

Draft Code of Ethics

PURPOSE

The Code of Ethics guides ethical dietetic practice for dietitians registered with the College of Dietitians of Ontario. It defines values, principles and expectations applicable across all contexts and decision-making levels. It articulates the ethical standards for dietitians, dietetic practicum students and applicants to the college and is used to help clients, colleagues, and the public understand ethical commitments.

ETHICAL PRINCIPLES

The College has adopted a value-based Code of Ethics, which applies healthcare principles to guide evidence-informed¹ and cultural safety² in dietetic practice. These principles align with professional values like cultural humility³, integrity, responsibility, excellence, and trustworthiness. Key principles include:

- **Respect for autonomy:** Acknowledges the decision-making rights of individuals and ensures client⁴-informed consent.
- **Beneficence (doing good):** Promoting population/public health, equity, and accountability.
- **Non-maleficence (not harming):** Emphasizes harm reduction.
- **Respect for persons/justice:** Advocates for fair treatment and just and equitable distribution of resources and services to benefit society.

USING THE CODE OF ETHICS

The Code of Ethics aligns with other College standards, legislation, policies, and guidelines. It forms an ethical framework for dietetic practice, supporting informed decisions, upholding care and professionalism and building trust in dietitians. Ethical expectations are organized into responsibilities to the client, the public, the individual practitioner (self), and the profession.

¹ Evidence-informed practice brings together the best available research evidence and the dietitian's experiential knowledge, along with the client's preferences, context, and available resources in the decision-making process (Integrated Competencies for Dietetic Education and Practice (ICDEP), 2020)

² Cultural safety is an outcome based on respectful engagement that recognizes and strives to address power imbalances inherent in the healthcare system. It results in an environment free of racism and discrimination, where people feel safe receiving health care (ICDEP, 2020).

³ Cultural humility is a process of self-reflection to understand personal and systemic biases and to develop and maintain respectful processes and relationships based on mutual trust. Cultural humility involves humbly acknowledging oneself as a learner when it comes to understanding another's experience." (First Nations Health Authority (n.d.)).

⁴Client is defined as the recipient of dietetic service regardless of setting (e.g., an individual, population, employee, business, employer, or agency etc.) A client-centred approach emphasizes respect for the individual and focuses on the therapeutic or counselling relationship between the dietitian and the client.

A registered dietitian demonstrates this expectation when making ethical choices by ensuring:

1. RESPONSIBILITY TO CLIENTS

- a. Acknowledge, respect and uphold the client's choices and rights for informed consent, research and personal health information.
- b. Treat each question and comment uniquely, avoiding assumptions about backgrounds or beliefs. Seek clarification and respond empathetically to create a safe and supportive environment.
- c. Commit to acknowledge and honour each client's inherent worth, value and cultural beliefs without discrimination, respecting their ways of knowing⁵.
- d. Consider clients' specific needs, wants and goals to provide client-centred services. Be open to client input, respect decisions, accommodate choices and document the treatment accordingly.
- e. Bill clients accurately in a manner that reflects the services that were delivered and maintain financial records whenever billing occurs in dietetic practice.
- f. Uphold professional boundaries and abstain from personal relationships with clients, including sexual relationships and conduct that could be perceived as sexual.
- g. Create an inclusive environment by actively including diverse individuals in decision-making, addressing power imbalances and recognizing the whole person beyond labels or roles.
- h. Implement measures to protect personal health information, ensuring confidentiality and privacy according to current legislation, including artificial intelligence, social media, and virtual care.
- i. Act caringly, respect client dignity, and treat people⁶ with empathy and compassion. Strive to create a welcoming, trusting, respectful and safe environment.
- j. Offer trauma-informed, culturally sensitive, anti-oppressive care by understanding and respecting cultural beliefs, addressing trauma, facilitating healing, and preventing re-traumatization.
- k. Contribute knowledge, skills, judgement, and a professional attitude focused on client welfare to promote safe, client-centred dietetic practices.
- l. Provide equitable care to all clients regardless of personal attributes such as race, ethnicity, gender identity and gender expression⁷, sexual orientation, body size/weight, age, religion, or socioeconomic status.
- m. Collaborate respectfully with colleagues, clients, caregivers, and relevant partners (including spiritual leaders and elders) to provide care that meets specific client needs.

