

# **CHILD TERMS OF ENGAGEMENT BETWEEN THE REGISTERED NUTRITIONAL THERAPY PRACTITIONER (RNTP) AND THE CLIENT**

## **PART 1**

### **The Nutritional Therapy Descriptor**

Nutritional therapy is the application of nutrition and lifestyle medicine sciences in the promotion of health, peak performance and individual care. Registered Nutritional Therapy Practitioners assess and identify potential nutritional imbalances and understand how these may contribute to an individual's symptoms and health concerns. This approach allows them to work with individuals to address nutritional imbalance and help support the body towards maintaining health.

Nutritional therapy is recognised as a complementary medicine and is relevant for individuals with chronic conditions, as well as those looking for support to enhance their health and wellbeing. Practitioners consider each individual to be unique and recommend personalised nutrition and lifestyle programmes rather than a 'one size fits all' approach. Practitioners never recommend nutritional therapy as a replacement for medical advice and always refer any client with 'red flag' signs or symptoms to their medical professional. They will also frequently work alongside medical professionals and will communicate with other healthcare professionals involved in the client's care to explain any nutritional therapy programme that has been provided.

### **The Registered Nutritional Therapy Practitioner (RNTP) requests that the Client notes the following:**

- The degree of benefit obtainable from nutritional therapy may vary between clients with similar health problems and following a similar nutritional therapy programme.
- Nutrition and lifestyle recommendations will be tailored to support health conditions and/or health concerns identified and agreed between both parties.
- RNTPs are not permitted to diagnose, or claim to treat, medical conditions.
- RNTPs' recommendations are not a substitute for professional medical advice and/or treatment.
- Your RNTP may recommend food supplements and/or functional testing as part of your child's nutritional therapy programme and may receive a commission on these products or services.
- Standards of professional practice in nutritional therapy are governed by the Complementary and Natural Healthcare Council (CNHC) Code of Conduct, Ethics and Performance.
- This document only covers the practice of nutritional therapy within this consultation, and your practitioner will make it clear if he or she intends to provide services that are outside the scope of nutritional therapy practice.
- RNTPs are advised to have a parent/guardian present when consulting with clients under sixteen years of age. Written consent must be provided from the child's parent/guardian for another adult to attend with the child or for the child to attend the consultation alone.

### **The Client understands and agrees to the following:**

- I consent to the RNTP consulting with and advising my child.
- A parent/guardian/other adult is advised to be present at each of my child's consultations in support of my child following the provided dietary and lifestyle recommendations, unless I have given written permission for my child to attend the consultation alone.
- I am responsible for contacting my child's GP about any health concerns.

A signed copy must be retained by both the Client and the Registered Nutritional Therapy Practitioner

- If my child is receiving treatment from my GP, or any other medical provider, I should tell him/her about any nutritional recommendations provided by my RNTP. This is necessary because of any possible reaction between medication and the nutritional programme.
- It is important that I tell my RNTP about any medical diagnosis, medication, herbal medicine or food supplements my child is taking as this may affect the nutritional programme.
- If I am unclear about the agreed nutritional therapy programme/food supplement doses/time period, I should contact my RNTP promptly for clarification.
- I understand that the recommendations are personal to my child and may not be appropriate for others.
- I must contact my RNTP should I wish to continue any specified supplement programme for my child for longer than the originally agreed period, to avoid any potential adverse reactions.
- Recording consultations using any form of electronic media is not permitted.
- It is my responsibility to ensure I have a working internet connection for online consultations, If I am unable to connect as scheduled, the appointment is considered a 'no show' and charged in full.

### Confidentiality and Data Protection

The Registered Nutritional Therapy Practitioner will keep your child's personal information confidential and secure following the UK GDPR guidelines for the practice. The RNTP will not share your child's information with third parties without your consent. However, if the RNTP believes that there is a risk of significant harm to your child or another person, the RNTP may pass the information onto an appropriate authority using the legal basis of vital interest. A separate Privacy and Consent Notice is available for your review.

## PART 2

### Payment Terms and Cancellation Policy

Fees are agreed in advance of the appointment and are paid in full in advance of an appointment. Payments can be made by bank transfer, credit or debit card.

Appointments cancelled with less than 48 hours' notice and 'no shows' will be charged in full.

In the case of advance payments for services, you have the right to cancel this Agreement within 14 days of the purchase without penalty ('Cooling-off Period'). If you wish to terminate the agreement within the 14-day Cooling-off Period, you must do so in writing to [hello@activeeat.co.uk](mailto:hello@activeeat.co.uk). The RNTP will refund any monies paid prior to cancelling this Agreement. If the services have commenced during the 14-day Cooling-off Period, the RNTP will refund any monies due to you for services not yet provided. The refund payment will be made within 14 days of cancellation

We understand the above and agree that our professional relationship will be based on the content of this Agreement. We declare that all the information we share during this professional relationship is confidential and to the best of our knowledge is true and correct.

<b>Child Name:</b>	
<b>Parent/Guardian Name:</b>	
<b>Parent/Guardian Signature:</b>	
<b>Date:</b>	

A signed copy must be retained by both the Client and the Registered Nutritional Therapy Practitioner

<b>RNTP Name:</b>	
<b>RNTP Signature:</b>	
<b>Date:</b>	