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| Nutrition and Dietetics Internship Program (DI) |
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| **Preceptor Handbook 2019-2020** |
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Dear site coordinators and preceptors

Thank you for your participation as a site coordinator/preceptor with Andrews University Nutrition and Dietetics Internship Program.

This Handbook is designed to provide you with information on;

* 2019-2020 Program Calendar
* Summary of supervised rotations
* Policy and Procedures related to the supervised practice
* Curriculum

Online and hard copies of evaluations are available on site coordinator website at <https://learninghub.andrews.edu>. Please let me know if you need help accessing this website.

As preceptors, you can obtain CEUs for precepting (please see page 89). You can also take FREE credits online though CDR’s “Online Campus” [www.cdrcampus.com/](http://www.cdrcampus.com/). Please refer to the Dietetics Preceptor Training Program.

Again, I want to recognize that you perform your preceptor role in addition to your other duties without extra pay or tangible rewards. We appreciate your professional commitment and support your efforts.

Thank you;

Nutrition and Dietetic Internship Faculty and Interns

Our program faculty and staff are here to serve you-please contact us at anytime. Also you can find the internship information on our webpage: [www.andrews.edu/shp/publichealth](http://www.andrews.edu/shp/publichealth) and check the dietetic internship.

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**Seek Knowledge. Affirm Faith. Change the World.**

**Nutrition and Dietetics Internship Program Preceptor Handbook**

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**Dietetic Internship**

**Competencies**

The DI provides experiences in three main areas of Dietetics – Community Nutrition, Food Service Management, and Clinical Nutrition. As 65% of our program is in the Clinical area; our program concentration is Medical Nutrition Therapy (MNT).

The Competencies for the MNT Concentration are as follows:

1. Participate actively in nutrition support or medical rounds.
2. Design a transitional feeding plan for a patient on a ventilator or on nutrition support in a critical care unit.
3. Design a menu with modified diets, including vegetarian options.
4. Design a one day individualized meal plan with vegetarian alternatives.

An important aspect of the Andrews University Dietetic Internship is a focus on vegetarian eating patterns, disease prevention and treatment. Some projects which contribute to the interns learning in this specialized area include:

1. During food service, interns write a menu including vegetarian options
2. A written individualized meal plan for a diabetes or weight management patient including vegetarian options
3. A meal plan for a renal patient including vegetarian options
4. A section on implications of vegetarian lifestyle is required in case studies
5. Interns each write and present a research topic, which includes implications of vegetarian lifestyles, if applicable
6. Review a topic on vegetarianism (interns’ choice) and write a blog post on it to be shared with fellow interns, and brief synopsis to be presented in ZOOM meeting
7. Sources on vegetarian lifestyle are available on learninghub. Write a summary of learning from the AND Position Statement and submit to DI director.

**Mission:**

The mission of the Andrews University Nutrition and Dietetics Internship Program is to prepare highly qualified dietetic professionals who are competent in MNT, and embrace a healthy and balanced lifestyle for generous service in the workplace.

**Goals:**

The primary goals of the Andrews University Nutrition and Dietetics Internship are twofold: to provide the intern with meaningful rotational experiences that will allow for successful completion of the registration examination for dietitians, and to provide the opportunity to develop the skills needed to obtain employment as an entry-level dietitian.

**Goal #1**: The program will prepare practitioners who are competent as an entry level dietitian.

Outcome measures:

1. 80% of the interns enrolled in the DI will complete all program requirements within 150% (13 months) of the time planned for completion.
2. 70% of more of the DI graduates who sought employment will be employed within twelve months of program completion.
3. Over a five-year period, 80% of DI graduates will pass the CDR examination for registered dietitian nutritionists within one year following the first attempt.
4. 90% of the program graduates first employers will rate the program as satisfactory or above for entry level practice.
5. 80% of program graduates will take CDR examination for registered dietitian nutritionists within 12 months of program completion.

**Goal #2**: The program will prepare dietetic practitioners who are competent in incorporating MNT principles in a healthy and balanced lifestyle.

Outcome Measures:

1. 20% of the program graduates will work in an Adventist affiliated institution where a healthy and balanced lifestyle is promoted.
2. 25% of the program graduates will engage in service areas where they can practice and promote a healthy and balanced lifestyle (examples: participate in the Vegetarian DPG or other, write articles on healthy and balanced lifestyles including vegetarianism, give health promotion lectures to the community, etc).
3. 75% of the program graduates survey will rate satisfactory or above for vegetarian nutrition knowledge.

**Minimum Requirements of the preceptors include:**

1. Preceptors must be credentialed or license as appropriate to meet state and federal regulations for the area in which they are supervising.
2. Primary preceptors/site coordinators are licensed and/or credentialed to practice in their field per government regulations.
3. Preceptors should be familiar with the purpose of ACEND accreditation process and intent of the standards.
4. Preceptors must be able to document appropriate continuing education.
5. Preceptors must provide supervised training according to curricula provided by the AU DI Program.

