

Self Assessment of Professional Competence

Sport and Performance Nutrition Pathway



The competencies expected of the SENr registrant in Sport and Performance Nutrition are summarised* in this document. All potential applicants are required to undertake a self assessment against the competency framework prior to submitting an application.

Task

Complete a self assessment of professional competency rating your level of competence against the assessment framework provided.

Purpose

To ensure that only suitably qualified applicants proceed to apply for formal SENr assessment of competency.

Process

The self assessment framework covers both the underpinning Scientific Knowledge and the Professional Application of knowledge, skills and attitudes expected of the registrant in the sport and performance environment.

The assessment criteria provides a range of 0 – 3, i.e. no knowledge / skill through to specialist knowledge / fully competent under all circumstances. It is expected that registrants will be at a level 2 or above in each of the competency areas (A-G), namely sound fundamental knowledge and competent under most circumstances.

The framework encourages all applicants to identify strengths and weaknesses, and where gaps exist in knowledge or experience undertake appropriate professional development.

NOTE:

If you do not meet all criteria including professional experience and application of skills (and can demonstrate this to be the case) do not submit an application for pre-assessment.

* For a full description of competencies refer to the document 'Competences in Sport and Performance Nutrition'

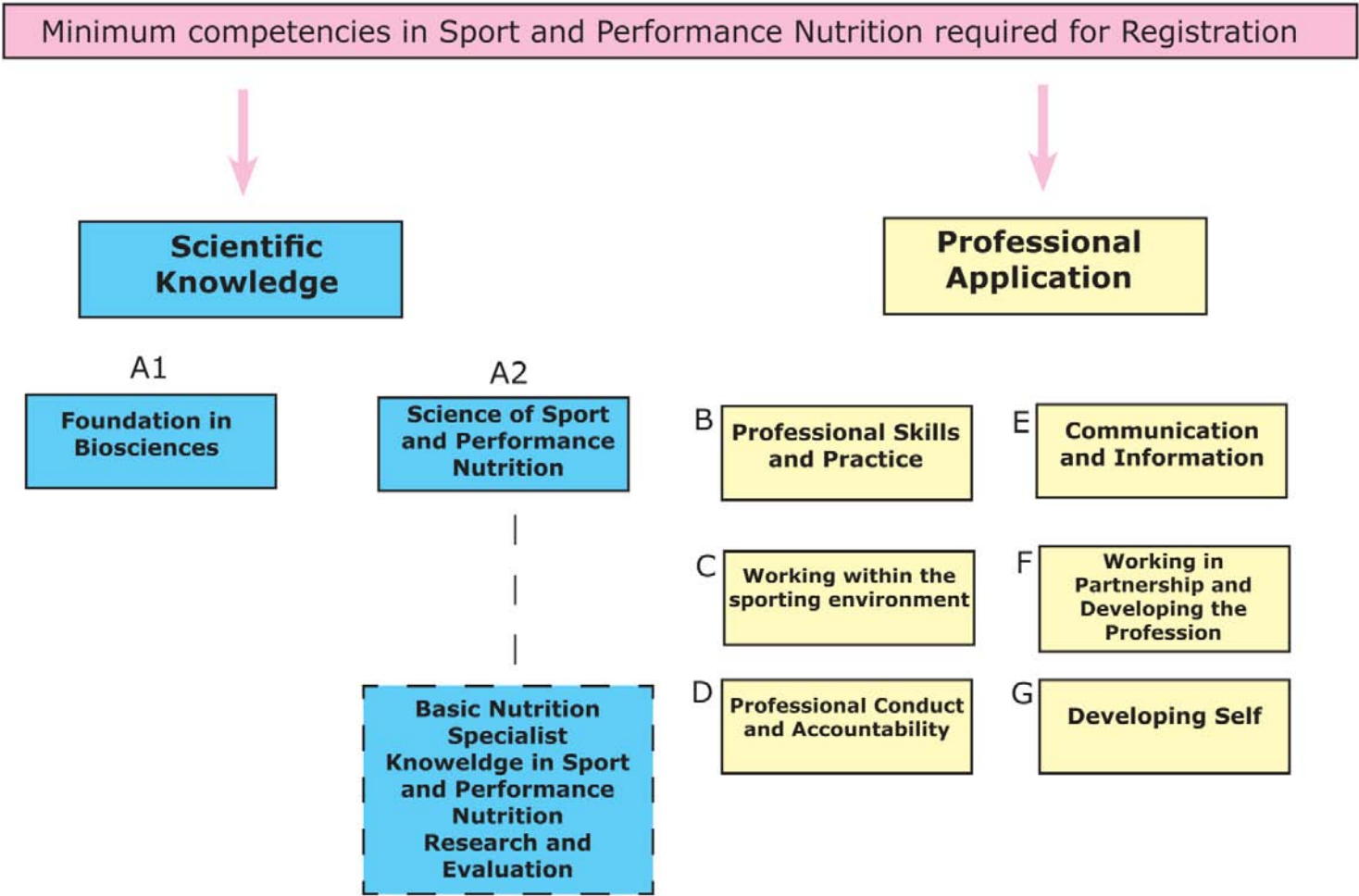


Figure 1. SENr Competency Framework for Sport and Performance Nutrition

SENr COMPETENCY A: SCIENTIFIC KNOWLEDGE	Key to Specialist Knowledge 0= No knowledge 1= Some knowledge 2= Sound fundamental knowledge 3= Specialist knowledge	
Competency	Self Assessment	Evidence / Comments
