Using the 2024 Scope and Standards of Practice to Expand Opportunities

Scope and Standards of Practice Task Force
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There are no conflicts of interest declared.
Learning Objectives

After completing this learning module on the Revised 2024 Scope and Standards of Practice for the RDN and for the NDTR, the learner will be able to:

• Describe the updates, identify the components, and be able to apply the subject matter to their practice

• Utilize the content for self-evaluation

• Explain the role delineation between RDNs and NDTRs

The 2024 Scope and Standards of Practice uses the term RDN to refer to both registered dietitians (RD) and registered dietitian nutritionists (RDN) and the term NDTR to refer to both dietetic technicians, registered (DTR) and nutrition and dietetics technicians, registered (NDTR).
History of the Scope and Standards of Practice

1998
- Standards of Professional Practice for Dietetics Professionals

2005
- Revised Nutrition Care SOP SOPP

2008
- Scope of Practice Framework
- Nutrition Care SOP SOPP

2013
- Scope of Practice in Nutrition and Dietetics
- Scope of Practice for the RD
- Scope of Practice for the DTR
- SOP in Nutrition Care and SOPP for RDs
- SOP in Nutrition Care and SOPP for DTRs

2017
- Scope of Practice for the RDN
- Scope and Standards of Practice for the NDTR
- SOP and SOPP for RDNs
- SOP and SOPP for NDTRs

2024
- Scope and Standards of Practice for the RDN
- Scope and Standards of Practice for the NDTR
- SOP and SOPP for RDNs
- SOP and SOPP for NDTRs

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Why was it Updated?

Scope and Standards documents are reviewed and revised every 7 years to reflect changes in:

- health care and other business segments
- public health initiatives
- practice guidelines and research
- performance measurement
- consumer interests
- technological advances
- emerging service delivery options
- practice environments

Also...
The 2024 revision combines the previous Scope of Practice and Standards of Practice into one unified document

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Key Updates to the 2024 Revision

Reflects changes in practice due to:

- Coronavirus pandemic
- Increased use of telehealth
- New public health initiatives
- Greater focus on health equity
- Growing application of nutrigenomics and personalized nutrition technologies
- The Malnutrition Quality Improvement Initiative (MQii)
- CMS acceptance of the global malnutrition composite score (GMCS) electronic clinical quality measure (eCQM) for hospital reporting
Let’s Reflect

Which of these changes impacted your practice and how?

• Pandemic
• Telehealth
• Public health initiatives
• Greater focus on health equity
• Nutrigenomics/other technologies
• MQii
• GMCS/eCQM
Relevant Components from the Code of Ethics

All RDNs and NDTRs must:

• Practice using an evidence-based approach within areas of competence, continuously develop and enhance expertise, and recognize limitations.

• Recognize and exercise professional judgment within the limits of individual qualifications and collaborate with others, seek counsel, and make referrals as appropriate.

• Practice within the limits of their scope and collaborate with the interprofessional team.
Let’s Reflect

High Quality Nutrition and Dietetics Practice

Foundational documents, along with applicable state and federal regulations, state practice acts, accreditation standards, organization/program policies, guidelines and practice informed guidelines and standards serve as guides for ensuring safe, timely, efficient, ethical, effective, equitable, person-/population-centered nutrition and dietetics practice.
What are the Scope and Standards?

Together, the **scope** of practice and the **standards** of practice are a comprehensive framework that describes the competent level of practice and professional performance expected from RDNs and NDTRs across all practice levels and settings.
Multiple Factors Shape an Individual RDN’s/NDTR’s Scope of Practice

- Education and Credentials
- Federal and State Regulations and Interpretive Guidelines
- Accreditation Organizations Standards
- Organization Policies and Procedures
- Additional training, credentials or certifications
- Scope and Standards of Practice for the RDN or for the NDTR
- State Laws (licensure, certification, title protection)

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Let’s Reflect

How might your scope of practice differ from a colleague’s based on the factors discussed previously?
Standards of Practice

• Reflect the minimum competent level of practice and professional performance for all RDNs and NDTRs

• Describe how RDNs/NDTRs can implement and demonstrate competence in 7 unique domains of practice and professional performance
The Standards can be used to:

- Describe the minimum competent levels of practice and performance
- Measure performance against indicators for self-evaluation
- Provide a foundation for public and professional accountability in nutrition and dietetics care and services
- Explain the role of nutrition and dietetics and the unique services that RDNs/NDTRs offer within the health care team and in practice settings beyond health care
- Guide policies and procedures, competence assessment tools, job descriptions, career laddering and compensation
- Create academic and supervised practice objectives for dietetics education programs
Let’s Reflect

Have you used the Standards for any of the purposes described previously?

