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Nutrition Advice within Scope of Practice for AusREPs

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Executive Summary

In Australia, there is currently an expectation among some consumers for fitness services to be coupled with nutrition advice, particularly with regards to weight management and dietary supplementation. This has created a need for AusREPs to find the balance between providing an appropriate level of nutrition advice to the client, without providing information beyond their professional scope of practice.

AusREPs are encouraged to provide basic healthy eating information and advice through the application of nationally endorsed nutritional standards and guidelines (in particular, the Australian Dietary Guidelines).

The Guidelines include information about the types and amounts of foods, food groups and dietary patterns that clients should aim for to promote health and wellbeing, reduce the risk of diet-related health conditions and chronic disease. The Eat for Health Educator Guide provides publicly available, practical tools and information that AusREPs can use as a basis for discussing client food choices, with the aim of educating and empowering the client to manage their diet for optimal health in the long term.

There are ample opportunities that exist within scope of practice for AusREPs to educate clients about nutrition and provide general healthy eating advice, including:

- The benefits of following the Australia Dietary Guidelines and Eat for Health guideline recommendations.
- Food groups, types and amounts of foods to be included in a healthy diet.
- Comparing clients’ general pattern of eating to the Australian Dietary Guidelines and/or Eat for Health Program recommendations.
- Assisting clients to change their eating patterns using the Australian Guide to Healthy Eating.
- General nutrition advice for weight management that aligns with the above guidelines.
- Providing examples of meals and snacks.
- Encouraging the use of the guidelines for healthy food preparation and cooking.
- Educating clients about how to read food labels for nutrition information.
Executive Summary

Provision of nutrition advice beyond basic healthy eating information and nationally endorsed nutritional standards and guidelines is considered to be outside the Scope of Practice of AusREPs. Some examples of such advice include:

- to recommend that a client avoid a specific food group (e.g. grains or dairy)
- to suggest or advise that a client use nutritional supplements
- to provide specific nutritional advice relating to a medical condition
- to recommend, provide or design a one-day or seven-day meal plan for a client that is inconsistent with the recommendations outlined in the Eat for Health Program guidelines

The depth of knowledge and training required to effectively and safely perform these tasks is not sufficiently covered in the training and education of AusREPs. For nutrition-related advice that is outside of scope, the appropriate health professional to refer to is an Accredited Practising Dietitian (APD) or an Accredited Sports Dietitian (AccSD).

Collaborative practice is an important way to safeguard clients from inaccurate, inappropriate or potentially harmful nutrition advice and to minimise the likelihood of legal liability associated with the provision of such advice. Furthermore, it can expand networks for potential client referrals and increase professional credibility.

More specific examples of the advice and activities that are both within and outside scope of practice in relation to nutrition, as well as responses to common client questions and scenarios are provided throughout this document. As such, this statement aims to clarify the capacity for an AusREP to provide nutrition advice while remaining within their professional scope of practice.

Fitness Australia, Dietitians Association of Australia and Sports Dietitians Australia have collaborated to develop and endorse this guideline.

The three organizations acknowledge and thank the following members of the Expert Reference Group for their contribution to the initiative:

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Developed and endorsed by:

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PART 1: Context

Qualification – Knowledge and Skill obtained

AusREPs often ask:

“What am I qualified to say about nutrition?”

The qualifications required for AusREPs include Vocational Education and Training (VET) qualifications in Fitness at Certificate III, Certificate IV and Diploma levels or higher education Exercise Science or Human Movement Degrees.

These qualifications provide appropriate training for specific vocational roles represented through the Fitness Australia Exercise Professional Registration system in the categories of:

- Personal Trainer
- Group Exercise Instructor
- Gym Instructor

Nutrition content within fitness qualifications

The nutrition-based content applicable to the role of an AusREP is contained in the specific units of competency SISFFIT005, SISFFIT020 and SISFFIT026 in vocational fitness qualifications.

The nutrition-based content in these units of competency refers to the use of the Australian Dietary Guidelines (ADG). This is inclusive of the content and processes outlined within the Eat for Health Educator Guide.
PART 1: Context

Professional Role - AusREPs and Accredited Practising Dietitians (APDs)

What is an AusREP?

An AusREP is registered with Fitness Australia and has completed a nationally endorsed Fitness qualification (AQF Levels 3, 4 or 5), Exercise Science qualification (AQF level 7) or a required skill set from the Australian Qualifications Framework and possesses the knowledge, skill and competency to independently plan and deliver exercise for low to moderate risk individuals. AusREPs may work with higher risk clientele (whose conditions are stabilised and managed) under guidance from the clients’ treating medical and/or allied health practitioner.