**Responsibilities of Primary Preceptor/Site Coordinator**

1. The primary preceptor/site coordinator shall have the weekly schedule ready for the intern at the time of the initial hospital orientation.
2. The primary preceptors/site coordinator shall determine the sequence of the food service and clinical rotations for the intern(s) based upon the convenience of the staff and the availability of appropriate preceptors to supervise the rotations.
3. The primary preceptor/site coordinator shall set deadlines for the 2 clinical case studies and the research paper/presentation to be completed. Assistance should be given to the intern(s), if help is deemed necessary; to select appropriate case study/research topics and provide general guidance for needed resources to complete the case studies.
4. The primary preceptor/site coordinator shall have a regular weekly meeting with the intern(s) to discuss progress, any problems or issues raised by the preceptors, and other matters of importance.
5. The primary preceptor/site coordinator, with the cooperation of the various preceptors, will suggest a portfolio of research papers and other readings for the intern to read at designated times during the period of the internship.
6. The primary preceptor/site coordinator shall review the evaluation forms from the preceptors for each rotation. The evaluations are to be turned in by each preceptor promptly after the rotation is completed. These evaluations should be discussed face to face with the intern and may be completed online or with the hard-copy form.
7. The university will provide the primary preceptor/site coordinator updated copies of the pre-test and post-test and an answer key for each test. Preceptors are to be kept supplied with the evaluation forms and the current pre-test and post-test forms.
8. Post-test scores of less than 80% are considered a failure. In the event the intern fails a test, the intern may have **one** retake. The preceptor can mention the topics that the intern failed but should **not** give the intern a copy of the test as some tests/questions may be reused year to year. The exams are available to be printed by the preceptor or taken online.
9. Any rotations considered by the preceptor to be unsuccessfully completed must be repeated completely, or in part, after consultation with the site coordinator. Lengthy repeats may have to be re-scheduled at the end of staff relief.

**Preceptor as a mentor:**

The preceptor’s role is critical in preparing interns to function as dietitians. Your participation as a preceptor sustains the dietetics profession by providing a structured environment for the beginner (intern) to learn and develop skills. These skills will include technical dietetics skills as well as professional behavior skills. Your participation also indicates that you believe in investing a part of yourself into others.

*Ask yourself or any intern what was*

*the best part of their dietetics*

*education and they will tell you,*

*“my internship rotations.”*

**Policies:**

**Ongoing training for Preceptors Policy**

**Policy:** Andrews University DI Program will train new preceptors and will provide on-going training to the actual preceptors to assure that they are up-to date with program revisions and precepting skills.

**New Preceptors:**

Every new preceptor will be oriented to the program. The program director will explain the programs’ mission, goals and outcomes. The curriculum,, evaluations and handbook will also be reviewed.

Ongoing training for the preceptors:

Ongoing training will occur in various ways.

1. Teleconference: When there are program revisions the program director with the main preceptors via a teleconference.
2. Intern(s) Evaluations: Every year the program director discusses the individual intern evaluation of the preceptor and facility. Discussion will also take place on how to improve the program based on the intern’s suggestions or concerns.
3. CDR modules: Preceptor Training Program. The program director/site coordinator encourages all the preceptors to do these modules on the web.
4. Review the Annual Handbook.

Assessment of intern learning policy

The supervised practice curriculum is derived from the Academy’s Competency Statements for the Supervised Practice Component of Entry-Level Dietitians Educational Program. These Competency Statements serve as the basis for both internal and external evaluation of the program. The evaluation is designed to improve the program on an on-going basis to produce competent practitioners. Formal evaluation occurs at pre-determined times throughout supervised practice rotations using specifically prepared forms. The following formal evaluations are:

1. Written evaluations forms from preceptors
2. Rubrics for: written case studies, research paper, oral presentation(s), theme meal, diet education, diet counselling, menu design, quality improvement, and NCP
3. Exams

During the internship there will be five online tests for each intern to complete. The first test is given during the orientation week at Andrews University. A passing score for this test is 75%. There is a second chance to take this test on the last day of orientation. Failure to pass this comprehensive exam, of 100 questions, will mean that the intern cannot continue with the internship. The exam will cover the DPD curriculum as covered in the BS degree. This test can be repeated once only at the end of the orientation. The next three tests will follow the main sections of the internship; clinical, food service administration, and community nutrition. A passing score for each of these tests is 80%. At the conclusion of the DI each intern will also take a 100 question RDN-exam like test online from learninghub. A passing score for this exam is also 80%. All 5 tests must be passed for the intern to successfully complete the internship and have their name forwarded to the CDR as eligible to sit for the RDN examination.

Each online test, except the final comprehensive, may be repeated ONCE. This retake is normally administered 7-10 days after the initial attempt. Repeated failure will result in the intern being required to complete a review course at the end of the internship. Some options include online reviews or in-person lectures such as those given by Jean Inman. The intern will also be required to take a practice exam put out by the CDR with a passing score of 70% before being eligible to sit for the RDN examination. The Internship Director reserves the right to determine when is the appropriate time to release the name of the intern to ACEND. Test scores throughout the program will influence that decision.

