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STRATEGIC PLAN OF THE DIETETICS PROGRAM IN THE DEPARTMENT OF ALLIED HEALTH SCIENCES

Mission of the Dietetics Program

The Dietetics Program is committed to improving the health and nutrition of the public through:
- Preparing competent and competitive entry-level dietitians
- Research in health promotion and disease prevention
- Service to the profession and community.

The following are measurable program goals of the Dietetics Program. These goals reflect the mission of the Program as well as the Strategic Plans of the College of Agriculture, Health and Natural Resources and the University of Connecticut. We accomplish our mission through the following goals that provide the basis for evaluation of program accomplishment.

Goals and Outcome Measures of the Dietetic Internship Program:

<table>
<thead>
<tr>
<th>Goals</th>
<th>Outcome Measures</th>
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| 1. Provide each graduate with a rigorous education that prepares the graduate as a competent entry-level RDN. | Annually:  
- 100% of students earn a grade of a B or better in required graduate courses.  
- 100% of students will receive a competent rating on the final evaluation.  
- 100% of graduates will take the CDR credentialing exam for dietitian nutritionists within 12 months of program completion.  
Over a five-year period:  
- 83% of enrolled students will complete program requirements in one full year (125%).  
- 90% of more of program graduates will pass the registration exam within one year following the first attempt  
- 67% of the graduates seeking employment will be employed within six months of program completion.  
- Program evaluations will reflect at least a “satisfactory” rating on a 4-point scale (needs improvement, satisfactory, above average, excellent) immediate after program completion and at 1 - 1 1/2 years post-program completion.  
- 83% of graduates’ preparation to practice assessed by employers will be satisfactory or higher. |
| 2. Recruit, retain, and graduate the most qualified students, supportive of learning needs and diversity. | Over a five-year period:  
- 10% of admitted students will be from under-represented ethnic/racial minority groups, under-represented gender and returning students.  
- Program will have 100% enrollment at the start of the program. |
Philosophy of the Dietetics Program

The Dietetics Program is dedicated to improving the well-being of all people. It is a dynamic, evolving program that responds to change in our system, population, demographics, society, science and technology, the food supply, and advances in knowledge. Our mission is to generate and disseminate knowledge in order to promote healthy lifestyles, to prevent disease, provide nutrition-related care, and initiate change in the dietetics profession. Our concentration area is Urban Issues. Interns will have numerous experiences focusing on urban issues with diverse populations in an 800 bed urban acute care facility including a level 1 trauma center and outpatient clinics, such as, AIDS, the Brownstone (medical and surgical services for clinic patients), Diabetes Life Care, Cancer Center, Bariatric Center, Institute of Living (IOL – psychiatric facility); the patient menu feeding a diverse population; SNAP-Ed; and working with hospital employees.

The philosophy of our Program guides our curriculum, which is in alignment with the Standards of Professional Practice of The Academy of Nutrition and Dietetics. The didactic and supervised practice competencies of the curriculum emphasize: the application of knowledge and skills within a wide variety of dietetic practice settings focusing on urban issues; effective communication of this knowledge and skill; collaboration with other professionals to advance practice; and self-assessment and directed professional development to support lifelong learning. The Program values research and requires interns to conduct a research project.

The Program is committed to a diverse body of interns and professionals. We will, therefore, take a pro-active role in the recruitment and retention of nontraditional, minority and/or interns with disabilities.

Concentration Area: Urban Issues

Upon completion of the program, graduates are able to:

1. Demonstrate an understanding of the challenges facing the dietitian in an urban setting
2. Utilize effective educational materials appropriate for low literacy, culturally diverse audiences
Curriculum and Supervised Practice

The Curriculum

The internship has supervised practice in clinical, community, food service management, and research with a concentration in urban issues. The program ensures that interns meet all the core competencies and provides learning experiences reflecting the breadth of dietetics practice. The core provides the broad base of diverse experiences necessary for future career mobility. Learning experiences for interns build on the didactic component of the intern’s undergraduate education. The internship is designed so that interns will progress from introductory to entry-level practice, with adequate time provided for supervised practice to ensure competency. Throughout the curriculum an emphasis is placed on self-assessment and the need to be an active participant in setting and achieving one’s professional goals.

The collaboration of the Department of Allied Health Sciences at the University of Connecticut and Hartford Hospital supports the professional goal of achieving a common body of knowledge. Supervised practice will take place in clinical dietetics, ambulatory nutrition, community nutrition and food service settings at Hartford Hospital, the University of Connecticut or its affiliates. Each intern will have the opportunity to complete a two-week specialty rotation. Intern will choose this rotation which must be approved by the Dietetics Director at UConn.

To enhance the intern’s learning experiences; interns will complete two graduate courses during the fall semester: AH 5350, Advanced Medical Nutrition Therapy, and AH 5351, Contemporary Nutrition Issues and Research. In the spring semester interns will attend seminar and group discussions on the University of Connecticut campus as well as meet with the Dietetics Director at Hartford Hospital. This will support the integration of didactic material into dietetic practice.

This Internship is designed to be completed in 9 ½ months (August - May). Each intern must complete all of the rotations and demonstrate competency of didactic instruction in the classroom, successfully meet performance requirement as documented by dietetic preceptors on performance evaluation forms, and successfully achieve professional behaviors. If an intern is not determined competent in an area the intern may need to complete additional supervised practice hours until competence is met. At the completion of the internship, the intern will receive a signed Verification Statement of Completion to ensure eligibility to write the national examination administered by the Commission on Dietetic Registration (CDR) of the Academy of Nutrition and Dietetics.

The major components of the curriculum include:

Clinical Dietetics Component: This component is designed to allow the interns to acquire the skills necessary to accurately assess, develop and implement a plan for medical nutrition therapy. Interns experience long-term care usually in the fall semester and a clinical inpatient psychiatry rotation at the Institute of Living seeing pediatric/adolescent, adult, and geriatric populations. Rotations progress in difficulty progressing from Clinical 1: Introductory Clinical, Clinical 2: Intermediate Clinical, Clinical 3: Advanced Clinical (stepdown units or intensive care units), and culminating with supervised staff relief.

Outpatient Component: The outpatient component provides opportunities to interns to enhance their counseling skills. This supports the trend of moving delivery of health care from
inpatient to outpatient settings. Interns complete rotations in a variety of outpatient settings. All interns complete rotations in cardiac care, dialysis, Diabetes Life Care, and general outpatient. Additional rotations maybe completed in bariatrics, cancer, etc depending on the intern’s interest. These experiences provide exposure and experiences with diverse populations allowing the intern to become culturally competent and sensitive.

Community Component: The community component provides interns numerous experiences through USDA SNAP-Ed (Supplemental Nutrition Assistance Program-Education). This component is provided through UConn’s Community Collaboration Office in Storrs. Interns receive experiences in WIC, Headstart/School Readiness programs, Title 1 elementary schools, food pantries, and food access agencies.

Food Service Component: This component provides the interns with a foundation of knowledge and skills regarding the organization and management of a food service operation. During this component, the interns learn how the menu is the ultimate focal point or driving force of the system. Rotations are divided into patient services, culinary/retail, and administrative systems and reporting. Interns are exposed to inventory control, production, quality assurance, distribution, diet office and management emphasizing how the menu controls the procurement, production and operations of the system. Interns will complete a rotation in school food service to insure an understanding of school food service and wellness programs.

Research Component: Dietetics practice is based on evidence. The registered dietitian must be able to conduct research as the high quality and cost effective care is necessary to assure success; dietetics faculty work in a variety of research settings. Interns will collaborate on research projects. The projects will vary annually and may focus on school foodservice and healthy eating and nutrition education. Faculty will mentor interns during the research component of the internship developing their ability to: problem solve, critically evaluate scientific literature; develop research hypotheses and design what tests these hypotheses; collect the data; interpret and synthesize the results; develop clinical application of this research. If appropriate interns will submit their work to the Connecticut Academy of Nutrition & Dietetics for a poster presentation at the Annual Spring meeting. This serves to develop the interns’ communication skills and to highlight the achievements of interns, as well as, encouraging submission of research to professional meetings.

Specialty Rotation: The intern must be considered competent in all areas of practice in order to complete this rotation. This rotation is a privilege. If an intern is not performing satisfactorily in another area; he/she will be required to spend additional time in the area of deficiency and will not be allowed to complete the specialty rotation. This is a two-week rotation. The specialty rotation is designed to provide the intern with practice in an area of dietetics that he/she is interested in further investigating. The specialty rotation will be mutually agreed upon by the intern and the Dietetics Director. This rotation provides the intern with an opportunity to take a leadership role in his/her education and to negotiate with the Dietetics Director and the specialty rotation preceptor. It is the intern’s responsibility to secure this rotation. Specialty rotations might include supermarket RD, private practice, sports nutrition, Cooperative Extension, communications/media, long-term care consulting, spa RD, local, state, federal RD. The intern will be responsible in determining what competencies will be met
during the rotation and specific learning activities. An evaluation must be completed by the specialty rotation preceptor and given to the Dietetics Director. The evaluation must be developed by the intern and approved by the Dietetics Director. A contract must be in place for an intern with the site. The intern must inform the Dietetics Director of the site and contact information so that a contract is put in place.

**Urban Issues:** Interns will have numerous experiences focusing on urban issues with diverse populations at Hartford Hospital and in the community rotation. Hartford Hospital is an 800 bed urban acute care facility including a level 1 trauma center and outpatient clinics, such as, the Brownstone (medical and surgical services for clinic patients), Diabetes Life Care, Women’s Health, Cancer Center, Bariatric Center, Institute of Living (IOL – psychiatric facility); the patient menu feeding a diverse population; SNAP-Ed; and working with hospital employees.

**Supervised Practice Facilities**

Hartford Hospital, with a national reputation of excellence and innovation, is one of the largest and most sophisticated tertiary medical centers in the country. It is a non-profit, 800-bed private urban acute care hospital including a level 1 trauma center and outpatient clinics. The Joint Commission on Accreditation of Health Care Organizations (JCAHO) accredits the Hospital. Hartford Hospital’s clinical rotations include: 1) Medical Service; 2) Surgical Service; 3) Cardiology Service; 4) Ambulatory Service (renal, diabetes, women’s health, oncology, and HIV). The wide variety of supervised practice experiences provides numerous opportunities to interns to become competent dietetic practitioners understanding urban issues.

Hartford Hospital is a member of the Hartford Health Care System.
COMPETENCY STATEMENTS FOR THE SUPERVISED PRACTICE COMPONENT

Competencies are set of specific knowledge, abilities, skills, capabilities, judgment, attitudes and values that every entry-level practitioner is expected to know and do for employment in dietetics. Competency statements are description of performance behavior of an entry-level practitioner, based on requisite knowledge, ability, capability, skills, judgment, attitudes and values. A concentration is an area of dietetics practice for which additional entry-level competency is developed. UConn’s Dietetic Internship Program has been developed to meet all of the competencies required as well as provide a concentration area.

2017 ACEND Competencies

Following are a list of the competencies/learning outcomes met during the dietetic internship program:

<table>
<thead>
<tr>
<th>Domain 1: Scientific and Evidence Base of Practice: integration of scientific information and research into practice</th>
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</thead>
<tbody>
<tr>
<td><strong>A) RE 6.1.a: ACEND-Required Core Competency</strong></td>
<td><strong>B) RE 6.1.b: Learning objectives that state specific activities and qualitative or quantitative target measures that will be used to assess overall student achievement of core competency</strong></td>
</tr>
<tr>
<td>CRDN 1.1: Select indicators of program quality and/or customer service and measure achievement of objectives.</td>
<td>100% of students will satisfactorily complete the Project Improvement assignment</td>
</tr>
<tr>
<td>CRDN 1.2: Apply evidence-based guidelines, systematic reviews and scientific literature.</td>
<td>83% of students will receive a B or higher on the Complementary and Alternative Medicine paper</td>
</tr>
<tr>
<td>CRDN 1.3: Justify programs, products, services and care using appropriate evidence or data.</td>
<td>100% of the students will complete a plate waste study and discuss recommendations</td>
</tr>
<tr>
<td>CRDN 1.4: Evaluate emerging research for application in nutrition and dietetics practice.</td>
<td>100% of the students will include current research during case study presentation</td>
</tr>
<tr>
<td>CRDN 1.5: Conduct projects using appropriate research methods, ethical procedures and data analysis.</td>
<td>83% of students will receive a competent rating during the research rotation</td>
</tr>
<tr>
<td>CRDN 1.6: Incorporate critical-thinking skills in overall practice.</td>
<td>100% of the students will score competent or higher on the final evaluation for clinical, community, and foodservice</td>
</tr>
</tbody>
</table>

Domain 2: Professional Practice Expectations: beliefs, values, attitudes and behaviors for the professional dietitian level of practice
<table>
<thead>
<tr>
<th>A) RE 6.1.a: ACEND-Required Core Competency</th>
<th>B) RE 6.1.b: Learning objectives that state specific activities and qualitative or quantitative target measures that will be used to assess overall student achievement of core competency</th>
<th>C) RE 6.1.c: Didactic courses and/or experiential learning in which assessment will occur</th>
</tr>
</thead>
<tbody>
<tr>
<td>CRDN 2.1: Practice in compliance with current federal regulations and state statutes and rules, as applicable and in accordance with accreditation standards and the Scope of Nutrition and Dietetics Practice and Code of Ethics for the Profession of Nutrition and Dietetics.</td>
<td>100% of the students will score “competent” on the Clinical Evaluation form for Initiative and Professionalism &amp; Time Management</td>
<td>Staff relief</td>
</tr>
<tr>
<td>CRDN 2.2: Demonstrate professional writing skills in preparing professional communications.</td>
<td>100% of the students will satisfactorily write a specification and a justification for a piece of equipment</td>
<td>Food service rotation</td>
</tr>
<tr>
<td>CRDN 2.3: Demonstrate active participation, teamwork and contributions in group settings.</td>
<td>100% of the students will satisfactorily participate in the theme meal project</td>
<td>Food service rotation</td>
</tr>
<tr>
<td>CRDN 2.4: Function as a member of interprofessional teams.</td>
<td>90% of students will receive a B or better on a reflection discussing the value of interprofessional team with pharmacy and speech and language students</td>
<td>Seminar</td>
</tr>
<tr>
<td>CRDN 2.5: Assign patient care activities to NDTRs and/or support personnel as appropriate.</td>
<td>80% of students will achieve a “beginner” rating in “Communicates with dietary support staff” on the clinical evaluation</td>
<td>Staff relief</td>
</tr>
<tr>
<td>CRDN 2.6: Refer clients and patients to other professionals and services when needs are beyond individual scope of practice.</td>
<td>100% of students will achieve a “competent” rating in Communicates appropriately with members of the health care team on Clinical evaluation form</td>
<td>Staff relief</td>
</tr>
<tr>
<td>CRDN 2.7: Apply leadership skills to achieve desired outcomes.</td>
<td>100% of the students will plan, seek, and determine competencies for the specialty rotation</td>
<td>Specialty rotation</td>
</tr>
<tr>
<td>CRDN 2.8: Demonstrate negotiation skills.</td>
<td>100% of the students will select staff relief assignment</td>
<td>Clinical rotations 1, 2, &amp; 3</td>
</tr>
<tr>
<td>CRDN 2.9: Participate in professional and community organizations.</td>
<td>100% of the students will attend a professional meeting</td>
<td>During internship</td>
</tr>
<tr>
<td>CRDN 2.10: Demonstrate professional attributes in all areas of practice.</td>
<td>83% of the students will achieve a “competent” rating in professionalism, time management, and ethical behavior on final clinical, community, food service, and research evaluations</td>
<td>Last rotation in staff relief, community, food service, &amp; research</td>
</tr>
<tr>
<td><strong>A) RE 6.1.a:</strong> ACEND-Required Core Competency</td>
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<td><strong>C) RE 6.1.c:</strong> Didactic courses and/or experiential learning in which assessment will occur</td>
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<tr>
<td>CRDN 2.11: Show cultural competence/sensitivity in interactions with clients, colleagues and staff.</td>
<td>90% of the students will be “competent” in communication skills for cultural competence/sensitivity</td>
<td>Last rotation in staff relief, community, &amp; food service</td>
</tr>
<tr>
<td>CRDN 2.12: Perform self-assessment and develop goals for self-improvement throughout the program.</td>
<td>100% of the students will self-assess at the conclusion of each clinical rotation and discuss goals</td>
<td>Clinical rotations 1, 2, &amp; 3</td>
</tr>
<tr>
<td>CRDN 2.13: Prepare a plan for professional development according to Commission on Dietetic Registration guidelines.</td>
<td>100% of students will receive a satisfactory on the plan for professional development</td>
<td>Seminar</td>
</tr>
<tr>
<td>CRDN 2.14: Demonstrate advocacy on local, state or national legislative and regulatory issues or policies impacting the nutrition and dietetics profession.</td>
<td>100% of the students will satisfactorily complete a public policy assignment</td>
<td>Seminar</td>
</tr>
<tr>
<td>CRDN 2.15: Practice and/or role play mentoring and precepting others.</td>
<td>100% of students will submit a reflection explaining and evaluating the mentoring experience</td>
<td>Mentoring reflection</td>
</tr>
</tbody>
</table>

**Domain 2: Clinical and Customer Services: development and delivery of information, products and services to individuals, groups and populations**

<p>| CRDN 3.1: Perform the Nutrition Care Process and use standardized nutrition language for individuals, groups and populations of differing ages and health status, in a variety of settings. | 83% of students will achieve a “competent” rating on the clinical evaluation form “Performs Nutrition Care Process and utilizes standardized language” | Staff relief |
| CRDN 3.2: Conduct nutrition focused physical assessment. | 83% of students will achieve a “beginner” rating on the clinical evaluation form “conducts nutrition focused physical assessment and incorporates into assessment” | Staff relief |
| CRDN 3.3: Demonstrate effective communications skills for clinical and customer services in a variety of formats and settings. | 100% of students will develop a lesson in the community setting and present to clients as well as presenting to peers and instructors | Community rotation |
| | 100% of the students will satisfactorily present an overview of issues facing the RDN in an urban setting | Seminar |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td>83% of the students will receive a “competent” rating on the clinical evaluation “Communicates with patients and family members demonstrating cultural competence &amp; sensitivity”</td>
<td>Staff relief</td>
<td></td>
</tr>
<tr>
<td>CRDN 3.4: Design, implement and evaluate presentations to a target audience.</td>
<td>100% of students satisfactorily complete and a presentation for diverse audience and evaluate it</td>
<td>Spring</td>
</tr>
<tr>
<td>CRDN 3.5: Develop nutrition education materials that are culturally and age appropriate and designed for the educational level of the audience.</td>
<td>100% of students will receive “beginner” or higher on the community evaluation for develop age, literacy, and developmentally appropriate nutrition education materials</td>
<td>Community</td>
</tr>
<tr>
<td>CRDN 3.6: Use effective education and counseling skills to facilitate behavior change.</td>
<td>83% of students will receive a “competent” rating on the evaluation in the Cardiac Rehab rotation</td>
<td>Cardiac Rehab</td>
</tr>
<tr>
<td>CRDN 3.7: Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management.</td>
<td>100% of the students will satisfactorily complete the National Nutrition Month rotation</td>
<td>NNM experience</td>
</tr>
<tr>
<td>CRDN 3.8: Deliver respectful, science-based answers to client questions concerning emerging trends.</td>
<td>83% of the students will receive “beginner” on community evaluation for Evaluate emerging research and communicates to clients respectfully to clients</td>
<td>Outpt Counseling Rotation</td>
</tr>
<tr>
<td>CRDN 3.9: Coordinate procurement, production, distribution and service of goods and services, demonstrating and promoting responsible use of resources.</td>
<td>100% of students will receive a “beginner” on the foodservice evaluation for the theme meal</td>
<td>Theme meal</td>
</tr>
<tr>
<td>CRDN 3.10: Develop and evaluate recipes, formulas and menus for acceptability and affordability that accommodate the cultural diversity and health needs of various populations, groups and individuals.</td>
<td>100% of students will receive a “beginner” on the foodservice evaluation for the theme meal</td>
<td>Theme meal</td>
</tr>
<tr>
<td>Domain 4: Practice Management and Use of Resources: strategic application of principles of management and systems in the provision of services to individuals and organizations</td>
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<td><strong>C) RE 6.1.c:</strong> Didactic courses and/or experiential learning in which assessment will occur</td>
</tr>
<tr>
<td>CRDN 4.1: Participate in management of human resources.</td>
<td>100% of the students will satisfactorily explain patient services</td>
<td>Foodservice</td>
</tr>
<tr>
<td>CRDN 4.2: Perform management functions related to safety, security and sanitation that affect employees, customers, patients, facilities and food.</td>
<td>100% of the students will satisfactorily explain in the culinary/retail assignment</td>
<td>Foodservice</td>
</tr>
<tr>
<td>CRDN 4.3: Conduct clinical and customer service quality management activities.</td>
<td>100% of students will satisfactorily complete the Project Improvement assignment</td>
<td>Food service rotation</td>
</tr>
<tr>
<td>CRDN 4.4: Apply current nutrition informatics to develop, store, retrieve and disseminate information and data.</td>
<td>100% of the students will be “competent” in Documents in the medical record according to facility guidelines on the Clinical Evaluation Form</td>
<td>Staff relief</td>
</tr>
<tr>
<td>CRDN 4.5: Analyze quality, financial and productivity data for use in planning.</td>
<td>100% of students will receive a “beginner” on the foodservice evaluation for the theme meal</td>
<td>Theme meal</td>
</tr>
<tr>
<td>CRDN 4.6: Propose and use procedures as appropriate to the practice setting to promote sustainability, reduce waste and protect the environment</td>
<td>100% of students will satisfactorily explain the Trim Trax program</td>
<td>Food service rotation</td>
</tr>
<tr>
<td>CRDN 4.7: Conduct feasibility studies for products, programs or services with consideration of costs and benefits.</td>
<td>100% of students will receive a “beginner” on the foodservice evaluation for the theme meal</td>
<td>Theme meal</td>
</tr>
<tr>
<td>CRDN 4.8: Develop a plan to provide or develop a product, program or service that includes a budget, staffing needs, equipment and supplies.</td>
<td>100% of students will receive a “beginner” on the foodservice evaluation for the theme meal</td>
<td>Theme meal</td>
</tr>
<tr>
<td>CRDN 4.9: Explain the process for coding and billing for nutrition and dietetics services to obtain reimbursement from public or private payers, fee-for-service and value-based payment systems.</td>
<td>100% of the students will participate in the coding and billing case study discussion</td>
<td>Seminar</td>
</tr>
<tr>
<td>A) RE 6.1.a: ACEND-Required Core Competency</td>
<td>B) RE 6.1.b: Learning objectives that state specific activities and qualitative or quantitative target measures that will be used to assess overall student achievement of core competency</td>
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</tr>
<tr>
<td>CRDN 4.10: Analyze risk in nutrition and dietetics practice.</td>
<td>100% of students will receive a “beginner” on the foodservice evaluation for the theme meal</td>
<td>Theme meal</td>
</tr>
</tbody>
</table>

