



**NUTRITION
COUNCIL
AUSTRALIA**

10763NAT **CERTIFICATE IV IN NUTRITION** **SCOPE OF PRACTICE**



Developed and endorsed by Nutrition Council Australia (NCA)

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EXECUTIVE SUMMARY: MISSION STATEMENT FOR THE CERTIFICATE IV IN NUTRITION

Australian society, amongst many societies around the world, is currently battling against surging levels of obesity and a steady decline in the quality of household diets. While this trend is widely recognised, the promotion of an active lifestyle and the advocacy of the Australian Dietary Guidelines is doing little to arrest its growth and development.

The 10763NAT - Certificate IV in Nutrition was developed in response to extensive industry consultation and through identifying the requirement for a non-tertiary education pathway. This pathway is directed at the general public, as well as health and fitness professionals, to be able to provide detailed nutritional information and dietary planning support to otherwise healthy clients.

The 10763NAT - Certificate IV in Nutrition takes into consideration a crucial factor when seeking nutritional advice – and that is the fact that only a very small portion of the public persist and seek expert advice from Accredited Practising Dietitians. The remaining greater portion of the public will simply accept nutrition information from those without adequate qualifications (fitness professionals, personal trainers, health coaches, social media influencers) who often create tailored nutritional plans despite their limited scope of practice and not being suitably qualified to do so. This not only puts their business at risk, it also can be detrimental to the health and wellbeing of the clients following the nutritional plan.

Additionally, the public also attempt to navigate the wealth of misinformation and misdirection available on the internet, which is not supported by quality research.

Creating preventative measures and safeguarding the Australian population through educational pathways:

The implementation of the 10763NAT - Certificate IV in Nutrition aims to improve the health and wellbeing for all individuals across Australia through appropriate nutritional education. With this aim in mind, the objective of this qualification is to bridge an educational gap between a health and/or fitness professional's lack of nutritional knowledge/scope of practice, and a dietitian's extensive knowledge of nutrition. The 10763NAT - Certificate IV in Nutrition can act as a pathway to broaden the scope of practice for health/fitness professionals, in order to support more ethical practice and cater to the escalating nutritional needs of the public

Being aware of this common trend in Australian society, the overall aim of the 10763NAT - Certificate IV in Nutrition is to create a preventative approach to managing the above widespread problem, in hope of resolving the negative and detrimental impact it is having on the health of Australians. Despite not being suitably qualified to do so, fitness professionals and un-accredited 'health coaches' are continuing to provide individual nutritional advice to the public.

Therefore, this course aims to provide a suitable pathway for industry professionals to up-skill and broaden their scope of practice, by educating them on how to safely, ethically and appropriately support their client's individual nutritional needs, and furthermore how to refer 'at risk' clientele to a more suitably qualified health professional.

In other words, this course denotes a middle ground between a fitness professional's/health coach's qualification and a dietitian's qualification, to prevent unqualified and unethical practice in a growing industry.

DEVELOPMENT AND ENDORSEMENT

Provided below are key stakeholders and organisations that have been involved in the development of the Certificate IV in Nutrition.

Nutrition Council of Australia (NCA): www.nutritioncouncilaustralia.com.au

Vast Fitness Academy: www.vastfitnessacademy.edu.au

Emillie-Jean Bisgrove-Cole: BExSc, Bed(Secondary), Cert III & IV Fitness, Cert. IV TAE, Counselling Skill Set.

Jessica Young: BNutr (Accredited Practising Nutritionist), Cert. III in Fitness, Cert. IV TAE, Counselling Skill Set.

Kelly Hodges: BNutrDiet (Accredited Practising Dietitian), Cert. III & IV Fitness.

Tim Mathews: BNutrDiet (Accredited Practising Dietitian), Cert. III & IV Fitness.

Lyndsie McDermott: BNutrDiet (Accredited Practising Dietitian), Cert. IV TAE, Counselling Skill Set.

Aaron Kirk: BAdVocEd, Cert IV TAE.

Marc De Bruin: BLaw, DipCouns, DipCommServ (CaseMgmt), GradDipMiCBT, Cert. IV TAE.

Joanne Hall: BNutrDiet (Accredited Practising Dietitian) Cert. IV TAE

PART 1: GOVERNANCE AND UTILISATION OF ENDORSED TITLES

NUTRITION COUNCIL AUSTRALIA: NATIONALLY RECOGNISED NUTRITIONIST (NRN)

Nutrition Council Australia (NCA) is a collaborative industry association that exists to promote positive nutritional information and healthy lifestyle practices within Australia. Nutrition Council Australia (NCA) is formed by a diverse cross-section of health professionals and industry experts, including nutritionists, dietitians and educators.

NCA recognises the need to support the development of nutrition professionals in the health and wellness sector through nationally recognised and accredited training.

NCA has developed the nationally recognised and accredited 10763NAT – Certificate IV in Nutrition qualification, and the associated Scope of Practice and Risk Stratification Screening Tool. Vast Fitness Academy is the current authorised Registered Training Organisation responsible for the delivery of this qualification.

NCA provides registration for graduates of the 10763NAT – Certificate IV in Nutrition, who hold professional indemnity and public liability insurance, who wish to practice as Nationally Recognised Nutritionists.

ELIGIBILITY FOR REGISTRATION:

1. Graduation from the 10763NAT – Certificate IV in Nutrition; and
2. Hold current professional indemnity and public liability insurance.

BENEFITS OF REGISTRATION WITH NCA:

- **Exclusive use of the title ‘Nationally Recognised Nutritionist’**

Exclusive registration and use of the title ‘Nationally Recognised Nutritionist’ allowing the NRN to work directly with clients to provide health and nutrition advice within the limitations of the NCA endorsed Scope of Practice.

- **Endorsed Documents and Templates**

All registered NRNs will have access to documents and templates developed and endorsed for use within nutritional advisory practices. These templates are continually reviewed with new documents added on a regular basis.

- **Access to Nutrition Supplement Wholesale Account**

PART 2: QUALIFICATION CONTEXT, FRAMEWORK & FOUNDATIONS

QUALIFICATION REQUIREMENTS – KNOWLEDGE AND SKILLS OBTAINED

The Vocational Education and Training (VET) qualification that is required for an individual to call themselves a ‘Nutritional Advisor’ or ‘Nationally Recognised Nutritionist (NRN)’ is the 10763NAT - Certificate IV in Nutrition. This is the only qualification that provides the appropriate ‘nationally recognised’ education and training for this specific vocational role, represented within the health, wellness and fitness Industry.

The role may be an informally held position or may fall within a broader scope of duties in an existing position; however, in all instances, it describes an individual who has completed and been awarded the 10763NAT - Certificate IV in Nutrition by an approved registered training organisation (RTO).

QUALIFICATION OUTCOMES AND GRADUATE ROLES

The 10763NAT - Certificate IV in Nutrition accredited course reflects the role of individuals who provide dietary advice and nutritional information to clients. Upon completion of this course, graduates have a substantial depth of knowledge to evaluate clients’ dietary requirements against personal goals, and to provide advice, support and nutritional plans to assist in achieving these goals.

Nutritional Advisors and NRNs may work independently or within a broader health and fitness environment such as a gym; however, they must work within the defined scope of practice outlined within this document.

Graduates also complement specialists such as dietitians, general practice physicians and other allied health professionals, through the provision of frontline nutritional advice to otherwise healthy individuals. Nutritional Advisors/NRNs do not diagnose medical conditions or ailments and will always seek to refer clients to medical practitioners if a potential health condition is identified during standard screening risk stratification or monitoring procedures.

The qualification does not provide the skills and knowledge for a Nutritional Advisor/NRN to provide advice to ‘high risk’ clients, other than to refer the client to an appropriate medical or allied health professional.

This qualification provides a pathway to work in a diverse range of roles within the health and fitness industry. Potential roles include sales positions within vitamin, health and supplements stores; health/wellness coach, sports nutrition coach, and fitness advisory roles such as personal trainers or fitness professionals (with a relevant fitness qualification).

NUTRITIONAL ADVISOR SPECIALISATION AREAS

Depending on the specialisation chosen by the individual, Nutritional Advisors/NRNs can choose to select one (or both) of the following awards:

- Certificate IV in Nutrition (Sports Nutrition Advisor) *
- Certificate IV in Nutrition (Health and Wellness Coach) **

*CERTIFICATE IV IN NUTRITION (SPORTS NUTRITION ADVISOR)

In addition to the performance outcomes within each 'core unit' of the 10763NAT - Certificate IV in Nutrition, if the award for the 10763NAT - Certificate IV in Nutrition (Sports Nutrition Advisor) is chosen, this enables its graduates to:

- Provide nutritional information to athletes
- Design an athlete's diet; and
- Support athletes to adopt principles of sports psychology.

**CERTIFICATE IV IN NUTRITION (HEALTH AND WELLNESS COACH)

In addition to the performance outcomes within each 'core unit' of the 10763NAT - Certificate IV in Nutrition, if the award for the 10763NAT - Certificate IV in Nutrition (Health and Wellness Coach) is chosen, this enables its graduates to:

- Assess and promote a client's social, emotional and physical wellbeing; and
- Establish, confirm and support counselling clients in decision-making processes relevant to a Nutritional Advisor.



FOUNDATION AND IMPLEMENTATION OF QUALITATIVE RESEARCH AND NATIONAL STANDARDS

The 10763NAT - Certificate IV in Nutrition has been created using an abundance of government-produced resources, alongside a plethora of high-quality, evidenced-based research from only reputable and reliable sources.

The following government sites and resources, amongst an array of other references, have been utilised extensively in the production of the 10763NAT - Certificate IV in Nutrition:

- [National Health and Medical Research Council \(NHMRC\)](#)
- [World Health Organisation \(WHO\)](#)
- [Nutrient Reference Values for Australia and New Zealand \(NRVs\)](#)
- [The Australian Institute of Health and Welfare \(AIHW\)](#)
- [Australian Sports Commission](#)
- [Australian Institute of Sport \(AIS\)](#)
- [Australian Government: Department of Health](#)
- [Australian Dietary Guidelines \(Eat for Health\)](#)

THE AUSTRALIAN DIETARY GUIDELINES – NOT A SOLE RESOURCE FOR CURRENT NUTRITIONAL ADVICE

Nutritional Advisors/NRNs are taught and encouraged to search for, compare, and make use of high quality, evidenced-based research from reputable sources (which coincides directly with the knowledge and skill required to meet the Australian Qualifications Framework [AQF] Level 4 Criteria).

