



Academy of Nutrition and Dietetics: Revised 2017 Standards of Practice and Standards of Professional Performance for Registered Dietitian Nutritionists (Competent, Proficient, and Expert) in Diabetes Care



Patricia Davidson, DCN, RDN, LDN, CDE, FAND; Tamara Ross, RD, LD, CDE, MLDE; Chimene Castor, EdD, RD, FAND

ABSTRACT

There are 30.3 million people with diabetes and 86 million with prediabetes in the United States, underscoring the growing need for comprehensive diabetes care and nutrition for the management of diabetes and diabetes-related conditions. Management of diabetes is also critical for the prevention of diabetes-related complications such as cardiovascular and renal disease. The Diabetes Care and Education Dietetic Practice Group along with the Academy of Nutrition and Dietetics Quality Management Committee have updated the Standards of Practice (SOP) and Standards of Professional Performance (SOPP) for Registered Dietitian Nutritionists (RDNs) in Diabetes Care. The SOP and SOPP for RDNs in Diabetes Care provide indicators that describe three levels of practice: competent, proficient, and expert. The SOP utilizes the Nutrition Care Process and clinical workflow elements for care and management of those with diabetes and prediabetes. The SOPP describes six domains that focus on professionalism: Quality in Practice, Competence and Accountability, Provision of Services, Application of Research, Communication and Application of Knowledge, and Utilization and Management of Resources. Specific indicators outlined in the SOP and SOPP depict how these standards apply to practice. The SOP and SOPP are complementary resources for RDNs caring for individuals with diabetes or specializing in diabetes care or practicing in other diabetes-related areas, including research. The SOP and SOPP are intended to be used for RDN self-evaluation for ensuring competent practice and for determining potential education and training needs for advancement to a higher practice level in a variety of settings.

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Editor's note: Figures 1 and 2 that accompany this article are available at www.jandonline.org.

THE DIABETES CARE AND EDUCATION Dietetic Practice Group (DCE DPG) of the Academy of Nutrition and Dietetics (Academy), under the guidance of the Academy Quality Management Committee, has revised the Standards of Practice (SOP) and Standards of Professional Performance (SOPP) for Registered Dietitians (RDs) in Diabetes Care published in 2011.¹ The revised documents, Academy of Nutrition and Dietetics: Revised 2017 Standards of Practice and Standards of Professional Performance for Registered Dietitian Nutritionists (RDNs) (Competent, Proficient, and Expert) in Diabetes Care, reflect advances in diabetes practice during

the past 6 years and replace the 2011 Standards. These documents build on the Academy of Nutrition and Dietetics: Revised 2017 Standards of Practice in Nutrition Care and Standards of Professional Performance for RDNs.² The Academy/Commission on Dietetic Registration's (CDR) Code of Ethics³ (revised and approved Code of Ethics available in 2018) along with the Academy of Nutrition and Dietetics: Revised 2017 Standards of Practice in Nutrition Care and Standards of Professional Performance for RDNs² and Revised 2017 Scope of Practice for the Registered Dietitian Nutritionist,⁴ guide the practice and performance of RDNs in all settings.

Scope of practice in nutrition and dietetics is composed of statutory and individual components, including codes of ethics (eg, Academy or other national organizations and/or employer code of ethics), and encompasses the range of roles, activities, practice guidelines, and regulations related to RDN performance. For credentialed practitioners, scope of

practice is typically established within the practice act and interpreted and controlled by the agency or board that regulates the practice of the profession in a given state.⁴ An RDN's statutory scope of practice can delineate the services an RDN is authorized to perform in a state where a practice act or certification exists. For more information see www.cdrnet.org/state/licensure-agency-list.

An RDN's individual scope of practice is determined by education, training,

*Approved December 2017, by the Quality Management Committee of the Academy and the Executive Committee of DCE DPG. **Scheduled review date: May 2024.** Questions regarding the Revised 2017 SOP and SOPP for RDNs (Competent, Proficient, and Expert) in Diabetes Care may be addressed to Academy Quality Management Staff: Dana Buelsing, MS, manager, quality standards operations, and Sharon McCauley, MS, MBA, RDN, LDN, FADA, FAND, senior director, quality management, at quality@eatright.org.*

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All registered dietitians are nutritionists—but not all nutritionists are registered dietitians. The Academy's Board of Directors and Commission on Dietetic Registration have determined that those who hold the credential Registered Dietitian (RD) may optionally use "Registered Dietitian Nutritionist" (RDN). The two credentials have identical meanings. In this document, the authors have chosen to use *RDN* to refer to both RDs and RDNs.