⁵ Cultural ways of knowing refers to how “different cultures and communities acquire, interpret, and apply knowledge. It recognizes that knowledge is not universally acquired or understood in the same way across all cultures, and it emphasizes the importance of respecting and valuing diverse ways of knowing”.

⁶ “Peoples” means a distinct group of persons who are linked by a common identity, culture, history, and collective interests.

⁷ The Ontario Human Rights Code (OHRC), a provincial legislation in Ontario, Canada, provides legal protections against discrimination and harassment based on certain grounds. It sets out the rights and responsibilities related to human rights in various areas of public life, including employment, housing, goods and services, and education.

- n. When utilizing artificial intelligence⁸ (AI) tools like Chatbots and virtual assistants⁹, ensure they are consistent with equity, diversity and inclusion principles, serving all clients impartially, free from bias based on attributes such as sex, gender, or race.
- j. Practise using an evidence-informed approach to meet a client's needs and combine evidence with a client's preferences and traditions for client-centred dietetic services.
 - i. Optimize food and nutrition decisions by considering benefits and risks while prioritizing each client's unique needs and values, making their requirements the primary focus.
 - ii. acknowledge the limitations of evidence-informed practice, including that research evidence is only one type and often reflects Western knowledge and methodologies. Consider all relevant contexts, traditions, and knowledge.
 - iii. Recognize that clients may approach their health and wellness, food and nutrition in various ways. Be aware of personal, social, economic and environmental factors determining individual and population health¹⁰. Dietitians may need to learn and unlearn to honour and respect client knowledge, cultural and Indigenous ways of knowing¹¹ in client practices and be mindful of the uniqueness and complexity of clients' experiences and realities.

2. RESPONSIBILITY TO THE PUBLIC

- a. Demonstrate professionalism, constructive dialogue, integrity, and civility in all communications, including virtual care and on social media.
- b. Act transparently and ethically in all professional and business dealings, including concerning fees, advertising, and managing conflicts of interest.
 - a. Transparently, publicly, and comprehensively disclose any financial or material relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the advertising.
 - b. Uphold ethical integrity by avoiding conflicts of interest¹². Identify circumstances that could result in a conflict of interests, particularly those involving financial,

⁸ Artificial Intelligence (AI) tools are software applications or systems that leverage and generate various artificial intelligence techniques to perform specific tasks or functions. These tools are designed to mimic human cognitive functions such as learning, problem-solving, reasoning, and decision-making, often in an automated or semi-automated manner.

⁹ AI-powered chatbots and virtual assistants use natural language processing (NLP) to engage in text or voice-based conversations with users, answer questions, and provide assistance.

¹⁰ The main determinants of health include income and social status, employment and working conditions, education and literacy, childhood experiences, physical environments, social supports and coping skills, healthy behaviours, access to health services, biology and genetic endowment, gender, culture or race/racism (Government of Canada, 2022).

¹¹ Preferred by many Indigenous scholars, recognizing Indigenous rights, reconciliation and the importance of addressing historical injustices and working toward a more equitable future for Indigenous peoples. Cultural or Indigenous ways of knowing refers to how cultures develop diverse worldviews over time. There is no single way of "knowing," and different cultures may approach knowledge in different ways.

¹² A conflict of interest is defined as a situation in which the existence of secondary interests or obligations risks compromising (or appearing to compromise) an individual's primary obligation to make decisions in the public's interest and on the basis of the best available evidence." (Rodwin M. A. (2018). Attempts to redefine conflicts of interest. *Accountability in research*, 25(2), 67–78. <https://doi.org/10.1080/08989621.2017.1405728>).

contractual, or material relationships with commercial entities that have an interest in the outcomes of dietetic practice. These relationships represent a high risk for influencing or undermining the dietitian's primary obligation to exercise professional judgment on a patient's or the public's behalf. Conflicts of interest should be prevented wherever possible (i.e., by eschewing gifts or payments from interested third parties). If not possible, conflicts of interest should be decisively managed publicly and comprehensively disclosed.