1. Digestion, absorption and excretion.		
2. Cellular metabolism & biochemical pathways of energy production: ○ Aerobic, anaerobic, intramuscular phosphate.		
3. Human energy transfer systems during exercise: ○ Energy release from fats, carbohydrates, proteins; ○ Lactate production, removal and transfer; ○ Oxygen uptake, kinetics, lag/debt.		
4. Measurement of energy costs of exercise: ○ Basal metabolic rates; ○ Calorimetry / daily energy expenditure.		
5. Cardiovascular and respiratory response and adaptations to exercise: ○ Heart rate, cardiac output, blood pressure; ○ Ventilatory rates, volumes.		
6. Hormones and endocrine systems in exercise.		

<p>7. Musculoskeletal and neuromuscular response to exercise:</p> <ul style="list-style-type: none"> ○ Motor units, fibre types (and preferred substrates); ○ Bone, muscle, tendon and joint; ○ Skeletal muscle structure / function; ○ Mechanics of human movement. 		
<p>8. Anthropometry:</p> <ul style="list-style-type: none"> ○ Anatomy, surface anatomy and anatomical landmarks. 		
<p>9. Principles of training:</p> <ul style="list-style-type: none"> ○ Training prescription and methodology; ○ Periodisation; ○ Peaking, tapering; ○ Long term athlete development; ○ Adaptation, recovery, over-training, de-training. 		
<p>10. Strength and conditioning:</p> <ul style="list-style-type: none"> ○ Anabolic and catabolic processes; ○ Resistance / eccentric training; ○ Affect on muscle, bone, joints, neural & cardiovascular systems. 		
<p>11. Environment and exercise:</p> <ul style="list-style-type: none"> ○ Thermoregulation, circulation and hypothalamic response; ○ Exercise and dietary implications at altitude, in the heat, in the cold, under water, in pollution; ○ Principles of training and adaptations in extreme environments. 		
<p>12. Hydration for exercise:</p> <ul style="list-style-type: none"> ○ Fluid and electrolyte balance; ○ Thermoregulation. 		
<p>13. Substrate utilisation during exercise of varying lengths.</p>		

