 2010 from: <http://www4.agr.gc.ca/AAFC-AAC/display-afficher.do?id=1171305207040&lang=eng>
- ⁶ College of Dietitians of Manitoba (2008). *Prescribing by RDs 16.5* (Professional Practice Guideline 16.0). Winnipeg, MB.
- ⁷ College of Dietitians of Manitoba. (2005). *Code of ethics for Registered Dietitians.* Winnipeg, MB.
- ⁸ Dietitians of Canada, College of Dietitians of Ontario (2000). *Professional standards for Dietitians in Canada*
- ⁹ College of Dietitians of Manitoba. (2006) *College Governance Policy 3.1.4.* Winnipeg, MB.
- ¹⁰ Diagnostic Services of Manitoba (2009) *Reporting of Critical Values Document 100-10-06. Operations-General Laboratory.*

REFERENCES

¹¹Diagnostic Services of Manitoba (2010) *Authorization to Order Diagnostic Tests Document 10-50-04. Section: Governance & Administration*

¹²Moreland, K., Gotfried, M., Vaughan, L. (2002). Development and implementation of the clinical privileges for dietitian nutrition order writing program at a long-term acute-care hospital. *Journal of the American Dietetic Association 102(1)*, 72-81.

¹³College of Physicians and Surgeons of Manitoba (2000) *Delegation of Functions: Principles. Statement No.130, 1-S19-1S20.*