**Concentration Area 1: Urban Issues**

<table>
<thead>
<tr>
<th>Demonstrate an understanding of the challenges facing the dietitian in an urban setting</th>
<th>100% of students will satisfactorily present an overview addressing the challenges facing the dietitian in an urban setting in a panel format speaking to six top issues identified by the interns</th>
<th>Seminar</th>
</tr>
</thead>
<tbody>
<tr>
<td>Utilize effective educational materials appropriate for low literacy, culturally diverse audiences</td>
<td>100% of students will receive “beginner” or higher of competence on the successful preparation and implementation of nutrition education materials that consider developmental appropriateness and literacy level of audience.</td>
<td>Community</td>
</tr>
</tbody>
</table>
Syllabi for Rotations

Clinical Rotations

Dietetic interns will have the following inpatient rotations:

- Long-term care
- Cardiac
- Medicine
- Surgery
- ICU (cardiac, medical, or trauma)
- Psychiatry
- Staff relief

The interns begin clinical rotations in the fall semester usually with long-term care and a clinical inpatient psychiatry rotation at the Institute of Living seeing pediatric/adolescent, adult, and geriatric populations. Rotations advance in difficulty progressing from Clinical 1: Introductory Clinical, Clinical 2: Intermediate Clinical, Clinical 3: Advanced Clinical (stepdown units or intensive care units), and culminating with supervised staff relief. In addition, interns will complete rotations focusing on disease states such as HIV, transplants (heart, lung, kidney, liver, and pancreas), cystic fibrosis, geriatrics, and orthopedics.

All rotations will be 8 hours per day for 4 to 5 days per week (Monday- Friday) depending on the seminar schedule. Due to varying hours of the clinical preceptors, the intern will work the hours of their assigned preceptor.

The following competencies will be covered over inpatient rotations:

**Domain 1: Scientific and Evidence Base of Practice: integration of scientific information and research into practice**

**Upon completion of the DI, graduates are able to:**

| CRDN 1.1 | Select indicators of program quality and/or customer service and measure achievement of objectives. |
| CRDN 1.2 | Apply evidence-based guidelines, systematic reviews and scientific literature. |
| CRDN 1.4 | Evaluate emerging research for application in nutrition and dietetics practice. |
| CRDN 1.6 | Incorporate critical-thinking skills in overall practice. |

**Domain 2: Professional Practice Expectations: beliefs, values, attitudes and behaviors for the professional dietitian level of practice.**

**Upon completion of the DI, graduates are able to:**

| CRDN 2.1 | Practice in compliance with current federal regulations and state statutes and rules, as applicable and in accordance with accreditation standards and the Scope of Nutrition and Dietetics Practice and Code of Ethics for the Profession of Nutrition and Dietetics. |
| CRDN 2.2 | Demonstrate professional writing skills in preparing professional communications. |
| CRDN 2.3 | Demonstrate active participation, teamwork and contributions in group settings. |
| CRDN 2.4 | Function as a member of interprofessional teams. |
CRDN 2.5: Assign patient care activities to NDTRs and/or support personnel as appropriate.

CRDN 2.6: Refer clients and patients to other professionals and services when needs are beyond individual scope of practice.

CRDN 2.7: Apply leadership skills to achieve desired outcomes.

CRDN 2.10: Demonstrate professional attributes in all areas of practice.

CRDN 2.11: Show cultural competence/sensitivity in interactions with clients, colleagues and staff.

CRDN 2.12: Perform self-assessment and develop goals for self-improvement throughout the program.

Domain 3: Clinical and Customer Services: development and delivery of information, products and services to individuals, groups and populations

Upon completion of the DI, graduates are able to:

- CRDN 3.1: Perform the Nutrition Care Process and use standardized nutrition language for individuals, groups and populations of differing ages and health status, in a variety of settings.
- CRDN 3.2: Conduct nutrition focused physical assessment.
- CRDN 3.3: Demonstrate effective communications skills for clinical and customer services in a variety of formats and settings.
- CRDN 3.4: Design, implement and evaluate presentations to a target audience.
- CRDN 3.5: Develop nutrition education materials that are culturally and age appropriate and designed for the educational level of the audience.
- CRDN 3.6: Use effective education and counseling skills to facilitate behavior change.
- CRDN 3.7: Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management.
- CRDN 3.8: Deliver respectful, science-based answers to client questions concerning emerging trends.

Domain 4: Practice Management and Use of Resources: strategic application of principles of management and systems in the provision of services to individuals and organizations

Upon completion of the DI, graduates are able to:

- CRDN 4.4: Apply current nutrition informatics to develop, store, retrieve and disseminate information and data.
- CRDN 4.5: Analyze quality, financial and productivity data for use in planning.

Concentration Area: Urban Issues

Demonstrate an understanding of the challenges facing the dietitian in an urban setting

Utilize effective educational materials appropriate for low literacy, culturally diverse audiences

Objectives:

- Chart in the electronic health system
- Utilize the nutrition care process
  - Assess, diagnose, implement, monitor/evaluate
• Communicate with the healthcare team
• Participate and contribute in medical rounds
• Determine appropriate enteral and parenteral needs of patients
• Observe PEG placement, a FEDS or barium swallow, and cardiac catheritization (strongly encourage)
• Prepare and present 2 case studies to staff from Hartford Hospital & UConn
• Complete 2 weeks of staff relief
  o The dietetic intern will cover a unit(s) that they he/she previously trained on. The intern will be in charge of the unit as if he/she is the RD on duty. The intern needs to prioritize all responsibilities that are involved in the unit and respond to any requests while on duty. Notes need to be cosigned by the RD.
• Develop skills to work with an urban population including patients, families, visitors, and medical staff

Evaluation: Each intern will be evaluated at the conclusion of each rotation by the clinical preceptor, internship liaison, and intern.
Outpatient Rotations

Dietetic interns will complete the following outpatient rotations:

- Diabetes Life Care
- Cardiac rehabilitation
- Renal
- General Outpatient

Additional rotations may be completed in bariatrics, cancer, etc depending on the intern’s interest. These experiences provide exposure and experiences with diverse populations allowing the intern to become culturally competent and sensitive.

All rotations will be 8 hours per day for 4 to 5 days per week (Monday- Friday) depending on the seminar schedule. Due to varying hours of the clinical preceptors, the intern will work the hours of their assigned preceptor.

Domain 1: Scientific and Evidence Base of Practice: integration of scientific information and research into practice
Upon completion of the DI, graduates are able to:

| CRDN 1.4: Evaluate emerging research for application in nutrition and dietetics practice. |

Domain 2: Professional Practice Expectations: beliefs, values, attitudes and behaviors for the professional dietitian level of practice.
Upon completion of the DI, graduates are able to:

| CRDN 2.1: Practice in compliance with current federal regulations and state statutes and rules, as applicable and in accordance with accreditation standards and the Scope of Nutrition and Dietetics Practice and Code of Ethics for the Profession of Nutrition and Dietetics. |
| CRDN 2.2: Demonstrate professional writing skills in preparing professional communications. |
| CRDN 2.3: Demonstrate active participation, teamwork and contributions in group settings. |
| CRDN 2.4: Function as a member of interprofessional teams. |
| CRDN 2.6: Refer clients and patients to other professionals and services when needs are beyond individual scope of practice |
| CRDN 2.10: Demonstrate professional attributes in all areas of practice. |
| CRDN 2.11: Show cultural competence/sensitivity in interactions with clients, colleagues and staff. |
| CRDN 2.12: Perform self-assessment and develop goals for self-improvement throughout the program. |

Domain 3: Clinical and Customer Services: development and delivery of information, products and services to individuals, groups and populations
Upon completion of the DI, graduates are able to:

| CRDN 3.1: Perform the Nutrition Care Process and use standardized nutrition language for individuals, groups and populations of differing ages and health status, in a variety of settings. |
CRDN 3.2: Conduct nutrition focused physical assessment.

CRDN 3.3: Demonstrate effective communications skills for clinical and customer services in a variety of formats and settings.

CRDN 3.4: Design, implement and evaluate presentations to a target audience.

CRDN 3.5: Develop nutrition education materials that are culturally and age appropriate and designed for the educational level of the audience.

CRDN 3.6: Use effective education and counseling skills to facilitate behavior change.

CRDN 3.7: Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management.

CRDN 3.8: Deliver respectful, science-based answers to client questions concerning emerging trends.

Domain 4: Practice Management and Use of Resources: strategic application of principles of management and systems in the provision of services to individuals and organizations

Upon completion of the DI, graduates are able to:

CRDN 4.4: Apply current nutrition informatics to develop, store, retrieve and disseminate information and data.

Concentration Area: Urban Issues

Demonstrate an understanding of the challenges facing the dietitian in an urban setting

Utilize effective educational materials appropriate for low literacy, culturally diverse audiences

Objectives:

- Chart in both the electronic health system and paper chart depending on the clinic rotation
- Utilize the nutrition care process
  - Assess, diagnose, implement, monitor/evaluate
- Counsel patients
- Communicate with the healthcare team and outside service providers
- Participate and contribute in medical rounds if available
- Teach outpatient classes where appropriate
- Develop and present nutrition education materials for a diverse audience
- Observe coding and billing of nutrition services for reimbursement
- Develop skills to work with an urban population including patients, families, visitors, and medical staff

Evaluation: Each intern will be evaluated at the conclusion of each rotation by the clinical preceptor, internship liaison, and intern.
Dietetic Internship Program
Community Practice Rotation
Fall 2017

Extension Instructor: Tina Fox Dugdale, MS RD RN CD-N
Office: Koons Hall 317A
Cell: 860-306-0228 (best)

Assistant Extension Instructor: Donna Zigmont RD CD-N
Cell: (860) 833-1932

Graduate student Samantha Oldman RD
Office: Koons Hall 317A (Mondays)
Cell: 860-986-2261
Email: Samantha.Oldman@uconn.edu

Heidi Karner, RD
Office: Koons Hall 317A (Mondays)
Cell: 765-749-7880
Email: Heidi.Karner@uconn.edu

Hours: Tuesday – Friday, 40 hours per week. Hours may vary from site to site. Monday Seminar affects some Mondays. Interns are required to be present for all assigned hours during the community rotation and most placements are in pairs. If an intern is unable to participate, they need to contact Tina as soon as they’ve made the decision. Time missed during the community rotation must be made up. Hours are to be tracked on time/effort forms available in Koons 317A. Time missed will be made up at the end of the semester, weekends, or evenings as determined by Tina and the community opportunities available to us at the time.

Academy of Nutrition and Dietetics
Nutrition Care Process Model

**COURSE GOAL:**

Diet 4435 focuses on the student’s accumulated competence in community nutrition. This rotation focuses on the introduction to, and development of, the skill sets inherent in community and public health nutrition. The intern will rely on accumulated competence in general nutrition principles, resulting in the application and synthesis of performance requirements in community nutrition. Program partnerships that provide hands-on community nutrition experiences for each intern include: WIC; mobile and stationary pantries; grocery stores; Head Start and CT School Readiness funded preschools; Title I schools; community health care outpatient nutrition services; senior subsidized housing sites; non-profits focused on food security (End Hunger CT; CLiCK community kitchen and garden); and farmers markets. A partnership with the University of Connecticut Medical and Dental Schools provides an opportunity for interdisciplinary education and counseling practice.

**Course Learning Objectives:**

1. To gain an increased understanding of the importance of assessment of the nutrition education needs of individuals and groups in a specific community demographic and in the context of a behavior change model.

2. To increase skill sets in the implementation of the nutrition education needs of individuals and groups utilizing the steps of the Nutrition Care Process (*assessment, diagnosis, plan, implement, evaluate, modify*).

3. To increase skills in setting learner goals and objectives in the context of outcomes’ related evaluation of community based programming.

4. To increase skills such as self-management, time management, teamwork, and communication and interprofessional education experiences with peers and community stakeholders in the context of delivery of quality nutrition education to individuals and groups.

Becoming a dietitian involves a combination of academics and application. The Academy of Nutrition and Dietetics and ACEND (The Accreditation Council for Education in Nutrition and Dietetics) is an autonomous accrediting agency for education programs preparing students to begin careers as registered dietitians or dietetic technicians, registered. Programs meeting the accreditation standards are accredited by ACEND. They have established competencies that when met, reflect your skills in community/public health. The competencies are housed in topics supported by the sciences.

**DIETETICS INTERNS’ LEARNING OUTCOMES:**

With successful completion of this community rotation, interns will achieve the following practice skills:

**Domain 1: Scientific and Evidence Base of Practice: integration of scientific information and research into practice**

CRDN 1.1 Select indicators of program quality and/or customer service and measure achievement of objectives. (Note: Outcomes may include clinical, programmatic, quality, productivity, economic or other outcomes in wellness, management, sports, clinical settings, etc.)

CRDN 1.2 Apply evidence-based guidelines, systematic reviews and scientific literature.

CRDN 1.3 Justify programs, products, services and care using appropriate evidence or data

CRDN 1.4 Evaluate emerging research for application in dietetics practice

CRDN 1.5 Conduct projects using appropriate research methods, ethical procedures and data analysis

CRDN 1.6 Incorporate critical-thinking skills in overall practice.
Domain 2: Professional Practice Expectations: beliefs, values, attitudes and behaviors for the professional dietitian level of practice.
CRDN 2.1 Practice in compliance with current federal regulations and state statutes and rules, as applicable and in accordance with accreditation standards and the Scope of Dietetics Practice and Code of Ethics for the Profession of Dietetics
CRDN 2.2 Demonstrate professional writing skills in preparing professional communications (Note: Examples include research manuscripts, project proposals, education materials, policies and procedures)
CRDN 2.3 Demonstrate active participation, teamwork and contributions in group settings
CRDN 2.4 Function as a member of interprofessional teams.
CRDN 2.5 Assign duties to NDTRs and/or support personnel as appropriate.
CRDN 2.6 Refer clients and patients to other professionals and services when needs are beyond individual scope of practice
CRDN 2.7 Apply leadership skills to achieve desired outcomes
CRDN 2.8 Demonstrate negotiation skills
CRDN 2.9 Participate in professional and community organizations
CRDN 2.10 Demonstrate professional attributes in all areas of practice
CRDN 2.11 Show cultural competence/sensitivity in interactions with clients, colleagues and staff.
CRDN 2.12 Perform self-assessment and develop goals for self-improvement throughout the program.
CRDN 2.13 Prepare a plan for professional development according to Commission on Dietetic Registration guidelines.
CRDN 2.14 Demonstrate advocacy on local, state or national legislative and regulatory issues or policies impacting the nutrition and dietetics profession.
CRDN 2.15 Practice and/or role play mentoring and precepting others.

Domain 3: Clinical and Customer Services: development and delivery of information, products and services to individuals, groups and populations
CRDN 3.1 Perform the Nutrition Care Process and use standardized nutrition language for individuals, groups and populations of differing ages and health status, in a variety of settings.
CRDN 3.2 Conduct nutrition focused physical exams.
CRDN 3.3 Demonstrate effective communications skills for clinical and customer services in a variety of formats
CRDN 3.4 Design, implement and evaluate presentations to a target audience.
CRDN 3.5 Develop nutrition education materials that are culturally and age appropriate and designed for the literacy level of the audience.
CRDN 3.6 Use effective education and counseling skills to facilitate behavior change
CRDN 3.7 Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management.
CRDN 3.8 Deliver respectful, science-based answers to client questions concerning emerging trends.
CRDN 3.9 Coordinate procurement, production, distribution and service of goods and services, demonstrating and promoting responsible use of resources
CRDN 3.10 Develop and evaluate recipes, formulas and menus for acceptability and affordability that accommodate the cultural diversity and health needs of various populations, groups and individuals.

Domain 4: Practice Management and Use of Resources: strategic application of principles of management and systems in the provision of services to individuals and organizations
CRDN 4.1 Participate in management of human resources
CRDN 4.2 Perform management functions related to safety, security and sanitation that affect employees,
customers, patients, facilities and food
CRDN 4.3 Conduct clinical and customer service quality management activities
CRDN 4.4 Apply current nutrition informatics to develop, store, retrieve and disseminate information and data.
CRDN 4.5 Analyze quality, financial or productivity data for use in planning
CRDN 4.6 Propose and use procedures as appropriate to the practice setting to promote sustainability, reduce waste and protect the environment
CRDN 4.7 Conduct feasibility studies for products, programs or services with consideration of costs and benefits.
CRDN 4.8 Develop a plan to provide or develop a product, program or service that includes a budget, staffing needs, equipment and supplies
CRDN 4.9 Explain the process for coding and billing for nutrition and dietetics services to obtain reimbursement from public or private payers, fee-for-service and value-based payment systems.
CRDN 4.10 Analyze risk in nutrition and dietetics practice.

Performance Evaluation:

1. The intern will be in attendance at rotation orientation.
2. Communication in this rotation is imperative. Email and cell phones are utilized.
3. Assignments are made in pairs. Driving to sites is necessary to connect you to valuable hands-on community experiences. Car-pooling is highly encouraged.
4. Feedback will be provided by site mentor at each site when time and situation allows, and open dialogue on-going throughout rotation via email, text, phone calls, etc.
5. Questions and communications highly encouraged with Tina, Donna and grad student Sam.
6. At the end of the rotation, the intern will meet with Tina to review written performance evaluation

TfdmsrdnmcdfnFall17
Food Service Rotation at Hartford Hospital

The food service rotation is 3 weeks at Hartford Hospital. This rotation will be a combination of hands on learning about how a large in-patient hospital, cafeteria, and catering food service function as well as a week being involved in the administrative processes. Throughout the 3 weeks you will be responsible for special projects that are important when conducting a food service business. All competencies MUST be satisfactorily completed by the end of the rotation to pass this portion of the internship. Competencies should be reviewed before rotations begin and completed during the rotation. It is your responsibility to ASK the questions of the preceptors to help you complete your assignments. Preceptors are aware of the competencies required and you will need to apply the knowledge you gain in each rotation to understand and achieve the desired outcomes. All assignments below must be TYPED and handed in within one week of the completion of the rotation.