<p>14. Nutrition for exercise in the general population and sub groups of the population:</p> <ul style="list-style-type: none"> ○ Age: children, youths, elderly; ○ Gender: males / females (e.g. pregnancy, menstrual cycle); ○ Disease (e.g. allergies, diabetes, coeliac disease, metabolic disorders, genetic predisposition); ○ Disability; ○ Overweight/obese, underweight, making weight; ○ Disordered eating; ○ Cultural, ethical or religious considerations (e.g. vegan). 		
<p>15. Nutrition for exercise, training and competition:</p> <ul style="list-style-type: none"> ○ Periodisation of nutrition; ○ Training and competition dietary plans; ○ Training camps; ○ Travel, foreign locations. 		
<p>16. Safety and health promoting properties of nutrients:</p> <ul style="list-style-type: none"> ○ Macronutrients and micronutrients; ○ Anti-nutrients, toxicants, additives, pharmacologically active agents (drugs); ○ Nutrient-nutrient interactions, 'nutri-ceuticals', functional foods, and any other metabolically active constituents of foods. 		

<p>17. Food preparation, handling, management and safety:</p> <ul style="list-style-type: none"> ○ Principles of catering management; ○ Practical and financial constraints on menu planning; ○ Methods of food service; ○ Food and nutritional labelling regulations and legislation; ○ Types of food additives, methods of food preservation and how these alter the nutrient content of food. 		
<p>18. Diet and nutrition for health:</p> <ul style="list-style-type: none"> ○ Constituents of a balanced diet; ○ Recommended daily allowances; ○ Promoting healthy habits. 		
<p>19. Diets and exercise:</p> <ul style="list-style-type: none"> ○ High carbohydrate, fat, protein; ○ Fad diets and implications; ○ Effects of alcohol on performance. 		
<p>20. Ergogenic aids and nutritional supplements (pharmacologically active agents, sports foods, sports drinks and supplements)</p> <ul style="list-style-type: none"> ○ Metabolic effects and efficacy; ○ Health, safety and legal aspects; ○ Anti-doping legislation, guidelines. 		
<p>21. Measurement and estimation of nutritional requirements, dietary reference values and recommended dietary allowances.</p>		
<p>22. Principles of body morphology:</p> <ul style="list-style-type: none"> ○ Ectomorphs, endomorphs, mesomorphs; ○ Sport specific and position specific body composition. 		
<p>23. Principles and methods of measurement and estimation of:</p> <ul style="list-style-type: none"> ○ Energy balance, energy expenditure; ○ Body mass, body composition; ○ Control of body mass and energy balance. 		

<p>24. Fitness assessment:</p> <ul style="list-style-type: none"> ○ Definitions and components; ○ Rationale for performing assessments; ○ Standard tests for aerobic / anaerobic fitness, strength, power, speed, flexibility. 		
<p>25. Monitoring of exercise capacity and training response.</p>		
<p>26. Cognisant of the range of methods used in research that are valid and appropriate to needs and context in sport nutrition:</p> <ul style="list-style-type: none"> ○ Principles and methods of research design; ○ Principles of measurement (including validity, repeatability of measurements); ○ Selection, use and interpretation of design issues (sampling, study size, power); ○ Selection, use and interpretation of appropriate analytical statistical techniques; ○ Methods for monitoring and evaluating the effectiveness of an intervention. 		
<p>27. Continually evaluate relevant research to ensure own practice is evidence based:</p> <ul style="list-style-type: none"> ○ Critical appraisal; ○ Application to practice. 		

SENr COMPETENCY B:**PROFESSIONAL SKILLS AND PRACTICE****Key to specialist knowledge***0= no knowledge**1= some knowledge**2= sound fundamental knowledge**3= specialist knowledge***Key to specialist skills/experience***0= no experience**1= some experience**2= competent under most circumstances**3= fully competent*