Making use of high-quality research enables graduates to base recommendations and education on current nutritional information, as opposed to relying solely on outdated information such as the Australian Dietary Guidelines (ADGs), which were created with the ‘one size fits all’ generalised approach to population-level health.

The ADGs were last updated in 2013, and therefore do not consider the nutrition research and updates which have come to fruition since this time. As it can take decades for guidelines to be updated, and with the continuous emergence of relevant nutritional information, it is best practice to utilise updated research in addition to the ADGs.

RELEVANCE FOR THE NATIONAL HEALTH AND MEDICAL RESEARCH COUNCIL (NHMRC)

For the role of the Nutritional Advisor/NRN, individualised nutritional requirements for their clients are calculated using the Nutrient Reference Values (NRVs) for Australia and New Zealand, as published by the NHMRC (NHMRC, 2006). This is a government-developed nutritional resource, which is also available to the public. NRVs assist health professionals and the public to calculate and determine individual requirements for energy, macronutrients, vitamins, minerals and trace elements.

NRVs are utilised extensively throughout the 10763NAT - Certificate IV in Nutrition Qualification, as opposed to solely relying on the ADGs, as they are a set of recommendations for nutritional intake based on current available scientific evidence.

The standard ADGs have numerous limiting factors, some of which have been outlined below:

- The ADGs and Eat for Health Program do not reflect current or up-to-date research, nor do they deviate from their recommendations, even if new research is backed by scientific evidence, industry professionals and peak governing bodies.
- The ADGs only provide basic advice for individuals to follow set food groups, types and serve sizes of food. This is a limiting factor due to its generalised approach towards a ‘healthy diet’. As a consequence, this does not allow for customisation of healthy foods and only enables a ‘one-size fits all’ approach to nutrition, rather than catering to nutritional requirements at an individual level.
- By following the guidelines in the Australian Guide to Healthy Eating, this is limiting in its nature (as mentioned above) also due to the inability of health professionals to ‘implement’ a tailored plan or approach for an individual to improve their health.
- The ADGs only provide ‘general’ or ‘basic’ nutrition advice for weight management. In a society that has an increasing obesity epidemic, there is a greater need for proactive measures to combat excessive weight-gain.
- The ADGs make inappropriate suggestions for meals and snacks, as they focus only on catering to a broad/ generalised population and not a person’s individual needs or health requirements.
- The ADGs do not encourage health professionals to learn, research or adapt new findings in research backed by scientific evidence or industry professionals, such as dietitians and peak industry bodies.
- The ADG’s do not ensure or encourage a holistic approach to health and wellbeing, in order to improve an individual’s health.
- The ADGs do not encourage health professionals to adapt critical or lateral thinking, in order to cater to the individual needs of their clients.

Given the above limitations of the ADGs, as well as the wide availability of high-quality research accessible to the public, there are many reasons as to why the 10763NAT - Certificate IV in Nutrition supports the notion of using a combination of resources and references, in order to create high-quality, evidenced-based, health-benefiting nutritional recommendations to adequately educate its graduates.

“Education and information is essential to achieving effective participation and the empowerment of people and communities”.
(WHO, 1997)



PART 3: SCOPE OF PRACTICE FOR NUTRITIONAL ADVISORS AND NATIONALLY RECOGNISED NUTRITIONISTS

This section aims to outline the scope of practice and confirms the roles and responsibilities of a Nutritional Advisor/Nationally Recognised Nutritionist, who holds a current 10763NAT - Certificate IV in Nutrition qualification.

The health, wellness and fitness industry in Australia is becoming increasingly recognised amongst the wider community, education services, sporting communities and the delivery of varied health services. Therefore, this document will also provide direction for a collective practice approach with qualified industry professionals across broader health and community services.

WITHIN SCOPE OF PRACTICE

This qualification provides a pathway to work in a diverse range of roles within the health, wellness and fitness industry.

Potential roles include, but are not limited to:

- NCA registered Nationally Recognised Nutritionist (NRN)*
- Nutritional Advisor
- Health and/or Wellness Coach
- Sports Nutrition Advisor
- Sales positions within vitamin, health and supplements stores
- Nutritional Advisor within gyms or other fitness facilities to assist Personal Trainers/fitness professionals.

***Please refer to NCA for explicit requirements to utilise the term Nationally Recognised Nutritionist (NRN) on page 5.**

CLIENTELE (WITHIN SCOPE OF PRACTICE)

Nutritional Advisors/NRNs have a substantial depth of knowledge to review, evaluate, plan and modify a client's individual dietary requirements against their personal goals and/or nutritional requirements. The qualification provides the skills and knowledge for Nutritional Advisors/NRNs to provide advice to healthy clients who are deemed as 'no risk' or who have been cleared of any current or potential health conditions or chronic diseases by a GP.

Before Nutritional Advisors/NRNs can begin to work with a client, the client must be deemed 'healthy' through an extensive Risk-Stratification Screening Tool (RSST), endorsed by NCA (2018).

Within this RSST, the client's current health status is analysed to identify any chronic health conditions. 'High risk' and 'at risk' factors are also used within the screening process to provide guidance on when a client may be outside a Nutritional Advisor/NRN's scope of practice.

If a client does not flag any 'at risk' factors or chronic medical conditions, and no referral/clearance is required, Nutritional Advisors/NRNs can then begin to work with such clients, to cater to their individual goals.

OUTSIDE OF SCOPE

Nutritional Advisors/NRNs cannot diagnose medical conditions or ailments and will, at all times, refer clients to more qualified allied health or medical professionals, if a potential health condition is identified during a standard RSST check or during monitoring procedures.

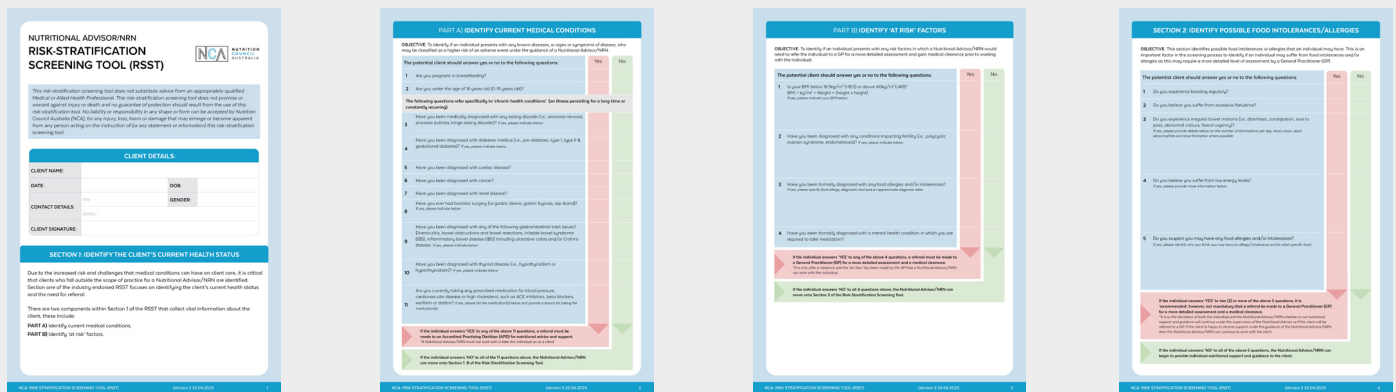
Risk-stratification procedures are strongly enforced by NCA and are an integral responsibility of Nutritional Advisors/NRNs. Conducting these screening measures safeguards both the client and Nutritional Advisors/NRNs, and establishes a professional relationship between both parties.

*RISK-STRATIFICATION SCREENING TOOL (RSST)

Prior to conducting any initial consultation with a potential client, Nutritional Advisors and NRNs must screen potential clients to deem whether or not they fall within their scope of practice. This is achieved by conducting a Risk-Stratification Screening Tool.

The RSST is created and endorsed by Nutrition Council Australia (NCA, 2021) and its use is imperative in ensuring that Nutritional Advisors/NRNs can ethically and legally provide customised nutritional information to clients within their scope of practice.

***There is the potential for significant consequences in the event that a Nutritional Advisor/NRN fails to accurately identify those who do not fall within their scope of practice**



The qualification does not provide the skills and knowledge for Nutritional Advisors/NRNs to provide advice to 'high risk' clients, other than to refer the client to an appropriate medical or allied health professional.

The following information provides a breakdown of the Risk-Stratification Screening Tool*, in which Nutritional Advisors/NRNs must conduct to identify clients that may fall outside their scope of practice.

IDENTIFY CURRENT MEDICAL CONDITIONS (OUTSIDE SCOPE OF PRACTICE)

*(In accordance with 'Section 1: Part A' of the Risk-Stratification Screening Tool)

Nutritional Advisors/NRNs provide dietary and nutritional advice and services to clients who have conducted a RSST and do **not** have pre-existing medical conditions or 'high risk factors' that may require specialist nutritional support, in which case a referral to an APD and/or a GP would be required.

The 10763NAT - Certificate IV in Nutrition qualification does not qualify Nutritional Advisors/NRNs to take detailed medical history or to interpret medical test results in the way that a GP or APD would during a consultation. It is important, however, that a brief health history is discussed and captured, to allow Nutritional Advisors/NRNs to identify potential chronic health conditions or factors which may impact the current or future health of their client.

Any client presenting with the following conditions/contraindications are required to be directly referred to an APD for nutritional advice and support.

- Pregnant or breastfeeding
- Individuals under the age of 16 years old (0-15 years)
- Individuals with medical conditions including but not limited to:
 - Eating disorders (anorexia nervosa, bulimia nervosa, binge eating disorder)
 - Diabetes mellitus (pre-diabetes, type I, type II and gestational diabetes)
 - Coeliac disease
 - Cancer (current diagnosis and/or receiving treatment for cancer)
 - Renal disease
 - Bariatric surgery (including gastric sleeve, gastric bypass, lap-band)
 - Chronic gastrointestinal tract issues, such as diverticulitis, bowel obstructions, bowel resections, irritable bowel syndrome (IBS), inflammatory bowel disease (IBD) including ulcerative colitis and Crohn's Disease
 - Thyroid disease (hypothyroidism or hyperthyroidism)
 - Prescribed medications for blood pressure, cardiovascular disease and high cholesterol, such as ACE inhibitors, beta blockers, warfarin or statins.



