STATE OF NEBRASKA

DEPARTMENT OF HEALTH

KAY A. ORR
GOVERNOR

GREGG F. WRIGHT, M.D., M.ED.
DIRECTOR

MEMORANDUM

TO: Senator Don Wesely
Chairman, Health & Human Services Committee

FROM: Gregg F. Wright, M.D., M.Ed.
Director of Health

DATE: March 16, 1987

SUBJECT: Recommendations Regarding Credentialing of Dietitians and Nutritionists

The current proposal of the dietitians and nutritionists is significantly different from the proposal that they submitted for review in 1985. In 1985, the dietitians and nutritionists asked for licensure for all persons who would provide nutrition services to the public. The legislative version of this proposal submitted by the applicants was LB 243 in the 1986 session. This bill was not passed by the Legislature.

In 1986 the applicants submitted a new proposal for LB 407 review which asked for certification for all of those who meet specific standards outlined in the proposal, and registration for all other practitioners. This is the proposal that is currently under review.

RECOMMENDATION

The technical committee recommended against credentialing dietitians and nutritionists at this time. The Board of Health concurred with this recommendation. I also concur that a compelling case has not been made for a state credentialling of this group of professionals, although if any additional protection were desired, I would recommend registration alone.

DISCUSSION

I agree with the technical committee and the Board of Health that there is harm to the public inherent in the current practice situation of dietetics and nutrition. Unscrupulous and unqualified practitioners can adversely affect the health and welfare of those citizens who are poorly informed about matters pertaining to diet and nutrition. Such persons stand to benefit from the assurance that those who provide dietetic and nutrition services in Nebraska are in one fashion or another regulated by the state of Nebraska.

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AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER

The major protection for the public currently is the dictum, "Let the buyer beware." At the current time I recommend that educational approaches be used which will reinforce this advice. When the public is getting nutritional advice, it is important that they realize that many claims are made which cannot be supported, and that some dietary advice may be dangerous. It does not appear to me that a system of certification and registration would eliminate the need for consumer protection, or would provide protection that would warrant the costs.

The public would potentially benefit by being provided with the means of making an informed choice as regards dietetic and nutrition practitioners. A system of registration for practitioners would provide the public with the means of making an informed choice. This must be balanced against the risks that registration alone would be taken by the public to confer some state acceptance on the practitioner. "Well, they are registered with the state, they must know what they are talking about."

A comparison with professional counseling is appropriate. There, a system of registration and certification was recommended. The major difference between that situation and that for those giving nutritional advice is the vulnerability of patients seeking mental health counseling, and the increased need for the protection of atleast a basic code of ethics. It can be said that some seeking nutritional counseling are just as vulnerable, but in my mind the difference is sufficient to warrant a distinction. In addition, to be effective, a system of registration must include both a required disclosure of training and methods, and a basic code of ethics that would define when such registration might be removed by the state. It is more difficult to define such a code for nutritional advice than for the practice of counseling.

Alternative modes of regulating this occupation such as certification are inappropriate because they are either too restrictive or not cost-effective. The title protection provision in certification would unnecessarily restrict those nutritionists who have sound academic credentials but who have not had the opportunity to satisfy the internship requirement which would be a prerequisite for certification under the terms of the current legislative version of the proposal. It is my understanding that admission to internship programs in this field is a highly selective process, and that only a relatively small percentage of students in dietetics and nutrition programs have the opportunity to become interns. I have seen no evidence to indicate that the completion of an internship program is necessary in order to become qualified to provide dietetic and nutrition services to the public. If this provision were stricken from the current proposal, certification would be a more attractive option for the credentialing of this occupation.

However, the applicant group already has the benefit of private certification through the American Dietetic Association. This organization is well-known and respected amongst those who employ the services of dietitians and nutritionists. The creation of a system of state certification would not provide the public with a greater degree of protection than is already provided by this system of private certification.

In conclusion, it is my judgment that no credentialling is warranted at this time, and in this judgment I am in agreement with both the technical review and the Board of Health. If an additional level of protection is desired, registration alone would provide the public with a means of making an informed choice and yet would neither duplicate currently existing private regulatory programs, nor place unnecessary restrictions on practitioners.