Policy · NUT-POL-001 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 40.1

At a glance

- Nutrition assessment and planning are done by a qualified dietitian or a trained clinician (NUT-REG-001).
- The author's qualification is checked before they write a plan.
- Dietitian input is required for complex cases.
- Staff without the qualification do not write nutrition plans.
- Stop and get help straight away if: a nutrition plan is written by someone not qualified or trained for it.

1. Purpose

To make sure nutrition care is planned by people qualified to do it (40.1).

2. Scope

Applies to	Clinical and support staff in the hospital
Locations	All wards, clinics and departments of the facility
When	Whenever the activity described is carried out
Does not apply to	Activities covered by another document listed in section 15

3. Definitions

Term	Meaning
Clinical lead	The doctor or nurse in charge of the area at the time

4. Background

Nutrition care needs the right skill. A qualified dietitian, or a clinician trained for the task, assesses and plans the diet, so that the plan is safe and effective.

5. Responsibilities

Role	Responsibility	Competence
Lead dietitian	Owns the competence standard and the register	Clinical director
Clinician writing a plan	Confirms qualification and asks for dietitian input when needed	Lead dietitian

6. Materials and equipment

Item	Requirement	Condition
Records and forms named in this document	Current version	Checked before use

7. Safety

- Stop and call for help if a patient is at immediate risk. Do not delay urgent care to complete paperwork.

8. Before you start

- Confirm the forms and equipment named in this document are available and current.

9. Procedure

Step 1. Confirm.

- Confirm the author’s qualification on the register before the plan is written.

Key point: Confirmed.

Step 2. Assess.

- Carry out the nutrition assessment and plan, with dietitian input for complex cases.

Key point: Assessed.

Step 3. Record.

- Record the author and any dietitian review on the plan (NUT-FRM-001).

Key point: Recorded.

10. Decision points

- No decision points in this procedure.

11. Special situations

Situation	Action
Out of hours	Follow the same steps. Use the on-call contact on the wall of the area.

12. Escalation

- Any serious problem goes to the duty clinical lead at once and to the clinical director the same day.

13. Monitoring

Measure	Target	Frequency	Owner	If not met
Plans written by qualified staff	100%	Quarterly	Lead dietitian	Escalate to the clinical director

14. Records

Record	Kept in	Retention
Record named in this document	Patient record or the area file	the period set by the facility’s records policy years

15. Training

- Staff are trained in this document at induction and refreshed each year, with a recorded competency check.

16. Related documents

ID	Title	Use
NUT-REG-001	Nutrition staff competence register	Register

17. Evidence

Reference	Note
E-009	Based on the ESPEN guideline on clinical nutrition and hydration (2019), the WHO Five Keys to Safer Food (2006), and the ASF Hospital and Long-Term Care standards for nutrition care.
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

18. Change history

Version	Date	What changed	Approval
1.0	the date of approval	First version	set Expert Committee approval

E-learning for this document

No e-learning course is linked to this document yet.

Planned course: No e-learning course is linked to this criterion yet. A course is planned to cover it.

References

- Accréditation Sans Frontières (2026). ASF Policy Framework v1.2. (E-006)
- Accréditation Sans Frontières (2026). ASF Expert Committee consensus on Standard 1. (E-009)

Download this document as PDF

Download this document as an editable Word file