The weeks are broken down into 3 focuses - Patient Services, Culinary/Retail, and Administrative Systems and Reporting. Dress code for days in culinary/retail is changed to black pants (not jeans), white shirts, and non-skid shoes. Professional dress code needs to be maintained on all other days.

Students will spend 8 hours per day in this rotation. Your schedule will vary; some days you will come in at 6 AM and some days you may stay until 8 PM. You will be given the schedule for your specific weeks prior to the start date.

Required Competencies and Codes

Domain 1: Scientific and Evidence Base of Practice: integration of scientific information and research into practice

CRDN 1.1: Select indicators of program quality and/or customer service and measure achievement of objectives
  - Perform satisfactorily when completing the Performance Improvement (PI) project

CRDN 1.3: Justify programs, products, services and care using appropriate evidence or data
  - Perform satisfactorily when completing the plate waste study

CRDN 1.6: Incorporate critical-thinking skills in overall practice
  - Receive a competent score on the foodservice evaluation

Domain 2: Professional Practice Expectations: beliefs, values, attitudes and behaviors for the professional dietitian level of practice

CRDN 2.2: Demonstrate professional writing skills in preparing professional communications
  - Perform satisfactorily when writing a specification and a justification for a piece of equipment

CRDN 2.3: Demonstrate active participation, teamwork and contributions in group settings
  - Perform satisfactorily on the Theme Meal project

CRDN 2.10: Demonstrate professional attributes in all areas of practice
  - Receive a competent rating in professionalism, time management, and ethical behavior on final evaluation

CRDN 2.11: Show cultural competence/sensitivity in interactions with clients, colleagues and staff
• Receive a competent rating in communication skills for cultural competence/sensitivity

**Domain 3: Clinical and Customer Services: development and delivery of information, products and services to individuals, groups and populations**

CRDN 3.7: Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management
- Perform satisfactorily on the National Nutrition Month rotation

CRDN 3.9: Coordinate procurement, production, distribution and service of goods and services, demonstrating and promoting responsible use of resources
- Receive a beginner rating or better on the Theme Meal project

CRDN 3.10: Develop and evaluate recipes, formulas and menus for acceptability and affordability that accommodate the cultural diversity and health needs of various populations, groups and individuals
- Receive a beginner rating or better on the Theme Meal project

**Domain 4: Practice Management and Use of Resources: strategic application of principles of management and systems in the provision of services to individuals and organizations**

CRDN 4.1: Participate in management of human resources
- Perform satisfactorily on patient services rotation assignments

CRDN 4.2: Perform management functions related to safety, security and sanitation that affect employees, customers, patients, facilities and food
- Perform satisfactorily on culinary/retail rotation assignments

CRDN 4.3: Conduct clinical and customer service quality management activities
- Perform satisfactorily when completing the Performance Improvement (PI) project

CRDN 4.5: Analyze quality, financial and productivity data for use in planning
- Receive a beginner rating or better on the Theme Meal project

CRDN 4.6: Propose and use procedures as appropriate to the practice setting to promote sustainability, reduce waste and protect the environment
- Perform satisfactorily on Trim Trax assignment

CRDN 4.7: Conduct feasibility studies for products, programs or services with consideration of costs and benefits
- Receive a beginner rating or better on the Theme Meal project
CRDN 4.8: Develop a plan to provide or develop a product, program or service that includes a budget, staffing needs, equipment and supplies

- Receive a beginner rating or better on the Theme Meal project

CRDN 4.10: Analyze risk in nutrition and dietetics practice

- Receive a beginner rating or better on the Theme Meal project

**Patient Services Rotation Assignment**

**Diet Office:** Understand diet office procedures, diet changes/generate tray ticket, patient menu selections, Computrition, tube feeding orders and delivery, scheduling staff, and meal counts. Interaction between clinical staff and office should be noted.

1. Explain how a one week schedule for the diet office works, noting how many hours are needed, how many FTEs are used on a daily basis, and how planned and unplanned vacancies are filled. Is overtime (OT) used to cover any schedule issues? How is weekend coverage determined?
2. Describe the role of the unit leader.
3. Describe the other positions in the diet office and what their responsibilities are. Do the employees have the ability to do every job?
4. List the reports that the employees use to assist in their daily tasks.
5. What type of menu are we currently using? How could the existing menu be changed to better satisfy the patients? Keep in mind the space currently used for the menu and the serving space on the tray line, as well as cost.
6. Complete a **Test Tray** for your PI report.
7. Monitor and document the nutrition coordinators daily tasks for the **Coordinator Workflow** for your PI report.

**Patient Tray:** Observe and participate in the organization of the patient trayline. Pass trays to patients, participate in unit stocking. Be aware of the importance of tray assembly, portion control, accuracy, training, and waste management. Be aware of proper temperatures for a cook serve system.

1. Describe the differences in a cook serve system versus a room service system. What are the advantages and disadvantages of both?
2. How would you propose changing to a room service system for a hospital this size? What equipment would need to be changed if we converted to a room service system? What type of system to maintain temperatures would you recommend?
3. How would the staffing change if a room service system was utilized?
4. Conduct a **Plate Waste Study** for your PI project.

**Culinary/Retail Rotation Assignment**

**Culinary Production:** Become familiar with the equipment in the food production area, individual job responsibilities of employees in the area, distribution of labor, and work flow. You must be knowledgeable about safe food handling procedures and temperatures, including requirements of HACCP and regulatory agencies. Work with the cooks to understand standardized recipes, forecasting, the importance of portion control, and production. Determine the relationship between food cost, pricing including mark up, controlling costs, and profit/loss within the department.

1. Identify one piece of equipment that you will focus on for your **Equipment Specification project**.
2. Discuss the importance of a standardized recipe in an acute care setting. What are some of the issues that can occur when recipes are not followed? Provide a thorough discussion including cost, inventory, client acceptance, safety, and impact on nutrient analysis.

3. Explain what the Trim Trax initiative does and it’s correlated dollar savings. What are the 4 categories of waste being tracked and where does this information go? Why? Give an explanation of waste reduction.

**Inventory, Catering, Food Safety:** Observe purchasing procedures and the inventory control process. Participate in inventory control and purchasing. Understand safe food handling from delivery to service. Participate in a sanitation inspection and understand the guidelines for safe food storage. Observe a catering function, how it is ordered, scheduled, produced, served, and charged. Understand the importance of catering functions in the hospital setting and restrictions that must be followed.

1. List and explain why a food service department would be interested in providing catering services.
2. Discuss staffing for catering.
3. If available, include menus, deviations of menus allowed, inclusion of liquor, determining selling price and mark-up.
4. Explain what you learned in the sanitation inspection.
5. Discuss the use of the Waste Bucket and how it relates to budgeted savings.
6. Complete a **HACCP Project** for your PI report.

**Administrative Systems and Reporting Rotation Assignment**

Participate in management activities relating to the budget, staffing, hiring employees including interviewing, human resource documentation, policies and procedures, department manual, diet manual, Performance Improvement (Quality Control), auditing, performance review, organizational charts, inter-department and interdisciplinary communications, competencies, and technology.

1. Review all policies and procedures manuals. Specify different job codes and descriptions.
2. What manuals are mandated by the state inspections and by JCAHO inspections? Why? Where are the kept in the department?
3. Review the budget (annual and monthly), P&L statements, and trends.
4. Understand and observe a **Clinical RD/DTR Chart Audit** for your PI report.
5. Determine the topic and complete an **Employee In-Service** for your PI report.

**Food Service Projects to Meet Competencies:**

**Performance Improvement (PI) Project:** Under this project you will be performing many activities:

**Part 1: Test Tray** – Coordinate this with the unit leader at a lunch meal service. The test tray will be the last tray on the truck served on the last unit. The purpose of this is to verify the temperatures of the food that the patients are eating upon conclusion of the meal service. Document the start of the meal service, the time the test tray was plated, and the time it arrived to the unit and was tested. Document the temperatures taken and a brief description of the food items.

**Part 2: Coordinator Workflow** – When following the coordinators, observe and participate. Find one area in the workflow that could be improved to enable the coordinators to move faster and obtain more patient choices.

**Part 3: Plate Waste Study** – Identify a food item on a specific meal that you want to assess. You will need to observe the waste and calculate the results. Determine if the item studied is an acceptable menu item and should remain on the menu or if it should be replaced. Make note of the number of portions being served to the patients versus how many portions (in ¼ portion servings) are coming back to the dish room. You will estimate plate waste based on
observation and number of portions returned. You should also indicate WHY some trays are not touched. See the unit leader for help with this assignment.

Part 4: HACCP Project – Use the 7 steps of the HACCP analysis to follow one food item from delivery, to storage, to production, and final distribution point to the client. List each of the Critical Control Points of that food item.

Part 5: Clinical RD/DTR Chart Audit – During your Administrative Systems and Reporting week, ask to observe a clinical RD/DTR chart audit. Review a nutrition note in a medical chart. Determine if the recommendations made by the RD/DTR were followed by the provider (check order section of EPIC or Comptrition orders). The department has specific nutrition standards that must be met. Document dates of the nutrition notes in order to determine if we are in compliance with our standards of care or guidelines of practice.

Part 6: Employee In-service – Throughout your rotation, inquire about topics requiring employee education. Organize and present an in-service to staff (either food service, clinical, or management).

**Equipment Specification Project:** Identify one piece of equipment that you will focus on for this project. Determine the age of the equipment and its repair history. Decide if it is more cost effective to repair the current equipment or purchase a replacement. If a replacement is necessary consider the existing requirements for space, energy, and use. Discuss how you will purchase the piece of equipment. List the equipment specifications. Discuss what departments are needed within the hospital to coordinate this purchase. If you chose to repair the equipment, explain the rationale for this decision.

**ROI Project (Return on Investment) / Theme Meal:** Please refer to separate handouts referring to the Theme Meal Guidelines and Calendar of deadlines. This project will be summarized by individual reports to be turned in within one week of completion of the Theme Meal.

**Evaluation:** Each intern will be evaluated at the conclusion of each rotation by the clinical preceptor, internship liaison, and intern.
Interns will spend 8 hours per day in this rotation.
The food service evaluation form will be completed at the conclusion of the rotation.

Competencies and Objectives

Domain 1: Scientific and Evidence Base of Practice: integration of scientific information and research into practice
Upon completion of the DI, graduates are able to:

CRDN 1.3: Justify programs, products, services and care using appropriate evidence or data.
- Discuss programs offered in schools

Domain 2: Professional Practice Expectations: beliefs, values, attitudes and behaviors for the professional dietitian level of practice.
Upon completion of the DI, graduates are able to:

CRDN 2.2: Demonstrate professional writing skills in preparing professional communications.
- Construct a communication for the program; this could relate to the menu, a bulletin board, providing a nutrition education program, etc.

CRDN 2.3: Demonstrate active participation, teamwork and contributions in group settings.
- Demonstrates ability to work effectively as a team member demonstrating cultural competence & sensitivity

CRDN 2.7: Apply leadership skills to achieve desired outcomes.
- Complete assignments proactively seeking advice and input when needed

CRDN 2.10: Demonstrate professional attributes in all areas of practice.
- Practices professionally and manages time wisely

Domain 3: Clinical and Customer Services: development and delivery of information, products and services to individuals, groups and populations
Upon completion of the DI, graduates are able to:

CRDN 3.3: Demonstrate effective communications skills for clinical and customer services in a variety of formats and settings.
- Demonstrates effective communication skills when dealing with employees and customers

CRDN 3.7: Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management.
- Describe the school wellness program

CRDN 3.9: Coordinate procurement, production, distribution and service of goods and services, demonstrating and promoting responsible use of resources.
- Discuss the procurement process and the use of commodities in the school system
- Critique the school foodservice operation for sustainability
CRDN 3.10: Develop and evaluate recipes, formulas and menus for acceptability and affordability that accommodate the cultural diversity and health needs of various populations, groups and individuals.

- Review school menus and programs for acceptability, cost and preferences of diverse populations

Domain 4: Practice Management and Use of Resources: strategic application of principles of management and systems in the provision of services to individuals and organizations

Upon completion of the DI, graduates are able to:

CRDN 4.1: Participate in management of human resources.
- Discuss scheduling of employees

CRDN 4.2: Perform management functions related to safety, security and sanitation that affect employees, customers, patients, facilities and food.
- Review HACCP and sanitation and safety procedures of the school system

CRDN 4.6: Propose and use procedures as appropriate to the practice setting to promote sustainability, reduce waste and protect the environment
- Critique the school foodservice operation for sustainability

Concentration Area: Urban Issues

Upon completion of the DI, graduates are able to:

Demonstrate an understanding of the challenges facing the dietitian in an urban setting
- Discuss requirement of free and reduced eligibility and percentages at schools and the school system

Evaluation: Each intern will be evaluated at the conclusion of each rotation by the clinical preceptor, internship liaison, and intern.
Long-Term Care Rotation

Dietetic interns will spend two weeks at a skilled nursing and rehabilitation facility.

All rotations will be 8 hours per day for 4 to 5 days per week (Monday- Friday) depending on the seminar schedule. Due to varying hours of the clinical preceptors, the intern will work the hours of their assigned preceptor.

2. Professional Practice Expectations: beliefs, values, attitudes and behaviors for the professional dietitian level of practice.

Upon completion of the DI, graduates are able to:

CRD 2.1: Practice in compliance with current federal regulations and state statutes and rules, as applicable and in accordance with accreditation standards and the Scope of Dietetics Practice and Code of Ethics for the Profession of Dietetics

CRD 2.3: Design, implement and evaluate presentations to a target audience (Note: A quality presentation considers life experiences, cultural diversity and educational background of the target audience.)

CRD 2.7: Refer clients and patients to other professionals and services when needs are beyond individual scope of practice

CRD 2.11: Demonstrate professional attributes within various organizational cultures (Note: Professional attributes include showing initiative and proactively developing solutions, advocacy, customer focus, risk

3. Clinical and Customer Services: development and delivery of information, products and services to individuals, groups and populations

Upon completion of the DI, graduates are able to:

CRD 3.1: Perform the Nutrition Care Process (a through e below) and use standardized nutrition language for individuals, groups and populations of differing ages and health status, in a variety of settings

CRD 3.1.a: Assess the nutritional status of individuals, groups and populations in a variety of settings where nutrition care is or can be delivered

CRD 3.1.b.: Diagnose nutrition problems and create problem, etiology, signs and symptoms (PES) statements

CRD 3.1.c: Plan and implement nutrition interventions to include prioritizing the nutrition diagnosis, formulating a nutrition prescription, establishing goals and selecting and managing intervention

CRD 3.1.d: Monitor and evaluate problems, etiologies, signs, symptoms and the impact of interventions on the nutrition diagnosis

CRD 3.1.e: Complete documentation that follows professional guidelines, guidelines required by health care systems and guidelines required by the practice setting

Objectives:

- Chart in the medical record
- Utilize the nutrition care process
  - Assess, recommend, and follow nutritional recommendations
- Visit and work with patients
• Communicate with the healthcare team
• Participate and contribute in patient care rounds
• Determine appropriate enteral needs of patients
• Utilize the MDS terminology in patient care
• Develop skills to work with the geriatric population and different disease states
• Recognize the importance of family involvement when working with this population

**Evaluation:** Each intern will be evaluated at the conclusion of each rotation by the clinical preceptor and intern.
Wellness Experience

Interns will participate in wellness activities during the Spring semester. Intern will provide education on campus in the Dining Halls, Student Union, or Hawley Armory promoting consumer health, wellness and lifestyle management. Activities will be coordinated with the Community Nutrition preceptor. Materials and presentations must be reviewed prior presentations.

Competencies and Objectives

Domain 3: Clinical and Customer Services: development and delivery of information, products and services to individuals, groups and populations

Upon completion of the DI graduates are able to:
CRDN 3.4: Design, implement and evaluate presentations to a target audience.
CRDN 3.5: Develop nutrition education materials that are culturally and age appropriate and designed for the educational level of the audience.
CRDN 3.7: Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management.
CRDN 3.8: Deliver respectful, science-based answers to client questions concerning emerging trends.

Evaluation: Community preceptor
Dietetics Research Practicum

Dietetics practice is based on evidence. The registered dietitian must be able to conduct research as the high quality and cost effective care is necessary to assure success; dietetics faculty work in a variety of research settings. Interns will collaborate on research projects. The projects will vary annually and may focus on school foodservice and healthy eating and nutrition education. Faculty will mentor interns during the research component of the internship developing their ability to: problem solve, critically evaluate scientific literature; develop research hypotheses and design what tests these hypotheses; collect the data; interpret and synthesize the results; develop clinical application of this research. If appropriate interns will submit their work to the Connecticut Academy of Nutrition & Dietetics for a poster presentation at the Annual Spring meeting. This serves to develop the interns’ communication skills and to highlight the achievements of interns, as well as, encouraging submission of research to professional meetings.

Course Goal:
The goal of this course is to have interns actively engaged in the research process.
- Interns will work with UConn faculty members to work on a research project
- Intern will work 8 hours per day for the three week rotation
- Interns will work together on a variety of projects and if appropriate prepare and present a poster

Faculty: Ellen L Shanley, MBA, RDN, CDN, FAND & Jillian Wanik, DCN, RDN, CDN

Competencies Completed:

Domain 1: Scientific and Evidence Base of Practice: integration of scientific information and research into practice
Upon completion of the DI graduates are able to:
CRDN 1.2: Apply evidence-based guidelines, systematic reviews and scientific literature.
CRDN 1.4: Evaluate emerging research for application in nutrition and dietetics practice.
CRDN 1.5: Conduct projects using appropriate research methods, ethical procedures and data analysis.

Domain 2: Professional Practice Expectations: beliefs, values, attitudes and behaviors for the professional dietitian level of practice
Upon completion of the DI graduates are able to
CRDN 2.2: Demonstrate professional writing skills in preparing professional communications.
CRDN 2.3: Demonstrate active participation, teamwork and contributions in group settings.
CRDN 2.7: Apply leadership skills to achieve desired outcomes.
CRDN 2.11: Show cultural competence/sensitivity in interactions with clients, colleagues and staff.

Domain 4: Practice Management and Use of Resources: strategic application of principles of management and systems in the provision of services to individuals and organizations
Upon completion of the DI graduates are able to
CRDN 4.4: Apply current nutrition informatics to develop, store, retrieve and disseminate information and data.
Case Study Outline

You will be presenting 2 case studies this year to the Hartford Hospital RDs, DTRs and UConn Facility. Each presentation will be approximately 20-25 minutes long and 5 minutes for audience questions. A power point presentation will compliment your case study. You will be evaluated on your presentation and the Clinical Liaison will review the evaluation with you. A copy of the evaluation form used by your audience can be found in your handbook.

