

## President's Message

We could define our priorities as a profession in three words: quality, quality and quality. This definition is a key feature of the initiatives that are being put in place to enhance the dietetic profession and safeguard the public.

Congratulations to the Austrian Association for the achievement of a National Register for Dietitians. This is so important not only for the recognition of dietitians as autonomous healthcare professionals, but also such a register reassures patients that their dietitian has reached a significant level of competence.

Many dietitians have found the PEN initiative promoted by the British Dietetic Association to be indispensable for evidence-based practice and another aspect of a quality dietetic service. Although the PEN searchable database is held by Dietitians Canada, it is truly an international initiative where dietitians all over the world make contributions.

Earlier this month, Presidents and Chairs of National Associations met with some of the EFAD team to talk and share information about the EFAD Strategic Plan and their own strategic initiatives. It was a thoughtful and insightful meeting that recognised how much brilliant work was being undertaken in our member countries. (My report is on page 7.)



The EFAD Executive Committee (shown here) met directly after the Presidents' meeting and focussed on delivering our own Strategic Plan to take forward a Federation dedicated to quality, safety and better health through nutrition.

Anne de Looy



## **Austria**

# **Compulsory Registration of Dietitians To Become Law**

### Verband der Diaetologen Österreichs

From 1 January next year, registration for members of the medical health professions (including dietitians) will at last become compulsory.

#### What does this law mean for dietitians in Austria?

Graduate dietitians who wish to pursue their profession in Austria will be legally required to have their names accepted onto the Health Care Register. Registration is a prerequisite for professional practice!

In addition to registering the members of the profession, the Health Care Register will also provides further measures. In particular, a Registrar's Advisory Board has been set up at the Federal Ministry of Health. This Board consists of representatives from various ministries, institutions, associations, etc and is responsible for tasks such as consultation and making recommendations on fundamental questions of quality assurance in the profession as well as the management of the register. It will also make recommendation on the further development of the Registry, in particular the acceptance of other health professions.

The establishment of the register for dietitians (and others) is a legal commitment to quality assurance and patient safety. There will be more transparency for patients and service providers. It will then be possible to compile and supply data for the planning and management of health care nation-wide.

#### **Further Reading**

www.ots.at/presseaussendung/OTS\_20160708\_OTS0002/mtd-austria-begruesst-gesundheitsberuferegister-gesetz-gbregg www.bmgf.gv.at/home/Gesundheit/Berufe/Gesundheitsberuferegister/www.ris.bka.gv.at/Dokumente/BgblAuth/BGBLA\_2016\_I\_87/BGBLA\_2016\_I\_87.pdf

Andrea Hofbauer, President Austrian Association of Dietitians

Trudy Giesinger, Delegate Austrian Association of Dietitians





### **Collective to Fight Against Undernutrition**

AFDN and French nutritionist-dietitians support the Collective to Fight Against Undernutrition in France. The Collective was founded at the beginning in 2016 at the initiative of Professor Fontaine, President of the French Corporation of Clinical Nutrition and Metabolism (SFNEP). The Collective aims to inform and to mobilize the population, in order to influence the public authorities and end undernutrition in France. It brings together many actors in civil society: patient organizations, caregivers, relatives and users, healthcare establishments, healthcare professionals, anthropologists, sociologists, philosophers, economists, administrators/managers, religious and political leaders. The members of the Collective have drafted a founding document containing the following 10 objectives:

#### The Collective aims to:

- make undernutrition the great national cause over the next five years
- launch a plan to fight against undernutrition 2018-2021; to control disease progression and address its medical, social and economic consequences
- set a target of: "ZERO" for the number of the elderly who die from undernutrition
- feed properly 100% of hospitalized patients
- weigh 100% of patients who are returning from hospital to home
- require the presence of 1 medical doctor and 10 dietitians for every 600 hospital beds
- allow healthcare professionals to treat 100 % of undernourished patients
- create a national Undernutrition Vigilance Committee in Childcare that will enable better healing outcomes
- train future doctors, medical and nursing staff, healthcare professionals as well as
  patients and their relatives, and caregivers in nutritional risk assessment

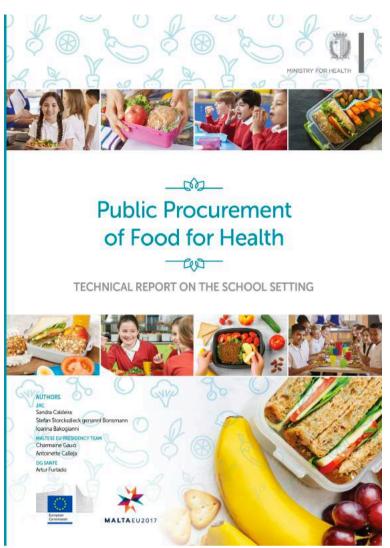
enhance the taste and pleasure of food

AFDN is part of the French Federation of Nutrition and in parallel to the Collective, the Federation and the French Health Authority have announced that they will be drawing up best-practice guidelines on malnutrition & undernutrition. A group of 20 has been set up including medical doctors, a pharmacist, a nurse and two dietitians.