IDENTIFYING 'AT RISK' FACTORS

*(In accordance with 'Section 1: Part B' of the Risk-Stratification Screening Tool)

The 10763NAT - Certificate IV in Nutrition promotes the identification of 'at risk' factors, which provide additional guidance to Nutritional Advisors/NRNs for when a client may be outside their scope of practice. Before consulting with a client and as previously mentioned, a Risk-Stratification Screening Tool must be completed. If an individual presents with any 'at risk' factors, a Nutritional Advisor/NRN would need to refer the individual to a GP for a more detailed assessment and gain medical clearance prior to working with the individual.

The RSST will work through the steps outlined below to ensure Nutritional Advisors/NRNs are practicing within their scope of practice:

1. Is your BMI under 18.5 (<18.5)kg/m² or over 40kg/m² (>40)?

A BMI below 18.5kg/m² is classed as underweight, whereas a BMI over 40kg/m² is classed as 'Level 3 Obesity' (very severe). Underweight and obese clients are often at risk of malnutrition and deranged pathologies such as high/low blood sugar levels, cholesterol and blood pressure.



It is important to note that BMI is a calculation based on total body weight and total body height. BMI does not take the type of weight (muscle or fat) into consideration, and therefore may place a client who displays a high level of muscle mass into the obese category. It is therefore essential for the Nutritional Advisor/NRN to consider the distribution of total body weight and to not draw conclusions based only on weight.

2. Have you been diagnosed with any conditions impacting fertility? For example, polycystic ovarian syndrome, endometriosis.

Conditions relating to fertility can cause various changes in hormones, weight and glucose regulation, which can affect a client's macronutrient and micronutrient requirements.

3. Have you been formally diagnosed with any food allergies and/or intolerances?

Food allergies are an immune-mediated response and food intolerances are a sensitivity to certain foods that can impact a client's nutritional intake. Diagnosing allergies and intolerances requires specialised intervention by a GP. Care must be taken to ensure that the offending food is not included in the client's diet, to avoid adverse symptoms such as pain, gastrointestinal upset and difficulties breathing.

4. Have you been formally diagnosed with a mental health condition in which you are required to take medication?

There are many mental health conditions (including depression, ADD/ADHD, anxiety, bipolar and schizophrenia) that require medication as part of their treatment and management. Many of these medications can affect metabolism, weight and nutritional needs, which will affect the effectiveness of a nutritional plan.

IDENTIFYING POSSIBLE FOOD INTOLERANCES AND ALLERGIES

*(In accordance with 'Section 2' of the Risk-Stratification Screening Tool)

An integral part of the screening process requires a Nutritional Advisor/NRN to identify if the client may suffer from food intolerances and/or allergies, as this may require a more detailed level of assessment by a GP.

The 10763NAT - Certificate IV in Nutrition promotes the following referral requirements:

If the client answers YES to TWO or more of the following, a referral to a GP is recommended:

1)	Do you experience bloating regularly?
2)	Do you believe you suffer from excessive flatulence? <i>Note: there is no normal amount, but just asking if a client experiences more flatulence than what they consider normal, and if the smell is "offensive" provides an initial indication of concern.</i>
3)	Do you experience irregular bowel motions (e.g. diarrhoea, constipation, sore to pass, abnormal colours, faecal urgency)? <i>If yes, please provide detail on the number of eliminations per day, stool colour, stool abnormalities and stool formation where possible.</i>
4)	Do you believe you suffer from low energy levels? <i>Discuss with the client the reason for low energy levels. Unexplained low energy levels may indicate poor nutritional absorption.</i>
5)	Do you suspect you may have any food allergies and/or intolerances? <i>If yes, please identify why you think you may have an allergy/intolerance and to what specific food.</i>

If the client answers 'yes' to two or more of the above questions, it is 'recommended', however not mandatory that a referral be made to a General Practitioner (GP) for a more detailed assessment and a medical clearance.

***It is at the discretion of both the individual and the Nutritional Advisor/NRN as to whether or not nutritional support and guidance will continue under the supervision of the Nutritional Advisor/NRN or if the client will be referred to a GP. If the client is happy to continue with nutritional support under the guidance of the Nutritional Advisor/NRN, then the Nutritional Advisor can continue to work with the client.**



IDENTIFY FAMILY HEALTH HISTORY

*(In accordance with ‘Section 3’ of the Risk-Stratification Screening Tool)

This section identifies possible chronic health conditions that present within immediate family members. Having a family health history of a chronic condition does not mean that the client will develop that condition, however, it is important to identify any potential risks.

The potential client should answer yes or no to the following questions:		<u>YES</u>	<u>NO</u>
1)	Has an immediate family member (parents or siblings) ever been diagnosed with any of the chronic health conditions outlined in Section 1: A? <i>If yes, please list the medical condition(s) below:</i>		
2)	If you have answered ‘yes’ to the above question, has it been longer than 12 months since your last health check up with a GP?		

It is recommended that the client undergoes a health check with their general practitioner (GP) if they have answered ‘YES’ to both questions above (i.e. they have indicated there is a family history of chronic disease and have not had a health check within the last 12 months).

The Nutritional Advisor/NRN can begin to provide individual nutritional support and guidance to the client even if a family history of chronic conditions has been indicated, however, clients should be encouraged to have regular health checks.

EXERCISE ADVICE FROM A NATIONALLY ACCREDITED NUTRITIONAL ADVISOR/NRN

It is **not** within a Nutritional Advisor/NRN's scope of practice to advise clients on specific/detailed exercise programming or requirements. This is because the depth of knowledge and education required to effectively and safely support exercise requirements or design exercise programs for clients is not sufficiently covered in the performance criteria of the 10763NAT - Certificate IV in Nutrition.

A Nutritional Advisor/NRN can, however, provide general physical activity advice and general guidelines for physical activity that aligns with their scope of practice and [Australia’s Physical Activity and Sedentary Behaviour Guidelines](#).

***To reiterate, it is outside the scope of practice for a Nutritional Advisor/NRN to recommend, prescribe and/or conduct individualised or tailored exercise plans with explicit types of exercises, timeframes, intensities, or frequency. If a Nutritional Advisor/NRN was to develop a tailored exercise plan for a client, it could possibly injure the client or be unsuccessful, and would be outside the Nutritional Advisor’s/NRN's scope of practice.**

The appropriate qualifications required for prescribing personalised exercise plans include Vocational Education and Training (VET) qualifications and higher education programs, such as:

- Certificate III in Fitness
 - Gym instructor
 - Group exercise instructor
 - Aqua exercise instructor
- Certificate IV in Fitness (Personal Trainer)
- Diploma of Fitness
- Higher education/university degrees such as
 - Bachelor of Sport and Exercise Science
 - Bachelor of Human Movement
 - Bachelor of Clinical Exercise Science.

SCOPE OF PRACTICE PROFESSIONAL APPLICATION AND EXAMPLE SCENARIOS

The information outlined in this section describes examples of appropriate practices for Nutritional Advisors/NRNs to adhere to, in response to client requests for guidance or services.

It is common for a Nutritional Advisor/NRN to ask themselves:

*‘What type of response is appropriate for me to provide to my clients as a Nutritional Advisor/NRN?
What is the line of difference between myself, an un-qualified nutrition coach/fitness professional and a dietitian?’*

	FITNESS PROFESSIONAL	NUTRITIONAL ADVISOR/NRN	ACCREDITED PRACTISING DIETITIAN
CLIENT QUERY:			
WITHIN SCOPE RESPONSE:	<p>This section provides an example of what a fitness professional (i.e. personal trainer) can do and how they stay within their scope of practice</p>	<p>This section provides an example of what a Nutritional Advisor/NRN can do and how they stay within their scope of practice.</p> <p><u>Notice how this section is identical to the ‘outside of scope’ as a fitness professional.</u></p>	<p>This section provides an example of what a dietitian can do with their clients in a clinical setting and how it differs from a Nutritional Advisor/NRN’s scope of practice.</p> <p><u>Notice how this section is identical to the ‘outside of scope’ as a Nutritional Advisor</u></p>
OUTSIDE SCOPE RESPONSE:	<p>This section provides an example of what a fitness professional (i.e. personal trainer) can not do and - what is considered to be outside of their scope of practice.</p> <p><u>Notice how this section is identical to the ‘within scope’ as a Nutritional Advisor/NRN.</u></p>	<p>This section provides an example of what a Nutritional advisor/NRN can not do and what is considered to be outside of their scope of practice.</p> <p><u>Notice how this section is identical to the ‘within scope’ as a dietitian.</u></p>	<p>Generally, there are no limits for a dietitian when practicing nutrition related queries with clients. However, in some cases dietitians will need to make an ethical judgement on their clients behalf and may need to refer to a GP or psychologist.</p>

****The image above depicts a visual representation of how to interpret the following tables.****

The tables on the following pages outline some of the broad client requirements or queries commonly asked of Nutritional Advisors/NRNs. It provides examples of appropriate responses that fall within and outside their scope of practice and also compares these to appropriate responses from a fitness professional’s (personal trainer) or dietitian’s perspective.

	FITNESS PROFESSIONAL	NUTRITIONAL ADVISOR/NRN (CERTIFICATE IV IN NUTRITION)	ACCREDITED PRACTISING DIETITIAN
CLIENT QUERY: 'How should I eat to lose weight?'			
WITHIN SCOPE RESPONSE:	<p>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 servings from each food group allocated to the Foundation diet, specific to your age and gender, will be appropriate.</p> <p><i>(Fitness Australia, 2017)</i></p>	<p>I can calculate your individual energy requirements, taking into account your body mass index, physical activity levels and desire for weight loss (calorie deficit). Individual macronutrient requirements will also be calculated to optimise nutritional adequacy. I can provide assistance and education to you throughout the process, to ensure ongoing nutritional adequacy while in a caloric deficit.</p>	<p>I would need to obtain a thorough medical and nutritional history to identify indications for initial weight gain (such as hormonal imbalances, insulin resistance). In order to do so, I would need to look at recent pathology and previous tests to identify any areas of concern. If concerns are flagged, I would correspond with fellow health professionals and request further testing or information as required.</p>
OUTSIDE SCOPE RESPONSE:	<p>I can calculate your individual energy requirements, taking into account your body mass index, physical activity levels and desire for weight loss (calorie deficit). Individual macronutrient requirements will also be calculated to optimise nutritional adequacy. I can provide assistance and education to you throughout the process, to ensure ongoing nutritional adequacy while in a caloric deficit.</p>	<p>I can calculate your individual energy requirements, taking into account your body mass index, physical activity levels and desire for weight loss (calorie deficit). Individual macronutrient requirements will also be calculated to optimise nutritional adequacy. I can provide assistance and education to you throughout the process, to ensure ongoing nutritional adequacy while in a caloric deficit.</p>	<p><u>NOT APPLICABLE:</u> <i>As dietitians are trained in providing medical nutrition therapy, there is unlikely to be a situation in which this would be outside of their scope of practice. Dietitians can encourage and assist the client with weight loss, despite the client already being underweight with a history of eating disorders.</i></p>