Competency	Self Assessment		Evidence / Comments
	Knowledge	Skills / Experience	
1. Determine the status of dietary practices and nutritional requirements from history, interview and investigation			
2. Assess nutritional needs holistically using appropriate methods that are based on research evidence, best practice standards, guidelines and protocols			
3. Interpret nutritional assessment information in relation to goals and preferences and the requirements of the specific sport or exercise regimen			
4. Ability to translate nutrients and energy requirements into foods and menus that are appropriate to the demands of exercise or sport			
5. Plan nutritional interventions and programmes in partnership taking account of goals, preferences, religious and cultural practices or proscriptions			
6. Record the agreed plan in a format that is clear and understandable			
7. Ensure that the nutritional plan is understood			
8. Monitor and evaluate the effectiveness of interventions and programmes and refine these to meet changing needs and goals			
9. Know the limits of own practice and where and when to seek advice and/or refer to another professional			
10. Prioritise personal workload and manage time and resources efficiently			
11. Maintain a safe working environment that conforms to health and safety legislation and organisational policies			
12. Audit practice against best practice standards, guidelines and protocols ♦ Continuously monitor performance and take effective action			


SENr
The Sport and Exercise Nutrition Register

SENr COMPETENCY C: WORKING WITHIN THE SPORTING ENVIRONMENT	Key to Specialist Knowledge 0= No knowledge 1= Some knowledge 2= Sound fundamental knowledge 3= Specialist knowledge		Key to Specialist Skills/Experience 0= No experience 1= Some experience 2= Competent under most circumstances 3= Fully competent
Competency	Self Assessment		Evidence / Comments
	Skills	Exp	
1. Role of the team dietitian / nutritionist: <ul style="list-style-type: none"> ○ Personal responsibilities; ○ Working within a multi-disciplinary team environment. 			
2. Structure support around individual and team requirements: <ul style="list-style-type: none"> ○ In line with training plan and competition schedule; ○ Work effectively with individual athletes and a team of athletes. 			
3. Anti-doping: <ul style="list-style-type: none"> ○ Doping classes and methods; ○ Permitted use of banned drugs; ○ Doping control procedures; ○ Side effects of performance enhancing substances / methods; ○ Sport specific patterns of abuse; ○ Professional conduct in relation to advice on supplementation; 			

<p>4. Travelling athletes / teams:</p> <ul style="list-style-type: none"> ○ Health issues; ○ Combating jet lag; ○ Meal plans, catering and strategies for travelling abroad and across time zones; ○ Dealing with restrictions, geographical variations, adverse weather, and language barriers; ○ Managing expectations, habits and preferences. 			
<p>5. Athlete ambitions, values, beliefs, motivations, psychological concerns and performance pressures:</p> <ul style="list-style-type: none"> ○ Coping with stress, injury, rehabilitation, failure, de-selection, retirement; ○ Performance scrutiny including peers, public and media; ○ Importance of role models and positive norms; ○ Impact of religious, cultural and ethical practices. 			
<p>6. Lifestyles of athletes, their families, coaches, fitness and professional staff who work with athletes.</p>			
<p>7. Sporting culture within a team, discipline, sport or nation:</p> <ul style="list-style-type: none"> ○ Group psychology: team, staff, programme. 			

<p>8. Tailored, appropriate (and in some cases leading edge) dietary advice and support to athletes from a wide variety of sports and circumstances</p> <ul style="list-style-type: none"> ◆ Types of sports: speed, power, strength, strength endurance, endurance, ultra endurance, multi-events, mixed capacity sports, target sports, combative sports ◆ Weight: underweight, overweight, making weight, body shaping, weight bearing, non-weight bearing ◆ Restricted diet: culture, religion, geography, competition structure ◆ Environment: hot, cold, high altitude, pollution ◆ The travelling athlete ◆ The disabled / ill athlete ◆ The team environment: camps, competition, training ◆ Peaking, tapering, heavy training, light training, recovery ◆ Injury and rehabilitation ◆ Supplements and alternatives 			
<p>9. Familiar with a wide variety of sports in terms of rules and regulations, physiological requirements and risk profiles, training and competition practices</p>			
<p>10. Aware of the special needs of disabled athletes</p> <ul style="list-style-type: none"> ◆ Disability classification and relevant competition rules and regulations ◆ Different dietary and energy requirements ◆ Practical issues related to impaired function 			
<p>11. Provide advice to team management in a wide variety of sports on dietary issues</p>			
<p>12. Monitor team environment in terms of food hygiene, including eating and cooking facilities</p>			
<p>13. Maintain adequate personal and team records</p>			
<p>14. Evaluate requirements and instigate dietary practices for a sporting event (e.g. camp, competition, tour)</p> <ul style="list-style-type: none"> ◆ Liase with caterers at training centres and hotels to ensure appropriate foods and drinks are provided at all appropriate times 			
<p>15. Athlete confidentiality and medicolegal aspects</p>			
<p>16. Child protection legislation</p> <ul style="list-style-type: none"> ◆ Sport and professional bodies' interpretation and policies ◆ Home Country variations in legislation and procedures 			
<p>17. Familiar with the relevant policies and procedures of governing bodies, institutes of sport, sport councils and Olympic and Paralympic Associations.</p>			