Your case study should contain the following:

1. Patient Demographic
2. Medical History
   a. PMH
   b. Admission DX
3. Hospitalization Course
4. Medications
   a. Prior to Admission
   b. During admission
   c. Sent home on (if Pt was D/C)
5. Lab Values
6. MNT
   a. Prior to Admission
   b. Hospitalization
7. Nutritional Assessment
8. Nutritional Problems
9. Nutritional Interventions
10. Monitoring/Evaluations
11. Review of Literature
    a. Background
    b. Goal of study
    c. Method
    d. Results
    e. References
12. What I would do differently
NUTRITION CARE CONFERENCE EVALUATION CRITERIA

INTERN NAME: ______________________________    DATE: _______

<table>
<thead>
<tr>
<th>Maximum Points</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nutrition Assessment</td>
<td>40</td>
</tr>
<tr>
<td>Medical Nutrition Therapy</td>
<td>40</td>
</tr>
<tr>
<td>Rapport with Audience</td>
<td>20</td>
</tr>
</tbody>
</table>

**Nutrition Assessment**
- Demographics
- Anthropometrics
- Psychosocial factors
- Medical history
- Diagnosis (focus on main nutrition-related problems)
- Significant medications
- Biochemical indices
- Nutrition history - significant points

**Medical Nutrition Therapy**
- Nutritional needs
- Dietary adjustments
- Possible obstacles
- Intervention strategies
- Evaluation

**Rapport with Audience**
- Appropriate eye contact
- Clear audible voice
- Stimulates interest
- Well prepared
- Effective use of PowerPoint
- Answered questions accurately
- Enthusiastic

**Strengths:**

**Suggestions for improvement:**
# Critique of an Interview

**Intern:**

**Rotation:**

**Preceptor:**

**Date:**

<table>
<thead>
<tr>
<th>Expectations</th>
<th>Satisfactory (2pts):</th>
<th>Needs Improvement (1pt):</th>
<th>Unsatisfactory/ Did Not Do (0 pts):</th>
<th>Comments (Note if not applicable):</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Introduced self appropriately</td>
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<tr>
<td>2. Established rapport appropriately</td>
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<td>3. Objectives shared with learner</td>
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<td>4. Determined when and where meals are eaten</td>
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<td>5. Determined how many meals and snacks are eaten</td>
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<td>6. Established what size portions are eaten</td>
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<tr>
<td>Expectations:</td>
<td>Satisfactory (2 pts):</td>
<td>Needs Improvement (1 pt):</td>
<td>Unsatisfactory/Did Not Do (0 pts):</td>
<td>Comments (Note if not applicable):</td>
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<tr>
<td>7. Determined usual food preparation methods</td>
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<td>8. Determined food likes and dislikes</td>
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<td>9. Determined allergies and intolerances</td>
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<td>10. Used open-ended questions appropriately</td>
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<td>11. Clarified/followed up on answers appropriately</td>
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<td>12. Summarized and recorded information appropriately</td>
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<td>13. Determined economics and food preparation and storage resources</td>
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<td>14. Listened effectively</td>
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<td>15. Established follow-up activities</td>
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<td><strong>Score:</strong></td>
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List the interns strengths in interviewing:

List the areas that the intern needs to improve:

Write several substantive comments (feedback) as you would say them to this intern:
The University of Connecticut  
Dietetic Internship  
Tracking Document for Conditions & Procedures

Intern Name: ________________________________

The intern is responsible to indicate which conditions are seen in each rotation. This form will be brought to the evaluations with the preceptor and the HH Clinical Liaison for verification. The intern and HH Liaison will ensure that you see all bolded conditions.

<table>
<thead>
<tr>
<th>Condition</th>
<th>Clinical 1</th>
<th>Clinical 2</th>
<th>Clinical 3</th>
<th>Psychiatry</th>
<th>Long-term care</th>
<th>DLC</th>
<th>Cardiac Rehab</th>
<th>Dialysis</th>
<th>General Outpt</th>
<th>Bariatric</th>
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<tbody>
<tr>
<td>Overweight &amp; obesity</td>
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<td>Endocrine Disorders</td>
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<td>Malnutrition</td>
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<td>Cardiovascular disease</td>
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<td>GI disorders</td>
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<td>Renal disease</td>
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<td>Cystic Fibrosis</td>
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<td>Transplant</td>
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</table>

For a broad experience it is recommended that you observe the following procedures if you are able to tolerate.

<table>
<thead>
<tr>
<th>Procedures</th>
<th>Date Completed</th>
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</thead>
<tbody>
<tr>
<td>PEG Placement</td>
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<tr>
<td>FEES OR Barium Swallow</td>
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<td>Cardiac Catheterization</td>
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<td>Wound change</td>
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<td>PICC Placement or central line</td>
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<tr>
<td>Intubation/extubation</td>
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<tr>
<td>DHT/NG tube</td>
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</tbody>
</table>
Mentoring Experience for Dietetic Interns

Each Dietetic Intern must complete a mentoring experience. It is important to have a fully developed mentoring experience. To complete this assignment, each intern will define, implement and evaluate a meaningful mentoring experience; submitting a reflection about the experience by the end of the internship. The intern will submit the reflection through an assignment portal on the compliance website on HuskyCT. A resource can be found on the HuskyCT site.

Ownership of the mentoring experience is important and the intern will take leadership of this. The requirement may be fulfilled in many ways. Following are some examples:

- Mentor and guide an undergraduate didactic intern interested in dietetics, assisting him/her with undergraduate steps necessary to pursue the career. This could be someone from where you graduated and is thinking of applying to internships.
- Connect to a NUSC student at UConn to discuss the internship application process.
- Return to your high school and speak with students about dietetics as a career option.

There are lots of possibilities! Please ask if you have any questions.
Definition of Performance Standards

1 - NOVICE - requires frequent supportive and occasional directive cues; identifies principles but needs direction to identify application

2 - BEGINNER - requires a supportive or directive cue occasionally; applies principles accurately with occasional cues; works at acceptable standards

3 - COMPETENT - demonstrates sound knowledge and effective use of entry level skills; seeks assistance after investigating potential solutions

N/A - Not observed/Not applicable

INSTRUCTIONS FOR PRECEPTORS: This evaluation serves as a continuum throughout junior and senior year. It is assumed that junior year the student will fall between Novice/Beginner, and Beginner/Competent during senior year. After completing the form, please assign a letter grade (located at the end of this form) which most closely assesses the student's competencies.

<table>
<thead>
<tr>
<th>1. INITIATIVE</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>N/A</th>
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<tbody>
<tr>
<td>Prepares appropriately for practicum days</td>
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<tr>
<td>Seeks out information and answers to questions</td>
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<tr>
<td>Takes initiative for additional learning</td>
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</table>

COMMENTS:

<table>
<thead>
<tr>
<th>2. NUTRITION ASSESSMENT AND CARE PLANS</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>N/A</th>
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</thead>
<tbody>
<tr>
<td>Performs nutrition screening to target at risk patients</td>
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<tr>
<td>Performs diet history when appropriate</td>
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<tr>
<td>Identifies and retrieves pertinent data from the medical record</td>
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<tr>
<td>Comprehends and utilizes laboratory values to analyze nutritional status</td>
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<td>Reviews patient's medications for side effects/interactions</td>
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<td>Conducts nutrition focused physical assessment and incorporates into assessment</td>
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<tr>
<td>Assesses patient's nutrient needs based on stress level/medical condition</td>
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<td>Utilizes appropriate formulas and calculations to formulate nutrient needs</td>
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<td>Assesses appropriateness of diet order and suggests changes if needed</td>
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<tr>
<td>Analyzes, evaluates, and summarizes assessment to identify nutritional problems</td>
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<td>Designs and implements appropriate individualized nutrition care plan</td>
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<tr>
<td>Integrates pathophysiology into nutrition recommendations</td>
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<tr>
<td>Performs Nutrition Care Process and utilizes standardized language</td>
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COMMENTS:

<table>
<thead>
<tr>
<th>3. USE OF MEDICAL RECORD/CHARTING SKILLS</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>N/A</th>
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<tbody>
<tr>
<td>Understands common medical terminology and abbreviations</td>
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<tr>
<td>Finds lab data, progress and nursing notes and other info as needed</td>
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<tr>
<td>Summarizes anthropometric, biochemical, and clinical dietary data to identify nutritional problems in clear concise statements</td>
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<tr>
<td>Documents in the medical record according to facility guidelines</td>
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<tr>
<td>Documents appropriate information in a timely manner</td>
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COMMENTS:

<table>
<thead>
<tr>
<th>4. DIET/ENTERAL AND PARENTERAL NUTRITION CALCULATION SKILLS</th>
<th>1</th>
<th>2</th>
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<th>N/A</th>
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<tbody>
<tr>
<td>Calculates diet patterns and nutrient intakes</td>
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<tr>
<td>Individualizes diet pattern to tailor patient's needs</td>
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<td>Plans foods or supplements that are acceptable and appropriate for patient's needs</td>
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</tbody>
</table>
Adjusts meals to meet patient's preferences/needs within constraints of foodservice system.

Selects, recommends, implements appropriate enteral and/or parenteral formulas.

Correctly calculates calorie and nutrient content of enteral/parenteral regimens.

Monitors tolerance of enteral and parenteral nutrition regimens.

Develops and implements appropriate transitional feeding plans.

**COMMENTS:**

5. **PATIENT EDUCATION SKILLS**

- Assesses and identifies patient's needs for education.
- Educates patients with appropriate materials and individualization.
- Identifies and explains drug/nutrient interactions.
- Gives accurate information in an organized manner.

**COMMENTS:**

6. **COMMUNICATION SKILLS**

- Exhibits good listening skills.
- Communicates with patients and family members demonstrating cultural competence & sensitivity.
- Communicates with members of the health care team demonstrating cultural competence & sensitivity.
- Uses diplomacy in approach to others.
- Utilizes correct spelling and grammar in written communications.
- Avoids excessive wordiness in written communications.

**COMMENTS:**

7. **PROFESSIONALISM, TIME MANAGEMENT AND ETHICAL BEHAVIOR**

- Performs ethically in accordance with the values of AND.
- Is punctual and dependable.
- Completes assignments/tasks on schedule.
- Uses time wisely.
- Shows respect for others and is sensitive to human diversity.
- Adheres to policies and procedures of the institution.
- Performs self assessment and participates in professional development.

**Performance during Staff relief**

**COMMENTS:**

AREAS FOR IMPROVEMENT:

Satisfactory________________ Un satisfactory_____________________

**If Unsatisfactory, Action Plan:**

Preceptor Signature
Student's Signature
HH Liaison Signature
The University of Connecticut
Dietetic Internship
Outpatient Hartford Hospital

Student:  Date:  

**Definition of Performance Standards:**

1. **NOVICE** - requires frequent supportive and occasional directive cues; identifies principles but needs direction to identify application

2. **BEGINNER** - requires a supportive or directive cue occasionally; applies principles accurately with occasional cues; works at acceptable standards

3. **COMPETENT** - demonstrates sound knowledge and effective use of entry level skills; seeks assistance after investigating potential solutions

**N/A** - Not observed/Not applicable

**Supervised Practice Expectations:**  

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<tr>
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<th>1</th>
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<tbody>
<tr>
<td><strong>1. INITIATIVE</strong></td>
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<tr>
<td>A. Prepares appropriately for practicum days</td>
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<tr>
<td>B. Seeks out information and answers to questions</td>
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<tr>
<td>C. Takes initiative for additional learning</td>
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</table>

**COMMENTS:**

**2. Professional practice expectations: Beliefs, values, attitudes and behaviors for the professional dietician**

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<th></th>
<th>1</th>
<th>2</th>
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<th>NA</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Apply evidence-based guidelines, systematic reviews and scientific literature to setting goals/objectives for nutrition education lessons and community-based nutrition programs</td>
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<tr>
<td>B. Evaluate emerging research and communicates respectfully to clients</td>
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<td>C. Practice in compliance with the standards of the Dietetics Professional Code of Ethics</td>
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<td>D. Demonstrate professional writing skills in preparing professional communications</td>
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<td>E. Develop professional-quality nutrition education materials reflective of audience language, literacy level and ethnicity</td>
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<tr>
<td>F. Use effective education and counseling skills to facilitate behavior change</td>
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<td>G. Demonstrate active participation, teamwork, and contributions in group settings</td>
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<tr>
<td>H. Demonstrate initiative by proactively developing solutions to problems</td>
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<tr>
<td>I. Apply leadership principles effectively to achieve desired outcomes</td>
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<tr>
<td>J. Is punctual, dependable and timely with assignments</td>
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<tr>
<td>K. Performs self-assessment, develops goals and objectives and prepares a draft portfolio for professional development as defined by the Commission on Dietetics Registration</td>
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<tr>
<td>L. Demonstrate assertiveness and negotiation skills while respecting life experiences, cultural diversity, and educational background</td>
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</tbody>
</table>

**COMMENTS:**

**3. Clinical and Customer Services: Development and delivery of information, products and services to individuals, groups and populations**

<table>
<thead>
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<th>1</th>
<th>2</th>
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<th>NA</th>
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</thead>
<tbody>
<tr>
<td>A. Performs nutrition screening to target at risk patients</td>
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<tr>
<td>B. Performs diet history when appropriate</td>
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<tr>
<td>C. Identifies and retrieves pertinent data from the medical record</td>
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<tr>
<td>D. Comprehends and utilizes laboratory values to analyze nutritional status</td>
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<tr>
<td>E. Reviews patient's medications for side effects/interactions</td>
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<tr>
<td>F. Conducts nutrition focused physical assessment and incorporates into assessment</td>
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<tr>
<td>G. Assesses patient's nutrient needs based on stress level/medical condition</td>
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<tr>
<td>H. Utilizes appropriate formulas and calculations to formulate nutrient needs</td>
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<tr>
<td>I. Assesses appropriateness of diet order and suggests changes if needed</td>
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<tr>
<td>J. Analyzes, evaluates, and summarizes assessment to identify nutritional problems</td>
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<tr>
<td>K. Designs and implements appropriate individualized nutrition care plan</td>
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</table>

43
L. Integrates pathophysiology into nutrition recommendations
M. Performs Nutrition Care Process and utilizes standardized language
N. Utilize the Nutrition Care Process and use standardized language for groups and populations
O. Assess the nutritional status of individuals, groups and populations in a variety of settings where nutrition care can be delivered
P. Diagnose and state nutrition problems for individuals or groups in the community using PES format
Q. Outline a nutrition intervention that is based on a behavior change theory, establishing goals, and outcomes to evaluate
R. Conduct community-based nutrition education lessons/programming
S. Refers clients to the appropriate community services for general nutrition needs

COMMENTS:

### 4. USE OF MEDICAL RECORD/CHARTING SKILLS

| A. Understands common medical terminology and abbreviations |
| B. Finds lab data, progress and nursing notes and other info as needed |
| C. Summarizes anthropometric, biochemical, and clinical dietary data to identify nutritional problems in clear concise statements |
| D. Documents in the medical record according to facility guidelines |
| E. Documents appropriate information in a timely manner |

COMMENTS:

### 5. Communication Skills

| A. Exhibits good listening skills |
| B. Communicates appropriately with peers and community collaboration team members demonstrating cultural competence & sensitivity |
| C. Communicates appropriately with individuals and groups in diverse community settings demonstrating cultural competence & sensitivity |
| D. Uses diplomacy in approach to others |
| E. Utilizes correct spelling and grammar in written communications |
| F. Uses effective education and counseling skills to facilitate behavior change during counseling rotation |

COMMENTS:

### 6. Professionalism, Time Management and Ethical Behavior

| A. Performs ethically in accordance with the values of AND |
| B. Is punctual and dependable |
| C. Completes assignments/tasks on schedule |
| D. Uses time wisely |
| E. Shows respect for others and is sensitive to human diversity |
| F. Adheres to policies and procedures of the institution |
| G. Performs self assessment and participates in professional development |

COMMENTS:

### AREAS FOR IMPROVEMENT:

Satisfactory_________________  Unsatisfactory___________________

If Unsatisfactory, Action Plan:

Preceptor Signature  HH Liaison Signature
Student's Signature

44
### Definition of Performance Standards:

1 - **NOVICE** - requires frequent supportive and occasional directive cues; identifies principles but needs direction to identify application

2 - **BEGINNER** - requires a supportive or directive cue occasionally; applies principles accurately with occasional cues; works at acceptable standards

3 - **COMPETENT** - demonstrates sound knowledge and effective use of entry level skills; seeks assistance after investigating potential solutions

**N/A** - Not observed/Not applicable

### Supervised Practice Expectations:

<table>
<thead>
<tr>
<th>1. INITIATIVE</th>
<th>1</th>
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<tbody>
<tr>
<td>A. Prepares appropriately for practicum days</td>
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<td>C. Takes initiative for additional learning</td>
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</table>

**COMMENTS:**

<table>
<thead>
<tr>
<th>2. Integration of scientific information &amp; research into practice</th>
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</thead>
<tbody>
<tr>
<td>A. Select appropriate indicators of outcomes of community-based nutrition programs</td>
</tr>
<tr>
<td>B. Apply evidence-based guidelines, systematic reviews and scientific literature to setting goals/objectives for nutrition education lessons and community-based nutrition programs</td>
</tr>
<tr>
<td>C. Justify community-based programs using appropriate evidence and data</td>
</tr>
<tr>
<td>D. Evaluate emerging research and communicates respectfully to clients</td>
</tr>
<tr>
<td>E. Participate in a community-based research project by entering community-based data into an Excel spreadsheet and conducting some descriptive statistics using Excel.</td>
</tr>
</tbody>
</table>

**COMMENTS:**

<table>
<thead>
<tr>
<th>3. Professional practice expectations: Beliefs, values, attitudes and behaviors for the professional dietitian</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Practice in compliance with the standards of the Dietetics Professional Code of Ethics</td>
</tr>
<tr>
<td>B. Demonstrate professional writing skills in preparing professional communications</td>
</tr>
<tr>
<td>C. Develop professional-quality nutrition education materials reflective of audience language, literacy level and ethnicity</td>
</tr>
<tr>
<td>D. Use effective education and counseling skills to facilitate behavior change</td>
</tr>
<tr>
<td>E. Demonstrate active participation, teamwork, and contributions in group settings</td>
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<tr>
<td>F. Demonstrate initiative by proactively developing solutions to problems</td>
</tr>
<tr>
<td>G. Apply leadership principles effectively to achieve desired outcomes</td>
</tr>
<tr>
<td>H. Is punctual, dependable and timely with assignments</td>
</tr>
<tr>
<td>I. Performs self-assessment, develops goals and objectives and prepares a draft portfolio for professional development as defined by the Commission on Dietetics Registration</td>
</tr>
<tr>
<td>J. Demonstrate assertiveness and negotiation skills while respecting life experiences, cultural diversity, and educational background</td>
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</tbody>
</table>

**COMMENTS:**
### 4. Clinical and Customer Services: Development and delivery of information, products and services to individuals, groups and populations

<table>
<thead>
<tr>
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<tr>
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<td>B. Assess the nutritional status of individuals, groups and populations in a variety of settings where nutrition care can be delivered</td>
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<td>E. Conduct community-based nutrition education lessons/programming</td>
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<td>F. Refers clients to the appropriate community services for general nutrition needs</td>
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</table>

**COMMENTS:**

### 5. Practice Management and Use of Resources: Strategic application of principles of management and systems in the provision of services to individuals and organizations.