What is an Accredited Practising Dietitian?

An Accredited Practising Dietitian (APD) describes an AQF Level 8, university-trained and Dietitians Association of Australia (DAA) accredited dietitian and nutritionist who possesses the knowledge, skills and competency to provide expert nutrition and dietary advice. APDs design and deliver both general nutrition advice, plus Medical Nutrition Therapy (MNT) which forms an integral part of the management of people with chronic and complex diseases. APDs are recognised by the Australia Government and Medicare. An Accredited Sports Dietitian (AccSD) is an APD that has undergone further education and training in sports nutrition practice.

Exercise advice from an Accredited Practising Dietitian

An APD can provide general physical activity advice and general guidelines for physical activity that aligns with Australia’s Physical Activity and Sedentary Behaviour Guidelines. It is outside the scope of practice for an APD to prescribe and/or deliver a personalised exercise program with specific types of exercise, intensity, duration and frequency. If a Dietitian was to prescribe a personalised exercise program for a client it could potentially harm the client or be ineffective.

Nutrition advice from an AusREP

An AusREP may provide nutrition advice to healthy individuals that is consistent with the Australian Dietary Guidelines and publicly available recommendations outlined in the Eat for Health Program guidelines. For an AusREP to prescribe a personalised one-day or seven-day meal plan with specific foods, amounts, meal timing and frequency of consumption would be to risk harming the client with nutrient imbalances or the ineffectiveness of the diet. For clients with food intolerances or food allergies, who are taking medications or have chronic conditions like gout or diabetes, the risks are greater. The same delineation in professional roles applies to any AusREP who has completed a Nutrition qualification at a Diploma level. This qualification is at AQF Level 5 and still does not enable the provision of specific nutrition advice. In this instance, a referral to an APD is appropriate.

Collaborative practice between AusREPs and Accredited Practising Dietitians is an important way to safeguard clients from inaccurate or inappropriate nutrition advice and to minimise the likelihood of legal liability associated with the provision of such advice. The significant benefits of collaborative practice are explained more fully in Part 3 Effective Referral / Collaborative Practice.
PART 1: Context

Description of the Australian Dietary Guidelines (2013)

The Australian Dietary Guidelines (ADG) consists of five recommendations with the key message to enjoy a wide range of nutritious foods and to drink plenty of water, while at the same time recognising the importance of appreciating the social and personal enjoyment of nutrition.

The five recommendations are:

1. To achieve and maintain a healthy weight, be physically active and choose amounts of nutritious food and drinks to meet your energy needs.

2. Enjoy a wide variety of nutritious foods from these 5 food groups everyday (Vegetables, Fruit, Grain Foods, Dairy, Meats/Legumes)

3. Limit intake of foods containing saturated fat, added salt, added sugar and alcohol

4. Encourage, support and promote breast feeding

5. Care for your food; prepare and store it safely

The Australian Dietary Guidelines apply to all healthy Australians, as well as those with common health conditions such as being overweight. They do not apply to people who need special dietary advice for a medical condition, or to the frail elderly.

The Australian Dietary Guidelines are available at www.eatforhealth.gov.au/guidelines
Why the Australian Dietary Guidelines?

Given the significant impact that habitual eating patterns have on health, the Australian Dietary Guidelines are an important resource for exercise professionals to share with clients who request advice on eating for health and wellbeing.

The current version of the Australian Dietary Guidelines and related resources were released in 2013 and represent the latest scientific evidence and expert opinion about healthy eating. The Guidelines include information about the types and amounts of foods, food groups and dietary patterns that clients should aim for to:

- promote health and wellbeing;
- reduce the risk of diet-related conditions, such as high cholesterol, high blood pressure and obesity; and
- reduce the risk of chronic diseases such as type 2 diabetes, cardiovascular disease and some types of cancers.

These aims are aligned with the goals that exercise professionals and clients set together when commencing or re-evaluating a regular exercise program. Therefore exercise professionals can use the Guidelines and related resources as a tool to support their clients in achieving their lifestyle related health goals.
PART 1: Context


The Eat for Health Educator Guide provides publically available, practical tools and information that exercise professionals can use as a basis for discussing client food choices, with the aim of educating and empowering them to manage their diet for optimal health in the long term.

The key features of the guide are:

- The Australian Guide to Healthy Eating (AGTHE) is a food selection guide and the primary educational and promotional tool in the Eat for Health guide.

- It can be used to help clients set goals and align their eating patterns to the proportion of food groups recommended in the ADGs (for example, averaging out over a week and across different times of the year), including an understanding about recommended serving and portion sizes.

