



Academy of Nutrition and Dietetics: Revised 2017 Standards of Practice in Nutrition Care and Standards of Professional Performance for Registered Dietitian Nutritionists



The Academy Quality Management Committee

ABSTRACT

Registered dietitian nutritionists (RDNs) face complex situations every day. Competently addressing the unique needs of each situation and applying standards appropriately are essential to providing safe, timely, patient-/client-/customer-centered, quality nutrition and dietetics care and services. The Academy of Nutrition and Dietetics (Academy) leads the profession by developing standards that can be used by RDNs (who are credentialed by the Commission on Dietetic Registration) for self-evaluation to assess quality of practice and performance. The Standards of Practice reflect the Nutrition Care Process and workflow elements as a method to manage nutrition care activities with patients/clients/populations that include nutrition screening, nutrition assessment, nutrition diagnosis, nutrition intervention/plan of care, nutrition monitoring and evaluation, and discharge planning and transitions of care. The Standards of Professional Performance consist of 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. Within each standard, specific indicators provide measurable action statements that illustrate how the standard can be applied to practice. The Academy's Revised 2017 Standards of Practice and Standards of Professional Performance for RDNs, along with the Academy's Code of Ethics and the Revised 2017 Scope of Practice for the RDN, provide minimum standards and tools for demonstrating competence and safe practice and are used collectively to gauge and guide an RDN's performance in nutrition and dietetics practice.

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Editor's note: Figures 2 and 3 that accompany this article are available online at www.jandonline.org.

THE ACADEMY OF NUTRITION and Dietetics (Academy) leads the profession of nutrition and dietetics by developing standards from which the quality of practice and performance of Registered Dietitian Nutritionists (RDNs) can be evaluated. The following Academy foundational documents guide the practice and performance of RDNs in all practice settings: Revised 2017 Standards of Practice (SOP) in Nutrition Care and Standards of Professional Performance (SOPP) for RDNs, along with the Academy/Commission on Dietetic Registration (CDR) Code of Ethics¹ and the Revised 2017 Scope of Practice for the RDN.² RDNs are nutrition and dietetics practitioners credentialed by CDR who are specifically

trained and qualified to provide nutrition and dietetics services and are accountable and responsible for their competent practice. The SOP in Nutrition Care and SOPP define minimum competent level of practice for RDNs.

WHAT ARE THE SOP AND SOPP FOR RDNs?

The standards and indicators found within the SOP and SOPP reflect the minimum competent level of nutrition and dietetics practice and professional performance for RDNs. The SOP in Nutrition Care is composed of four standards that apply the Nutrition Care Process and Terminology in the care of patients/clients/populations (see [Figure 1](#)).³ The SOPP for RDNs consist of standards representing six domains of professional performance (see [Figure 1](#)).

The SOP and SOPP reflect the education, training, responsibility, and accountability of the RDN. Both sets of standards and indicators ([Figures 2 and 3](#), available at www.jandonline.org) comprehensively depict the minimum expectation for competent care of the patient/client/customer, delivery of

services, and professional practice outcomes for the RDN. This article represents the 2017 update of the Academy's SOP in Nutrition Care and SOPP for RDNs.

WHY ARE THE STANDARDS IMPORTANT FOR RDNs?

The standards promote:

- safe, effective, quality, and efficient food, nutrition, and related services, and dietetics practice;

Approved August 2017 by the Quality Management Committee of the Academy of Nutrition and Dietetics (Academy) and the House of Delegates Leadership Team on behalf of the House of Delegates. Scheduled review date: June 2023. Questions regarding the Revised 2017 Standards of Practice in Nutrition Care and Standards of Professional Performance for Registered Dietitian Nutritionists may be addressed to the Academy Quality Management Staff: Dana Buelsing, MS, manager, Quality Standards Operations; and Sharon M. 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. The same determination and option also applies to those who hold the credential Dietetic Technician, Registered (DTR) and Nutrition and Dietetics Technician, Registered (NDTR). The two credentials have identical meanings. In this document, the term RDN is used to refer to both registered dietitians and registered dietitian nutritionists, and the term NDTR is used to refer to both dietetic technicians, registered and nutrition and dietetics technicians, registered.

- evidence-based practice and best practices;
- improved nutrition and health-related outcomes and cost-reduction methods;
- efficient management of time, finances, facilities, supplies, technology, and natural and human resources;
- quality assurance, performance improvement, and outcomes reporting;
- ethical and transparent business, billing, and financial management practices^{9,10};
- verification of practitioner qualifications and competence because

CLIENT/PATIENT/RESIDENT/FAMILY/CUSTOMER

Generally, these terms are interchangeable, with a specific term used in a given situation, dependent on the setting and the population receiving care or services. Examples of terms used include, but are not limited to: *patient/client, patient/client/customer, resident, participant, student, consumer, or any individual/person, group, population, or organization* to which the RDN provides service. In a clinical setting, the term *patient/client* is commonly used. As a universal term, the use of *customer* in the Standards of Professional Performance is intended to encompass all the other terms with the meaning taken by the reader reflecting the context of the situation and setting. Use of *customer* is not intended to imply monetary exchange.

state and federal regulatory agencies, such as health departments and the Centers for Medicare and Medicaid Services (CMS), look to professional organizations to create and maintain standards of practice^{7,11,12};

- consistency in practice and performance;
- nutrition and dietetics research, innovation, and practice development; and

- individual professional advancement.

The standards provide:

- minimum competent levels of practice and performance;
- common measurable indicators for self-evaluation;
- a foundation for public and professional accountability in nutrition and dietetics care and services;
- a description of the role of nutrition and dietetics and the unique services that RDNs offer within the health care team and in practice settings outside of health care;
- guidance for policies and procedures, job descriptions, competence assessment tools; and
- academic and supervised practice objectives for education programs.

HOW DOES THE ACADEMY’S SCOPE OF PRACTICE FOR THE RDN GUIDE THE PRACTICE AND PERFORMANCE OF RDNs IN ALL SETTINGS?

The Revised 2017 Scope of Practice for the RDN is composed of statutory and individual components, including codes of ethics (eg, Academy/CDR, other national organizations, and/or employer code of ethics), and encompasses the range of roles, activities, and regulations within which RDNs perform. 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.² 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. In 2017, 46 states had statutory provisions regarding professional regulations for dietitians and/or nutritionists (<http://www.eatrightpro.org/resource/advocacy/legislation/all-legislation/licensure>).

The RDN’s individual scope of practice is determined by education, training, credentialing, experience, and demonstrating and documenting competence to practice. Individual scope of practice in nutrition and dietetics has flexible boundaries to

The SOP in Nutrition Care:

- reflect the Nutrition Care Process and workflow elements as a method to manage nutrition care activities (ie, nutrition screening, nutrition assessment, nutrition diagnosis, nutrition intervention/plan of care, nutrition monitoring and evaluation, and discharge planning and transitions of care); and
- apply to RDNs who provide individualized nutrition assessment, intervention, and discharge planning for patients/clients/populations in acute and post-acute health care, ambulatory care, home-based, public health, and community settings.

The SOPP:

- are formatted according to six domains of professional performance (ie, Quality in Practice, Competence and Accountability, Provision of Services, Application of Research, Communication and Application of Knowledge, and Utilization and Management of Resources); and
- apply to all RDNs maintaining the RDN credential:
 - in all practice settings; and
 - not practicing in nutrition and dietetics.

Figure 1. What are the Standards of Practice (SOP) and Standards of Professional Performance (SOPP) for Registered Dietitian Nutritionists (RDNs)?

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