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<tr>
<th>Task</th>
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<tbody>
<tr>
<td>A. Apply systems theory and a process approach to make decisions and maximize outcomes</td>
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<tr>
<td>B. Participates in time and effort documentation</td>
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<tr>
<td>C. Participates in human resources' and materials' mgmt</td>
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**COMMENTS:**

### 6. Communication Skills

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<th>Task</th>
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<tbody>
<tr>
<td>A. Exhibits good listening skills</td>
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<tr>
<td>B. Communicates appropriately with peers and community collaboration team members demonstrating cultural competence &amp; sensitivity</td>
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<td>C. Communicates appropriately with individuals and groups in diverse community settings demonstrating cultural competence &amp; sensitivity</td>
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<td>F. Uses effective education and counseling skills to facilitate behavior change during counseling rotation</td>
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**COMMENTS:**

### 7. Professionalism, Time Management and Ethical Behavior

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<tr>
<th>Task</th>
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<tbody>
<tr>
<td>A. Performs ethically in accordance with the values of AND</td>
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<tr>
<td>B. Is punctual and dependable</td>
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<tr>
<td>C. Completes assignments/tasks on schedule</td>
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<tr>
<td>D. Uses time wisely</td>
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<tr>
<td>E. Shows respect for others and is sensitive to human diversity</td>
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<tr>
<td>F. Adheres to policies and procedures of the institution</td>
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<tr>
<td>G. Performs self assessment and participates in professional development</td>
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</table>

**COMMENTS:**

### AREAS FOR IMPROVEMENT:

**Satisfactory____________**

**Unsatisfactory___________________**

If Unsatisfactory, Action Plan:

Preceptor Signature   HH Liaison
Signature

---

46
**Definition of Performance Standards**

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N/A - Not observed/Not applicable

<table>
<thead>
<tr>
<th>1. INITIATIVE</th>
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<tbody>
<tr>
<td>Prepares appropriately for practicum days</td>
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<td>Takes initiative for additional learning</td>
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**COMMENTS:**

2. **FOOD PRODUCTION AND MENU DESIGN**

Demonstrates ability to calculate and interpret nutrient composition of foods

Demonstrates ability to translate nutrient requirements into menu for individuals and groups

Demonstrates ability to alter recipe proportions for volume food production

Able to plan a menu or a portion thereof

Utilizes portion control, production schedules, standardized recipes, and presentation

Considers resources, budget, outside influences (such as season, weather)

Uses appropriate food combinations to meet consumer needs, production capabilities

Participates in sensory evaluation of food and nutrition products: **test tray**

**COMMENTS:**

3. **FOOD PROCUREMENT, DISTRIBUTION AND SERVICE**

Able to perform activities related to inventory, ordering, purchasing, receiving

Utilizes material/equipment specifications, product evaluation

Utilizes forecasting methods to meet needs

Supervises procurement, distribution, and service within delivery system

**COMMENTS:**

4. **FOOD SAFETY AND SANITATION**

Applies microbial consideration in process control

Manages safety and sanitation issues related to the production and delivery of food

Utilizes HACCP

**COMMENTS:**

5. **BUDGET**

Demonstrates ability to determine costs of operation (food costs, labor costs)

Demonstrates ability to determine costs of recipes, patient meals, and retail costs (plate waste)

Demonstrates ability to prepare a budget

Demonstrates ability to interpret financial data

ROI project

**COMMENTS:**
### 6. MARKETING:
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<tbody>
<tr>
<td>Demonstrates ability to apply marketing principles to patient/consumers’ needs</td>
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<tr>
<td>Performs marketing functions</td>
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**COMMENTS:**

### 7. HUMAN RESOURCES
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<tr>
<td>Demonstrates knowledge of employee job descriptions and functions</td>
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<tr>
<td>Assists in scheduling employees</td>
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<tr>
<td>Utilizes and refers to Policy and Procedure manual as appropriate</td>
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<tr>
<td>Identifies issues that staff need to be educated on</td>
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<tr>
<td>Develops in-service including outline, visual aids, and pre and post tests</td>
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<tr>
<td>Conducts in-service for employees and follows up by monitoring progress from info provided</td>
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<tr>
<td>Demonstrates ability to work effectively as a team member demonstrating cultural competence &amp; sensitivity</td>
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**COMMENTS:**

### 8. Project Improvement (PI)
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<tr>
<td>Develops and measures outcomes for food and nutrition services</td>
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<td>Applies modifications to operations or work flow as a way to address areas of improvement</td>
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<tr>
<td>Participates in patient/customer satisfaction surveys and uses information accordingly</td>
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**COMMENTS:**

### 9. GENERAL MANAGEMENT
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<tr>
<td>Uses current technologies for information and communication activities</td>
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<tr>
<td>Demonstrates ability to write specification for food service equipment</td>
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<tr>
<td>Participates in operational management, including equipment selection and design of work units</td>
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<td>Supervises the integration of financial, human, physical, and material resources and services</td>
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<tr>
<td>Competency with Computrition</td>
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**COMMENTS:**

### 10. PROFESSIONALISM, TIME MANAGEMENT AND ETHICAL BEHAVIOR
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<tr>
<td>Performs ethically in accordance with the values of ADA</td>
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<tr>
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<tr>
<td>Adheres to the policies and procedures of the facility</td>
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**COMMENTS:**

### 11. Theme Meal

### 12. Overall Evaluation

**Areas for Improvement**

**Satisfactory________________**

**Unsatisfactory________________**

**If Unsatisfactory, Action Plan:**

Preceptor Signature

HH Liaison Signature

Student's Signature

48
The University of Connecticut
Dietetic Internship
School Foodservice Performance Evaluation

Definition of Performance Standards

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COMMENTS:

<table>
<thead>
<tr>
<th>2. FOOD PRODUCTION AND MENU DESIGN</th>
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<tbody>
<tr>
<td>Discusses menu design of school menus</td>
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<td>Compares requirements of breakfast and lunch programs</td>
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<tr>
<td>Demonstrates ability to alter recipe proportions for volume food production</td>
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<tr>
<td>Utilizes portion control, production schedules, standardized recipes, and presentation</td>
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<td>Considers resources, budget, outside influences (such as season, weather)</td>
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<td>Uses appropriate food combinations to meet consumer needs, production capabilities</td>
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<td>Participates in sensory evaluation of food and nutrition products</td>
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COMMENTS:

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<tr>
<th>3. FOOD PROCUREMENT, DISTRIBUTION AND SERVICE</th>
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<tr>
<td>Able to perform activities related to inventory, ordering, purchasing, receiving</td>
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<tr>
<td>Discusses use of commodities</td>
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<td>Utilizes material/equipment specifications, product evaluation</td>
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<td>Utilizes forecasting methods to meet needs</td>
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<td>Supervises procurement, distribution, and service within delivery system</td>
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COMMENTS:

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<thead>
<tr>
<th>4. FOOD SAFETY AND SANITATION</th>
<th>1</th>
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<tbody>
<tr>
<td>Applies microbial consideration in process control</td>
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<td>Manages safety and sanitation issues related to the production and delivery of food</td>
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<tr>
<td>Utilizes HACCP</td>
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COMMENTS:

<table>
<thead>
<tr>
<th>5. BUDGET</th>
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<th>N/A</th>
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<tr>
<td>Demonstrates ability to determine costs of operation (food costs, labor costs)</td>
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<tr>
<td>Demonstrates ability to determine costs of recipes, meals costs and plate waste</td>
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<tr>
<td>Discusses cost structure and reimbursement of meals</td>
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<tr>
<td>Demonstrates ability to prepare a budget</td>
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<tr>
<td>Demonstrates ability to interpret financial data</td>
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COMMENTS:
6. MARKETING: 1 2 3 N/A
Demonstrates ability to apply marketing principles to patient/consumers' needs
Performs marketing functions
COMMENTS:

7. HUMAN RESOURCES
Demonstrates knowledge of employee job descriptions and functions
Assists in scheduling employees
Utilizes and refers to Policy and Procedure manual as appropriate
Identifies issues that staff need to be educated on
Develops in-service including outline, visual aids, and pre and post tests
Conducts in-service for employees and follows up by monitoring progress from info provided
Demonstrates ability to work effectively as a team member demonstrating cultural competence & sensitivity
COMMENTS:

9. GENERAL MANAGEMENT
Uses current technologies for information and communication activities
Demonstrates ability to write specification for food service equipment
Participates in operational management, including equipment selection and design of work units
Supervises the integration of financial, human, physical, and material resources and services
COMMENTS:

10. PROFESSIONALISM, TIME MANAGEMENT AND ETHICAL BEHAVIOR
Performs ethically in accordance with the values of AND
Is punctual and dependable
Completes assignments/tasks on schedule
Uses time wisely
Shows respect for others and is sensitive to human diversity
Performs self assessment and participates in professional development
Adheres to the policies and procedures of the facility
COMMENTS:

Areas for Improvement

Satisfactory_________________  Unsatisfactory_________________

If Unsatisfactory, Action Plan:

Preceptor Signature                               HH Liaison Signature
Student's Signature
<table>
<thead>
<tr>
<th>Definition of Performance Standards:</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>N/A</th>
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<tbody>
<tr>
<td>1 - NOVICE - requires frequent supportive and occasional directive cues; identifies principles but needs direction to identify application</td>
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<tr>
<td>2 - BEGINNER - requires a supportive or directive cue occasionally; applies principles accurately with occasional cues; works at acceptable standards</td>
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<tr>
<td>3 - COMPETENT - demonstrates sound knowledge and effective use of entry level skills; seeks assistance after investigating potential solutions</td>
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<td>N/A - Not observed/Not applicable</td>
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<thead>
<tr>
<th>1. INITIATIVE</th>
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<tbody>
<tr>
<td>Demonstrates self-directing learning by formulating goals and objectives, documenting progress toward these goals and objectives, and identifying future learning and competency needs</td>
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<tr>
<td>Prepares appropriately for practicum days</td>
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<tr>
<td>Seeks out information and answers to questions</td>
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<tr>
<td>Takes initiative for additional learning</td>
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<tr>
<td>Proactively identifies and/or works independently on research problems</td>
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<tr>
<td>Proactively develops solutions to problems</td>
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<tr>
<td>COMMENTS:</td>
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<tr>
<th>2. INTEGRATES SCIENTIFIC INFORMATION AND RESEARCH INTO PRACTICE</th>
<th>1</th>
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<th>N/A</th>
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<tbody>
<tr>
<td>Seeks out evidence-based guidelines, systematic reviews and scientific literature</td>
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<tr>
<td>Demonstrates the ability to interpret current research</td>
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<tr>
<td>Understands how to conduct and interpret basic statistics</td>
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<td>Demonstrates the ability to develop a relevant research question</td>
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<tr>
<td>Can discuss how to develop a scientific approach to address the question</td>
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<tr>
<td>Participates in available research activities (proposal writing, data checking, diet analysis, subject interviewing, etc)</td>
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<tr>
<td>Writes a scientific poster (or equivalent project)</td>
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<td>Demonstrates scientific writing and communications</td>
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<tr>
<td>Applies evidence-based guidelines, systematic reviews and scientific literature to dietetic practice</td>
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<tr>
<td>Actively engage in ongoing faculty research</td>
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<td>Critiques scientific studies</td>
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<tr>
<td>Takes leadership responsibility for conducting a component of research project</td>
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<tr>
<td>COMMENTS:</td>
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### 4. PROFESSIONALISM AND TIME MANAGEMENT SKILLS

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<tbody>
<tr>
<td>Punctual and dependable</td>
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<tr>
<td>Completes assignments/tasks on schedule</td>
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<tr>
<td>Uses research time wisely</td>
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<td>Completes unfinished work items before leaving for the day</td>
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<td>Works well with other students</td>
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<td>Exhibits respect and empathy for others when appropriate</td>
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<td>Adheres to policies and procedures of the institution</td>
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<td>Demonstrate professional attributes such as advocacy, customer focus, risk taking, critical thinking, flexibility</td>
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**COMMENTS:**

### 5. Ethics

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<tr>
<td>Complies with approved protocols for conducting research and reporting research results</td>
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<td>Demonstrates increased understanding of ethical research practices</td>
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**AREAS FOR IMPROVEMENT:**

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Satisfactory___________ Unsatisfactory__________________

**If Un satisfactory, Action Plan:**

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Preceptor's Signature
Student's Signature
Faculty's Signature
Definition of Performance Standards

1 – NOVICE/FOUNDATION - requires frequent supportive and occasional directive cues; identifies principles but needs direction to identify application

2 – BEGINNER/GROWTH - requires a supportive or directive cue occasionally; applies principles accurately with occasional cues; works at acceptable standards

3 – COMPETENT/ENTRY LEVEL - demonstrates sound knowledge and effective use of entry level skills; seeks assistance after investigating potential solutions

N/A - Not observed/Not applicable

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<th>1</th>
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<tbody>
<tr>
<td>1. Clinical Nutrition (Hartford Hospital and Extended Care)</td>
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<tr>
<td>Initiative</td>
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<tr>
<td>Nutrition Assessment and Care Plans</td>
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<tr>
<td>Use of Medical Record/Charting Skills</td>
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<tr>
<td>Diet/Enteral and Parenteral Nutrition Calculation Skills</td>
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<td>Patient Education Skills</td>
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<tr>
<td>Communication Skills</td>
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<tr>
<td>Case studies</td>
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2. Outpatient

Nutrition Assessment and Care Plans |   |   |   |     |
Use of Medical Record/Charting Skills |   |   |   |     |
Diet/Enteral and Parenteral Nutrition Calculation Skills |   |   |   |     |
Patient Education Skills |   |   |   |     |
Communication Skills |   |   |   |     |

3. Community (Snap-Ed, Hawley, and National Nutrition Month)

Initiative
Integration of scientific information & research into practice |   |   |   |     |
Professional practice expectations: Beliefs, values, attitudes and behaviors for the professional dietitian |   |   |   |     |
Clinical and Customer Services: Development and delivery of information, products and services to individuals, groups and populations |   |   |   |     |
Practice Management and Use of Resources: Strategic application of principles of management and systems in the provision of services to individuals and organizations. |   |   |   |     |
National Nutrition Month |   |   |   |     |
4. Foodservice (Hospital and School)
   Initiative
   Food production and menu design
   Food procurement, distribution and service
   Food safety and sanitation
   Budget
   Marketing:
   Human resources
   Project Improvement (PI)
   General management

5. Research
   Initiative
   Integrates scientific information and research into practice
   Communication Skills
   Ethics

6. Seminar
   Case studies-2
   Special project
   Hawley
   National Nutrition Month

7. PROFESSIONALISM, TIME MANAGEMENT AND ETHICAL BEHAVIOR
   Performs ethically in accordance with the values of AND
   Is punctual and dependable
   Completes assignments/tasks on schedule
   Uses time wisely
   Shows respect for others and is sensitive to human diversity
   Performs self assessment and participates in professional development
   Adheres to the policies and procedures of the facility

   COMMENTS:

   Intern's Signature
   HH Liaison Signature
   DI Coordinator
The University of Connecticut
Department of Allied Health Sciences

Internship Policies

2017-2018

You are responsible for adhering to all policies and procedures as described, as well as any additional policies and procedures of the facilities to which you are assigned for supervised practice. Interns also must adhere to policies related to the use of the cafeteria, library, etc. when applicable.

Interns are to keep present address (Hartford area), home address, and current telephone numbers with the Dietetics Director and in the Food and Nutrition Services office at Hartford Hospital.

1. Clinical Education Policies
   Interns must:
   - Have a completed physical examination on file at UConn Intern Health Services prior to the beginning of the dietetic internship, which includes PPD test, required lab work and immunizations including Hepatitis B. These documents must be uploaded to Complio as well.
   - Be certified in Cardiopulmonary Resuscitation (CPR) throughout the duration of the program.
   - Provide proof of health insurance prior to registration to the Hartford Hospital Clinical Liaison and Complio.
   - Placement in the clinical setting requires state and federal criminal records background checks at one or more points during the program and some sites require drug screening before an intern can begin interacting with patients. The costs of meeting these requirements are the responsibility of the intern. Positive reports related to criminal records or drug use may preclude placement in required clinical experiences and therefore completion of the Dietetics program requirements. The University is not responsible for arranging clinical placements required for degree completion under these circumstances. In some circumstances additional costs may be incurred.
   - Complete criminal background check by Complio for $55 (price may vary).
   - The student is responsible for payment of the professional liability coverage (malpractice insurance). You are billed for this when you receive your fee bill over the summer. Students who withdraw from the course and/or program (voluntarily or otherwise) are not entitled to a refund of this fee.
   - Interns must meet all requirements of each supervised practice site; if an intern does not comply the University is not responsible for arranging clinical placements required for program completion under these circumstances. In some circumstances additional costs may be incurred. Please note that sites may change requirements at any time and the intern must comply.
   - Arrange and pay for their room, board, and transportation.
   - Must have a flu shot.

2. Injury or Illness at immediately Supervised Practice Site
   - Interns are to immediately report their illness, injury or exposure to a communicable disease, e.g. tuberculosis or an environmental toxin to the Program Director.
   - If the intern is at Hartford Hospital and medical attention is deemed necessary, the intern must go to the Hartford Hospital Emergency Department. Interns are responsible for medical costs that might incur due to the incident.
   - If the intern is at a different site, the interns must go to the Emergency Department as directed by the preceptor.
   - If it is necessary for the intern to leave the site due to injury or illness, the hours missed are considered excused time and would need to be made up at the convenience of the practice site.
3. Assessment of Prior Learning
   - Assessment for prior learning for supervised practice will be on an individual basis and a request for evaluation must be in writing to the Dietetics Program Director.
     - Assessment will be based on competency/knowledge learned, not number of hours spent in experience.
     - The intern will need to provide evidence that competencies were met.
     - A review panel consisting of the Dietetics Director and two faculty members will review the request and provide a written response to the intern with one month of receipt of the request.
   - Graduate courses must be taken; no exemptions will be made for prior learning.

4. Attendance and Hours
   - The Dietetic Internship is held accountable to the interns and the Accreditation Council for Education in Nutrition and Dietetics (ACEND) to ensure that a minimum of 1200 hours of supervised practice is fulfilled and documented. The internship begins mid-August through May. Interns supervised practice is Monday-Friday.
   - Tracking of hours:
     - During supervised practice rotations, the student is responsible for tracking hours on a shared spreadsheet (student, faculty, and Hartford Hospital Liaison) that will be provided. Hours will be verified with the preceptor during the rotation evaluation.
     - There are non-worksite supervised practice hours during the internship. The student MUST be present for all of these experiences.
   - If the intern is at Hartford Hospital, he/she must contact Erin Estabrook (Clinical Nutrition Manager, Dept of Food & Nutrition Services) or Diane Avino (Internship Liaison) immediately (before the scheduled activity begins) to determine if the absence will be excused.
   - If the intern is at an alternate site, he/she must contact the site preceptor and copy the Dietetics Director and Internship Liaison to determine if the absence will be excused.
   - Interns must therefore make up all absent hours since no allowance for absenteeism is in the schedule. Hours are made up and scheduled with the Internship Liaison in conjunction with the preceptor prior to dates of “make-up”.
   - Personal Days: The dietetic intern is permitted three personal days during the internship. These days are not vacation days. The personal days are intended for excused absences, illness and emergency situations only. If a student is absent due to illness for three or more days consecutively, a doctor’s note must be provided. Competence in all areas is expected. The student may need to make up hours in a specific area if the absence impedes learning.
   - Time absent is either excused or unexcused.
     - Excused absence includes:
       - Illness (your preceptor may request that you present a medical excuse when absent).
       - Unavoidable emergencies
       - Severe inclement weather: Hospitals are open 24 hours per day 7 days per week and must have coverage. The dietetic internship is a training program and you are interns. When you are completing supervised practice at Hartford Hospitals you will follow the guidance put forth by the state of CT. The notification system may be found at http://www.ct.gov/demhs/cwp/view.asp?a=1934&Q=287788. Follow announcements for non-essential employees for early release, late openings, and closure. Please remember that your safety always comes first. State of CT employees may still be required to go to work but UConn may close; you may choose not to not come to supervised practice. This would be considered an excused absence, however, your hours will need to be made up. Even if UConn is not closed and you are concerned for your safety; that is what is most important. You may choose to come in for the internship in you would like.
• Other valid reasons for which permission has been obtained from your instructors or preceptor and the internship liaison prior to your absence. Examples include job interviews or death of family member or close friend
• Religious holidays
• In the case of illness, emergency or severe inclement weather call the Nutrition Department and the internship liaison at least one hour before scheduled time on duty. This applies to outside rotations as well as in-house rotations.

| Diane Avino, Internship Liaison | Office | 860.972.2419 | Diane.avino@hhchealth.org |
| Erin Estabrook, Clinical Nutrition Manager | Office | 860-972-1449 | Erin.Estabrook@hhchealth.org |
| Food & Nutrition Services | Office | 860.972.2604 |

• Unexcused absence includes all other situations. The taking of unexcused time jeopardizes your continued participation in the internship.
• In the event of an illness or injury the intern is responsible for medical expenses. Time missed from rotations will need to be made-up.
• Absenteeism causes a disruption of rotations; therefore, it is imperative that you make every effort to come in as scheduled.
• Make-up time will be at the discretion of the Program Director & Internship Liaison and may involve weekends, holidays, vacations, breaks, and/or specialty rotation.
• You are expected to be on time for supervised practice experiences; this means you are in your assigned area ready to work. Late time will be made up at the convenience of the preceptor. Patient care does not always fall within a set daily schedule and, therefore, you may occasionally be involved in patient care that extends beyond the scheduled clinical time. You have the professional duty to stay and complete the necessary work.
• As a professional-in-training, your work and project responsibilities must be completed prior to leaving the rotation. As a result, you may need to stay past the scheduled shift to complete the day’s assignments. The additional time may or may not be counted as supervised practice hours. This determination will be at the sole discretion of the Internship Liaison. However, if an intern requires more time to complete the regular tasks, this time will not count toward additional supervised practice hours.
• Banked time: if an intern chooses to do additional work, comes in for extra experiences, or volunteers for an event; he/she may be able to bank the additional hours. In order for time to be banked, it must be approved by the Dietetics Director or Internship Liaison prior to the time it occurs. This time may count if needed in the event of an illness or an excused absence. However, it should be noted that the intern must be competent in all rotations.
• The schedule is based on a four (4) to five (5) day, 32 - 40 hour per week depending on the schedule.
• Work hours will vary based on the rotation and shift hours of the dietitians.
• You may need to stay past the scheduled shift to complete the day’s assignments.
• Interns are not allowed to leave the premises prior to the completion of an eight hour day without first obtaining direct permission from the Internship Liaison.
• Examples of shift hours are: 6:00 AM - 2:30 PM; 7:00 AM - 3:30 PM; 9:30 AM - 6:00 PM.
• Supervised practical experience time can only be altered by the Program Director and Internship Liaison.