- It describes energy and nutritional requirements for healthy individuals within particular age, gender or lifestyle groups through suggested weekly meal plans based on the five food groups, including:
  - the **Foundation Diet** (for individuals with lower energy needs due to being less active and/or smaller in body size); and
  - the **Total Diet** (for individuals with higher energy needs based on their height and/or activity levels).

- The guide includes tables to help people estimate how much extra energy they will need depending on their height, age and activity level.

- It provides sample eating plans for males/females.

- Provision of further information – Food label reading, food preparation and storage.

- It may be used by dietitians, nutritionists, school teachers and other health educators (including AusREPs).

- It relates to people of all ages and backgrounds in the general healthy population, including those people with common diet-related risk factors such as being overweight. It does not apply to people with medical conditions requiring specialised dietary advice, or to frail elderly people who are at risk of malnutrition.

Scope of Practice

AusREPs often ask:

“What can I say or not say about nutrition to clients?”

Clarification is provided through the Fitness Australia’s Scope of Practice for AusREPs Position Statement (2014), an industry endorsed guideline that identifies the parameters for delivering safe and effective instruction, education and advice to clients. The statement is available at www.fitness.org.au/scope-of-practice

Included are the following clauses that relate to nutrition advice:

Within Scope

Clause 6.1G

Working within professional limitations to provide basic healthy eating information and advice through the application of nationally endorsed nutritional standards and guidelines.

Clause 6.1H

Provision of general nationally endorsed public health information that will educate and support positive client health outcomes.

What does this mean? Providing nutrition advice to healthy individuals that is consistent with the Australian Dietary Guidelines and publicly available recommendations outlined in the Eat for Health Program guidelines. These documents reflect sound, evidence based general nutrition advice that is designed to support positive health outcomes. These guidelines are endorsed by the NHMRC and the Australian Government Department of Health. More specific examples of the advice and activities that AusREPs can provide within scope of practice in relation to nutrition is provided in the following section.
PART 2: Nutrition Scope of Practice - Definition and Application

Scope of Practice

Outside of Scope

Clause 6.4A

Provision of nutritional advice outside of basic healthy eating information and nationally endorsed nutritional standards and guidelines.

*What does this mean?*
Providing nutrition advice that is inconsistent with the Australian Dietary Guidelines or the recommendations outlined in the Eat for Health Program guidelines. Some examples of such advice include:

- to recommend that a client avoid a specific food group (e.g. grains or dairy)
- to suggest or advise that a client use nutritional supplements
- to provide specific nutritional advice relating to a medical condition
- to recommend, provide or design a one-day or seven-day meal plan for a client that is inconsistent with the recommendations outlined in the Eat for Health Program guidelines

More specific examples of the advice and activities that are outside scope of practice in relation to nutrition and therefore should not be provided by AusREPs, is provided in the following section.

► Examples of advice and activities within Scope of Practice

There is ample opportunity for AusREPs to provide clients with nutrition advice that is within scope of practice.

In the context of the ADG and Eat for Health Guide, the following tasks/actions are within an AusREP’s scope of practice:

- **Discuss benefits of following the Australian Dietary Guidelines and Eat for Health guideline recommendations**

*What does this mean?*
Informing a client about Australian Dietary Guidelines, explaining what recommendations mean in simple terms and the associated general health benefits associated with following a healthy diet that aligns with the guidelines.  

*For example:*
Asking a client if they know what broad eating patterns they should be following and then explaining the five recommendations and why they should follow the Australian Dietary Guidelines.
• Discuss food groups and types and amounts of foods to be included in a healthy diet.

What does this mean?
Informing a client about the five food groups in the Australian Guide to Healthy Eating, explaining what a food group means (including how foods are categorised and the benefits of each food group), provide examples of foods in each food group as well as an understanding about recommended daily servings of each food group.

For example:
Asking a client if they know what the five food groups are and how much of each they should consume daily for optimal health, explaining why each is needed as part of a healthy diet and listing examples of foods in each food group that can be included in a healthy diet.

• Compare client eating general patterns to the five Australian Dietary Guidelines and/or the Eat for Health Program recommendations

What does this mean?
Using the tools and resources within the Eat for Health Program to review your client’s typical eating patterns which will support your client in identifying what changes they might need to make to their eating patterns to benefit their overall health.

For example:
Questioning a client about their usual average daily intake of serves of food groups (this might be in person or via a questionnaire) and comparing this with the recommended number of serves based on their age, gender and activity levels.

• Assist clients to make changes to their eating patterns using the Australian Guide to Healthy Eating (AGTGE) template.

What does this mean?
Explaining the visual Australian Guide to Healthy Eating template, its components and foods shown to assist clients to implement positive eating strategies.