**Isabelle Parmentier, President AFDN** 

Eric Fontaine, President SFNEP



## **Malta**

# Childhood Obesity: Halting the Rise

The European Commission and the Maltese Presidency have published a valuable new resource (shown here) for public procurement authorities in member states.

The report translates school food standards into adequate procurement contract language. While currently focused on the school setting, the technical guidance outlined in this report could potentially pave the way to encourage the publication of a series of other similar publications focusing on other specific food settings, such as work canteens, elderly

homes, hospitals and prisons.

The report identifies the following potential benefits:

- Improved quality of school food service
- Increased availability and accessibility to nutritious and safe food
- Reduction of food insecurity
- Reduction in health inequalities
- Improved dietary habits during childhood
- Reduced incidence of childhood obesity and overweight
- Positive effects on school attendance and performance
- Development of health-minded schools

The full text of the report is available here:

https://ec.europa.eu/jrc/sites/jrcsh/files/public-procurement-food-health-technical-report.pdf

Stefan Storcksdieck Genannt Bonsmann Scientific Project Officer





## **France**

Nutrition & the Human Gut Microbiome: What should dietitians know?

Report from the Gut Microbiota for Health World Summit 2016

As EFAD representatives, we attended the 6<sup>th</sup> Gut Microbiota World Summit, held in Paris in March. The Summit included two 90-minute workshops specifically designed to provide key concepts and tools for dietary clinical management of the patient with food sensitivity: "Nutrition and the Human Gut Microbiome: what should health professionals know for their daily practice". The Workshops were very popular and were also of interest to physicians specialising in the relationship between the glycaemic index (GI) of foods and the management of diabetes. (The GI tells patients whether a food raises blood glucose levels quickly, moderately or slowly. Such information can be useful for patients in the management of their diabetes.)

Chair: Elena Verdú (Canada)

Presenters: Magnus Simren (Sweden), Stine Störsrud (Sweden), Joseph A Murray

(USA)

For more information, follow this link:

www.gutmicrobiotaforhealth.com/en/gut-microbiota-health-world-summit-2017/program/



Ingela Marklinder Lecturer, Food Science Uppsala University, Sweden Amalia Tsagari Dietitian Kat General Hospital, Greece



## **United Kingdom**

### **Practice-Based Evidence in Nutrition**



There are many areas a dietitian is expected to know about; however, maintaining an accurate overview of the evidence-base in all general and specialised areas of dietetic practice can be a challenge.

PEN is a global nutrition and dietetic resource that provides quick online access to the most up-to-date, critically appraised evidence on more than 190 nutrition and dietetic-related topics all in one handy, easily searchable system!

PEN condenses, summarises and presents the entire evidence-base on a particular topic for you, saving you time searching the internet. It then provides you with the practical guidance so you can implement into dietetic practice (called 'Knowledge Translation').

#### **Navigating Each Knowledge Pathway**

The BDA has produced how-to guides that are available for you to download, specifically for:

- Dietetic Students www.bda.uk.com/pen/pen for students
- Practising Dietitians www.bda.uk.com/pen/pen for practitioners
- University Educators www.bda.uk.com/pen/pen for educators

#### What's new in PEN?

The PEN system is constantly being updated as new evidence emerges. You can find a sampling of new and updated content here: www.pennutrition.com/NewKPContent.aspx and a sampling of new tools and resources here www.pennutrition.com/NewToolsResources.aspx.

Additionally, we now have a 'What's New in PEN?' page on the BDA website to keep you up-to-date which is available here www.bda.uk.com/pen/whatsnew

Another really useful feature of PEN is PEN eNews, a bi-monthly e-zine covering the latest nutrition-related news and topical dietetic discussions. Please click here to read the latest issues (and previous ones from 2012) www.pennutrition.com/enews archive.aspx



The Association

Sammie Gill of UK Dietitians Policy Officer, Evidence-Based Practice **British Dietetic Association** 



**EUROPEAN FEDERATION OF** THE ASSOCIATIONS OF DIETITIANS

## **National Dietetic Associations working with EFAD's new Strategic Plan** 2017-2021

The Presidents and Chairs in **EFAD National Associations** have been meeting together annually as a small group for the past seven years. We usually schedule a meeting at a convenient time during the three days of the General Meeting of Delegates and the EFAD conference. Occasionally,



we have a virtual meeting between our yearly meetings in person. This year we decided to meet for a face-to-face meeting in Rotterdam where we will be holding our 2017 Conference this September. The purpose of our meeting was to discuss the implementation of the new EFAD Strategic Plan.