5. Pager
• You will each receive a pager.
• If you are outside of the hospital and need to page 860.545.4411 then pager # of person you are paging
• If in the hospital 5-4411 then pager # of person you are paging
6. Schedule
- The dietitians’ schedules are posted in the main office of the Food Service and Nutrition Department and provided to the intern.
- You are expected to be on time for all supervised practice experiences.
- Holidays that are scheduled off include: Labor Day, Wednesday through Sunday of Thanksgiving, Holiday Break (before and after Christmas) and UConn’s Spring Break in March.
- These days may be used for make-up if it can be arranged with the preceptor and Internship Liaison.
- A schedule of rotations will be provided in August for rotations through December and in December for January-June.
- The Program will try to accommodate a leave of absence. Additional fees may apply.

7. Dress
- Clean, pressed, white lab coats (will only be used at certain locations and intern will be responsible for purchasing and laundering), name tags and professional attire are required.
- Name tags (approximate cost id $10) must be purchased at the UConn Bookstore prior to beginning the first rotation. It should state Name, Dietetic Intern, University of Connecticut.
- Men must wear collared shirts and ties and must be clean shaven. Jeans are NOT allowed, only dress pants.
- Acceptable attire for women include: skirts, blouses, sweaters, dresses or dress slacks, stockings and basic shoes (no sneakers or boots). Must wear stockings.
- Jeans, shorts, tee shirts, miniskirts, leggings, capris, sweatshirts, and open toe shoes are not permitted, nor are any clothing that reveals the midriff, is low cut or tight fitting.
- In food service rotations, closed toe shoes with rubber soles must be worn. Hairnets are required. Modest jewelry is allowed.
- Nail polish of any kind and/or artificial nails are not permitted.
- Body pierced objects beyond pierced earrings must be removed during supervised practice hours. Tattoos must be covered.
- Professional attire is required at all professional conferences and for all on-campus intern presentations.
- Hartford Hospital’s Dress Code Policy may be found on page 64.

8. Transportation and Parking
- Transportation and parking are the responsibility of the student. The student is liable for safety in traveling to and from assigned areas.

- Under Connecticut law, the owner of a private passenger automobile is required to have an insurance policy providing the following minimum coverage:
  - Liability protection of 20/40/10 ($20,000 for any one person, $40,000 for any one accident, $10,000 for property damage), and
  - Uninsured motorist protection of 20/40 ($20,000 for any one person, $40,000 for any one accident).
- The University is not responsible for liability.
- University Parking - Interns will be billed separately for parking ($122-$244 a year for commuter surface lots). A student decal will be provided. Call Parking Services at (860) 486-4930 for more information.
- Hospital Parking - $75/month + deposit (deposit is refundable if card is returned within the designated time frame), check with the Dietetic Internship Liaison for specific information.

9. Library
- Interns have access to libraries at the University of Connecticut and Hartford Hospital (no fees).

10. Mailboxes
- A mailbox will be reserved for the interns in the main office of the Food Service and Nutrition Department at
Hartford Hospital.
- Mailboxes should be checked daily for messages, material, etc.
- Dietetic Interns also have a mail folder in the Dietetics Program Office at UConn.
- Faculty communicate via email - you MUST check your email daily.

11. Meetings/In-services
- During the clinical component all interns are responsible for attending staff meetings unless otherwise directed.
- Clinical staff meetings are held on at 1:00 PM, 1st and 3rd Tuesdays of each month.
- Interns are required to attend one professional dietetic meeting. The intern must provide confirmation of attendance to the Dietetic Internship Director.

12. HIPAA
- Interns on clinical rotation will have access to confidential patient medical information. Therefore, you have a moral, ethical and legal responsibility to maintain the confidential nature of this information. You are NOT allowed to discuss patient information in public places (i.e., cafeteria, elevators, lobby) where patients, relatives, or other guests may overhear. You are also forbidden from storing or transmitting confidential information electronically. Any unauthorized release of confidential information by any intern to unauthorized personnel will be grounds for immediate dismissal from the program. Some supervised practice sites may require you to complete their site training. The intern MUST comply. Time spent will count towards supervised practice hours. This information should not be shared outside the Hospital under any circumstances. Disciplinary action will be taken by the Dietetic Internship Director for violation of patient confidentiality.
- If an intern needs to obtain a medical record of a discharged patient, contact the Internship Liaison to arrange to have the chart pulled
- Medical records can be viewed in the Medical Records Department only
- Charts may not be photocopied

13. Outside Employment
- Interns are strongly discouraged from having outside job responsibilities during the week as these may conflict with scheduled experiences and the ability to meet the expected competencies for entry-level dietitians.

14. Purpose of Internship Program
- The dietetic internship is for the educational purpose of supervised practice. The intern cannot be used to replace an employee.

15. Academic Standards and Retention and Remediation
- It should be noted that a grade of a “B” or higher is normally needed to transfer a graduate course to a graduate program and is the expectation. Interns must demonstrate a “C” or better mastery in the two graduate courses, AH 5350 and 5351, to continue in the program.
- A grade of C- or less in either of these courses will result in termination from the dietetic internship program.
- Evaluations are conducted at the conclusion of each rotation. The intern must receive a “satisfactory” overall rating for each rotation.
- If a “satisfactory” is not received, the intern may be terminated from the program or will be required to spend additional time until a satisfactory rating is received.
- “Retention and Remediation Policy
  - The University has a Center for Students with Disabilities that may be able to assist (https://csd.uconn.edu/). If a student has any issues or learning difficulties in a course, it is strongly encouraged that the student inform the instructor and the Program Director. The program will try to find a tutor for the student. The student may incur an additional cost.
16. Confidentiality of Intern Records
- The Family Education Rights and Privacy Act protects the privacy of educational records, establishes the interns' rights to inspect their educational records, provides guidelines for correcting inaccurate or misleading data for the protection of the intern. (Detailed information concerning this may be found at http://ferpa.uconn.edu/.
- The student has the right to access his/her own file

17. Rotations:
- Preparation for In-house Rotations
  - The week prior to the start of a rotation the Intern will contact the preceptor in order to discuss the following:
    - The schedule
    - Where to report
    - Preceptor suggested prior to the start of the rotation
- Preceptors have many responsibilities in addition to teaching. Respect their time and review appropriate materials, policies and procedures before beginning. Be prepared to discuss your learning style and level of background/experience.
- Come to each rotation prepared with notes, calculator, review material/disease states, etc that you will be exposed to.
- Preparation for External Rotations
  - A week prior to the rotation Interns are to contact the preceptor at the cooperating institution to introduce yourself, obtain directions, scheduled hours and parking information. Be sure to bring your name tag. Ask a preceptor if a lab coat is needed. Other facilities may have different procedures and policies from Hartford Hospital; be sure to follow the directions of your preceptor. Remember, when you visit another facility, you are representing the University of Connecticut and Hartford Hospital. Be courteous, polite and professional with the preceptor and others. We want to continue to provide opportunities for external rotations. The institutions cooperate without remuneration and contribute their time because they are committed to the education and development of dietetic practitioners. Any problems with an outside rotation should be discussed with the Dietetic Internship Director as soon as possible.

18. Professional Conduct
- Suggestions on exhibiting professional behavior while working with others include:
  - Cell phone usage: during the work day cell phones should be turned off or to vibrate. Only work related calls, text messages, email may be accessed during work hours. Non-work related messages should only be addressed while on breaks. Cell phone usage also relates to attendance at meetings.
  - If you don’t know an answer, research the question and report back. Timely and thorough follow-up signify a responsible professional.
  - All employees or staff may not be familiar with you and your role in the Department, therefore:
    - If assigned to work in a specific area, introduce yourself to the employees. Explain your assignment and ask how you can achieve the goals and objectives without impeding their work.
    - When using equipment, supplies or work space, check with the appropriate employees to be sure you will not be interfering with their assignments
    - When you are finished, clean the equipment area and place all materials in their appropriate place(s)
    - Thank the employees for any assistance or participation they may have provided
- All managers and dietitians have their own style of working, patient interaction and documentation with which you may agree or disagree. However, the basic content should reflect the standards of care set by the Department and the Profession of Dietetics. If at any time you feel these standards are being compromised, discuss them with the preceptor and if not resolved, with the Internship Liaison. If the Liaison should be the preceptor, then discuss your concerns with the Director of Nutrition Services at Hartford Hospital or the
Dietetic Internship Director at the University of Connecticut.

- Although you have many projects and assignments, learn to balance your workload with leisure time. One of the characteristics of professionalism is finding a place for relaxation in your schedule.

19. Intern Support Services
- Interns are encouraged to utilize the Office of Academic Affairs in the Department of Allied Health Sciences. The Office assists interns with questions regarding curriculum, academic and clinical policies, and personal issues that impact academic performance in both didactic and clinical courses.
- Many Intern Support Services are available. A listing may be found at http://cap.uconn.edu/sss/
- You may use Intern Health Services on campus. If your insurance company participates with Intern Health Services, you will need to provide the co-payment. If your insurance is not participating, you must pay the charge and seek reimbursement from your insurance company.

20. Program Completion Requirements
Verification statements of completion are issued to interns after having successfully completed the requirements of the Internship. In order to receive a written Verification Statement from the Dietetic Internship Director indicating the intern has completed all requirements of the internship, the intern must:

- Meet a minimum of “satisfactory” for each rotation. As rotations progress expectations rise. It is expected that the intern will be competent in most areas as he/she progresses through supervised practice. Competent is defined as: demonstrates sound knowledge and effective use of entry level skills; seeks assistance after investigating potential solutions.
- Formal documented evaluations of performance will be reviewed with interns at the completion of each rotations. At all of the Hartford Hospital rotations, both the intern and the preceptor complete evaluations. This is an opportunity to self-assess and take an active role in setting personal goals. The Internship Liaison reviews the evaluations with the preceptor, interns, and if possible, the preceptor for the following rotation. These evaluations become a part of the permanent intern file. If an interns is rated unsatisfactory, the interns must complete additional time in the rotation to become satisfactory. If it is determined that the intern will not become satisfactory in the area, the intern will be dismissed from the program.
- Successful completion of the graduate courses required at UConn with a grade of “C” or better. Note that most graduate programs will only accept graduate credits with a grade of B or higher.
- Complete all assigned projects and or field trips satisfactorily.
- Program completion must be within 125% of the time (within 1 year of program commencement)

21. Withdrawal, Appeals, Grievance, Complaint Procedures
- Intern grievances should first be handled with the preceptor involved immediately. If the grievance has not been resolved to the satisfaction of both the intern and the preceptor, the Dietetic Internship Liaison needs to be informed in order to mediate a potential resolution. If the resolution is unacceptable to the intern, he/she may appeal in writing within two weeks of the event to the Clinical Nutrition Manager of Food & Nutrition Services at Hartford Hospital and to the Dietetics Director at the University of Connecticut. After receipt of the written appeal to the Clinical Nutrition Manager (CNM) of Food & Nutrition Services and the Dietetic Internship Director or Dietetics Director, a meeting will be convened with the intent of resolving the grievance. The intern, the preceptor, both The CNM, Dietetic Internship Director or Dietetics Director, and the Dietetic Internship Liaison will be in attendance. If not resolved at this level, the intern has the right to appeal to the Department Head in Allied Health Sciences. If not resolved the intern may proceed with the grievance to Associate Dean of Academic Programs, the College of Agriculture, Health and Natural Resources. The Associates Dean’s decision is final.
If an Intern exhibits behavior that threatens or disrupts the mission of the University, their actions will be considered under UConn’s Student Code of Conduct which includes disciplinary sanctions, rules of hearing and appeal. (This may be found at http://community.uconn.edu/the-student-code-preamble/)

The Department of Allied Health Sciences will withdraw upon the recommendation of Hartford Hospital any intern who fails to meet the requirements of the educational program/internship or who fails to comply with all Hospital policies, rules and regulations. In the event of a withdrawal, the intern has the right to appeal the decision by submitting a written request to the Department Head of Allied Health Sciences within one week. If not resolved at this level the intern has the right to appeal to the Associate Dean of Academic Programs, the College of Agriculture, Health and Natural Resources within two weeks. The Associate Dean’s decision is final. Removal of an Intern from the program will be a joint decision between the University and the Hospital.

The University has a procedure in place if a student has a complaint. It may be found at https://heoa.uconn.edu/wp-content/uploads/sites/495/2017/08/Student_Complaint_Process-Word-2017-08-10.pdf.

Preceptor complaint: Preceptors who have complaints about the University of Connecticut Dietetic Internship Program can present complaints to the Dietetic Internship Director at UConn in writing. If the complaint occurs at Hartford Hospital, the preceptor will bring the written complaint to the Clinical Nutrition Manager (CNM) first.

- Procedure: A preceptor at Hartford Hospital with a complaint should bring the written complaint to the attention of the CNM. The CNM will bring it forward to the Dietetic Internship Director. If a preceptor at a different site has a complaint, it should be made in writing to the Dietetic Internship Director. The DI Director will investigate the complaint and will determine a fair and effective resolution. If the preceptor is not in agreement with the resolution, the preceptor may contact the Allied Health Sciences Department Head. The Dietetics Internship Director ensures that retaliation for presenting the complaint does not occur.

The University refund policy may be found at https://bursar.uconn.edu/checks-and-refunds/.

The dietetic internship program registration fee is non-refundable after the start of the semester.

## 23. Projected Costs

### DI 2017-2018

<table>
<thead>
<tr>
<th>Item</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Registration Fee</td>
<td>$4,938</td>
</tr>
<tr>
<td><strong>To enhance the learning experience, students in the Dietetic Internship will be required to enroll in 6 graduate credits through Non-Degree Services and will incur an additional expense of $806/credit plus additional University fees. These classes will be offered on the Storrs campus.</strong></td>
<td>$5,515</td>
</tr>
<tr>
<td>Lab coat</td>
<td>$20-$40</td>
</tr>
<tr>
<td>Name tag</td>
<td>$10</td>
</tr>
<tr>
<td>Physical examination &amp; lab tests (Varies based upon personal health insurance)</td>
<td>$100-$200</td>
</tr>
<tr>
<td>Health Insurance (Varies depending on policy &amp; coverage)</td>
<td>$3,200</td>
</tr>
<tr>
<td>Professional Lability Insurance (Billed by UConn)</td>
<td>~$20</td>
</tr>
<tr>
<td>Textbooks &amp; references</td>
<td>$200-$400</td>
</tr>
<tr>
<td>Transportation (Approximately 100 miles per week)</td>
<td>Variable</td>
</tr>
<tr>
<td>University of Connecticut commuter parking permit</td>
<td>$122-$244</td>
</tr>
<tr>
<td>Parking near Hartford Hospital</td>
<td>$75 per month</td>
</tr>
<tr>
<td>Complio Tracking &amp; Background Services</td>
<td>~$55</td>
</tr>
<tr>
<td>Off-campus housing</td>
<td>$7,000</td>
</tr>
<tr>
<td>(Varies dependent upon location)</td>
<td>$7,000</td>
</tr>
<tr>
<td>Off-campus board (Not provided)</td>
<td>$2,000</td>
</tr>
<tr>
<td>Internship application fee</td>
<td>$70</td>
</tr>
<tr>
<td>Fall/Spring CT Academy of Nutrition &amp; Dietetics meeting</td>
<td>~$75</td>
</tr>
<tr>
<td>Strongly recommended: Academy of Nutrition and Dietetics membership</td>
<td>$58</td>
</tr>
</tbody>
</table>

* Medical Dictionary; Medical Terminology; Medical Reference, i.e. Merck or Washington, Drug Nutrient Guide; and undergraduate textbooks.

Interns are required to have a calculator, Computer, and Access to the Internet.
Title/Subject: Professional Image and Dress  
Code Policy  
Section: Standards of Conduct  
Policy #: 105

PURPOSE:
Hartford Hospital recognizes the importance of the professional appearance of its staff in maintaining an atmosphere conducive to the delivery of quality health care services. To promote such an atmosphere, all Hartford Hospital employed staff members, regardless of the specific campus where they work, are expected to display a professional image through personal cleanliness, good grooming and to dress in a manner appropriate to the jobs that they perform.

SCOPE:
All employed staff members who work on any Hartford Hospital campus.

When an employed staff member is wearing their ID badge, they are officially “in uniform”, e.g. professionally dressed and and/or wearing their role specific uniform. This includes being on campus for meetings, nursing validation, use of CESI, etc.

Contractors and vendors who are routinely on HH premises must comply with HH standards of dress and grooming.

POLICY:
This policy is in keeping with Hartford Hospital’s patient-centered model of care, values and commitment to safety. It constitutes a minimum standard and departmental guidelines may be more detailed than this policy. The leadership team of the organization reserves the right to determine what constitutes appropriate attire even if it is not specifically stated in this policy.

PROCEDURE: Operational Guidelines:
1. Employed staff members are expected to be aware and conscientious of their personal hygiene, neatness of attire and cleanliness of apparel.

2. A Hartford Hospital identification badge must be worn on the upper part of the body with the employed staff member’s picture facing outward during all working hours in
compliance with the Hartford Hospital ID Badge policy. Nothing may block or obscure the ID badge.

During work hours and/or while wearing badges, employed staff members are representatives of Hartford Hospital and Hartford Healthcare and are expected to follow the guidelines of this policy.
   i. Lanyards are not an acceptable form of displaying the ID badge;
   ii. Nurses and Doctors must also clearly display the additional badge attachment provided to them that identifies their discipline.

3. Employed staff members working in an area, department or function with a specific uniform requirement are expected to wear the uniform, while on duty, in accordance with the uniform policy of that particular department or area. Only plain/non-logo, white or black T-shirts, short or long sleeved, may be worn under uniform.

4. White lab coats are to be worn by the medical team only. This includes doctors, advanced practitioners (Nurse Practitioners, Physicians Assistants & nurse midwives), residents, medical interns, PharmD (pharmacists) and the palliative care team.

5. Medical team members (as defined in numbered paragraph 4 must wear either scrubs with a white lab coat or:
   i. Males: a dress shirt and slacks required and tie (preferred) with either a sport jacket or white lab coat;
   ii. Females: professional attire as described in numbered paragraph 6;
   iii. Scrub colors cannot conflict with existing, role based hospital issued scrubs.

6. Employed staff members working in areas or departments that do not have a specific uniform requirement should dress in a manner which is appropriate to the job being performed and consistent with the business needs of the area. Examples of appropriate attire:
   i. clean, neat, non-wrinkled skirts, suits, dresses, tailored pants, slacks, blouses, shirts, sweaters, blazers, sport coats and turtlenecks
   ii. dresses or skirts should be no shorter than two inches above the knee iii. pants must reach the ankle bone when individual is standing;
   iv. socks or hosiery must be worn at all times for employed staff members who work or enter into patient care areas
      1. Peds, if fully intact and covering the foot and toes are an acceptable option to hosiery;
      2. In operating rooms and/or procedure areas, appropriate surgical shoes may be worn in lieu of socks, provided that they are clean (not stained and/or soiled) see numbered paragraphs 3 and 6.
   v. shoes should be appropriate for the work being performed:
      1. for employed staff members who work or enter into patient care areas, open toed shoes are not acceptable
      2. for employed staff members who do NOT enter into patient care areas, shoes may be open toed and/or sling back with no toe separator and must have solid sides and tops;
      3. Within the peri-operative and/or procedure areas, all employed staff members should wear shoes with closed toes and backs, low heals, and non-skid soles.