For example:
Print and provide a client with the AGTGE template and discuss the foods shown, highlighting ways that each food can be included in the client’s normal diet.
• Provide general nutrition advice for weight management that aligns with the guidelines.

What does this mean?
Providing advice about the importance of physical activity and healthy eating to achieve and maintain a healthy weight, including education about energy balance, average energy requirements (and thus serves from each food group), appropriate portion sizes and portion control.

For example:
Based on your review of your client’s usual eating patterns and in addition to any recommended adjustments based on recommended food groups, discuss with your client the types of high-kilojoule treats (discretionary foods) that they may need to limit and explain the portion sizes in the Eat for Health Program guidelines. This might also include assisting a client to calculate their estimated energy requirements using the Eat for Health Educator Guide (based on height and physical activity levels) and explain the relevant servings of food groups that they should aim for as outlined in the Foundation Diet and Total Diet within the Eat for Health Program guidelines.

• Provide examples of healthy meals and snacks.

What does this mean?
Explaining what makes up a balanced meal and sharing practical food ideas and healthy snack options using the Eat for Health Program guidelines.

For example:
Asking a client about the sorts of lunchbox meals and snacks they usually pack, then providing feedback and suggestions for healthy choices through use of the Eat for Health Program guidelines.

• Encourage use of the guidelines for healthy food preparation and cooking

What does this mean?
Explaining how to choose healthy food at the supermarket, what to eat away from home, healthy cooking techniques and other tips for eating well in the Eat for Health Program guidelines.

For example:
Discuss with a client their usual food shopping habits and provide them with healthy food shopping tips in the Eat for Health Program guidelines.

• Educate clients about how to read food labels for nutrition information

What does this mean?
Explaining the components of a food label and what information is shown, including the Nutrition Information Panel and Ingredients List using the Eat for Health Program guidelines.

For example:
Print and provide a client with the “How to understand food labels” sheet in the Eat for Health Program guidelines. Then, explain the healthy target criteria for fat, fibre, sugars and other nutrients. This might include showing examples from food packaging.
PART 2: Nutrition Scope of Practice - Definition and Application

Examples of advice and activities outside of Scope of Practice

The following tasks/actions are outside of the AusREPs’ scope of practice:

- **Detailed nutritional assessment to determine individual energy, macro- and micronutrient needs and/or adequacy**

  **What does this mean?**
  This involves the assessment of an individual’s diet beyond a comparison of the client’s eating patterns to the Eat for Health Program guidelines. A complete and detailed assessment of nutrient needs and/or adequacy can only be completed by an Accredited Practising Dietitian (APD). This is because the assessment of an individual’s intake to this level of detail requires specific training (undertaken by APD’s) to ensure that the assessment is based on an accurate data, otherwise incorrect and potentially harmful recommendations could result.

  **Out of scope example:**
  Calculation of the number of grams of macronutrients (carbohydrate, protein, fat) required or estimation of micronutrient intake (e.g. iron, calcium, etc) to determine adequacy.

- **Provision of personalised meal plans detailing nutritional composition to meet a specific goal**

  **What does this mean?**
  Provision of a meal plan that gives detailed information beyond the general advice that promotes health and well-being from the Eat for Health Program guidelines. A detailed personalised meal plan can only be provided by an Accredited Practicing Dietitian (APD), or Accredited Sports Dietitians (AccSD), to ensure nutritional adequacy and minimise the risk of any potential harm to health and wellbeing.

  **Out of scope example:**
  Provision of a personalised meal plan to achieve a body composition/physique, training and/or competition goal.

- **Recommendations to follow a ‘popular’ or ‘fad’ diet that does not align with the recommendations outlined by the ADG**

  **What does this mean?**
  This involves the provision of advice (written or verbal) which does not align with the eating patterns recommended in the Eat for Health Program guidelines.

  **Out of scope example:**
  Recommendation to follow a diet which does not align with the Eat for Health Program Guidelines (e.g. ‘high fat, low carbohydrate’ diet, ‘paleo diet’, ‘superfood diet’, ‘blood type diet’ or a ‘detox’ diet). Refer to definitions in Glossary
• **Recommendations to avoid or completely eliminate a specific food group or types of food**

**What does this mean?**
General nutrition advice provided should always align with the recommendations outlined in the Eat for Health Program guidelines. This includes eating a wide variety of foods from each of the five (5) food groups in line with recommended amounts. Exclusion or restriction of any food group can be detrimental to health and well-being (and can impair performance).

**Out of scope example:**
Recommendation to restrict the quantity of grain foods eaten or to eliminate all dairy foods from the diet.

