

CNH8 Provide Nutritional Therapy to clients

OVERVIEW

This standard is about providing Nutritional Therapy to clients. Nutritional Therapy Practitioners work in preventive medicine, the optimization of physical and mental health, and in the treatment of chronic diseases, often with complex multiple causes. Nutritional Therapy encompasses personalized dietary therapy and nutraceutical prescription, and life style advice within a functional medicine framework. The scope of practice for Nutritional Therapy excludes artificial (parenteral/enteral) feeding and dietary management of acute life threatening states, e.g. intestinal or renal failure, and injury trauma. Users of this standard will need to ensure that practice reflects up to date information and policies. Version No 1

KNOWLEDGE AND UNDERSTANDING

You will need to know and understand:

- 1.the historical development of the therapy and the profession
- 2.the concepts underpinning functional systems biology/medicine, and patient centred approaches
- 3.the concept of Nutritional Therapy as a process driven modality
- 4.the concepts underpinning CAM, and integrative and orthodox medicine
- 5.roles that evidence-based and traditional research play in informing clinical decision-making
- 6.how to use questionnaires and diaries to optimise gathering of information
- 7.methods for obtaining and recording anthropometric measurements
- 8.methods for conducting and recording observations of health status
- 9.how to select, when appropriate, biochemical, nutritional and functional tests
- 10.how to use support materials, resources and information to increase compliance
- 11.how to communicate with other health professionals to provide a client-centred integrated approach
- 12.how to use the client's story as a key tool for integrating diagnosis, signs and symptoms, and evidence of clinical imbalances into a comprehensive approach to improve both the patient's environmental inputs and physiological function
- 13.how to apply a functional systems biology/medicine, and patient centred approach
- 14.how to use prognosis to rationalize strategies for prioritisation, and timeline planning
- 15.how to identify situations in which it may be appropriate to delay implementing all or part of a treatment plan
- 16.ways in which individual safety may be compromised by inappropriate treatment and how to minimise such risks

- 17.how to interpret and evaluate data from observations and laboratory tests
- 18.how to use diverse sources of information to provide a personalised plan
- 19.how to synthesize new information and modify the treatment plan over successive consultations
- 20.issues in translating government guidelines, epidemiological, and other research findings to the construction of individualized interventions
- 21.models of reflection and how these are applied to practice
- 22.strategies for managing potential dissonance between expected and actual treatment outcomes for self and client
- 23.the relationship the client has with food, food groups and dietary models
- 24.how different cultures describe effects of food on health
- 25.how to conduct quantitative and qualitative analyses of food intake
- 26.how to balance quality, quantity, variety and therapeutic effect to achieve negotiated goals, redress deficiency, modulate/optimize functional status or for palliation
- 27.uses of transitional, alternative and functional foods, recipes and menu plans to increase compliance
- 28.how to a construct ethical and environmentally sensitive dietary advice
- 29.how to identify potential food – drug and nutraceutical interactions
- 30.risks - benefits of foods or dietary models, historical and current, used to modulate antecedents, triggers and mediators
- 31.the approach of orthodox dietetics in prevention and treatment, including enteral and parenteral nutrition, to facilitate collaboration and identify professional boundaries
- 32.the nature and extent of changes to performance or symptoms expected
- 33.how to distinguish perceived negative effects that may be experienced by individuals from other causes of change
- 34.how changes are explained by nutritional therapy principles
- 35.how to enable individuals to recognise progress
- 36.the purpose of supporting the individual to consider the implications of any changes which are made to the treatment
- 37.the use of audit to monitor all aspects of a programme
- 38.the sources, classification, biochemical structures and related functions, interactions of and therapeutic considerations of macronutrients, micronutrients, secondary plant metabolites and other non-nutritive substances
- 39.factors affecting individual's requirements: bioavailability, absorption, transport, metabolism and excretion, endogenous and exogenous xenobiotics, impact of genetics and disease
- 40.the integration, coordination, and regulation of metabolic pathways by hormones and bio-molecules, nutrients and nutraceuticals
- 41.interaction of nutrients, non-nutritive substances and nutraceuticals with the human genome including epigenetic effects
- 42.traditional and novel uses of nutrients and non-nutritive substances
- 43.how requirements and reference intakes through the life stages are determined
- 44.the chemical composition of food and its effects on health and disease
- 45.use of food composition tables and nutritional databases
- 46.effects of food adulterants and contaminants on health
- 47.effects of production, processing and preparation on food quality, health and the environment
- 48.nutrient, phytonutrient content of foods and their effects on bioavailability
- 49.the diversity of adverse reactions to foods and functional foods
- 50.how regulations relating to labelling and health claims impact on practice
- 51.the functioning and web-like interaction between tissues and organs at the, cellular and systemic levels

- 52.the core clinical imbalances that underlie various disease conditions
- 53.the clinical signs and symptoms generated by the body's response to stress, poor nutrition, insult or injury through exposure to endogenous and exogenous toxins, allergens, infectious agents, parasites, other environmental factors, genetic predisposition, emotional and psychosocial factors
- 54.common biomedical terminology used in pathology
- 55.the aetiology and pathology of common diseases and their clinical features
- 56.the impact of microbiota on health
- 57.how to ascertain the sensitivity, specificity and validity of diagnostic tests
- 58.selection, use and evaluation of tests of biochemistry, pathology, microbiology genetic information, and functionality in diagnosis and monitoring
- 59.differential diagnoses of common conditions and diseases
- 60.boundaries to practice including:
 - 1.which conditions should be referred (the red flag list)
 - 2.which signs and symptoms, and test results warrant further investigation
 - 3.high-penetrance single-gene disorders

PERFORMANCE CRITERIA

You must be able to do the following:

- 1.conduct a nutritional and overall health assessment, and plan the therapy
- 2.ensure that the environment meets the client's needs
- 3.ensure that any equipment and materials are ready for use
- 4.provide clear and accurate advice to the client in relation to nutritional therapy
- 5.select, implement and interpret appropriate assessments and tests for the client and to inform decision-making
- 6.ensure that when referring to or collaborating with other healthcare providers communication is accurate and supports the needs of the client
- 7.implement nutritional therapy safely and in accordance with professional codes of practice, legal and organisational requirements
- 8.make appropriate adjustments to the nutritional therapy to meet any changing needs
- 9.check the client's well-being throughout and give reassurance where needed
- 10.educate the client to implement nutritional therapy, and any relevant aftercare and self-care
- 11.critically evaluate the outcomes of the nutritional therapy programme to inform future plans and actions
- 12.critically appraise areas for self-development within the context of continuing professional development planning

ADDITIONAL INFORMATION

This National Occupational Standard was developed by Skills for Health. This standard links with the following dimension within the NHS Knowledge and Skills Framework (October 2004): Dimension: HWB7 Interventions and treatments. This standard has replaced CH NT1 and CH NT2. Related Functions: Principles of Good Practice CNH1 Explore and establish the client's needs for complementary and natural healthcare CNH2 Develop and agree plans for complementary and natural healthcare with clients