Professional Image and Dress Code Policy #105
Page 65 of 4
7. To promote patient confidence and portray a competent, professional image the following types of appearance, hygiene and/or attire are inappropriate and unacceptable in all areas of the hospital:
   vi. non-traditional hair, i.e. spikes, mohawks and/or non-traditional colors
   vii. hair that is longer than shoulder length that is not pulled back and secured away from the face (for employed staff members with direct patient care only)
   viii. revealing, plunging necklines (front or back), tight fitting or see-through clothing, sleeveless shirts, sleeveless dresses, T-shirts, sweat suits, hooded sweatshirts, v-neck or round collar sweatshirts, jogging suits, tank tops, shorts, jeans, denim of any color, leggings, Capri style pants, overalls, or midriff bearing shirts
   ix. hats or headwear worn indoors, except for medical or religious reasons and/or those issued as part of a Hartford Hospital uniform
   x. flip-flops of any material and sandals
   xi. visible facial piercing (except for religious reasons)
   xii. hoop earrings greater than 1 inch in diameter; large dangling earrings
   xiii. visible tattoos that are large (>3 inches), religiously, culturally, racially or sexually explicit in nature; and/or imply violence or threatening acts
   xiv. Strong odors or excessive use of perfume or cologne
   xv. artificial fingernails or fingernail enhancements (for employed staff members who work or enter into patient care areas); fingernails extending more than ¼ inch above the fingertip, chipped polish or any decorations on the nails.

8. Employed staff members who fail to follow personal appearance, unit/department dress code and/or personal hygiene guidelines may be sent home and directed to return to work in proper attire. Under such circumstances, employed staff members will not be compensated for the time away from work in accordance with federal, state and local law.

9. Employed staff members who fail to comply with this policy are subject to progressive discipline up to and including termination from employment pursuant to the Staff Performance Improvement Policy (702).
**RELATED POLICIES:**
Policy #106 – Rules of Conduct Policy
Policy #207 – Identification Badge Policy
Policy #702 – Staff Performance Improvement Policy

<table>
<thead>
<tr>
<th>Issued:</th>
<th>New</th>
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<tbody>
<tr>
<td>Review Date:</td>
<td>2/13, 6/14</td>
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<tr>
<td>Revised Date:</td>
<td>2/13, 7/14</td>
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</table>
Code of Ethics for the Profession

The Academy of Nutrition and Dietetics (Academy) and its credentialing agency, the Commission on Dietetic Registration (CDR), believe it is in the best interest of the profession and the public it serves to have a Code of Ethics in place that provides guidance to dietetics practitioners in their professional practice and conduct. Dietetics practitioners have voluntarily adopted this Code of Ethics to reflect the values and ethical principles guiding the dietetics profession and to set forth commitments and obligations of the dietetics practitioner to the public, clients, the profession, colleagues, and other professionals. The current Code of Ethics was approved on June 2, 2009, by the Academy Board of Directors, House of Delegates, and the Commission on Dietetic Registration.

THE CODE OF ETHICS APPLIES TO THE FOLLOWING PRACTITIONERS:

- All members of the Academy who are credentialed (RDN or NDTR)
- All members of the Academy who are not credentialed
- All RDNs and NDTRs who are not members of the Academy.

The Code is overseen by a 3 person Ethics Committee, with representation from the Board of Directors, Commission on Dietetic Registration and House of Delegates. The term of office is 3 years.
There are 19 principles of the code which are divided into 5 categories

**Fundamental Principles**

1. The dietetics practitioner conducts himself/herself with honesty, integrity, and fairness.

2. The dietetics practitioner supports and promotes high standards of professional practice. The dietetics practitioner accepts the obligation to protect clients, the public, and the profession by upholding the Code of Ethics for the Profession of Dietetics and by reporting perceived violations of the Code through the processes established by the Academy and its credentialing agency, the Commission on Dietetic Registration (CDR).

5. The dietetics practitioner provides professional services with objectivity and with respect for the unique needs and values of individuals.
   a. The dietetics practitioner does not, in professional practice, discriminate against others on the basis of race, ethnicity, creed, religion, disability, gender, age, gender identity, sexual orientation, national origin, economic status, or any other legally protected category.
   b. The dietetics practitioner provides services in a manner that is sensitive to cultural differences.
   c. The dietetics practitioner does not engage in sexual harassment in connection with professional practice.

**Responsibilities to the Public**

3. The dietetics practitioner considers the health, safety, and welfare of the public at all times. The dietetics practitioner will report inappropriate behavior or treatment of a client by another dietetics practitioner or other professionals.

4. The dietetics practitioner complies with all laws and regulations applicable or related to the profession or to the practitioner's ethical obligations as described in this Code.
   a. The dietetics practitioner must not be convicted of a crime under the laws of the United States, whether a felony or a misdemeanor, an essential element of which is dishonesty.
   b. The dietetics practitioner must not be disciplined by a state for conduct that would violate one or more of these principles.
   c. The dietetics practitioner must not commit an act of misfeasance or malfeasance that is directly related to the practice of the profession as determined by a court of competent jurisdiction, a licensing board, or an agency of a governmental body.

6. The dietetics practitioner does not engage in false or misleading practices or communications.
   a. The dietetics practitioner does not engage in false or deceptive advertising of his or her services.
   b. The dietetics practitioner promotes or endorses specific goods or products only in a manner that is not false and misleading.
   c. The dietetics practitioner provides accurate and truthful information in communicating with the public.

7. The dietetics practitioner withdraws from professional practice when unable to fulfill his or her professional duties and responsibilities to clients and others.
a. The dietetics practitioner withdraws from practice when he/she has engaged in abuse of a substance such that it could affect his or her practice.

b. The dietetics practitioner ceases practice when he or she has been adjudged by a court to be mentally incompetent.

c. The dietetics practitioner will not engage in practice when he or she has a condition that substantially impairs his or her ability to provide effective service to others.

RESPONSIBILITIES TO CLIENTS

8. The dietetics practitioner recognizes and exercises professional judgment within the limits of his or her qualifications and collaborates with others, seeks counsel, or makes referrals as appropriate.

9. The dietetics practitioner treats clients and patients with respect and consideration.

   a. The dietetics practitioner provides sufficient information to enable clients and others to make their own informed decisions.

   b. The dietetics practitioner respects the client's right to make decisions regarding the recommended plan of care, including consent, modification, or refusal.

10. The dietetics practitioner protects confidential information and makes full disclosure about any limitations on his or her ability to guarantee full confidentiality.

11. The dietetics practitioner, in dealing with and providing services to clients and others, complies with the same principles set forth in "Responsibilities to the Public" (Principles #3-7).

RESPONSIBILITIES TO THE PROFESSION

12. The dietetics practitioner practices dietetics based on evidence-based principles and current information.

13. The dietetics practitioner presents reliable and substantiated information and interprets controversial information without personal bias, recognizing that legitimate differences of opinion exist.

14. The dietetics practitioner assumes a life-long responsibility and accountability for personal competence in practice, consistent with accepted professional standards, continually striving to increase professional knowledge and skills and to apply them in practice.

15. The dietetics practitioner is alert to the occurrence of a real or potential conflict of interest and takes appropriate action whenever a conflict arises.

   a. The dietetics practitioner makes full disclosure of any real or perceived conflict of interest.

   b. When a conflict of interest cannot be resolved by disclosure, the dietetics practitioner takes such other action as may be necessary to eliminate the conflict, including recusal from an office, position, or practice situation.

16. The dietetics practitioner permits the use of his or her name for the purpose of certifying that dietetics services have been rendered only if he or she has provided or supervised the provision of those services.

17. The dietetics practitioner accurately presents professional qualifications and credentials.

   a. The dietetics practitioner, in seeking, maintaining, and using credentials provided by CDR, provides accurate information and complies with all requirements imposed by CDR. The dietetics practitioner uses CDR-awarded credentials ("RD" or "Registered Dietitian"; "DTR" or "Dietetic Technician, Registered"; "CS" or "Certified Specialist"; and "FAND" or "Fellow of the Academy of Nutrition and Dietetics") only when the credential is current and authorized by CDR.

   b. The dietetics practitioner does not aid any other person in violating any CDR requirements, or in representing himself or herself as CDR-credentialed when he or she is not.

18. The dietetics practitioner does not invite, accept, or offer gifts, monetary incentives, or other considerations that affect or reasonably give an appearance of affecting his/her professional judgment.

Clarification of Principle:

a. Whether a gift, incentive, or other item of consideration shall be viewed to affect, or give the appearance
of affecting, a dietetics practitioner's professional judgment is dependent on all factors relating to the transaction, including the amount or value of the consideration, the likelihood that the practitioner's judgment will or is intended to be affected, the position held by the practitioner, and whether the consideration is offered or generally available to persons other than the practitioner.

b. It shall not be a violation of this principle for a dietetics practitioner to accept compensation as a consultant or employee or as part of a research grant or corporate sponsorship program, provided the relationship is openly disclosed and the practitioner acts with integrity in performing the services or responsibilities.

c. This principle shall not preclude a dietetics practitioner from accepting gifts of nominal value, attendance at educational programs, meals in connection with educational exchanges of information, free samples of products, or similar items, as long as such items are not offered in exchange for or with the expectation of, and do not result in, conduct or services that are contrary to the practitioner's professional judgment.

d. The test for appearance of impropriety is whether the conduct would create in reasonable minds a perception that the dietetics practitioner's ability to carry out professional responsibilities with integrity, impartiality, and competence is impaired.

**RESPONSIBILITIES TO COLLEAGUES AND OTHER PROFESSIONALS**

19. The dietetics practitioner demonstrates respect for the values, rights, knowledge, and skills of colleagues and other professionals.

a. The dietetics practitioner does not engage in dishonest, misleading, or inappropriate business practices that demonstrate a disregard for the rights or interests of others.

b. The dietetics practitioner provides objective evaluations of performance for employees and coworkers, candidates for employment, students, professional association memberships, awards, or scholarships, making all reasonable efforts to avoid bias in the professional evaluation of others.

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### How Do I Know if It is Really an Ethics Issue?

<table>
<thead>
<tr>
<th><strong>AN ETHICAL ISSUE?</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>The violation of established rules or standards governing the conduct of a person or the members of a profession. An ethical issue is specific to one of the 19 principles of the Code.</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th><strong>A LEGAL ISSUE?</strong></th>
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<tbody>
<tr>
<td>Many state and federal laws apply to our profession. If a state or federal law has been violated, the issue could result in action by the Ethics Committee. However, not every violation of the law is a breach of the Academy/CDR Code of Ethics for the Profession of Dietetics.</td>
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<tr>
<th><strong>A BUSINESS ISSUE?</strong></th>
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</thead>
<tbody>
<tr>
<td>An issue may be a business issue, but not an ethical issue, if it arises from a business dispute or breach of a contractual obligation, or a failure to provide products or services of an expected quality. Examples include billing or contract disputes, scheduling problems or other dissatisfaction with services provided. You should not attempt to use the Code to resolve business disputes between practitioners, other health care providers or consumers.</td>
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</tbody>
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<thead>
<tr>
<th><strong>AN EMPLOYMENT ISSUE?</strong></th>
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<tbody>
<tr>
<td>Employment issues can be addressed by an employer's policy or policies or can be resolved in the workplace via the appropriate structure to provide oversight (i.e., Human Resources) or through federal and state laws that protect employees. An employment issue may not be an ethical issue, such as a disagreement with a supervisor or other employee about how to conduct business. Additional examples of an employment issue include disagreement about time or hours worked; misleading statements to supervisors, coworkers, customers, or vendors; and misusing an employer's assets.</td>
</tr>
</tbody>
</table>
Approach to Ethical Decision-making

**STEP 1**

**STATE AN ETHICAL DILEMMA**
Identify components of potential ethical dilemma
- Is it an ethical issue, OR a
- Communication problem, OR a
- Practitioner-patient issue, OR a
- Practitioner-supervisor/employer issue, OR a
- Legal matter
- What are the facts of the situation?
- Objectively identify the issue
- Who are key participants
- Identify your perceptions/values
- What further information is needed

**STEP 2**

**CONNECT ETHICAL THEORY TO THE DILEMMA IN PRACTICE**
Employ four key principles of ethical theory*
- Autonomy
- Nonmaleficence
- Beneficence
- Justice

**STEP 3**

**APPLY THE ACADEMY CODE OF ETHICS TO THE ISSUE AND YOUR ETHICAL DECISION-MAKING**
There are 19 principles of the current Academy Code of Ethics. Two are fundamental principles:
- Honesty, integrity, and fairness; and
- Behaviors that support and promote high professional standards.

**STEP 4**

**SELECT THE BEST ALTERNATIVE AND JUSTIFY YOUR DECISION**
Identify possible alternatives to resolve the dilemma, considering:
- Cultural influences affecting your decision making process
- How alternative solutions track with your values and your institution’s values
- Your confidence in and ability to defend the ultimate decision?
- Whether the decision aligns with the Academy Code of Ethics and/or the SOPs/SOPPs
- How the decision might affect others and whether they will support it
- Make a final decision

**STEP 5**

**DEVELOP STRATEGIES TO SUCCESSFULLY IMPLEMENT THE CHosen DECISION**
Strategies to successfully implement the chosen resolution
- Seek additional knowledge to clarify or contextualize the situation as needed
- Implement chosen resolution

**STEP 6**

**EVALUATE THE OUTCOMES AND HOW TO PREVENT A SIMILAR OCCURRENCE**
- Monitor outcomes, ensuring intended outcome(s) are achieved
- What are the strategies to prevent a similar issue in the future?

*Adapted from Ferraro A. Approaches to ethical decision making. J Acad Nutr Diet. 2015;115 (2):179-181.
INDIVIDUAL VERSUS ORGANIZATIONAL ETHICS

What if my ethics complaint concerns an organization or group, not an individual?

The Code of Ethics for the Dietetics Profession pertains to individual practitioners, not organizations. The Academy is an individual professional membership organization. Thus, the Academy cannot accept ethics complaints that pertain to organizations. If you have an organizational ethics issue:

• If your concern involves a for-profit or non-profit organization, reach out to the governing body or Board of Directors

• If your concern relates to a hospital or healthcare system, consider contacting the American Hospital Association (AHA)

• If your complaint involves a health insurer, the America’s Health Insurance Plans (AHIP) may be able to assist

• If your concern relates to a non-dietetics professional that is not an Academy member, consider contacting the professional organization that represents that profession

The focus of the code is:

EDUCATION  REMEDIATION  SELF-REGULATION

The purpose of the code is not policing practitioners.

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Academy Scope of Practice: Tools for Determining Competence and Advancing Practice

In the pursuit of lifelong learning, professional development, and the highest level of scope of practice, the individual registered dietitian (RD) or registered dietitian nutritionist (RDN) and dietetic technician, registered (DTR) must continually self-assess his or her skills, education, training, and knowledge, as well as his or her autonomy, responsibility, and accountability in the practice of nutrition and dietetics. These are the critical components of a profession. How a profession determines its unique role is answered through sources of professional direction. Professions develop documents or statements about what the members feel is important in order to guide their practice, to establish control over practice, and to influence the quality of that practice. Examples are social policy statements, scope and standards of practice, code of ethics, and state boards that operate under a practice act detailing regulations to protect the health and safety of the public.

Responding to our members’ requests, the Academy of Nutrition and Dietetics defined professional scope of practice characteristics and metrics through the development of the Comprehensive Scope of Practice. Resources for the Registered Dietitian or Registered Dietitian Nutritionist and the Comprehensive Scope of Practice Resources for the Dietetic Technician, Registered.

The Resources are an all-inclusive set of documents that describe the knowledge and skills the RD or RDN and DTR need to acquire in order to provide quality nutrition and dietetics care. The Resources describe the tasks and services RDS or RDNs and DTRs perform to meet employer, government, customer/client/patient, and other stakeholder requirements and opportunities. The Comprehensive Scope of Practice Resources assist the RD or RDN and DTR in their commitment to improving the nation’s health through food and nutrition.

What is the next step in the process of defining competence in practice? Competence is essential for quality assurance and performance improvement. Competence is “a principle of professional practice, identifying the ability of the provider to administer safe and reliable services on a consistent basis.” According to Principle 14 of the Academy of Nutrition and Dietetics and Commission on Dietetic Registration (CDR) Code of Ethics, “The dietetics practitioner assumes a lifelong responsibility and accountability for personal competence in practice, consistent with accepted professional standards, continually striving to increase professional knowledge and skills and to apply them in practice.” And according to an Academy/CDR Ethics Opinion, “Professionals who are competent use up-to-date knowledge and skills; make sound decisions based on appropriate data; communicate effectively with patients, customers, and other professionals; critically evaluate their own practice; and improve performance based on self-awareness, applied practice, and feedback from others.”

Credentialed nutrition and dietetics practitioners’ effectiveness is gauged through the use of self-assessment competence tools. The Academy provides tools for determining competence and advancing practice via the Comprehensive Resources. They are:

1. Scope of Practice in Nutrition and Dietetics
2. Scope of Practice for the Registered Dietitian
3. Standards of Practice in Nutrition Care and Standards of Professional Performance for Registered Dietitians
4. Scope of Practice for the Dietetic Technician, Registered
5. Standards of Practice in Nutrition Care and Standards of Professional Performance for Dietetic Technicians, Registered
6. Definition of Terms List
7. Scope of Practice Decision Tool

SCOPE OF PRACTICE IN NUTRITION AND DIETETICS

The Scope of Practice in Nutrition and Dietetics is an overview of the profession that describes components of the scope of practice in nutrition and dietetics and assists with RD or RDN and DTR scope of practice decision making to provide safe, high-quality food and nutrition services. The article includes a Scope of Practice figure, a visual that outlines the education and credentials required for the RD or RDN and DTR, the references needed for managing and advancing practice, and the available standards and resources from the Academy and quality organizations.

SCOPE OF PRACTICE FOR THE REGISTERED DIETITIAN

The Scope of Practice for the RD describes the roles and activities within which the RD or RDN performs. The RD’s or RDN’s scope of practice expands...
FROM THE ACADEMY

with advances in nutrition and food science, health care, and information technology, and is driven by national health quality initiatives and evidence-based research that demonstrates the impact of food and nutrition on health status, disease prevention and treatment, quality of life, and the safety and well-being of the public.

STANDARDS OF PRACTICE IN NUTRITION CARE AND STANDARDS OF PROFESSIONAL PERFORMANCE FOR REGISTERED DIETITIANS

The Revised 2012 Standards of Practice (SOP) in Nutrition Care and Standards of Professional Performance (SOPP) for Registered Dietitians provide a synopsis of the rationale for the RD or RDN standards, details quality indicators, and reviews the role of performance and relationship between the RD or RDN and DTR. The SOPP/SOP is utilized by RDs or RDNs to:

- evaluate practice and performance through self-assessment;
- reflect the minimum competent level of practice and professional performance;
- measure quality and performance improvement through outcomes examples;
- outline quality indicators for practice and performance and
- guide professional practice and development.

The supplementary flowchart on how to use the SOPP/SOP in Figure 3 of the article illustrates the best method for implementing the 2012 SOP for RDs in Nutrition Care and the SOPP for RDs.

SCOPE OF PRACTICE FOR THE DIETETIC TECHNICIAN, REGISTERED

The Scope of Practice for the DTR describes the roles and activities within which the DTR performs. The Scope of Practice for the DTR focuses on food and nutrition and related services provided by the DTR who works under the supervision of an RD or RDN when in direct patient/client nutrition care for the delivery of medical nutrition therapy (MNT). DTRs also work independently in areas such as community/public health, business and industry, research, and management of food and nutrition services in a variety of practice settings.

STANDARDS OF PRACTICE IN NUTRITION CARE AND STANDARDS OF PROFESSIONAL PERFORMANCE FOR DIETETIC TECHNICIANS, REGISTERED

The Revised 2012 Standards of Practice (SOP) in Nutrition Care and Standards of Professional Performance (SOPP) for Dietetic Technicians, Registered, provide a conceptual overview of the rationale for the DTR standards, details quality indicators, and reviews the relationship between the RD or RDN and DTR. The SOPP/SOP is utilized by DTRs to:

- evaluate practice and performance through self-assessment;
- reflect the minimum competent level of practice and professional performance;
- measure quality and performance improvement through outcomes examples;
- outline quality indicators for practice and performance and
- guide professional practice and development.

The supplementary flowchart on how to use the SOPP/SOP in Figure 3 of the article illustrates the best method for implementing the 2012 SOP for DTRs in Nutrition Care and the SOPP for DTRs.

PRACTICE TOOLS

The RD or RDN and DTR use practice tools such as the Definition of Terms, the Scope of Practice Decision Tool, and Quality Management Practice Tips and Case Studies to assist in providing safe, culturally, competent, high-quality food and nutrition services. The Definition of Terms is a cumulative anthology of definitions developed by the Academy. The term list is alphabetical and cross-referenced and includes descriptions, key considerations, and references. The definitions are broad based, have implications for use across the nutrition and dietetics profession, and are consistent with the regulatory and legal needs of the profession. The terms are a resource for the RD or RDN, the DTR, and other food and nutrition practitioners. As a reference document, the definitions serve as standardized language with standardized application in various practice settings.