• **Nutrition advice for specific requirements**

**What does this mean?**
Certain individuals will have unique nutrition needs which may require the manipulation of the Eat for Health Program guidelines because of personal preferences (e.g. moral, ethical or religious choices) or medical conditions. In these situations an Accredited Practicing Dietitian (APD) is the most appropriate person to make these recommendations to ensure nutritional adequacy is still achieved.

**Out of scope example:**
Provision of nutrition advice to individuals following a vegetarian or vegan diet, those following specific religious rituals (e.g. Ramadan), health conditions (e.g. diabetes) and/or allergies (e.g. coeliac disease).

• **Prescribing nutritional supplements (performance, medical or general health)**

**What does this mean?**
 Recommending nutritional supplements for a performance goal or medical situation is beyond the scope of practice for AusREPs. This is because supplements need to be integrated within an individual’s detailed nutrition plan and, if used incorrectly, can have detrimental or harmful effects on an individual’s health and well-being or performance.

**Out of scope example:**
Recommended that a client who is feeling fatigued starts taking an iron supplement in case their iron levels are low or advising a client to start using creatine to help them ‘bulk up’.

• **Providing nutrition advice related to medications or drug interactions**

**What does this mean?**
Nutrients can affect the absorption, breakdown or excretion of a drug (medication) which may enhance or oppose the intended effect of the medication. It is therefore beyond the scope of AusREPs to give nutrition information which may interfere or compromise the effect of medications.

**Out of scope example:**
Recommending that a client does all of their training in a fasted state before breakfast to accelerate weight loss even if this means that they need to take their medication on an empty stomach despite being advised by their GP to take it with breakfast.
PART 2: Nutrition Scope of Practice - Definition and Application

- Providing medical nutritional therapy for a specific condition

**What does this mean?**
Medical nutrition therapy refers to any dietary intervention used to prevent or treat health conditions. Given the complex interactions of diet and medical conditions and potential to cause harm if incorrect advice is provided, it is beyond the scope of AusREPs to provide information relating to the treatment or prevention of medical conditions.

**Out of scope example:**
Provision of nutrition information to support cancer treatment or manage high cholesterol levels.

**Why are these professional activities outside of scope?**

There are logical professional reasons why these nutrition-related activities are outside the scope of practice for AusREPs. The main reason is the depth of knowledge and training required to effectively and safely perform these tasks.

They require a level of knowledge and skill that can only be attained through higher qualifications in Dietetics / Nutrition at AQF Level 8 or above (4 to 6 year programs). (Refer to the links in the References & Guidelines section).

Fitness Qualifications are at AQF level 3, 4 & 5 (6-24 month programs). Nutrition Education within these qualifications typically represents a small percentage of total content and therefore do not adequately prepare AusREPs to perform the more detailed and specific tasks listed as ‘outside of scope’ above.

**What if I do a nutrition course on top of my PT course?**

There are lots of great courses available for AusREPs to increase their knowledge and understanding of nutrition. However, these courses do not provide the level of training and practical skill to a level equivalent to that of Dietetics qualifications and as such, do not extend your scope of practice.
Consequences of practicing outside of scope

There are potentially serious consequences for conducting nutrition activities or actions outside of scope.

These include the following risks for clients:

- Nutrient deficiencies and imbalances
- Negative impact on existing health conditions
- Food intolerance or allergy adverse reactions
- Negative food-drug interactions
- Nutrition confusion
- Financial constraints

The consequences for the AusREPs include:

- Litigation for caused harm
- Considerable financial costs of associated legal proceedings
- Potential complaint to Fitness Australia and loss of registration
- Loss of professional reputation and standing

These consequences occur because of how Australian law operates when a person gives advice that is outside their scope of practice, or inconsistent with generally prevailing standards of professional competency. It should not be overlooked that a client can take you to court and win if you have failed to comply with reasonable and acceptable industry standards.

The following is a negligence lawsuit example that occurred in USA:

**Capati v Crunch Fitness (5,6)**

A personal trainer allegedly advised his client who was taking prescribed medication for hypertension to take a variety of nutritional and dietary supplements — some of which contained ephedra. Research has shown that the combination of hypertension medication and ephedra can be lethal. While working out at the Club one day, the client became very sick and later died of a brain haemorrhage (stroke) at the hospital. As a result, the family filed a $320 million dollar wrongful death claim against the defendants — the personal trainer, the Club, and a variety of other defendants including Vitamin Shoppe Industries. The case was settled before going to trial, with the personal trainer and the Club liable for $1,750,000.

