

Oncology Role Statement

Developed by members of the Oncology Interest Group

Introduction

Accredited Practising Dietitians (APDs) are recognised professionals with the qualifications and skills to provide expert nutrition and dietary advice. APDs are qualified to advise individuals, groups and organisations on nutrition-related matters.

APDs have university training accredited by Dietitians Australia, undertake ongoing professional development and commit to evidence-based practice. They comply with the [Dietitians Australia Code of Professional Conduct and Statement of Ethical Practice](#) and commit to providing quality service.

APD is the only national credential recognised by the Australian Government, Medicare, the Department of Veterans Affairs, the National Disability Insurance Agency and most private health funds as the quality standard for nutrition and dietetics services in Australia. It is a recognised trademark protected by law.

Purpose of this Role Statement

The purpose of this Role Statement is:

- To define the role an APD may fulfil when working in the area of oncology
- To promote the knowledge and expertise of an APD, broadly and in the area of oncology and beyond [National Competency Standards](#)
- To advocate for dietetic services

Knowledge and skills in this area of practice

Entry level dietetic competencies ensure all APDs can conduct assessments, diagnose nutritional issues, and develop, monitor and evaluate interventions. Within a particular practice area, APD skills and knowledge will range from entry level to highly skilled. Within this continuum APDs can either fully manage the patient, seek support to continue seeing the patient or refer the patient on.

The following is a list of skills and knowledge required to work in the oncology area:

Knowledge

- Understands the impact the cancer diagnosis and treatment have on ingestion, digestion, absorption, and utilisation of nutrients.
- Aware of the expected type and timing of nutrition-related side effects (both acute and late effects) from standard treatment modalities for cancer diagnoses.
- Best-practice management for nutrition-related side effects from cancer and cancer treatments.

- Evidence-based pathways of care for patients with cancer based on diagnosis and treatment type, including recognition of appropriate time points for nutrition screening, assessment, intervention, and monitoring.
- Aware of appropriate goals for nutrition intervention based on the treatment plan (for example, curative vs palliative intent, inpatient vs outpatient) and the individual's position in the cancer journey (for example, newly diagnosed, active treatment, survivorship, end-of-life).
- Recognises and addresses nutritional considerations to reduce the impact of late effects and long-term chronic health implications associated with cancer diagnosis, treatment, and associated diet and lifestyle changes.

Skills

- Ability to undertake an appropriate and tailored assessment of an individual, including consideration of disease type and stage, treatment, social situation, physical function and anthropometry, biochemical requirements, psychosocial needs and other relevant clinical assessments.
- Estimation of nutrition requirements (energy, macronutrients, micronutrients and fluid) relevant to the individual's stage of treatment and disease process.
- Ability to provide evidence-based, specific and tailored advice to the individual with cancer and their carer/s, considering the changing physiological and psychosocial needs related to disease state and treatment (chemotherapy/biological therapies, radiation therapy, immunotherapy, stem cell transplantation, surgery) and psychosocial needs.
- Working within the person-centred paradigm, considering the individual's personal needs, choices and goals, relevant to the stage of disease (for example, curative vs palliative intent and transition to end of life care).
- Advanced critical and clinical reasoning skills in oncology nutrition, taking into consideration the complex medical nature of patients undergoing treatment for cancer.

Activities entry level APDs would conduct

- Estimating a patient's nutritional requirements, appropriate to the individual considering cancer type, treatment modality and other relevant clinical considerations.
- Managing nutrition impact symptoms resulting from cancer and its treatment.
- Appropriate care planning, discharge planning and referral to appropriate services or programs (for example, palliative care, survivorship programs and community lifestyle programs).
- Advise on appropriate oral nutrition supplements and how to access this cost effectively in the community.
- Providing education and intervention around nutritional considerations to reduce the impact of late effects and long-term chronic health implications associated with cancer diagnosis, treatment, and associated diet and lifestyle changes, in collaboration with primary care teams.
- Working with foodservice to ensure appropriate dietary provision for inpatients with cancer (for example, food safety considerations in neutropenia, low iodine diets, texture-modified diets).

Activities APDs working at a higher level would conduct

- Complex patient care, particularly those requiring enteral or parenteral nutrition (for example, head and neck cancers, haematological cancers, gastrointestinal cancers, lung cancers, complex surgery) and cancer types with complex needs (for example, neuro-endocrine tumours).
- Care coordination of patients with complex nutrition needs or a high level of dietetic input within a multidisciplinary team.
- Advocacy regarding oncology nutrition prescription and education.
- Advocacy for adequate staffing allocation (ie full-time equivalent/FTE) using evidence-based guidelines.

Practitioners should refer to the [Scope of Practice Decision Tool](#) to determine if a task is within their scope of practice.