

# HCPC CPD Audit: FAQs for Industry and Non- Clinical Dietitians

## Introduction: Practising Your Profession and Maintaining HCPC Registration

Dietitians working in industry and other non-clinical roles can maintain HCPC registration without direct patient contact.

The HCPC defines practising your profession as undertaking any role in which you draw on the professional knowledge and skills gained through your dietetics qualification and developed through ongoing practice and CPD.

This means that practising as a dietitian is not limited to direct clinical care. It may also include roles in:

- medical affairs;
- scientific and regulatory affairs;
- education and training;
- product development;
- research;
- leadership and management;
- policy and strategy.

To maintain HCPC registration, registrants must continue to meet the HCPC standards, including the standards for continuing professional development (CPD), and confirm this at each two-year renewal.

There is no requirement to complete a set number of clinical hours or to see patients directly.

The key consideration is whether your current role involves applying your dietetic knowledge and skills within your defined scope of practice.

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Examples include:

- developing evidence-based educational materials;
- interpreting scientific literature;
- advising on product safety and nutritional suitability;
- supporting healthcare professional education;
- participating in patient insight or advisory activities.

If your role no longer draws on your dietetic knowledge and skills, you may decide that HCPC registration is no longer required. In that case, you would not be able to use the protected title Dietitian.

The decision to maintain registration is ultimately the responsibility of the individual registrant, taking into account the nature of their role and the HCPC requirements.

## Frequently Asked Questions

### 1. Do I need to see patients to maintain HCPC registration?

No.

Dietitians can maintain HCPC registration without direct patient contact, provided they:

- are practising within their professional scope;
- continue to use their dietetic knowledge and skills in their role; and
- undertake CPD that is relevant to their current practice.

Examples of roles where this applies include:

- medical affairs;
- scientific advisory roles;
- nutrition communications;
- product development;
- professional education;
- regulatory affairs.

The key question is whether you are applying your dietetic expertise in a professional context.

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## 2. What counts as CPD in an industry role?

Any activity that develops your professional knowledge or skills and informs your practice may count as CPD.

Examples include:

- internal scientific training;
- external webinars and conferences;
- advisory board participation;
- patient focus groups;
- review of clinical guidelines and research;
- review of UK and international regulations to ensure products meet nutritional and legal requirements (e.g. gluten-free labelling standards);
- development of educational materials;
- product formulation and nutritional analysis
- compliance and ethics training;
- presenting to colleagues or healthcare professionals.

The format is less important than being able to explain what you learned and how it influenced your work.

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## 3. Who is the service user in a non-clinical role?

According to the HCPC, a service user is anyone affected by your work.

In industry roles, this may include:

- patients (directly or indirectly);
  - healthcare professionals;
  - internal colleagues;
  - multidisciplinary teams;
  - wider populations influenced by your outputs.
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## 4. How do I demonstrate service-user benefit?

You should explain how your CPD improved the quality, accuracy or relevance of your work.

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- improving the scientific accuracy of educational materials;
- strengthening understanding of patient needs;
- informing safer product decisions;
- enhancing evidence-based communication with healthcare professionals.

## 5. What evidence can I provide if I do not have certificates?

Certificates are not essential.

Acceptable evidence includes:

- reflective summaries;
- notes from meetings or training;
- presentation slides;
- screenshots or confirmation emails;
- guidance documents or resources you created.

In most cases, supporting evidence is only required for the 4–6 activities discussed in detail within your personal statement.

## 6. How should I structure my CPD profile?

If selected for audit, your profile should include:

- a full dated list of CPD activities completed over the relevant two-year audit cycle (for the current cycle, 1 July 2024 to 30 June 2026). Example entry listed in CPD log

Date	CPD Activity	Service User Benefit	Reflection File	Evidence File
10/01/25	Advisory Board Meeting	Improved relevance of patient education materials	Advisory Board – Reflection.doc	AB_Meeting Notes.pdf

- a 500-word summary of your current role, including your scope of practice, who your service users are, and how your work impacts those service users.
- a personal statement (maximum 1,500 words) describing how your selected 4–6 activities meet the HCPC CPD standards.
- supporting evidence for the selected activities, listed within an accompanying Evidence Summary Table

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For further information, please refer to the HCPC guidance on [What We Mean by 'Practising Your Profession'](#).



We have defined 'practising your profession' as drawing on your professional skills and knowledge in the course of your work.

This does not have to be in clinical or 'frontline' practice and can include roles in education, management and research, or other areas.

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