It is clear that compliance with industry guidelines in relation to scope of practice, is an important way to minimise legal liability associated with the provision of nutrition advice.
Scenario Chart: Suitable practice to meet typical client requests for advice or services

AusREPs will often ask:

“How do I assist clients with specific nutrition-related goals?”

The following chart lists some of the typical client requests or questions asked of AusREPs and examples of responses that would be within scope and outside of scope.

<table>
<thead>
<tr>
<th>Typical client request/question</th>
<th>Within scope response</th>
<th>Outside of scope response</th>
<th>Potential consequences of out of scope response</th>
</tr>
</thead>
<tbody>
<tr>
<td>“How should I eat to lose weight?”</td>
<td>Selecting foods from each of the five food groups in appropriate amounts will not only assist with weight loss but also ensure nutrient needs are met. Unless you are of a small body size or largely sedentary, the serves from each food group allocated to the Foundation diet specific to your age and gender will be appropriate.</td>
<td>It is imperative to reduce your carbohydrate intake to assist with fat loss. This means removing all grains and fruit from your meal plan. Dairy foods are also fattening so these should also be minimised.</td>
<td>Nutrient deficiencies, impaired training and performance, eating disorders.</td>
</tr>
</tbody>
</table>

<table>
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<tr>
<th>Typical client request/question</th>
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<th>Potential consequences of out of scope response</th>
</tr>
</thead>
<tbody>
<tr>
<td>“How should I eat to gain muscle?”</td>
<td>Selecting foods from each of the five food groups in appropriate amounts will achieve the nutrient needs essential for building muscle mass. Extra serves of food from each of the five food groups will be necessary to account for the energy cost of resistance training and the metabolic demands of building muscle.</td>
<td>Building muscle mass demands a big increase in your protein intake. To build muscle, you need at least 2 grams of protein per kilogram of body weight. So for a 70kg person, you’d need at least 140g of protein daily.</td>
<td>Nutrient imbalances, financial constraints.</td>
</tr>
</tbody>
</table>
**PART 2: Nutrition Scope of Practice - Definition and Application**

**Typical client request/question**
“How should I eat to be healthier?”

**Within scope response**
Selecting a wide variety of foods from each of the five food groups in appropriate amounts will achieve the nutrient needs essential for long term health. The omission of any specific food group (or selection of fewer serves than that identified in the Foundation diet) may impair your intake of nutrients essential for long term health.

**Outside of scope response**
Organic foods offer significantly greater health benefits, providing not only more nutrients essential for health but also helping to avoid unhealthy chemicals.

**Potential consequences of out of scope response**
Nutritional imbalance, nutrition confusion, financial constraints.

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**Typical client request/question**
“What supplements should I take?”

**Within scope response**
By selecting foods from each of the five food groups, in amounts aligned with the foundation diet, you can be expected to meet your daily nutrient needs. If you have any concerns about eating the right foods to help you meet your nutritional needs, I’d recommend you seek the advice of an Accredited Practising Dietitian to get a full dietary assessment and advice.*

**Outside of scope response**
Given our soils have been leached of nutrients through modern day farming techniques, even foods once considered healthy now no longer contain nutrients important for long term health. As such, it is essential for you to take a multi-vitamin supplement. Green’s supplements may also be invaluable, packing all the goodness of your daily greens into one shake or pill. It’s a great insurance policy for your long term health.

**Potential consequences of out of scope response**
Nutrient imbalances, nutrition confusion, drug-nutrient interaction, financial constraints, depending on level of athlete, risk of contaminants in unsafe product; adverse health reactions/issues from misuse/incorrect dosage.
**Typical client request/question**
“How should I eat to assist injury rehabilitation?”

**Within scope response**
Diet can play an important role in recovery from injury, assisting with both recovery and prevention of fat gain and/or muscle loss when training has to be limited. However, this is a very specialised area for which I do not have the qualifications. I would encourage you to seek the support of an accredited practising dietitian or accredited sports dietitian.*

**Outside of scope response**
As you are not training, it is important to cut the carbs from your diet to prevent fat gain. Grains and fruit need to be omitted from your meal plan. Supplements like whey protein and zinc may be particularly beneficial during rehabilitation.

**Potential consequences of out of scope response**
Nutrient deficiencies, nutrition confusion, delayed recovery.

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**Typical client request/question**
“Should I use a specialty diet?”

**Within scope response**
Some individuals require adjustments to their diet to assist with the management of specific medical conditions. Such medical nutrition therapy should only be provided by an accredited practising dietitian.*

**Outside of scope response**
Wheat and dairy tend to cause bloating and inflammation for many people. Given this, you should follow a gluten and dairy free meal plan if you are serious about improving your health.