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The Standards Promote:

- Food, nutrition, and related services, and dietetic practice that is ethical, safe, timely, efficient, effective, equitable, and person centered
- Practice that is evidence-based or informed by the best available research/evidence
- Quality assurance, performance improvement, and outcomes reporting; ethical and transparent business, billing, and financial management practices
- Verification of practitioner qualifications and competence because state and federal regulatory agencies, and accreditation organizations look to professional organizations to create and maintain standards of practice
- Individual professional advancement
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<td>Identify evidence-based screening criteria/tool according to the patient/client population (adult or pediatric), collaborate for incorporation into health record system when screening completed by others, and review reported nutrition screening data or incorporate screening into nutrition assessment</td>
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<td><strong>Nutrition Assessment and Reassessment</strong></td>
<td>Perform and document results of initial and follow-up assessment(s)</td>
<td>Per RDN request or standard procedure, obtain and document specified data to contribute elements of the nutrition assessment or reassessment for completion by the RDN</td>
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<td>Determine nutrition diagnosis(es)</td>
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<td>Determine or recommend nutrition prescription and initiate interventions such as Medical Nutrition Therapy (MNT). When applicable, adhere to disease or condition-specific protocol orders initiated by the referring practitioner</td>
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<td><strong>Nutrition Monitoring and Evaluation</strong></td>
<td>Determine and document outcome of interventions reflecting input from all sources</td>
<td>Implement/oversee duties performed by other nutrition and foodservice staff; monitor patient/client tolerance and acceptance of meals, snacks, nutritional supplements; document per procedure; and report to the RDN and other team members the results and observations of monitoring activities</td>
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Traditional and Emerging Areas of Practice

- Health Care
- Preventative Care, Wellness, Lifestyle
- Foodservice Systems, Culinary, Retail
- Military Services, First Responders, US Public Health Services
- Sustainable Food and Water Systems
- Education and Research
- Business, Industry and Communications
- Management and Leadership
- Nutrition Informatics

Note - this list is not all inclusive
Let’s Reflect

Do you know someone practicing in a non-traditional area of practice?
The Standards of Practice at a Glance

All standards are equal in relevance and importance
How are the Standards Formatted?

Brief description of the competent level of practice

Rationale describes the intent, purpose, and importance of the standard

Indicators provide measurable action statements that illustrate applications of the standard

STANDARD 1. DEMONSTRATING ETHICS AND COMPETENCE IN PRACTICE

Standard
The registered dietitian nutritionist (RDN) demonstrates competence, accountability, and responsibility for ensuring safe, ethical, and quality person-centered care and services through regular self-evaluation, and timely continuing professional education to maintain and enhance knowledge, skills, and experiences.

Standard Rationale
Professionalism in nutrition and dietetics practice is demonstrated through:

- Evidence-based practice,
- continuous acquisition of knowledge, skills, experience, judgment, demonstrated competence, and
- adherence to established ethics and professional standards.

Each RDN:

Adheres to code of ethics
1.1 Adheres to the code(s) of ethics (e.g., Academy and CDR, other national organizations, and/or employer code of ethics)

1.2 Assumes accountability and demonstrates responsibility for actions and behaviors regarding scope of practice, supervision, referrals, collaboration, and self-disclosure (including any actual or potential conflicts of interest or fiscal relationships); identifies, acknowledges, and corrects errors

1.3 Demonstrates ethical and responsible practices that consider human, environmental, social, and economic resources as applicable to role and setting

1.4 Discloses actual or potential conflicts of interest, and any financial relationships regarding the promotion, sale, or recommendation of products (e.g., dietary supplements, books, foods) to customer or organization

Ensures competence in practice
1.5 Demonstrates and documents competence in practice and delivery of customer-centered services

1.6 Exhibits professionalism and strives for improvement in practice (e.g., manages change effectively, demonstrates listening and conflict resolution skills, and ability to collaborate)

1.7 Integrates standards into practice (e.g., Scope and Standards of Practice for RDNs, focus area standards, and other professional standards as appropriate), uses focus area standards applicable to populations served and practice setting (www.cdrnet.org/scope)

1.8 Recognizes advantages and accounts for disadvantages of technology related to privacy, confidentiality, effectiveness, and safety for clients and organization

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Each RDN and NDTR

1. Adheres to code of ethics
2. Ensures competence in practice
3. Adheres to laws and regulations
4. Completes self-evaluation to identify needs for continuing education
5. Pursues continuing education
Each RDN and NDTR

1. Addresses social determinants of health, nutrition security, food insecurity, and malnutrition
2. Promotes sustainability practices (eg, food systems, food/ingredient/supply choices)
3. Maintains awareness of public health and community nutrition/population health
4. Recognizes global food and nutrition
Each RDN and NDTR