- c. Act in a trustworthy manner at all times.
- d. Be aware of potential harm when practising dietetics and identify risk characteristics, including the type, likelihood, frequency, impact, duration, and whether they are perceived as rational or irrational¹³.
 - a. Determine the best way to mitigate harm in the situation, take appropriate actions and apply protective factors, such as ongoing education and training to enhance cultural competence, safety, and humility, including a grasp of equity, diversity, inclusion and belonging principles.
 - b. While taking no action can be a valid risk response, avoiding or ignoring risks can lead to harm. Effective protective measures may involve communication and collaboration with interprofessional care teams, organizations, regulatory colleges, professional associations, or other system partners.
- k. Approach technology, including AI tools, to uphold human autonomy, ensuring individuals retain decision-making authority, especially regarding person-centred outcomes. When using AI in healthcare, integrate it responsibly and ethically, improving dietetic services with professionalism and compassion.
- l. Complete and organize record keeping for easy access, promote collaboration with other healthcare providers, adhere to legal requirements, and safeguard client confidentiality.
- e. Comply with reporting duties by promptly reporting inappropriate behaviour or treatment, including self-reporting as required by law¹⁴
- f. Provide optimal care to reduce health disparities, protect human rights, and promote fairness and equity. Eliminate barriers to culturally safe care for equity-deserving¹⁵ groups, contribute to improving access to dietetic care when possible, and contribute to addressing and preventing systemic racism and discrimination in healthcare.
- g. Operate efficiently within the healthcare system while demonstrating responsible resource management.
- h. Regularly evaluate the quality and effectiveness of services.

¹³ refers to whether the perceived risk or harm is based on logical, evidence-based reasoning or if it is driven by emotional, unfounded, or irrational beliefs and fears. When assessing potential harm in dietetics, it's important to consider whether the concerns are grounded in sound reasoning and evidence, or if they are based on irrational or emotional reactions that may not be supported by evidence.

¹⁴ Mandatory reports are legally mandated, necessitating submission to the designated authority for specified reasons.

¹⁵ Equity-deserving groups" refer to communities or individuals who have historically experienced disadvantages, discrimination, or inequities in society. These groups may include but are not limited to racial and ethnic minorities, 2SLGBTQIA+ individuals, people with disabilities, indigenous populations, and other marginalized communities. The term emphasizes the need for equitable treatment and opportunities to address historical and systemic disparities.

3. RESPONSIBILITY TO SELF AND THE PROFESSION

- a. Be accountable for one's actions when practising dietetics. Be aware of one's power, position and privilege. Avoid exploiting power imbalances. Ensure that any public platform represents independent expertise and is exercised in the interest of public health.
- b. Engage in reflective practice, identify learning needs and participate in continuing education, ongoing training, and staying updated on best practices, including AI ethics and technology change for continued competence, quality assurance and quality improvement, professional growth and currency. Support and foster learning together with colleagues and students.
- c. Maintain awareness of contexts when interacting with individuals and technology to uphold a compassionate approach in professional conduct.
- d. Assume responsibility for your physical and mental well-being and avoid practising dietetics when your capacity to deliver appropriate and competent services is compromised.
- e. Provide accurate and truthful information in all communications. Avoid conveying falsehoods, fraudulent content, deceptive messages, misleading information, disparaging remarks, hateful content or unfair statements or claims.
- f. Ensure decision-making remains independent of third-party interests, accountable to clients, and client-focused (i.e., putting the client's interests first) to foster trust and credibility.
- g. Be reflexive and aware of personal biases and work to mitigate them in interactions with people, including clients and colleagues, to promote equity and inclusivity.
- h. Practise within the limits of individual competence and scope of practice. Know when to refer and collaborate with an inter-professional team to support collaborative care, communication, and respect for colleagues.
- i. Maintain independence and commit to continuing learning to support a dietetic practice that is sound and grounded in the best available evidence and client-centred care., which is essential to exercise professional judgment.
- j. Refrain from verbal/physical/emotional/sexual harassment.
- k. Be collegial, understand how to work effectively with others and manage interpersonal and collaborative relations.
Refrain from harassing, abusing, or discriminating against others, such as colleagues, employees, or students.

For questions, please feel free to contact the College's Practice Advisory Service:
practiceadvisor@collegeofdietitians.org 416-598-1725 / 1-800-668-4990, ext. 397.

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