**Potential consequences of out of scope response**
Eating disorders.

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**Typical client request/question**
“Can you create a meal plan for me?”

**Within scope response**
It’s not within my scope of practice to write you a personalised meal plan, but what I can do is give you some examples from the Eat to Health guide which you can use as a starting point. If you’d like a plan that’s more tailored to your individual needs then I’d suggest you make an appointment with an Accredited Practising Dietitian who can help with this.

**Outside of scope response**
Sure, I’ll come up with a meal plan for you.

**Potential consequences of out of scope response**
Nutrient imbalances, nutrient deficiencies.

*Ideally referring to an APD specifically from your professional network.*
Important FAQs from AusREPs:

How is getting a meal plan from a magazine different from what they’ll get from me?

While there are lots of meal plans available in magazines (and on the internet), these come with the same risks that have been mentioned previously including:

- Nutrient deficiencies and imbalances
- Negative impact on existing health conditions
- Food intolerance or allergy adverse reactions
- Negative food-drug interactions
- Nutrition confusion
- Financial constraints

They also have similar potential litigation consequences for the author if the advice given leads to harmful outcomes for the reader.

What’s the difference between a generic and personalised meal plan?

A generic meal plan is the sample one-day meal plan provided in the Eat for Health Educator Guide which has the correct balance of food groups and meets the expected nutritional needs of the average healthy person (male/female, 19-50 years, average weight and activity).

A personalised meal plan is either a one or seven-day meal plan with specific foods and amounts of foods in specific frequencies to ensure nutritional adequacy and meet the specific nutritional needs of the individual. An Accredited Practising Dietitian is qualified to design personalised meal plans.

I’ve been giving meal plans to clients for 15yrs, why should I stop now?

We understand that there has been a wide variety of practices amongst AusREPs in recent years. Part of the purpose of this document is to ensure that all AusREPs are operating in accordance with their scope of practice to minimise the risk of any detrimental outcomes to their client, and potential litigation for the AusREP.

My client tells me a particular food or nutrient doesn’t agree with them – what do I do?

In this situation, the best approach is to refer your client to an Accredited Practising Dietitian so that they can complete a full dietary assessment and provide appropriate advice to meet the individual client’s needs.
AusREPs also ask:

“Who can I refer to for nutrition-related tasks that are outside of scope?”

For nutrition-related advice outside of scope, the appropriate health professional to refer to is an Accredited Practising Dietitian (APD) or an Accredited Sports Dietitian (AccSD). An APD or AccSD has higher level (AQF Level 8) training to provide nutrition advice and therapy. Refer to the useful links in the References & Guidelines section for AQF information.

You can find an Accredited Practising Dietitian at: www.daa.asn.au

You can find an Accredited Sports Dietitian at: www.sportsdietitians.com.au

Collaborative practice is an important way to safeguard clients from inaccurate or inappropriate nutrition advice and to minimise the likelihood of legal liability associated with the provision of such advice.

Beyond this, collaborative practice has other benefits for fitness industry professionals, contributing to enhanced professional credibility, both with clients, within the fitness industry and among related allied health professional sectors. The development of relationships that enable client referral for nutrition advice can be a valuable information resource for exercise professionals, can expand health networks generally and brings the very real potential for new clients or business opportunities that might otherwise not be exposed to fitness services.

Fitness Australia has developed a Referral Kit that provides general guidance about how to find and work with allied health professionals when making client referrals for guidance that is outside scope of practice – www.fitness.org.au/exercise-referral-kit
Responding to requests for personalised nutrition advice/meal plans:

The guidance provided in Part 2: Nutrition Scope of Practice Definition and Application should form the basis for how the AusREPs should respond to such a request:

1. Find out from the client why they are seeking personalised nutrition advice.
2. If the client’s motivation is general health and/or weight management, AusREPs can follow the strategies outlined in Part 2:

   Examples of advice and activities within Scope of Practice, including:

   a. Discuss benefits of following the Australian Dietary Guidelines and Eat for Health guideline recommendations.
   b. Discuss food groups and types and amounts of foods to be included in a healthy diet.
   c. Compare client eating general patterns to the five Australian Dietary Guidelines and/or the Eat for Health Program recommendations.
   d. Assist clients to make changes to their eating patterns using the Australian Guide to Healthy Eating (AGTHE) template.
   e. Provide general nutrition advice for weight management that aligns with the guidelines.
   f. Provide examples of healthy meals and snacks.
   g. Encourage use of the guidelines for healthy food preparation and cooking.
   h. Educate clients about how to read food labels for nutrition information.