1. Incorporates quality assurance and performance improvement (QAPI) processes
2. Identifies and uses tools for determining/conducting quality improvement (QI)
3. Identifies measures and outcomes
4. Monitors and addresses customer safety
Each RDN and NDTR

1. Engages in collaborative ready practice
2. Facilitates referrals
3. Manages programs and services
4. Contributes to, manages, and/or designs food/nutrition delivery systems
5. Precepts, supervises, and engages in career laddering
6. Contributes to a healthy work environment (eg, safety, incident reporting, anti-bullying, personal protective equipment)
Each RDN and NDTR

1. Engages in scholarly inquiry (ie, identifies and uses evidence-based publications and practice guidelines applicable to practice area; and contributes to process of research)

2. Applies critical thinking and judgement for evidence-based practice
Each RDN and NDTR

1. Engages in information dissemination through conversations, presentations, publications, media, social media with various audiences

2. Participates in advocacy and public policy engagement and outreach
Each RDN

1. Reviews or completes nutrition screening
2. Conducts nutrition assessment
3. Identifies nutrition diagnosis
4. Develops nutrition intervention/plan of care
5. Implements nutrition monitoring and evaluation
6. Participates in coordination and transitions of care
STANDARD 7
Providing (Supporting) Person-/Population-Centered Nutrition Care

Each NDTR

1. Reviews or completes nutrition screening
2. Conducts interviews and reviews records
3. Provides support to the RDN on nutrition diagnosis
4. Supports the nutrition intervention/plan of care as directed by the RDN
5. Implements nutrition monitoring and evaluation as directed by the RDN
6. Participates in coordination and transitions of care as directed by the RDN
Using the Standards to Evaluate and Advance Practice

RDNs and NDTRs can use the standards as a self-evaluation tool to support/demonstrate quality practice and competence by:

- applying every indicator or identifying specific areas to strengthen and accomplish
- identifying additional indicators and examples of outcomes that reflect their individual practice/setting
- applying only applicable indicators based on their practice roles, activities, organization performance expectations, and work or volunteer practice settings
Let’s Reflect

How have you used the Standards in your professional practice?
Using the Standards to Guide your Professional Development

Professional Development Plan

Step I
Conduct Self-Evaluation

Step II
Identify Competency Gaps

Step III
Create Learning Plan

Step IV
Implement Learning Plan

Step V
Review/Revise Learning Plan
Focus Area Standards for RDNs

- Adult Weight Management
- Clinical Nutrition Management
- Diabetes Care
- Eating Disorders
- Education of Nutrition and Dietetics Practitioners
- Intellectual and Developmental Disabilities
- Management of Food and Nutrition Systems
- Mental Health and Addictions
- Nephrology Nutrition

- Nutrition in Integrative and Functional Medicine
- Nutrition Support
- Oncology Nutrition
- Pediatric Nutrition
- Post-Acute and Long-Term Care Nutrition
- Public Health and Community Nutrition
- Sports and Human Performance Nutrition
- Sustainable, Resilient, and Healthy Food and Water Systems
The Scope of Practice Decision Algorithm

1. Asks the user to answer a series of questions
2. Algorithm assists user to critically evaluate their knowledge, skills, experience, and competence using criteria resources
3. Helps user determine if an activity/service is within their scope of practice
A malnourished patient is receiving nutrition care at an acute care facility by a competent, proficient and expert level RDN.

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<th>Proficient</th>
<th>Expert</th>
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<td>Activity</td>
<td>NFPE to determine nutrition diagnosis of malnutrition and facilitate the medical diagnosis of malnutrition. Recommended nutrition intervention of enteral nutrition therapy.</td>
<td>Competent level and Manages patients with complex co-morbid conditions, recommends and evaluates biomedical testing, and has been approved for clinical privileges related to enteral nutrition management.</td>
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Case Study 2- NDTR

A NDTR with 4 years’ experience as a foodservice supervisor in a small community hospital, is considering applying for a position for food and nutrition service director in one of the community’s long-term care facilities.

They use the Scope and Standards of Practice to determine whether they have the necessary knowledge, skills and experience to take on a department director role.
Case Study 3- Student/Intern

A student/intern is preparing to graduate and take the RDN exam. They are reviewing a potential job opportunity in which they would be assessing outcomes and providing individual counseling to clients taking weight loss medications.

**TIP:** Educators may be able to use this learning activity (learning module and accompanying case studies and quiz) to satisfy one or more of the ACEND core knowledge/competency requirements relating to the Scope and Standards of Practice.
Where to Locate

www.cdrnet.org/scope

Read accompanying Briefing article in the Journal of the Academy of Nutrition and Dietetics, https://www.jandonline.org/
Questions?

Email CDR at quality@eatright.org
Thank you!