	FITNESS PROFESSIONAL	NUTRITIONAL ADVISOR/NRN (CERTIFICATE IV IN NUTRITION)	ACCREDITED PRACTISING DIETITIAN
CLIENT QUERY: 'Can you create a custom meal plan for me?'			
WITHIN SCOPE RESPONSE:	<p>It is 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 For Health guide, which you can use as a starting point. If you would like a plan that is more tailored to your individual needs, then I would suggest you make an appointment with an APD who can help with this</p> <p><i>(Fitness Australia, 2017)</i></p>	<p>Absolutely, I am happy to work out your individual nutritional requirements and come up with a meal plan that ensures adequate nutrition. In this process I will also consider your current supplement intake and/or medication to ensure that the nutritional plan I create does not have a negative impact on your health.</p>	<p>Absolutely, I am happy to work out your individual nutritional requirements and come up with a meal plan that ensures adequate nutrition. We will also take a look at your most recent pathology, current medications and supplements, as well as taking into account any past and current chronic diseases, which may affect your personal nutritional needs.</p>
OUTSIDE SCOPE RESPONSE:	<p>Absolutely, I am happy to work out your individual nutritional requirements and come up with a meal plan that ensures adequate nutrition.</p>	<p>Absolutely, I am happy to work out your individual nutritional requirements and come up with a meal plan that ensures adequate nutrition. We will also take a look at your most recent pathology, current medications and supplements, as well as taking into account any past and current chronic diseases, which may affect your personal nutritional needs.</p>	<p><u>NOT APPLICABLE</u> <i>As dietitians are trained in providing medical nutrition therapy, there is unlikely to be a situation in which this would be outside of their scope of practice.</i></p>

	FITNESS PROFESSIONAL	NUTRITIONAL ADVISOR/NRN (CERTIFICATE IV IN NUTRITION)	ACCREDITED PRACTISING DIETITIAN
CLIENT QUERY: 'How should I eat to gain muscle?'			
WITHIN SCOPE RESPONSE:	<p>Selecting foods from each of the five food groups in appropriate amounts will achieve the nutrient needs essential for building muscle mass. Extra servings 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.</p> <p><i>(Fitness Australia, 2017)</i></p>	<p>Muscle growth (and recovery after exercise) depends heavily on adequate protein intake throughout the day. Depending on the intensity and frequency of exercise, this determines the number of grams of protein needed per kilogram of body weight. We can definitely work that out for you, as well as when the best time to consume that protein would be to ensure you are meeting your requirements.</p> <p>For example, a 90kg male doing football training/games 4-5 times each week would require approx. 1.4-1.7g of protein per kilogram of body weight (Australian Sports Commission, 2009). This would equate to the athlete requiring between 126-153g of protein on a daily basis.</p>	<p>For the most part of gaining muscle, it would be ensuring adequacy in protein ingestion and timing. We would also need to take into account any chronic health conditions which you may have, such as Cystic Fibrosis or cancer, as well as medications you may be on such as insulin or blood thinners.</p>
OUTSIDE SCOPE RESPONSE:	<p>Muscle growth (and recovery after exercise) depends heavily on adequate protein intake throughout the day. Depending on the intensity and frequency of exercise, this determines the number of grams of protein needed per kilogram of body weight. We can definitely work that out for you, as well as when the best time to consume that protein would be to ensure you are meeting the requirements.</p> <p>For example, a 90kg male doing football training/games 4-5 times each week would require approx. 1.4-1.7g of protein per kilogram of body weight (Australian Sports Commission, 2009). This would equate to the athlete requiring between 126-153g of protein on a daily basis</p>	<p>For the most part of gaining muscle, it would be ensuring adequacy in protein ingestion and timing. We would also need to take into account any chronic health conditions which you may have, such as Cystic Fibrosis or cancer, as well as medications you may be on such as insulin or blood thinners.</p>	<p><u>NOT APPLICABLE:</u> <i>As dietitians are trained in providing medical nutrition therapy, there is unlikely to be a situation in which this would be outside of their scope of practice.</i></p>

	FITNESS PROFESSIONAL	NUTRITIONAL ADVISOR/NRN (CERTIFICATE IV IN NUTRITION)	ACCREDITED PRACTISING DIETITIAN
CLIENT QUERY: ‘How should I eat to be healthier?’			
WITHIN SCOPE RESPONSE:	<p>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 servings than that identified in the Foundation diet) may impair your intake of nutrients, essential for long term health.</p> <p><i>(Fitness Australia, 2017)</i></p>	<p>Eating to be healthier is a matter of ensuring all nutritional requirements are being met, including protein, carbohydrates, fats, vitamins and minerals. In order to eat healthier, we need to calculate your individualised nutritional requirements and create a healthy meal plan based on this information. I can also educate you on the benefits of incorporating (where possible) organic food. Organic foods offer significantly greater health benefits, providing not only more nutrients essential for health, but also helping to avoid unhealthy chemicals.</p> <p><i>(Crinnion, 2010) (Palupi, Jayanegara, Ploeger & Kahl, 2012)</i></p>	<p>In order to eat to be healthier, I would need to see recent pathology to indicate important aspects such as iron levels, lipid profiles and fasting sugars. What may be recommended as ‘healthier eating’ for one person, may be different to the next, given this information. I can also take a detailed medical history, to determine if you have any existing medical conditions that I need to be aware of.</p>
OUTSIDE SCOPE RESPONSE:	<p>Eating to be healthier is a matter of ensuring all nutritional requirements are being met, including protein, carbohydrates, fats, vitamins and minerals. In order to eat healthier, we need to calculate your individualised nutritional requirements and create a healthy meal plan based on this information. I can also educate you on the benefits of incorporating (where possible) organic food. Organic foods offer significantly greater health benefits, providing not only more nutrients essential for health, but also helping to avoid unhealthy chemicals.</p> <p><i>(Crinnion, 2010) (Palupi, Jayanegara, Ploeger & Kahl, 2012)</i></p>	<p>In order to eat to be healthier, I would need to see recent pathology to indicate important aspects such as iron levels, lipid profiles and fasting sugars. What may be recommended as ‘healthier eating’ for one person, may be different to the next, given this information.</p>	<p><u>NOT APPLICABLE:</u> <i>There are no limitations when it comes to dietitians providing support for clients to eat in a healthier manner. Dietitians have extensive knowledge when it comes to improving health, and most clients, even those who are already ‘healthy’, can benefit from making further dietary changes.</i></p>

	FITNESS PROFESSIONAL	NUTRITIONAL ADVISOR/NRN (CERTIFICATE IV IN NUTRITION)	ACCREDITED PRACTISING DIETITIAN
CLIENT QUERY: 'What supplements/vitamins should I take?'			
WITHIN SCOPE RESPONSE:	<p>You can be expected to meet your daily nutrient needs by selecting foods from each of the five food groups, in amounts aligned with the foundation diet. If you have any concerns about eating the right foods to help you meet your nutritional needs, I would recommend you seek the advice of an APD to get a full dietary assessment and advice.</p> <p><i>(Fitness Australia, 2017)</i></p>	<p>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 can be beneficial to go through and identify any nutritional deficiencies in your diet, and consider supplementation if required. However, we will firstly need to consult a pharmacist if you are currently taking medication or experiencing at-risk factors.</p> <p>(DAA, 2018) (NHMRC, 2017)</p>	<p>Given your current digestive health issues including irregular bowel motions, frequent abdominal bloating and floating stools, it is encouraged to firstly identify trigger foods which may be causing inflammation and thus reduced nutrient absorption. Various tests, such as coeliac testing and hydrogen breath test may be implemented to identify trigger foods, and supplementation recommended based on absorptive capacity and inflammatory state.</p>
OUTSIDE SCOPE RESPONSE:	<p>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 can be beneficial to go through and identify any nutritional deficiencies in your diet, and consider supplementation if required.</p> <p>(DAA, 2018) (NHMRC, 2017)</p>	<p>Given your current digestive health issues including irregular bowel motions, frequent abdominal bloating and floating stools, it would be wise to firstly identify trigger foods which may be causing inflammation and thus reduced nutrient absorption. Various tests, such as coeliac testing and hydrogen breath testing would be beneficial to identify trigger foods, and supplementation would be recommended based on the findings of your absorptive capacity and inflammatory state.</p>	<p><u>NOT APPLICABLE</u> <i>Technically there are no limits, however ethics do come into play and a dietitian would not advise a client to take supplements if they had nutritional toxicity (unless medically indicated).</i></p>

	FITNESS PROFESSIONAL	NUTRITIONAL ADVISOR/NRN (CERTIFICATE IV IN NUTRITION)	ACCREDITED PRACTISING DIETITIAN
CLIENT QUERY: 'How should I eat to assist injury rehabilitation?'			
WITHIN SCOPE RESPONSE:	<p>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 is 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 APD or Accredited Sports Dietitian.*</p> <p><i>(Fitness Australia, 2017)</i></p>	<p>During rehabilitation it is essential that you are consuming a nutritionally complete diet with adequate protein, fats, carbohydrates, fluids, vitamins and minerals to ensure the body has all the nutrients it requires to optimise recovery. Let us take a closer look at your current diet to ensure you are reaching your individualised nutritional requirements.</p>	<p>During recovery, the human body generally has higher metabolic demands, and as such, individualised energy and macronutrient requirements need to be recalculated, taking type of injury and/or amputation into account. Based on the new calculations and taking into account your recent pathology following the injury, a dietary plan can be created to ensure recovery is optimised and nutritional demands are met.</p>
OUTSIDE SCOPE RESPONSE:	<p>During rehabilitation, it is essential that you are consuming a nutritionally complete diet with adequate protein, fats, carbohydrates, fluids, vitamins and minerals to ensure the body has all the nutrients it requires to optimise recovery. Let us take a closer look at your current diet to ensure you are reaching your individualised nutritional requirements.</p>	<p>During recovery, the human body generally has higher metabolic demands, and as such, individualised energy and macronutrient requirements need to be recalculated. Based on the new calculations, and taking into account your recent pathology following the injury, a dietary plan can be created to ensure recovery is optimised and nutritional demands are met.</p>	<p><u>NOT APPLICABLE</u> <i>As dietitians are trained in providing medical nutrition therapy, there is unlikely to be a situation in which this would be outside of their scope of practice.</i></p>

