

Academy of Nutrition and Dietetics: Revised 2018 Standards of Practice and Standards of Professional Performance for RDNs (Competent, Proficient, and Expert) in Post-Acute and Long-Term Care Nutrition

What are the Standards of Practice (SOP) and Standards of Professional Performance (SOPP)?

- SOP and SOPP are consensus standards for RDNs to use for professional development and to assure competence.
- The standards provide a guide for self-evaluation; determine education and skills needed for advancing practice levels; and may be used by employers or regulatory agencies to determine competence for credentialed nutrition and dietetics practitioners.

SOP – Direct care to patient/client/customer

- Nutrition Assessment
- Nutrition Diagnosis
- Nutrition Intervention/Plan of Care
- Nutrition Monitoring and Evaluation

SOPP – 6 Domains of Professionalism

- Quality in Practice
- Competence and Accountability
- Provision of Services
- Application of Research
- Communication and Application of Knowledge
- Utilization and Management of Resources



WHAT?

What is a Focus Area?

- A focus area of nutrition and dietetics practice is a defined field of practice that requires specialized knowledge, skills and experience.
- It relates to how a practitioner specializes in a specific area of practice (e.g., diabetes care, nephrology nutrition, public health and community nutrition).¹
 - The SOP in Nutrition Care and SOPP for RDNs² serves as the blueprint for the SOP SOPP in Post-Acute and Long-Term Care Nutrition (PALTC) in competent, proficient, and expert levels of practice.



WHEN?

When is a Focus Area SOP SOPP updated?

- Seven-year review process
- Indicated by changes in
 - healthcare and other business segments
 - public health initiatives
 - new research that guides evidence-based practice and best practices
 - consumer interests
 - technological advances
 - emerging practice environments



HOW?

How were the PALTC Standards updated?

The article, indicators, and figures were revised with input and consensus of content experts representing diverse PALTC practice areas/settings and geographic perspectives.

Reviewed and approved by the Executive Committee of the Dietetics in Health Care Communities Dietetic Practice Group and the Academy Quality Management Committee.

Sources:

¹ Definition of Terms List. Access September 30, 2022. <https://www.cdnet.org/definitions>

² Academy of Nutrition and Dietetics. Quality Management Committee. Academy of Nutrition and Dietetics: Revised 2017 Standards of Practice in Nutrition Care and Standards of Professional Performance for Registered Dietitian Nutritionists. *J Acad Nutr Diet.* 2018;118(1): 132-140.

Post-Acute and Long-Term Care Nutrition Overview and Application



Person-Centered



Quality of Life



Interprofessional Care



PALTC Settings

Overview

- PALTC is a continuum of care provided by community-based settings that can include long-term acute care hospitals, skilled nursing facilities, inpatient rehabilitation facilities, home health agencies, hospice, assisted living facilities, and corrections facilities.
- RDNs working in PALTC must have the appropriate knowledge, skills, judgement, and competence to provide safe and effective person-centered nutrition care across the lifespan.
- RDNs are an integral team member in PALTC settings by providing evidence-based care, coordination, and quality leadership through collaboration with other interprofessional team members.¹



Role Example – PALTC Consultant RDN

“A consultant RDN for an assisted living facility works with the food and nutrition services director who is a nutrition and dietetics technician, registered (NDTR). At the RDN’s regular visit, the NDTR reports on a new resident’s nutrition screening results, diet order concern, and lack of interest in eating. The RDN reviews the resident’s medical record, hospital discharge plan, and transfer materials for relevant information. The RDN reflects on the SOP and SOPP for RDNs in PALTC Nutrition’s emphasis on person-centered interventions and care in problem solving and shared decision making with the resident. By accommodating food preferences and liberalizing the diet order in consultation with the physician, the resident’s intake improved.”¹

Additional Information and Resources

Webpages:

- Scope of Practice: <https://www.cdrnet.org/scope>
 - Standards of Practice: <https://www.cdrnet.org/scope>
- Journal of the Academy of Nutrition and Dietetics*
- Scope and Standards for RDNs and NDTRs Collection: <https://jandonline.org/content/core>
 - Focus Area Standards for CDR Specialist Credentials Collection: <https://jandonline.org/content/credentialed>
 - Focus Area Standards for RDNs Collection: <https://jandonline.org/content/focus>
- Dietetics in Health Care Communities (DHCC) Dietetic Practice Group: <https://www.dhccdpg.org/>

Sources:

Robinson GE, Cryst S. Academy of Nutrition and Dietetics: Revised 2018 Standards of Practice and Standards of Professional Performance for Registered Dietitian Nutritionists (Competent, Proficient, and Expert) in Post-Acute and Long-Term Nutrition. *J Acad Nutr Diet*. 2018; 118(9): 1749-1760.e53.