3. If the client’s motivation is to manage a health or medical condition, they should be referred to an Accredited Practising Dietitian.
4. If the client’s motivation is to optimise performance in organised or competitive sport, they should be referred to an Accredited Sports Dietitian.
5. If the client participates in high volume or intensity exercise and/or has sports nutrition goals, they should be referred to an Accredited Sports Dietitian.
6. If the client has followed the recommendations within the Eat for Health educator guide but has not achieved their general health and/or weight management goals, they should be referred to an Accredited Practising Dietitian.
Australian Dietary Guidelines – The Australian Dietary Guidelines give advice on eating for health and wellbeing based on current scientific evidence. The Guidelines have information about the types and amounts of foods, food groups and dietary patterns that aim to promote health and wellbeing and reduce the risk of diet-related medical conditions.

Australian Guide to Healthy Eating – A visual food selection guide that represents the proportion of each of the five food groups recommended to eat each day.

Detailed nutrition assessment – An in-depth evaluation of objective and subjective data related to an individual’s food and nutrient intake, lifestyle, and medical history.

Drug-nutrient interactions – Changes to a drug (medication) caused by a nutrient. This may include effects on absorption, breakdown or excretion of the drug and may enhance or oppose the intended effect of the medication (e.g. caffeine may enhance the absorption of some drugs; foods containing vitamin K may reduce the effectiveness of some drugs).

Food allergy – A response caused by an overreaction of the body’s immune system to a protein whereby the immune system responds to a harmless substance as if it were toxic. The most common food allergies include peanuts, tree nuts, eggs, milk, wheat, sesame, fish, shellfish and soy. In severe cases, food allergies can cause a life-threatening anaphylactic reaction that needs urgent medical attention.

Food group – A collection of foods that share similar nutritional properties or key nutrients. For example, the key nutrients of the “milk, yoghurt, cheese and alternatives” food group are calcium and protein.

Food intolerance – A reaction experienced by some people after eating or drinking certain foods (does not involve an immune response). A reaction is usually related to the amount of the food consumed and may not occur until a certain amount of the food is eaten, but this amount varies for each person. Common food intolerances include dairy (lactose), flavour enhancers, food additives and foods high in FODMAPs (Fermentable Oligosaccharides, Disaccharides, Monosaccharides and Polyols).

General nutrition advice – Nutrition advice that is based on the Australian Dietary Guidelines which may include recommendations on the type and amount (serves) of food, food groups and dietary patterns that promote health and wellbeing and reduce the risk of diet-related medical conditions (e.g. type 2 diabetes, high cholesterol, obesity). General nutrition advice excludes the provision of personalised meal plans.

Generic meal plan – The sample 1-day meal plan given in the Educator Guide which meets the expected nutritional needs of the average person (male/female/ 19-50yr, average height, weight & activity).

Medical Nutrition Therapy – A dietary intervention used to prevent or treat health conditions. This may include, but is not isolated to, the nutritional management of diabetes, heart disease, cancers, gastrointestinal diseases, food allergies, food intolerances, weight management (e.g. obesity) and disordered eating.
Nutrient – A substance that provides nourishment essential for the maintenance of life and for growth. There are two main types of nutrients, macronutrients and micronutrients. The three main categories of macronutrients include carbohydrate, protein, and fat. The two types of micronutrients are vitamins and minerals.

Nutrient confusion – Defined as perceived ambiguity about nutrition recommendations and research.

Nutrient deficiency – An inadequate supply of essential nutrients (such as vitamins and minerals) in the diet resulting in malnutrition or disease. A nutritional deficiency occurs when the body doesn’t absorb the necessary amount of a nutrient.

Nutrient imbalance – A nutrient imbalance can be caused by having a deficiency (or excess) of certain nutrients, such as carbohydrates, protein, fats, vitamins or minerals.

Nutritional supplements – Products that contain an ingredient or combination of ingredients, typically in higher concentrations than found naturally in dietary sources, intended to add further nutritional value to (supplement) the diet. May be for either specific sports related nutrition needs (e.g. creatine, whey protein powder, caffeine) or general health (e.g. multivitamin, vitamin D, iron).

Personalised meal plan – A 1-day or 7-day meal plan with specific foods and amounts of foods in specific frequencies to ensure nutritional adequacy and meet the specific nutritional needs of the individual. An APD is qualified to design personalised meal plans.

Popular / fad diet – A diet that lacks scientific evidence to support its effectiveness as a general diet (e.g: blood type diet) or a diet that may have elements of scientific evidence, but is not suitable for the general population (e.g. low-carbohydrate diet).


**The International Society for the Advancement of Kinanthropometry:** [http://isak.global](http://isak.global)