	FITNESS PROFESSIONAL	NUTRITIONAL ADVISOR/NRN (CERTIFICATE IV IN NUTRITION)	ACCREDITED PRACTISING DIETITIAN
CLIENT QUERY: 'Can you design me a nutrition plan if I am coeliac?'			
WITHIN SCOPE RESPONSE:	Some clients require adjustments to their diet to assist with the management of specific medical conditions. Such medical nutrition therapy should only be provided by an APD. <i>(Fitness Australia, 2017)</i>	Unfortunately, coeliac disease requires strict dietary protocols in order to manage this condition. This does not fall within my scope of practice. Failure to follow the correct diet can result in malabsorption, fertility issues and severe pain. However, I am able to refer you to an APD for further intervention	As you are already diagnosed with coeliac disease, I can create a meal plan suited to your needs. If you are still symptomatic after a few weeks of following this meal plan, we can have a look into some other tests and protocols to identify any further food sensitivities or gut issues.
OUTSIDE SCOPE RESPONSE:	As you are already diagnosed with coeliac disease, I can create a meal plan suited to your needs.	As you are already diagnosed with coeliac disease, I can create a meal plan suited to your needs. If you are still symptomatic after a few weeks of following this meal plan, we can have a look into some other tests and protocols to identify any further food sensitivities or gut issues.	<u>NOT APPLICABLE:</u> <i>As dietitians are trained in providing medical nutrition therapy, there is unlikely to be a situation in which this would be outside of their scope of practice.</i>

	FITNESS PROFESSIONAL	NUTRITIONAL ADVISOR/NRN (CERTIFICATE IV IN NUTRITION)	ACCREDITED PRACTISING DIETITIAN
CLIENT QUERY: 'Are you able to provide me with a meal plan designed around meeting specific macronutrient requirements?'			
WITHIN SCOPE RESPONSE:	Unfortunately not. In order to calculate specific macronutrient requirements, you would need to see a health professional trained in this area, such as an APD.	Yes, certainly. I can help you calculate not only your macronutrient requirements, but we can take a look at your total energy requirements, taking into account any goals you may have, such as weight loss, muscle gain or weight maintenance. From here, I can help create a meal plan to meet your individual needs.	Yes, absolutely. In order to create a meal plan to suit your specific macronutrient requirements, I would need to get a thorough understanding of your history first, taking into account recent pathology results, current medical conditions, family history of medical conditions and prescribed medications. From here, I can calculate your specific energy and macronutrient requirements to create a meal plan to meet your individual needs.
OUTSIDE SCOPE RESPONSE:	Yes, certainly. I can help you calculate not only your macronutrient requirements, but we can take a look at your total energy requirements, taking into account any goals you may have, such as weight loss, muscle gain or weight maintenance. From here, I can help create a meal plan to meet your individual needs.	Yes, absolutely. In order to create a meal plan to suit your specific macronutrient requirements, I would need to get a thorough understanding of your history first, taking into account recent pathology results, current medical conditions, family history of medical conditions and prescribed medications. From here, I can calculate your specific energy and macronutrient requirements to create a meal plan to meet your individual needs.	<u>NOT APPLICABLE</u> <i>As dietitians are trained in providing medical nutrition therapy, there is unlikely to be a situation in which this would be outside of their scope of practice.</i> <i>NOTE:</i> Creating a meal plan based around the client's self-calculated macronutrient requirements, despite knowing that the requirements are not meeting their nutritional requirements (such as inadequate protein intake), would be outside of their scope/duty of care.

	FITNESS PROFESSIONAL	NUTRITIONAL ADVISOR/NRN (CERTIFICATE IV IN NUTRITION)	ACCREDITED PRACTISING DIETITIAN
CLIENT QUERY: 'I am an athlete, and I would like to improve my athletic performance: can you design me a custom meal plan to help me achieve my goals?'			
WITHIN SCOPE RESPONSE:	I am not able to provide any custom meal plans; however I am happy to show you the Eat for Health Guide and take you through the healthy eating principles.	Yes, I can help you with that. Let us first take a look at your current training program, so that I can work out your specific macronutrient needs as well as the best timing for ingestion of certain macronutrients.	Yes, I can absolutely help. Given your history of uncontrolled diabetes and anaemia, it will be essential to look at your current training program and recent pathology (in particular glucose readings, protein stores and iron levels) to identify your specific nutritional requirements and the best timing for ingestion of certain macronutrients.
OUTSIDE SCOPE RESPONSE:	Yes, I can help you with that. Let us first take a look at your current training program, so that I can work out your specific macronutrient needs as well as the best timing for ingestion of certain macronutrients.	Yes, I can absolutely help. Given your history of uncontrolled diabetes and anaemia, it will be essential to look at your current training program and recent pathology (in particular glucose readings, protein stores and iron levels) to identify your specific nutritional requirements and the best timing for ingestion of certain macronutrients.	NOT APPLICABLE. As dietitians are trained in providing medical nutrition therapy, there is unlikely to be a situation in which this would be outside of their scope of practice

	FITNESS PROFESSIONAL	NUTRITIONAL ADVISOR/NRN (CERTIFICATE IV IN NUTRITION)	ACCREDITED PRACTISING DIETITIAN
CLIENT QUERY: 'I have been diagnosed with chronic depression (taking a prescribed medication) and would like you to help me get through this by providing me with a custom meal plan so I can feel better: can you help me?'			
WITHIN SCOPE RESPONSE:	I can help you set nutrition goals based on the Healthy Eating Guidelines; however, for a personalised approach specific to chronic depression, or any mental health issues, you would need to speak with an appropriate allied health professional such as an APD or psychologist.	I can absolutely assist you, once I have received the appropriate medical clearance from your general practitioner (GP). I can help you set nutrition goals based on your individualised macronutrient requirements, and assist with general counselling and achieving those nutrition-based goals. However, for a personalised approach specific to treating chronic depression, or any mental health issues, I would need to refer you onto an appropriate allied health professional such as a GP or psychologist.	I can most certainly assist in creating a custom meal plan based on your individual nutritional requirements, taking into account foods which are known to be beneficial to cognitive health, your current hormonal levels and other factors which may be affecting overall mood such as deficiencies, toxicities, liver damage(which affects your body's ability to self-detox), and unbalanced fat ratios.
OUTSIDE SCOPE RESPONSE:	I can absolutely assist you once I have received the appropriate medical clearance from your general practitioner (GP). I can help you set nutrition goals based on your individualised macronutrient requirements, and assist with general counselling and achieving those nutrition-based goals.	I can most certainly assist in creating a custom meal plan based on your individual nutritional requirements, taking into account foods which are known to be beneficial to cognitive health, your current hormonal levels and other factors which may be affecting overall mood such as deficiencies, toxicities, liver damage (which affects your body's ability to self-detox), and unbalanced fat ratios.	NOT APPLICABLE As dietitians are trained in providing medical nutrition therapy, there is unlikely to be a situation in which this would be outside of their scope of practice. *Dietitians may need to communicate with the client's GP and/or psychologist/counsellor in some circumstances

	FITNESS PROFESSIONAL	NUTRITIONAL ADVISOR/NRN (CERTIFICATE IV IN NUTRITION)	ACCREDITED PRACTISING DIETITIAN
CLIENT QUERY: 'I have been struggling with a few mild digestive issues for a while, including small amounts of flatulence and irregular bowel motions. Are you able to create a custom meal plan to alleviate these symptoms?'			
WITHIN SCOPE RESPONSE:	Unfortunately, it is outside of my scope of practice to create custom meal plans. I am happy however to show you the recommendations of the five food groups which may help to optimise digestive health.	I can absolutely assist you, once I have received the appropriate medical clearance from your general practitioner (GP). I can then create a custom meal plan in effort to reduce gastrointestinal issues. We would start by taking a look at your individualised nutritional requirements, paying special attention to the different types and quantities of fibre in your current diet, and supporting overall gut health.	Digestive symptoms can be an indicator of food sensitivities. It will be important to identify any trigger foods as these may be causing an inflammatory response and reducing your absorptive capacity. There are a number of tests and protocols (such as elimination diets and food allergy testing) we can work through to assist in alleviating these symptoms.
OUTSIDE SCOPE RESPONSE:	Yes, absolutely I can create a custom meal plan in effort to reduce gastrointestinal issues. We would start by taking a look at your individualised nutritional requirements, paying special attention to the different types and quantities of fibre in your current diet, and supporting overall gut health.	Digestive symptoms can be an indicator of food sensitivities. It will be important to identify any trigger foods as these may be causing an inflammatory response and reducing your absorptive capacity. There are a number of tests and protocols (such as elimination diets and food allergy testing) we can work through to assist in alleviating these symptoms.	NOT APPLICABLE As dietitians are trained in providing medical nutrition therapy, there is unlikely to be a situation in which this would be outside of their scope of practice.

	FITNESS PROFESSIONAL	NUTRITIONAL ADVISOR (CERTIFICATE IV IN NUTRITION)	ACCREDITED PRACTISING DIETITIAN
CLIENT QUERY: 'I am currently 8 weeks pregnant and am wanting to eat correctly to nourish my baby. Are you able to create a custom meal plan to ensure I am getting all my essential nutrients?'			
WITHIN SCOPE RESPONSE:	Unfortunately, it is outside of my scope of practice to write custom meal plans or make nutrition suggestions for women who are pregnant.	I cannot create a custom meal plan whilst you are pregnant, as your body will have increased nutritional demands to support the growth of your baby. However, once you have finished breast feeding, I am able to help calculate your individualised nutritional requirements and provide education relating to ensuring adequate nutrition in your day-to-day life.	Yes, absolutely. I can assist with ensuring all specific nutritional needs are met throughout the course of your pregnancy, discuss appropriate supplementation and create a custom meal plan to meet your specific nutritional requirements.
OUTSIDE SCOPE RESPONSE:	I am able to help calculate your pre, during and post pregnancy nutritional requirements and provide education relating to pregnancy.	Yes, absolutely. I can assist with ensuring all specific nutritional needs are met throughout the course of your pregnancy, discuss appropriate supplementation and create a custom meal plan to meet your specific nutritional requirements. .	NOT APPLICABLE As dietitians are trained in providing medical nutrition therapy, there is unlikely to be a situation in which this would be outside of their scope of practice.