The Scope of Practice Decision Tool is an online, interactive tool that permits an RD or RDN and DTR to answer a series of questions to determine whether a particular activity is within the scope of practice. The Tool is designed to allow RDs or RDNs and DTRs to critically evaluate, using criteria resources, their knowledge, skill, and demonstrated competence. RDs or RDNs and DTRs utilize the Tool to define their individual competence within each separate activity. The Quality Management Practice Tips and Case Studies outline steps for frequently asked questions on quality care and service and review actual scenarios affecting credentialed nutrition and dietetics practitioners.

RD OR RDN AND DTR RESPONSIBILITY

All RDs or RDNs and DTRs are individually responsible for knowledge and understanding of all scope of practice and Standards of Practice and Professional Performance resources and practice tools. The resources and tools aid RDs or RDNs and DTRs in assessing their individual scope of practice and, if applicable, statutory scope of practice, and support RDs or RDNs and DTRs in providing safe, high-quality food and nutrition services. The Academy’s Quality Management Committee advises all RDs or RDNs and DTRs to have the most recent copy of the Scope of Practice in Nutrition and Dietetics and its components (as found in this supplement) in their personal libraries. The documents will continue to be reviewed and revised as new trends in the profession of nutrition and dietetics and external influences emerge.

References
Academy of Nutrition and Dietetics: Scope of Practice in Nutrition and Dietetics

The Academy Quality Management Committee and Scope of Practice Subcommittee of the Quality Management Committee

The Academy of Nutrition and Dietetics (Academy), the professional association for credentialed dietetics practitioners—registered dietitians (RDs) and dietetic technicians, registered (DTRs)—developed the Scope of Practice as a guide for nutrition and dietetics practitioners. The purpose of the Scope of Practice in Nutrition and Dietetics document is threefold:

1. Provide an overview of the components that encompass the Scope of Practice in Nutrition and Dietetics, in Scope of Practice for the Registered Dietitian
2. Enable RDs and DTRs to be leaders in providing safe, culturally competent, quality food and nutrition services.
3. Introduce resources for RDs and DTRs to direct scope of practice decision making.

WHAT IS THE RATIONAL FOR A SCOPE OF PRACTICE IN NUTRITION AND DIETETICS?
Scope of Practice in Nutrition and Dietetics encompasses the range of roles, activities, and regulations within which nutrition and dietetics practitioners 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. In today's dynamic, diverse health care environment, demand is increasing for quality food and nutrition services that are delivered in varied settings. These new opportunities may lead credentialed dietetics practitioners to ask, “Is this activity within my scope of practice?” The Scope of Practice Decision Tool, which is an online, interactive tool, permits an RD or DTR to answer a series of questions to determine whether a particular activity is within his or her scope of practice. The tool is designed to allow for an RD or DTR to critically evaluate his or her knowledge, skill, and demonstrated competence with criteria resources.

The Scope of Practice in Nutrition and Dietetics is built upon Academy of Nutrition and Dietetics (Academy) resources:
- American Dietetic Association: Scope of Dietetics Practice Framework (2005);
- Academy of Nutrition and Dietetics (Academy) Commission on Dietetic Registration (CDR) Code of Ethics;
- Academy of Nutrition and Dietetics; Standards of Practice in Nutrition Care and Standards of Professional Performance for RDs;
- Academy of Nutrition and Dietetics; Standards of Practice in Nutrition Care and Standards of Professional Performance for DTRs; and

In the 2005 Scope of Dietetics Practice Framework article, the Academy utilized the concept of a framework to describe the full range of roles, responsibilities, and activities that credentialed dietetics practitioners are educated and authorized to perform. The Scope of Practice in Nutrition and Dietetics embodies the framework components and includes practice standards, practice management materials, and other resources to assist credentialed dietetics practitioners in sound decision making that supports quality practice in traditional, emerging, and expanded roles. In addition, the Scope of Practice in Nutrition and Dietetics can serve as a resource for organizations seeking an authoritative description of the elements of competent, safe, and quality nutrition and dietetics practice.

COMPETENCE IN PRACTICE
Competence is a principle of professional practice, identifying the ability of the provider to administer safe and reliable services on a consistent basis. Competence is integral to the delivery of safe, quality health care, and other services that credentialed dietetics practitioners provide. In keeping with the Code of Ethics, RDs and DTRs can only practice in areas in which they are qualified and have demonstrated competence in delivery of food and nutrition services that achieve safe, ethical, and quality outcomes. RDs and DTRs are expected to be competent in, and accept accountability and responsibility for, ensuring safety and quality in the services they provide.

Competence to perform designated activities within defined practice settings is an essential element of the scope of practice in nutrition and dietetics, as demonstrated by the following principles:
1. level of experience, skills, and proficiency to perform designated activities varies among individuals;
2. individual practitioners might not be competent in all aspects of the field;
3. practitioners are expected to practice in the areas in which they are competent; and
4. practitioners pursue additional education and experience to expand their individual scope of practice.3

Competent practitioners use up-to-date knowledge and skills; make sound decisions based on appropriate data; communicate effectively with patients, customers, and other professionals; critically evaluate their own practice; and improve their performance based on self-awareness, applied practice, continued education, and feedback from others.4 Furthermore, according to the Centers for Medicare and Medicaid Services' Interpretive Guidelines for Hospitals §482.28(a)(3), "Administrative and technical personnel must be competent in their assigned duties. This competence is demonstrated through education, experience and specialized training appropriate to the task(s) assigned. Personnel files should include documentation that the staff member(s) is competent in their respective duties."5 RDs and DTRs and the R/DTR team operate within the directives of applicable federal and state laws and regulations, as well as policies and procedures established by the organization in which they are employed. To determine whether an activity is within the scope of practice of the RD or DTR, the practitioner critically evaluates his or her knowledge, skill, and demonstrated competence with criteria resources. The Academy's Scope of Practice Decision Tool, which is an online, interactive tool, is specifically designed to assist with this exercise in evaluation by the individual practitioner and his or her organization.

COMPONENTS OF SCOPE OF PRACTICE IN NUTRITION AND DIETETICS

The figure displays the scope of practice components that RDs and DTRs utilize in nutrition and dietetics. Components and location of the documents and resources are provided. Components are Education Preparation and Credentialing, Practice Standards, Practice Management and Advancement, and Practice Resources.

**Education Preparation and Credentialing**

RD: The Commission on Dietetic Registration (CDR), the credentialing agency for the Academy, defines the RD as an individual who has met current minimum (Baccalaureate) academic requirements with successful completion of both specified didactic education and supervised practice experiences through programs accredited by the Accreditation Council for Education in Nutrition and Dietetics (ACEND) of the Academy of Nutrition and Dietetics and who has successfully completed the Registration Examination for Dietitians. To maintain the RD credential, the RD must comply with the CDR Professional Development Portfolio recertification requirements (acquire 75 units of approved continuing professional education every 5 years).4

DTR: The Commission on Dietetic Registration (CDR) defines the DTR as an individual who has met current minimum requirements through one of three routes:

- successful completion of a minimum of an Associate degree and a Didactic Technician Program as accredited by the Accreditation Council for Education in Nutrition and Dietetics (ACEND) of the Academy of Nutrition and Dietetics (Academy) that includes 450 hours of supervised practice experience;
- successful completion of a minimum of a Baccalaureate degree, met current academic requirements (Didactic Program in Dietetics) as accredited by ACEND of the Academy, successfully completed a supervised practice program under the auspices of a Didactic Technician Program as accredited by ACEND; and completed a minimum of a Baccalaureate degree; successfully completed a Didactic Program in Dietetics as accredited by ACEND.

In all three routes, the individual must successfully complete the Registration Examination for Dietetic Technicians. To maintain the DTR credential, the DTR must comply with the CDR Professional Development Portfolio recertification requirements (acquire 50 hours of approved continuing professional education every 5 years).4,5

**Practice Standards**

Practice standards are core documents of the Academy that lay the foundation for the profession of nutrition and dietetics. Included are the following:

- Code of Ethics;6
- Scope of Practice for the RD;7
- Scope of Practice for the DTR;7
- Standards of Practice in Nutrition Care and Standards of Professional Performance for RDs;8 and
- Standards of Practice in Nutrition Care and Standards of Professional Performance for DTRs.8

These resources, along with applicable state and federal regulations, state practice acts, and organizational standards and program policies, serve as guides for ensuring safe, person-centered, culturally competent, quality nutrition and dietetics practice. Additional uses can include any of the following: evaluate performance, develop position descriptions, contribute to hiring decisions, initiate regulatory reform, or determine whether a specific activity aligns with a practitioner's individual scope of practice, such as clinical privileges.

**Practice Management and Advancement**

The Scope of Practice Decision Tool is a resource that assists RDs and DTRs in determining whether a new activity is within their individual scope of practice and, if applicable, statutory scope of practice. State and federal regulations, standards of patient/client safety, ethical practice, organizational policies and procedures, and education, training, and competence of the practitioner form the basis for determining whether an activity falls within a practitioner's scope of practice. The tool can also aid RDs and DTRs in expanding their practice in response to changing roles, new opportunities, and demands for food and nutrition services. The Scope of
PROFESSION OF NUTRITION AND DIETETICS

SCOPE OF PRACTICE:
- Encompasses the range of roles, activities, and regulations within which nutrition and dietetics practitioners perform.

PRACTICE MANAGEMENT AND ADVANCEMENT
- Scope of Practice Decision Tool
- Dietetics Career Development Guide
- CDR Professional Development Portfolio for maintenance of RD and DTR credentials
- Certificate programs
- Advanced degrees and certifications
- Specialist credentials

PRACTICE STANDARDS
- Code of Ethics
- Scope of Practice for the RD and DTR
- Standards of Practice and Standards of Professional Performance for the RD and DTR in:
  - Nutrition Care
  - Focus Areas
  - Federal and state regulations
  - Organization accreditation standards
  - Organization and program policies

PRACTICE RESOURCES
- Definition of Terms
- Evidence Analysis Library
- Evidence-based nutrition practice guidelines/toolkits
- National Guideline Clearinghouse
- Nutrition Care Manual—Adult, Pediatric, Sports
- Nutrition Services Coverage and billing
- Position and Practice Papers
- Quality Management resources:
  - www.eatright.org/quality
  - www.eatright.org/quality/resources
  - www.eatright.org/cope
  - www.eatright.org/soop

CREDENTIALS
- RD: Commission on Dietetic Registration (CDR) Registration Examination for Registered Dietitian (RD) Credential
- DTR: Commission on Dietetic Registration (CDR) Registration Examination for Dietetic Technician, Registered (DTR) Credential

State licensure or certification, if applicable

EDUCATION
- Completion of academic requirements and supervised practice experience specified by the Accreditation Council for Education in Nutrition and Dietetics (ACEND) of the Academy of Nutrition and Dietetics to qualify for the credentialing examination for the Registered Dietitian (RD) credential or the Dietetic Technician, Registered (DTR) credential

- RD: minimum of a bachelor's degree plus supervised practice program/pathway
- DTR: minimum of an associate's degree plus supervised practice program/pathway; or a minimum of a bachelor's degree

Figure. Scope of practice components that registered dietitians (RDs) and dietetic technicians, registered (DTRs) utilize in nutrition and dietetics. ACEND—Accreditation Council for Education in Nutrition and Dietetics; CDR—Commission on Dietetic Registration.
Practice Decision Tool, which is an online, interactive tool, is available on the Academy’s website (http://www.eatright.org/SHOP/). The Academy’s Dietetics Career Development Guide forms the cornerstone for practice management and advancement in nutrition and dietetics. The Guide uses the Dreyfus model of skill acquisition to illustrate how a practitioner attains increasing levels of knowledge and skill throughout a career. Through life-long learning and professional development, practitioners acquire and develop skills that lead to increased competence and higher levels of practice. The Academy’s website features a graphic representation and explanation of the guide (http://www.eatright.org/futurepractice/).

Maintenance of the RD and DTR credentials requires documentation of continuing education via the Professional Development Portfolio. Participating in certificate programs as well as acquiring advanced degrees and certifications are additional ways in which RDs and DTRs gain new skills and advance their practice. An option available is CDR’s Board Certification Specialist for RDs in focus areas of practice in recognition of an applicant’s documented practice experience and successful completion of an examination.

Practice Resources
The Academy’s practice resources aid RDs and DTRs in providing safe, quality food and nutrition services. A brief description of each resource category is provided:

- **The Definition of Terms** is a cumulative anthology of definitions developed by the Academy. The definitions are broad-based, have implications for use across the nutrition and dietetics profession, and are consistent with the regulatory and legal needs of the profession. The terms are a resource for RDs, DTRs, and other food and nutrition practitioners. As a reference document, the definitions serve as standardized language and standardized application in various practice settings (http://www.eatright.org/scope/).

- **The Evidence Analysis Library** is a synthesis of nutritional research on important dietetics practice questions and is housed within an accessible online library. The Evidence Analysis Library is designed to guide RDs and DTRs in making evidence-based decisions (http://www.eadevidencelibrary.com/).

- **Evidence-Based Nutrition Practice Guidelines and Toolkits** aid RDs in implementing evidence-based practice in specific practice areas. Evidence-based nutrition practice guidelines are a series of guiding statements and treatment algorithms that are developed using a systematic process for identifying, analyzing, and synthesizing scientific evidence. They are designed to assist the RD and patient/client in making decisions about appropriate nutrition care for specific disease states or conditions in typical settings. Evidence-based toolkits are a set of companion documents that are disease or condition specific and detail how the practitioner applies the evidence-based nutrition practice guidelines in practice. Evidence-based nutrition practice guidelines and toolkits incorporate the Academy’s Nutrition Care Process and Model as the standard process for patient/client care (http://www.eadevidencelibrary.com/) and are submitted to the National Guideline Clearinghouse.

- **The National Guideline Clearinghouse** in an initiative of the Agency for Healthcare Research and Quality (http://www.ahrq.gov/US Depart-ment of Health and Human Services. The National Guideline Clearinghouse was originally created by the Agency for Healthcare Research and Quality in partnership with the American Medical Association and the American Association of Health Plans (now America’s Health Insurance Plans). The mission of the National Guideline Clearinghouse is to provide physicians and other health professionals, health care providers, health plans, integrated delivery systems, and purchasers with an accessible mechanism for obtaining objective, detailed information to further the dissemination, implementation, and use of clinical practice guidelines. The Nutrition Care Manual products are therapeutic diet and professional practice manuals for RDs, DTRs, and allied health profession-
REFERENCES


AUTHOR INFORMATION

Inventory of the Academy Quality Management Committee 2010-2011, 2011-2012, 2012-2013 and Scope of Practice Subcommittee of the Quality Management Committee 2010-2011, 2011-2012, 2012-2013: Joyce A. Pribo, MS, RD, LDN-Chair 2010-2011; Sue Kneis, MS, RD, LD-Chair 2011-2012; Annette E. Stitley, MSA, RD, Chair 2012-2013; Valerie M. Williams, MS, RD, LDN-Vice Chair 2012-2013; Annemie K. Showalter, MSA, RD, LD, Charlotte E. Gable, PhD, RD, FADA; Sharon A. Cox, MA, RD, LD; Mary J. Mavier, BSc, RD, CSG; Elaine A. Smith, MA, RD, LD; Pamela Charney, PhD, RD, LD, Patrick J. Fahy-Man, MSA, RD, LD, FADA; Rachel M. Parage, PhD, RD, LD, FADA; Elizabeth V. Weiskopf, RD, PhD, RD, FADA; Terry J. Brown, MPH, RD, CNS-C; Susan L. Smith, MSA, RD, LD Barbara J. Korpak, MS, RD, Gretchen V. Robinson, MS, RD, LD, FADA; Margaret J. Tate, MS, RD; Carol J. Gilmore, MS, RD, LD, FADA; Patricia L. Steiner, MSA, RD, CSG; EN; Joan A. Anderson, MS, RD, Les J. Hile, MS, RD, CDR, RD; Sandra S. McNeil, MA, RD, CLDN, FADA; Bethany L. Daugherty, BS, RD, CD; Pauline Williams, PhD, MPH, MS, RD, CLD; Melissa N. Church, MS, RD, LD; Karen Hui, RD, LDN and Sharon M. McCulley, MA, MSA, RD, LDN, FADA.

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# RDN Test Specifications

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Academic Calendar
Summer Session 2017 (summersession.uconn.edu)

**Fall Semester 2017**

- Mon. Aug. 28: Full semester begins
- Mon. Sept. 4: Labor Day – No classes
- Tues. Sept. 5: Last day to file petitions for course credit by examination
- Mon. Sept. 11: Last day to add or drop courses via the Student Administration System without additional signatures (See chart under Adding and Dropping Courses). Courses dropped after this date will have a “W” for withdrawal recorded on the academic record.
- Mon. Sept. 18: Last day to place courses on Pass/Fail
- Tues.-Mon. Sept. 19-25: Last day for students to make up Incomplete or Absence grades
- Tues. Sept. 26: Dean’s signature required to add courses
- Fri. Oct. 6: Mid-semester progress reports due students from faculty
- Mon. Oct. 23: Registration for the Spring 2018 semester via Student Administration System begins
- Mon. Oct. 30: Last day to drop a course
- Sun.-Sat. Nov. 19-25: Last day to convert courses on Pass/Fail option to letter grade
- Fri. Dec. 8: Thanksgiving Recess
- Mon.-Sat. Dec. 11-17: Last day of fall semester classes
- Mon.-Sat. Dec. 11-17: Final examinations

Winter Session 2018 (wintersession.uconn.edu)

**Spring Semester 2018**

- Tues. Jan. 16: Spring semester begins
- Mon. Jan. 22: Last day to file petitions for course credit by examination
- Mon. Jan. 29: Last day to add or drop courses via the Student Administration System without additional signatures (See chart under Adding and Dropping Courses). Courses dropped after this date will have a “W” for withdrawal recorded on the academic record.
- Mon. Feb. 5: Last day to place courses on Pass/Fail
- Tues.-Mon. Feb. 6-12: Last day for students to make up Incomplete or Absence grades
- Tues. Feb. 13: Dean’s signature required to add courses
- Fri. Feb. 23: Mid-semester progress reports due students from faculty
- Sun.-Sat. Mar. 11-17: Spring Recess
- Mon. Mar. 19: Registration for the Fall 2018 semester via Student Administration System begins
- Sat. Mar. 24: Emergency closing class make up date
- Mon. Mar. 26: Last day to drop a course
- Fri. Apr. 27: Last day to convert courses on Pass/Fail option to letter grade
- Mon.-Sat. Apr 30-May 5: Last day of spring semester classes
- Fri. May 5 - Sun. May 6: Final examinations
- Undergraduate commencement ceremonies

Faculty are urged to try not to schedule exams on significant religious holidays.
Filing a Program Complaint to
Accreditation Council for Education in Nutrition and Dietetics

The Accreditation Council for Education in Nutrition and Dietetics (ACEND) has established a process for reviewing complaints against accredited programs in order to fulfill its public responsibility for assuring the quality and integrity of the educational programs that it accredits. Any individual, for example, intern, faculty, dietetics practitioner and/or member of the public may submit a complaint against any accredited or approved program to ACEND. The complaint must be signed by the complainant. Anonymous complaints are not considered. Where a complainant has threatened or filed legal action against the institution involved, ACEND will hold complaints in abeyance pending resolution of the legal issues and the complainant is so advised.

**Program accreditation standards** may be found on ACEND’s website at http://www.eatrightpro.org/resources/acend/accreditation-standards-fees-and-policies

**Procedures for handling program complaints** may be found at http://www.eatrightpro.org/resource/acend/accreditation-standards-fees-and-policies/filing-a-complaint/procedure-for-complaints-against-accredited-programs

If additional information is needed you may contact the ACEND’s Education staff at the:

Academy of Nutrition and Dietetics
120 South Riverside Plaza, Suite 2190
Chicago, IL 60606
(800) 877-1600 extension 5400
UNIVERSITY OF CONNECTICUT
Department of Allied Health Sciences
DIETETIC INTERNSHIP

I have read and agree to abide by the Policies of the University of Connecticut Dietetic Internship

______________________________
Signature

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Date
I have read and agree to abide by the Policies of the University of Connecticut Dietetic Internship

Signature

Date