SENr COMPETENCY D: PROFESSIONAL CONDUCT AND ACCOUNTABILITY	Key to Specialist Knowledge 0= No knowledge 1= Some knowledge 2= Sound fundamental knowledge 3= Specialist knowledge		Key to Specialist Skills/Experience 0= No experience 1= Some experience 2= Competent under most circumstances 3= Fully competent
Competency	Self Assessment		Evidence / Comments
	Skills	Exp	
1. Practise within the framework set out in the SENr Code of Professional Conduct.			
2. Understand the legal and ethical responsibilities of professional practice.			
3. Exercise a professional duty of care to athletes (and / or other clients).			
4. Ensure working practices are safe and that the health and safety of clients and colleagues in the workplace is supported.			
5. Understand professional role and its scope and limits of practice <ul style="list-style-type: none"> ○ Requirements of professional regulatory bodies; ○ Practise within the framework set out in the Statement of Professional Conduct; ○ Limit or cease practice if performance or judgement is affected by physical or mental health; ○ Make ethically sound decisions that are consistent with relevant legislation, organisational policies and current research evidence. 			

6.	Acknowledge equality, diversity and the rights of the individual.			
7.	Adhere to the principles and practice of client confidentiality.			
8.	Obtain informed consent before conducting a procedure or providing a service.			
9.	Maintain appropriately detailed records of client care, prescribed diets and advice issued to support and justify one's actions.			
10.	Exercise personal initiative and sound professional judgement in the resolution of problems.			
11.	Understand the inappropriateness of exploiting relationships with clients for personal gain or gratification.			
12.	Understanding the inappropriateness of professionals promoting and selling supplements in the sporting world, and action which would lead to removal from the register.			

<i>SENr COMPETENCY E: COMMUNICATION AND INFORMATION</i>	<i>Key to Specialist Knowledge</i> 0= No knowledge 1= Some knowledge 2= Sound fundamental knowledge 3= Specialist knowledge		<i>Key to Specialist Skills/Experience</i> 0= No experience 1= Some experience 2= Competent under most circumstances 3= Fully competent
<i>Competency</i>	<i>Self Assessment</i>		<i>Evidence / Comments</i>
	Skills	Exp	
1. Sufficient communication skills (including speaking, listening and writing) to elicit, interpret, integrate, assess and apply relevant information (psycho-social, economic and scientific) in order to individualise safe and sound advice: <ul style="list-style-type: none"> ○ Communicate in English to the standards equivalent to level 7 of the International English Language Testing System [HPC standard of proficiency]. 			
2. Present information clearly and succinctly in oral and written formats tailored to message and audience: <ul style="list-style-type: none"> ○ Modify to address potential barriers such as age, literacy, physical and learning disability; ○ Communicate scientific terms and concepts in lay language. 			