	FITNESS PROFESSIONAL	NUTRITIONAL ADVISOR/NRN (CERTIFICATE IV IN NUTRITION)	ACCREDITED PRACTISING DIETITIAN
CLIENT QUERY: 'I have been really struggling with chronic digestive issues for a while, since I have been diagnosed with Irritable Bowel Syndrome. My symptoms include abdominal pain, faecal urgency, irregular bowel motions and floating stools. Are you able to create a custom meal plan to alleviate these symptoms?'			
WITHIN SCOPE RESPONSE:	Creating custom meal plans is unfortunately outside my scope of practice. While some clients may require specific support in modifying their diet to assist with digestive symptoms, such nutrition therapy should only be provided by an APD.	Creating custom meal plans for chronic digestive issues is unfortunately outside my scope of practice. While some clients may require specific support in modifying their diet to assist with digestive symptoms, such nutrition therapy should only be provided by an APD.	Yes, I am happy to assist you with creating a custom meal plan given your ongoing digestive issues. Digestive symptoms can be an indicator of food sensitivities. It will be important to identify any trigger foods, as these may be causing an inflammatory response and reducing your absorptive capacity. There are a number of tests and protocols (such as elimination diets and food allergy testing) we can work through to assist in alleviating these symptoms.
OUTSIDE SCOPE RESPONSE:	Yes, I am happy to assist you with creating a custom meal plan given your ongoing digestive issues. Digestive symptoms can be an indicator of food sensitivities. It will be important to identify any trigger foods as these may be causing an inflammatory response and reducing your absorptive capacity. There are a number of tests and protocols (such as elimination diets and food allergy testing) we can work through to assist in alleviating these symptoms.	Yes, I am happy to assist you with creating a custom meal plan given your ongoing digestive issues. Digestive symptoms can be an indicator of food sensitivities. It will be important to identify any trigger foods, as these may be causing an inflammatory response and reducing your absorptive capacity. There are a number of tests and protocols (such as elimination diets and food allergy testing) we can work through to assist in alleviating these symptoms.	<u>NOT APPLICABLE</u> As dietitians are trained in providing medical nutrition therapy, there is unlikely to be a situation in which this would be outside of their scope of practice. *Dietitians may need to work closely with gastrointestinal specialists to ensure optimal care for the clients.

	FITNESS PROFESSIONAL	NUTRITIONAL ADVISOR/NRN (CERTIFICATE IV IN NUTRITION)	ACCREDITED PRACTISING DIETITIAN
CLIENT QUERY: 'I have recently found out that I have high total cholesterol and triglyceride levels, but I am not currently taking medication for it. Can you create a custom meal plan to optimise my cholesterol levels, to help me avoid taking medication?'			
WITHIN SCOPE RESPONSE:	Unfortunately, it is outside my scope of practice to create custom meal plans or to provide individualised dietary recommendations. For specific advice regarding pathology results, it is best to speak with an APD.	While I cannot read your pathology results, I can most definitely help to calculate your individualised nutrient requirements, and ensure you are obtaining adequate nutrients on a day-to-day basis to optimise overall health and wellbeing. However, if you begin taking medication for your condition, this falls outside of my scope of practice, and I will need to refer you to an APD.	Absolutely, I can take a look at your pathology results and current diet, and work with you to make realistic dietary changes which will assist in reducing total cholesterol and triglycerides.
OUTSIDE SCOPE RESPONSE:	While I cannot read your pathology results, I can most definitely help to calculate your individualised nutrient requirements, and ensure you are obtaining adequate nutrients on a day-to-day basis to optimise overall health and wellbeing.	Absolutely, I can take a look at your pathology results and current diet, and work with you to make realistic dietary changes which will assist in reducing total cholesterol and triglycerides.	<u>NOT APPLICABLE.</u> As dietitians are trained in providing medical nutrition therapy, there is unlikely to be a situation in which this would be outside of their scope of practice.

	FITNESS PROFESSIONAL	NUTRITIONAL ADVISOR/NRN (CERTIFICATE IV IN NUTRITION)	ACCREDITED PRACTISING DIETITIAN
CLIENT QUERY: 'I tend to be an emotional eater, binging on decadent foods such as chocolate whenever I am feeling stressed, anxious or depressed. Are you able to help me overcome this and write a custom meal plan?'			
WITHIN SCOPE RESPONSE:	Unfortunately it is outside my scope of practice to write a custom meal plan or to provide individualised recommendations. It may be beneficial to discuss these dietary habits with a nutrition-based health professional and/or a counsellor or psychologist.	While I am unable to create a custom meal plan specifically for depression or anxiety, I can help you in a number of other ways. We can take a look at your triggers for emotional eating, the types of food you turn to, alternative foods we can use to replace current foods while breaking the habit, and discuss strategies to overcome this behaviour longer term. However, if I feel that your mental health is compromised in any way, I will need to refer you on to a GP or psychologist for medical clearance before continuing care. If your eating patterns are reflective of an eating disorder, this does not fall within my scope of practice and I will need to refer you on to a dietitian.	I can most certainly assist in creating a custom meal plan based on your individual nutritional requirements, taking into account foods which are known to benefit cognitive health, current hormonal levels and other factors which may be affecting overall mood such as deficiencies, toxicities and unbalanced fat ratios. We can also take a look at various strategies to overcome this behaviour longer term and help you to create new strategies for dealing with stressful situations in the future.
OUTSIDE SCOPE RESPONSE:	Yes absolutely. We can take a look at your triggers for emotional eating, the types of food you turn to, alternative foods we can use to replace current foods while breaking the habit, and discuss strategies to overcome this behaviour longer term.	I can most certainly assist in creating a custom meal plan based on your individual nutritional requirements, taking into account foods which are known to benefit cognitive health, current hormonal levels and other factors which may be affecting overall mood such as deficiencies, toxicities and unbalanced fat ratios. We can also take a look at various strategies to overcome this behaviour longer term and help you to create new strategies for dealing with stressful situations in the future.	<u>NOT APPLICABLE</u> As dietitians are trained in providing medical nutrition therapy, there is unlikely to be a situation in which this would be outside of their scope of practice. *Dietitians may need to work closely with counsellors or psychologists to ensure optimal care for the patient.

PART 4: REFERRAL PROCESSES AND COLLECTIVE PRACTICE

UNDERSTANDING THE NEED FOR REFERRALS

The depth of knowledge and training/education required to effectively and safely support the previously mentioned ‘out of scope’ clientele is not sufficiently covered in the 10763NAT - Certificate IV in Nutrition. A referral to an appropriate allied health professional is required for clinical nutrition-related advice or for any client who falls outside of the scope of practice (who is deemed ‘high risk’) for a Nutritional Advisor/NRN.

In most situations, the appropriate allied health professionals to refer to are as follows:

- Accredited Practising Dietitian (APD)
- Accredited Sports Dietitian (AccSD)
- General Practitioner (GP).

More information can be found using the following links:

Accredited Practising Dietitian: www.daa.asn.au

Accredited Sports Dietitian: www.sportsdietitians.com.au

As a Nutritional Advisor/NRN, collaborative practice with the appropriate health professional/s is an imperative approach to protect ‘out of scope’ clientele from unsuitable or potentially dangerous nutritional advice. In turn, this can also prevent the possibility of legal liability related to the inappropriate provision of nutritional advice to such clients. Furthermore, this collaborative approach can improve the industry by growing networks for client referrals and increasing expert credibility and integrity within the health and fitness industry.

The table below outlines the roles of necessary medical professionals that are relevant in the referral process for Nutritional Advisors/NRNs:

ACCREDITED PRACTISING DIETITIAN:	ACCREDITED SPORTS DIETITIAN:	GENERAL PRACTITIONER:
<p>Accredited Practising Dietitians (APDs) are university-qualified professionals that undertake ongoing training and education programs to ensure that they are the most up-to-date and credible source of nutrition information. They translate scientific health and nutrition research into practical advice and practise in line with Dietitians Australia (DA) Professional Standards.</p> <p>(Dietitians Association of Australia (DAA), 2018)</p>	<p>An Accredited Sports Dietitian is an APD that has undergone further education and training in sports nutrition practice.</p> <p>(Sports Dietitians Australia (SDA), 2018)</p>	<p>A general practitioner (GP) refers to a doctor who is also qualified in general medical practice. GPs are often the first point of contact for clients, of any age, who feel sick or have a health concern. They treat a wide array of medical conditions and health issues.</p> <p>A GP may also undergo further education in specific areas such as women’s or men’s health, sports medicine or paediatrics.</p> <p>(Better Health, 2018)</p>

THE REFERRAL PROCESS

As discussed throughout this document, the 10763NAT - Certificate IV in Nutrition qualification does not qualify Nutritional Advisors/NRNs to analyse a detailed medical history or to interpret medical test results in the way that a GP or APD would during a consultation. It is important, however, that Nutritional Advisors/NRNs conduct their standardised screening tools and a non-clinical health history, to allow them to identify potential chronic health conditions or aspects of which may be impacting their client's current or future health status.

The steps below are guidelines on the most appropriate process for initiating and conducting a referral.

<p>STEP 1</p>	<p>RISK STRATIFICATION SCREENING TOOL</p> <p>SECTION 1: IDENTIFY THE CLIENT'S CURRENT HEALTH STATUS PART A) Identify any current medical conditions PART B) Identify 'at risk' factors SECTION 2: IDENTIFY POSSIBLE FOOD INTOLERANCES AND/OR ALLERGIES. SECTION 3: IDENTIFY FAMILY HEALTH HISTORY</p>
<p>STEP 2</p>	<p>EVALUATE RISK-STRATIFICATION RESULTS</p> <p>Ensure understanding of a Nutritional Advisors/NRN's Scope of Practice and evaluate the results from the Risk Stratification Screening Tool to determine if a medical clearance or referral is required.</p>
<p>STEP 3</p>	<p>IDENTIFY THE CORRECT PROFESSIONAL TO REFER TO</p> <p>Identify which type of medical or allied health professional is best for the client's needs.</p>
<p>STEP 4</p>	<p>DEVELOP REFERRAL FORM</p> <p>Develop a referral form that includes appropriate, factual and succinct information about the client for the purpose of a referral.</p>
<p>STEP 5</p>	<p>GAIN CLIENT CONSENT</p> <p>Prior to completing and sending off the referral form, it is important to gain the client's trust and informed consent to share their health information with the appropriate medical professional.</p>
<p>STEP 6</p>	<p>MAKE THE REFERRAL</p> <p>Connect and communicate with the appropriate medical professional and develop a professional relationship. Send the referral off and wait for professional advice to be relayed back.</p>
<p>STEP 7</p>	<p>RECEIVE ADVICE FROM ALLIED HEALTH OR MEDICAL PROFESSIONAL</p> <p>Receive advice from medical professional and action their requests. *In some situations a medical clearance is solely needed, in which case continue to work with the client to assist their nutritional needs.</p>
<p>STEP 8</p>	<p>DEVELOP NUTRITIONAL PLAN/APPROACH</p> <p>Using the feedback received from the medical professional, this will determine the nutritional approach to be conducted with the client. The Nutritional Advisor/NRN should commit to providing a professional and ethical relationship with the client in order to cater to their individual needs/requirements.</p>

PART 5: CODE OF PROFESSIONAL CONDUCT FOR NRN MEMBERS

This code of conduct outlines the professional standards, behaviours, ethical principles and standards of practice for NRN's who are registered with NCA.