During the meeting we heard from several Presidents about the activities of their associations and in particular how they organised and evaluated their own strategic plans. There was also a good discussion about how associations can use opinion papers and reports to generate greater interest in politicians and others in order to address the poor nutrition of some of our population groups. It was seen that these reports or information appearing in the press had a significant effect on the profile and recognition of dietitians, which often led to other projects and involvement with government. Presidents who were unable to travel to Rotterdam also sent reports of activities in their countries showing how associations were funding research projects or developing policies such as nutrition guidelines.

The meeting allowed us to share information and ideas that we often do not have time to do and everyone agreed that they went out from the meeting with many more ideas and enthusiasm for taking forward initiatives in their own countries. Spending dedicated time together really does provide many benefits and demonstrates that the three objectives of the new Strategic Plan (shown here) will support EFAD and all its members to meet our vision for European dietetics and better health through nutrition.

If you would like to know more

**Objective 1** 

To build European-level cooperation between stakeholders who promote nutrition and dietetics

#### **Objective 2**

To continually enhance the profession by taking an approach that is flexible, innovative and can be experimental

#### **Objective 3**

To develop a system which encourages exchange of knowledge in Europe and leads to the sustainability of EFAD

about our Strategic Plan 2017 - 2021 please contact us at secretariat@efad.org

Anne de Looy, President of EFAD

## Save the Date



# The EFAD Annual Report 2016 will soon be available from the website.

Deadline for submissions for the next Newsletter is 31 May 2017. Send your article to: editor@efad.org

See Editorial Policy and Guidelines for Authors on the next page

Register on our website for our Newsflash service & this quarterly Newsletter.

www.efad.org



www.facebook.com



www.linkedin.com

# **European Dietitians**

#### **Editorial Policy**

The EFAD Editorial Board comprises the Honorary Vice-President, the Secretary General and a Committee or ESDN lead (to be consulted in rotation or as required), with assistance from the non-executive Editor. The Board will decide the content of each Newsletter and their decision is final. Articles should reflect EFAD's core values: fairness, openness, non-discrimination, collaboration and independence. The Editorial Board welcomes suggestions from members for improving and developing the Newsletter. In order to reflect EFAD's mission statement, articles for the Newsletter should always refer to 'dietitians' or 'dietetics' in the text.

#### **Guidelines for Authors**

- Please read previous editions of the Newsletter available at: www.efad.org/everyone/3147/5/0/32
- Your article should be in English and emailed to me, Terry Hyde: editor@efad.org
- Your article should be about 500 words (2,500 characters with spaces), but can be up to 1000 words if it is particularly important.
- Please send your own photographs or ones that are copyright-free or free-to-use for noncommercial purposes.

#### Who is the audience?

This is the first and most important question that any editor or author must answer before they start work. I will edit all articles to meet the needs of a very wide audience: undergraduate students, dietitians, academics, journalists, Ministers of Health and senior figures at WHO European Region. The first language of most of our readers will not be English. Therefore, I will also edit to ensure that the writing is concise, the meaning is clear and the language is free of bias. I will use **plain English, modern English usage** and **open punctuation**.

#### What is plain English?

Some of the principles of plain English are:

- · use short words rather than long words
- write in short sentences rather than long ones
- use the active verb rather than the passive, eg 'I edit the Newsletter" not "The Newsletter is edited by me'
- use lists where possible
- avoid jargon, acronyms and abbreviations

In science and education, the last point is the most difficult to follow. All of our readers will know what EFAD and EU and UN means (and probably WHO), but how many will know what FNAP means? For more information on plain English, go to www.plainenglish.co.uk

#### What is modern English usage?

English is a living language in constant change; in particular it absorbs words from other languages and treats them as its own. New words arrive every day and others drop out of use. Existing words change their meanings or develop extra meanings. A few years ago, the only thing that could be stored in a **cloud** was water vapour, but now.... Spellings and constructions also change. So, in modern English usage the word 'lifelong' is written as one word (no space, no hyphen); similarly with the words 'online' and 'website'. Part of my job is to reflect these changes in usage and spelling etc. For more information on modern English usage, see Burchfield RW (2004) Fowler's Modern English Usage 3rd Ed Re-revised OUP Oxford.

#### What is Open Punctuation?

Open punctuation reduces the number of keystrokes needed to type a document. It does this by removing unnecessary punctuation and capital letters. So:

Ph.D. 
$$\rightarrow$$
 PhD B.Sc.  $\rightarrow$  BSc e.g.  $\rightarrow$  eg Dr.  $\rightarrow$  Dr

..Doctors, Dietitians and Physiotherapists... → ...doctors, dietitians and physiotherapists...