credentialing, experience, organizational policies and procedures, and demonstrating and documenting competence to practice. Individual scope of practice in nutrition and dietetics has flexible boundaries to capture the breadth of an individual's professional practice. Professional advancement beyond the core education and supervised practice to qualify for the CDR RDN credential provides RDNs practice opportunities such as expanded roles within an organization based on specified training and certifications, if required; or additional credentials (eg, focus area CDR specialist certification, if applicable, or Advanced Practice Certification in Clinical Nutrition [RDN-AP], Certified Diabetes Educator [CDE], Board Certified-Advanced Diabetes Management [BC-ADM], Certified Case Manager [CCM], or Certified Professional in Health Care Quality [CPHQ]). The Scope of Practice Decision Tool (www.eatrightpro.org/scope), an online interactive tool, guides an RDN through a series of questions to determine whether a particular activity is within his or her scope of practice. This tool is designed to allow an RDN to critically evaluate his or her personal knowledge, skill, experience, judgment, and demonstrated competence using criteria resources.⁵

The Centers for Medicare and Medicaid Services (CMS), Department of Health and Human Services, Hospital⁶ and Critical Access Hospital⁷ Conditions of Participation now allows a hospital and its medical staff the option of including RDNs or other qualified nutrition professionals within the category of "non-physician practitioners" eligible for ordering privileges for therapeutic diets and nutrition-related services when it is consistent with state law and health care regulations. RDNs in hospital settings

interested in obtaining ordering privileges must review state laws (eg, licensure, certification, and title protection) if applicable and health care regulations to determine whether there are any barriers or state-specific processes that must be addressed. For more information, review the Academy's practice tips that outline the regulations and implementation steps for obtaining ordering privileges (www.eatrightpro.org/dietorders). For assistance, refer questions to the Academy's State Affiliate organization.

Medical staff oversight of an RDN(s) occurs in one of two ways. A hospital has the regulatory flexibility to appoint an RDN(s) to the medical staff and grant the RDN(s) specific nutrition ordering privileges, or can authorize the ordering privileges without appointment to the medical staff. To comply with regulatory requirements, an RDN's eligibility to be considered for ordering privileges must be through the hospital's medical staff rules, regulations, and bylaws, or other facility-specific process.⁸ The actual privileges granted will be based on an RDN's knowledge, skills, experience, and specialist certification, if required, and demonstrated and documented competence.

The Long-Term Care Final Rule published October 4, 2016, in the *Federal Register* "allows the attending physician to delegate to a qualified dietitian or other clinically qualified nutrition professional the task of prescribing a resident's diet, including a therapeutic diet, to the extent allowed by State law" and permitted by the facility's policies.⁹ The qualified professional must be acting within the scope of practice as defined by state law and is under the supervision of the physician that may include, for example, countersigning the orders written by the qualified dietitian or clinically qualified nutrition professional. RDNs who work in long-term care facilities should review the Academy's updates on CMS that outline the regulatory changes to §483.60 Food and Nutrition Services (www.eatrightpro.org/quality). Review his or her state's long-term care regulations to identify potential barriers to implementation and identify considerations for developing the facility's process with the medical director and for orientation of attending physicians. The CMS State Operations Manual, Appendix PP-Guidance for Surveyors for Long-Term Care Facilities¹⁰ contains the revised

regulatory language (new revisions are italicized and in red color¹⁰). CMS periodically revises the State Operations Manual Conditions of Participation; obtain the current information at www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/som107Appendicestoc.pdf.

ACADEMY QUALITY AND PRACTICE RESOURCES

The Academy's Revised 2017 SOP in Nutrition Care and SOPP for RDNs² reflect the minimum competent level of nutrition and dietetics practice and performance. The core standards serve as blueprints for the development of focus area SOP and SOPP for RDNs in competent, proficient, and expert levels of practice. The SOP in Nutrition Care is composed of four standards consistent with the Nutrition Care Process and clinical workflow elements as applied to the care of patients/clients/populations in all settings.¹¹ The SOPP consist of standards representing six domains of professional performance: Quality in Practice, Competence and Accountability, Provision of Services, Application of Research, Communication and Application of Knowledge, and Utilization and Management of Resources. The SOP and SOPP for RDNs are designed to promote the provision of safe, effective, efficient, and quality food and nutrition care and services; facilitate evidence-based practice; and serve as a professional evaluation resource.

These focus area standards for RDNs in diabetes care provide a guide for self-evaluation and expanding practice, a means of identifying areas for professional development, and a tool for demonstrating competence in delivering diabetes care and dietetic services.

They are used by RDNs to assess their current level of practice and to determine the education and training required to maintain currency in their

Nutrition and Dietetics Diabetes Care and Services (for the purpose of the SOP and SOPP in Diabetes Care) encompasses medical nutrition therapy, counseling, both patient and professional education, support, research, and other diabetes nutrition-related services (eg, utilizing the Nutrition Care Process in nutrition planning, food preparation and modification, and lifestyle education).

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