1. DEFINITION

- A. **NRN.** The acronym NRN stands for Nationally Recognised Nutritionist. To become an NRN, individuals must have completed the Nationally Accredited 10763NAT - Certificate IV in Nutrition, hold insurance with an approved insurance provider.
- B. **NCA.** The Acronym NCA stands for Nutrition Council of Australia.

2. STANDARDS

The standards listed below are aimed to guide what is expected of NRNs:

- A. **Adherence to the scope of practice for NRNs:** The scope of practice outlines exactly which population groups NRNs can advise, and which population groups require referral to APDs, GPs or other allied health professionals/specialists.
- B. **Maintain insurance with an NCA approved insurance provider:** For the protection of both the clients and the NRN, insurance must be maintained in order to practise as an NRN.
- C. **Effective Communication:** Effective communication is essential for a client's understanding of the advice given and rational behind the advice. An NRN should strive to provide education in managing negative dietary habits and behaviours that might impact on health, in an easy-to-understand manner. For example, the use of acronyms for various conditions or situations without explanation is not advised; however, the use of common language, whilst simultaneously confirming understanding, is advised.
- D. **Professional Development:** All NRNs should keep up to date with the latest developments in the nutritional field by undertaking regular professional development, to provide safe and current information to their clients.
- E. **Professional Representation:** Do not conduct or represent themselves in any way that would reflect negatively on the role of an NRN.

3. ETHICAL PRACTICE

The development of these ethical standards is to outline expected ethical practice that Nutrition Council Australia upholds for NRNs. The standards below are not a comprehensive list:

- A. Client-centred care:** Client-centred care is ensuring that all advice and recommendations are based on the client's individual and personal needs, ensuring that the needs of the client are of utmost importance and priority. As no two clients are the same, individualised advice should always be given. Reproduction of generic diets is not advised, unless it specifically suits the client.
- B. Confidentiality:** Confidentiality is crucial in maintaining the client's trust, enabling clients to speak honestly and openly about their health status, knowing that the information they provide will be kept securely. Confidentiality is also a legal obligation for all health professionals to align with the Privacy Act 1988. Breaches in confidentiality will face legal ramifications.
- C. Integrity:** All NRNs must place the needs of the client first and act within their best interest to maintain trusting relationships.
- D. Conflicts of interest:** Any conflicts of interest between the NRN and the client - such as incentives, affiliations, referrals and so on - should be made known to the client immediately, so that the necessary steps of action can be taken to ensure the client feels comfortable proceeding with the service.
- E. False and misleading information:** All NRNs are required to represent themselves in an honest and reputable manner and not wilfully deceive clients or the public.

4. APPLICATION OF AND ADHERENCE TO THE CODE OF CONDUCT AND ETHICAL PRACTICE

It is a requirement of all NRNs to adhere to their code of conduct, and to conduct themselves in a professional manner at all times, in order to maintain registration as an NRN. Any breach in the Code of Conduct will lead to a review of their registration and accredited NRN title and could potentially lead to a suspension or cancellation of such.



PART 6: AUXILIARY INFORMATION

LIMITING FACTORS FOR A FITNESS PROFESSIONAL'S SCOPE OF PRACTICE IN RELATION TO NUTRITION

Frontline health and fitness professionals, such as personal trainers, sports and fitness coaches, and retail specialists within the industry (such as supplements sales representatives) are consistently approached to provide additional advice and guidance on nutrition and custom meal planning. However, in most instances, these professionals are either unqualified to provide useful advice or are prohibited from doing so by their scope of practice and/or obligation to only to follow the Australian Dietary Guidelines.

The current Fitness Australia scope of practice (for *AusREPs members) prevents registered fitness professionals (i.e. personal trainers) from providing the following support to clients:

- 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/vitamins
- To provide specific nutritional advice relating to health or 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.

***AusREP members include those who have completed qualifications in Fitness at a Certificate III, Certificate IV or Diploma level, or higher education Exercise Science or Human Movement Degrees.**

AusREP members are only 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 and the Nutrition Advice Guidelines for AusREPs).

With an alarmingly increasing level of obesity within the Australian society, it is evident that the basic information provided to the public from a fitness professional is not reducing the ever-growing obesity epidemic, nor is it improving the health of individuals in Australia. This is because of the limiting nature of their scope of practice and the lack of knowledge supplied in relevant fitness courses, such as the Certificates III and IV in Fitness.

While it is a positive notion that fitness professionals are able to promote and educate their clients about healthy eating, it is imperative that the Australian public are made aware of their limitations and that these professionals are unqualified and unable to address a wide array of their client's nutritional needs. As AusREP members are unable to adequately address the nutritional needs of their clients, this in turn creates a gap in services for the health/fitness industry.

There is a magnitude of limitations for fitness professionals and personal trainers regarding nutrition and their scope of practice, and these can include, but are not limited to, the following:

- Fitness professionals are only permitted to give advice in-line with the Australian Dietary Guidelines and Eat for Health Program recommendations. In turn, this does not allow for current information or deviations, even if new research is backed by scientific evidence, industry professionals and peak governing bodies.
- Fitness professionals only have the ability to provide basic advice for clients to follow set food groups and types of food, as well as set serving amounts according to the Australian Dietary Guidelines. This is limiting because it is a generalised approach for a ‘healthy diet’, which doesn’t allow for customisation of healthy foods and only enables a ‘one-size fits all’ approach to nutrition, rather than catering to the client’s nutritional needs at an individual level.
- Fitness professionals can only compare their clients’ general patterns of eating to the Australian Dietary Guidelines and/or Eat for Health Program (i.e. foundation diets), which is limiting due to its generalised ‘one-size fits all’ approach to nutrition that does not consider the client at an individual level.
- Fitness professionals can only ‘assist’ or ‘recommend’ clients to change their eating patterns by using the Australian Guide to Healthy Eating, which is limiting in its nature as mentioned above in previous points but also due to not being able to actually ‘implement’ a specific plan or approach for their client.
- Fitness professionals can only provide ‘general’ or ‘basic’ nutrition advice for weight management that aligns with the above guidelines. In a society that has an increasing obesity epidemic, this is not taking proactive measures to combat excessive weight-gain, nor can it be beneficial for their clients.
- Fitness professionals can only provide ‘examples’ of meals and snacks to clients, and these snacks/ meals must not stray from the Australian Dietary Guidelines. Therefore, as previously mentioned, it is limiting because it only caters to a generalised population and not a person’s individual needs, preferences or health requirements.
- Fitness professionals cannot provide information or suggest the use of nutritional supplements and/or nutritional vitamins. This is limiting, in not being able to suitably accommodate clients if they struggle to meet daily nutrient requirements from food sources only.
- Fitness professionals are not encouraged to learn, research or adapt new findings in research, backed by industry professionals such as APDs and peak industry bodies.
- Fitness professionals cannot adapt critical or lateral thinking in order to cater to the individual needs of their clients. In doing so, they will stray from the recommendations within the Australian Dietary Guidelines and, thus, fall outside their scope of practice as a fitness professional.

GLOSSARY

TERM	DESCRIPTION/DEFINITION:
Advice in-line with the Australian Dietary Guidelines (ADG)	Nutrition advice that does not stray from the Australian Dietary Guidelines (ADG).
Allied Health Professionals (AHP)	A broad term which refers to all health professionals, excluding doctors, dentists and nurses. They aim to diagnose, prevent and treat a range of illnesses under a wide variety of professions. For example, chiropractors, psychologists, speech pathologists and optometrists are just a few AHP.
AusREP members	Include those who have completed qualifications in fitness at a Certificate III, Certificate IV or Diploma level, or higher education Exercise Science or Human Movement Degrees. (Fitness Australia. 2017)
Australian Dietary Guidelines	The Australian Dietary Guidelines provide 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. (Fitness Australia. 2017)
Australian Guide to Healthy Eating	The Australian Guide to Health Eating is a food selection guide which visually represents the proportion of the five food groups recommended for consumption each day. (Eat For Health. 2015)
Assist or 'recommend' clients to change their eating patterns.	Having the ability to 'assist' or 'recommend' clients to change their eating patterns refers only to the use of the Australian Guide to Healthy Eating in making recommendations for the client, and does not include the 'implementation' or 'creation' an individualised plan or approach for a client.
'At risk' factors	Measured indications used to identify whether the client is at risk of becoming injured, developing a disease, or worsening their current condition. These 'at risk' factors prompt referral to an appropriate medical professional for medical clearance if required.
Basic healthy eating information and advice	Nutrition advice that is based on the Australian Dietary Guidelines only, which may include limited recommendations on the type and amount (servings) of food, food groups and dietary patterns that promote health and wellbeing. General nutrition advice excludes the provision of personalised meal plans or anything outside that of the ADGs. (Fitness Australia. 2017)
Critical thinking	Critical thinking refers to the analysis and evaluation of an issue or matter, in order to form a well-educated judgement and basis of action. (Paul & Elder, 2006)
Custom meal planning	Refers to designing a specific meal plan for a client, which is suited to their unique needs, goals and lifestyle. It is solely based on their nutritional requirements and would not be suitable for any other client.