3.	Collate, analyse and interpret published information on behalf of the client.			
4.	Select and prepare appropriate teaching and information materials for diverse audiences.			
5.	Able to negotiate with clients in order to assess, review and evaluate efficacy of, and satisfaction with, service quality.			
6.	Apply appropriate theories of behaviour, behaviour change, counselling and communication, in order to initiate and sustain changes in attitudes and dietary behaviour.			
7.	Gather relevant information from a wide range of sources including electronic data: <ul style="list-style-type: none"> ○ Use statistical and research skills to gather and interpret evidence. ○ 			
8.	Develop resources to support service interventions and client education.			
9.				
10.	Effectively communicate the interpretation of clinical data and proposed interventions: <ul style="list-style-type: none"> ○ Food intake analysis data and dietary plans; ○ Physiological data, including blood and body composition; ○ Impact on performance. 			

<p>11. Keep accurate, legible and up to date records:</p> <ul style="list-style-type: none"> ○ Recognise the need to handle these records and all other clinical information in accordance with applicable legislation, protocols, and guidelines; ○ Understand the need to use only accepted terminology and abbreviations in client records; ○ Understand and work within the Data Protection Act. 			
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<p><i>SENr COMPETENCY F: WORKING IN PARTNERSHIP AND DEVELOPING THE PROFESSION</i></p>	<p><i>Key to Specialist Knowledge</i></p> <p>0= No knowledge 1= Some knowledge 2= Sound fundamental knowledge 3= Specialist knowledge</p>		<p><i>Key to Specialist Skills/Experience</i></p> <p>0= No experience 1= Some experience 2= Competent under most circumstances 3= Fully competent</p>
<p><i>Competency</i></p>	<p><i>Self Assessment</i></p>		<p><i>Evidence / Comments</i></p>
<p>1. Work effectively as part of a multidisciplinary team:</p> <ul style="list-style-type: none"> ○ Work in partnership to plan, implement and review interventions and programmes. 	<p>Skills</p>	<p>Exp</p>	

2.	Recognise own place and contribution within whole sports care profile: <ul style="list-style-type: none"> ○ Lead, support, refer and defer as appropriate. 			
3.	Understand and respond appropriately to the prevailing logistical and financial frameworks and existing team dynamics to ensure effective practitioner contribution.			
4.	Build and sustain professional relationships as both an independent practitioner and collaboratively as a member of a team or within a professional network.			
5.	Appreciate the process and importance of contribution to the: <ul style="list-style-type: none"> ○ Formulation of standards, guidelines, strategy and policy on behalf of clubs, groups, sports organisations, governing bodies, regulatory bodies, and others; ○ Development of the knowledge and practice of others using a variety of teaching and learning methods. 			
6.	Promote the profession of Sport and Performance Nutrition in an informative, engaging and considered manner.			

SENr COMPETENCY G: DEVELOPING SELF	Key to Specialist Knowledge 0= No knowledge 1= Some knowledge 2= Sound fundamental knowledge 3= Specialist knowledge		Key to Specialist Skills/Experience 0= No experience 1= Some experience 2= Competent under most circumstances 3= Fully competent
Competency	Self Assessment		Evidence / Comments
	Skills	Exp	
<p>1. Proactive in, and take responsibility for, developing and improving own competence:</p> <ul style="list-style-type: none"> ○ Career long continuing professional development; ○ Maintain up to date knowledge in the scientific basis of sports and exercise nutrition; ○ Engage in formal events such as scientific conferences, case conferences, workshops, journal clubs and other activities. 			
<p>2. Continually reflect on and evaluate own practice:</p> <ul style="list-style-type: none"> ○ Maintain effective audit trails; ○ Implement quality control, quality assurance and reflective practice procedures; ○ Identify areas for self-development. 			
<p>3. Maintain a personal development portfolio which identifies learning and development needs, plans, actions and outcomes.</p>			

4.	Change practice as needed to take account of new research and developments in the field.			
5.	Review and evaluate interventions and programmes and improve them in the interests of athletes (and other clients).			
6.	Establish and maintain appropriate professional relationships and networks with health and other professionals who can support, advise and mentor.			