Daily nutrient requirements	In order to function effectively and at its optimal level, the body requires certain amounts of each nutrient to be consumed through food every day. In order to avoid nutritional deficiency, disease and other symptoms, daily nutrient requirements need to be met.
Detailed nutrition assessment	An in-depth evaluation of objective and subjective data related to a client's food and nutrient intake, lifestyle, and medical history. (Fitness Australia. 2017)
Drug-nutrient interactions	Drug-nutrient interactions refers to the way specific nutrients can change the effect and intended purpose of a drug. This can include either enhancing or inhibiting the drug, or altering its absorption, breakdown, excretion or transportation. For example, caffeine can enhance the absorption of some drugs, and vitamin K may inhibit the effectiveness of some drugs.
Exercise program/fitness program	An exercise program details a range of different physical exercises to be performed by a client or group. It also states the amount of time each exercise should be performed for and/or the number of repetitions needed for each exercise. It can be tailored to the specific needs of a client or for the participation of a group.
Family medical condition/history	A family medical history is a record of health information about a client and their close relatives. A history should include information from parents, siblings and children.
Fitness Australia	Fitness Australia is an industry body (non-governing) providing information, education and events in the Fitness Industry. It is the national health and fitness industry association which allows fitness professionals and businesses to register.
Food allergy	A food allergy is an immune response produced by the body in the identification of a harmless substance or nutrient as if it were toxic. As a result, the immune system responds dramatically in an attempt to eliminate or treat the substance as quickly as possible. The most common food allergies include peanuts, shellfish, soy, other tree nuts etc. Some reactions may be extremely severe (such as Anaphylaxis), resulting in immediate medical attention.
Food group	Refers to the grouping of foods which share the same dominant nutrients or similar nutritional properties. For example, 'whole grain breads and cereals' contain the same dominant nutrient of carbohydrates. Generally speaking, there are five main food groups within the average human diet.
Food intolerance	Food intolerances do not warrant the same immune system response as food allergies; however, the body does respond, causing inflammation and/or digestive issues seen with symptoms such as breathlessness, bloating, flatulence, nausea etc. A visible reaction may not occur until a certain amount of the food has been consumed (this amount varying for each person); however, if a client is intolerant to a certain food, any amount of it will cause inflammation. Common food intolerances include milk, flavour enhancers or additives and foods high in FODMAPS (Fermentable Oligosaccharides, Disaccharides, Monosaccharides and Polyols).

Foundation diet	The term ‘foundation diet’ was developed by the NHMRC Food Modelling System to represent the basis of an optimal diet for the smallest and most inactive member for a certain age, gender or lifestyle group and includes only foods from the 5 Food Groups. (Eat For Health. 2013)
Frontline health and fitness professionals	Used to describe professionals within the health and fitness industry who work directly with clients. These professionals are considered to hold the most advanced and/or responsible position as a health and fitness professional. Some examples include personal trainers, sports and fitness coaches, retail specialists within the industry (such as supplements sales representatives) and exercise physiologists.
Generalised approach for a ‘healthy diet’	An approach to eating healthily that does not allow for customisation of healthy foods. This approach enables a ‘one-size fits all’ approach to nutrition rather than catering to the client’s individual nutritional needs.
General nutrition advice	Nutrition advice that is based on the Australian Dietary Guidelines which may only include recommendations on the type and amount (servings) of food, food groups and dietary patterns that promote health and wellbeing. General nutrition advice excludes the provision of personalised meal plans. (Fitness Australia. 2017)
Generic meal plan	The sample 1-day meal plan given in the Australian Dietary Guidelines Educator Guide which meets the expected nutritional needs of the average person (male/female, 19-50yr, average height, weight & activity). (Fitness Australia. 2017)
Healthy individuals	Are those who are free from any ‘risk factors’ and chronic disease. This type of person falls within the scope of practice of a Nutritional Advisor/ NRN.
Lateral thinking	Problem solving in a non-traditional way, or in a way that does not use traditional problem-solving methods. Requires thinking outside of the box and being creative.
Medical clearance	Receiving appropriate assessment and approval from a GP or other allied health professional to continue working with a Nutritional Advisor/NRN, despite the possibility of existing health issues.
Accredited Nutritional Advisor (ANA)	Graduates who have successfully completed the 10763NAT - Certificate IV in Nutrition.
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.

Nutritional supplements/ vitamins	Dietary supplements that aim to provide nutrients that are unable to be consumed in adequate quantities from food. Their purpose is not to replace a healthy diet, but to provide dietary support for those who may not be able to consume the adequate amount of nutrients for various reasons.
Obesity	A BMI over 30kg/m ² is classed as obese. Obese clients often have other health conditions such as elevated sugars, cholesterol and blood pressure.
Obesity epidemic	Refers to the quickly escalating number of people who are falling into the 'overweight' and 'obese' category, both in Australia and around the world.
One-size fits all approach	This approach omits the needs of the client and acts as a blanket-type approach to meet the general needs of the population.
'Peak Industry Body' or 'Industry Body'	A peak industry body is a representative organisation that provides information dissemination services, membership support, coordination, advocacy and representation, and research and policy development services for members and other interested parties. (Industry Commission, 1995:181)
Personal Trainer	Is an individual who has successfully completed a Certificate IV in Fitness through a nationally accredited training organisation.
Predisposition	The increased likelihood and tendency to behave a certain way or suffer from a particular disease - usually based on environmental and genetic factors.
Risk-stratification screening tool (RSST)	A standardised tool used to identify client risk factors, family medical history, and other factors which may influence the advice a Nutritional Advisor/NRN can provide, and/or identifies the need to refer the client onto an AHP. It provides a baseline understanding of the client's health status.
Preventative approach	An approach that aims to avoid the onset of various diseases or conditions through nutritional treatment and advice, irrespective of whether the client has the predisposition for a certain disease, or whether it is simply for general health and wellbeing.
Registered Training Organisation (RTO)	An RTO is an organisation accredited by the Australian Skills Quality Authority (ASQA) which is the national regulator for Australia's vocational education and training sector. ASQA regulates courses and training providers to ensure nationally approved quality standards are met. RTOs may include TAFE institutes, private providers, community providers, schools, higher education institutions, industry organisations and enterprises.(Australian Qualifications Framework (AQF)

<p>Scope of Practice</p>	<p>A Scope of Practice document outlines the boundaries within which a health professional is permitted to work, when dealing with, treating, advising and referring clients. Working within these boundaries ensures the reliability and currency of the professional’s licence, and breaching these boundaries usually results in legal action which could see the professional’s licence to practice revoked. In simple terms, it identifies what the health professional can and cannot do.</p>
<p>Specific nutritional advice relating to health</p>	<p>Refers to the advice from a health professional such as an NRN, nutritionist or dietitian that is directly addressing the specific health status and needs of the client at hand. This could include general information about their condition and the impact of their lifestyle , personalised meal plans and other dietary advice.</p>
<p>Unqualified nutritional advice</p>	<p>Advice given by an individual who does not hold the adequate training or qualifications to be able to comment on, or give advice to, a client or individual regarding their nutritional needs. It may also refer to advice given outside a professional’s scope of practice, whereby they may be qualified to give basic nutrition advice to a healthy client but not qualified to assist someone with a chronic disease.</p>
<p>Vocational Education and Training (VET)</p>	<p>VET refers to a structured sequence of training developed to meet training needs that are not addressed by existing training packages: a course accredited by the national VET regulator or by a delegated body of the national VET regulator, and a course that has been assessed by ASQA as compliant with the Standards for VET Accredited Courses 2012 and the Australian Qualifications Framework (AQF).</p>

REFERENCES:

- Australian Qualifications Framework (AQF). (2013). 2nd ed. Australian Qualifications Framework Council, pp.12, 15, 36, 37.
- Australian Institute of Sport (2021). AIS Sports Supplement Framework – Isolated Protein Supplements. Retrieved from: https://www.ais.gov.au/__data/assets/pdf_file/0003/1000488/Sport-supplement-fact-sheets-Isolated-protein-supplement-v3.pdf [Accessed 09 Feb 2022]
- Better Health. (2018). General practitioner services. [online] Available <https://www.betterhealth.vic.gov.au/health/serviceprofiles/general-practitioner-services> [Accessed 29 May 2018].
- Dietitians Association of Australia (DAA). (2018). Why Choose an Accredited Practising Dietitian? – Dietitians Association of Australia. [online] Available at: <https://daa.asn.au/what-dietitians-do/choosing-your-nutrition-expert/> [Accessed 29 May 2018].
- Eat For Health. (2015). About the Australian Dietary Guidelines. Retrieved from <https://www.eatforhealth.gov.au/guidelines/australian-guide-healthy-eating> [Accessed 1 June 2018].
- Crinnion, W. (2010). Organic Foods Contain Higher Levels of Certain Nutrients, Lower Levels of Pesticides, and May Provide Health Benefits for the Consumer. *Alternative Medicine Review*, 15(1), 4-12. Retrieved from <https://altmedrev.com/wp-content/uploads/2019/02/v15-1-4.pdf>
- Fitness Australia. (2017). Nutrition Advice within Scope of Practice for AusREPs[PDF]. Retrieved from https://ausactive.org.au/wp-content/uploads/2021/11/Nutrition_Advice_within_SoP_for_AusREPs_F.pdf
- Industry Commission 1995, Charitable Organisations in Australia, Report No.45, AGPS, Melbourne p. 181.
- National Health and Medical Research Council (NHMRC). (2017). Nutrient Reference Values: Nutrients. Retrieved from <https://www.nrv.gov.au/nutrients> [Accessed 10 June 2018].
- Palupi, E., Jayanegara, A., Ploeger, A., & Kahl, J. (2012). Comparison of nutritional quality between conventional and organic dairy products: a meta-analysis. *Journal Of The Science Of Food And Agriculture*, 92(14), 2774-2781. doi: 10.1002/jsfa.5639
- Paul, D. & Elder, D. (2006). *The Miniature Guide to Critical Thinking Concepts and Tools* [Ebook] (4th ed., pp. 4, 12, 15, 21). Foundation for Critical Thinking. Retrieved from https://www.criticalthinking.org/files/Concepts_Tools.pdf [Accessed 2 June 2018].
- World Health Organisation (WHO). (1997). WHO I Jakarta Declaration on Leading Health Promotion into the 21st Century. [online] Available at: https://apps.who.int/iris/bitstream/handle/10665/63698/WHO_HPR_HEP_4ICHP_BR_97.4_eng.pdf?sequence=1&isAllowed=y [Accessed 7 June 2018].
- Dietitians Association of Australia (DAA). (2018). Smart Eating Facts: I don't eat a lot of fruit and vegetables, should I take a supplement instead? Retrieved from <https://daa.asn.au/smart-eating-for-you/smart-eating-fast-facts/healthy-eating/i-dont-eat-a-lot-of-fruit-and-vegetables-should-i-take-a-supplement-instead/> [Accessed 11 June 2018].
- Sports Dietitians Australia (SDA). (2018). Careers in Sports Nutrition - Sports Dietitians Australia (SDA). [online] Available at: <https://www.sportsdietitians.com.au/member-hub/careers-in-sports-nutrition/> [Accessed 29 May 2018].

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