Pre and Post tests are also administered through the internship for food service and specific clinical rotations. These paper post-tests require a minimum score of 80% to pass. The pre-test is given ONLY to assess deficits, there is no required minimum score. These tests should be proctored and the intern should NOT be given a copy of the test(s) as the DI reuses these tests year to year.

The evaluation instruments assess intern’s performance, knowledge and professional conduct. Some of these judgements will be personable and subjective. Other evaluation strategies will utilize mutual agreement or consensus, or the analysis of objective data. Preceptors completing the evaluation use the provided form(s) and review them with the intern prior to signing. It is the responsibility of the intern to by familiar with various evaluation forms so that s/he is aware of the criteria and timing for each evaluation. It is the responsibility of the intern to ensure that all evaluations are sent to the DI Program Director.

Other policies can be found online: [www.andrews.edu/publichealth/](http://www.andrews.edu/publichealth/)

**Planning and Orientation of the intern suggestions:**

Prior to the beginning of a supervised practice experience the following suggestions will help with the transition from student to intern.

1. Review the program curriculum and evaluations so you have a good understanding of rotation objectives and expectations.
2. Provide your staff with information on intern schedule and rotation expectations and the pre/post-tests.
3. Give a tour of the facility to the intern.
4. Talk to your intern to find out his/her interests, past experiences, strengths, and learning style.
5. Share a written outline of the projects, due dates, and specific goals you have for the intern.
6. Promote professionalism.

**Evaluations:**

* Complete the program’s evaluation forms and have the intern mail them back as soon as possible.
* Keep a copy of the evaluations for at least 6 months after the intern has completed the internship.
* Have regular meetings with the intern. Review face to face each evaluation with the intern. The intern is responsible for submitting completed evaluations to the DI Director.
* Provide constructive oral and written feedback on performance; both what the intern did well and what the intern needs to work on.

**Dietetic Internship Program Calendar**

  Dietetic Internship Orientation (Andrews University Campus) August 13-15

**Entry Exam** **August 13 (10:15 am)**

***(Make-up Entry Exam****,* ***August 15 at 3:00 pm EST)***

Begin Dietetic Internship (usually foodservice rotation) August 26

Labor Day Holiday (1 day) September 2 (8 hours)

Study Day October 4 (8 hours)

**Online Food Service Exam\*\***  **October 7 (8:30 am)**

***(Make-up Food Service Exam, Oct. 21 at 8:30 am)***

Food service Rotation Ends October 11

Begin the Community Rotation October 14

FNCE: Washington D.C. (preapproval needed) October 19-22

Evaluation Reports *Due as scheduled. Submit as completed. See Checklist.*

Begin Clinical Rotation October 28

Study Day November 8 (8 hours)

**Online Community Exam\*\* November 11 (8:30 am)**

***(Make-up Community Exam, Dec 2 at 8:30 am)***

Thanksgiving Vacation\* (3 days) November 20-22

Registration/Payment Due for 2nd Semester December 6

Christmas Vacation\* (8 days) December 20 – December 27

Spring Vacation\* (4 days) March 17-20

Study Day March 21 (8 hours)

**Online Clinical Exam\*\* March 24 (8:30 am)**

***(Make-up Exam Clinical Exam, April 7 at 8:30 am)***

Study Day April 21 (8 hours)

**Online Comprehensive Test** (rest of the day off) **April 22 (8:30 am)**

Final Reports/Remaining Evaluations Due April 25

Last Day of Internship April 25

*\* Provides for a total of 16 vacation days. The finish date should be extended accordingly if sick days are or extenuating circumstances occur (e.g., family death) during the program.*

*\*\* Each exam needs to be passed with a score of 80%. One make-up exam is scheduled.*

**Summary of Supervised Practice**

|  |  |  |
| --- | --- | --- |
| **Experience/Rotation** | **Practice Hours** | **Total Hours** |
| **Orientation at Andrews University** |  | **(24)** |
| **Community Nutrition (1 month)** |  | **156** |
| WIC | 40 |  |
| School Lunch Program | 20 |  |
| Community Wellness | 80 |  |
| Community Elective | 16 |  |
| **Food Service Administration (7 weeks)** |  | **264** |
| Food Production | 80 |  |
| Cafeteria/Catering/Nutrition Accounting | 40 |  |
| Leadership/Management & Human Resources | 144 |  |
| **Clinical Dietetics (21 weeks)** |  | **800** |
| General Clinical: Diet History, Medical  Records, Assessment, Counseling | 40 |  |
| Medical/Surgical | 80 |  |
| Cardiac | 80 |  |
| Diabetes/Weight Management | 80 |  |
| Oncology | 64 |  |
| Renal | 40 |  |
| OB/Pediatrics | 56 |  |
| Performance Improvement | 8 |  |
| Nutrition Support | 80 |  |
| Outpatient Clinic | 24 |  |
| Nutrition Education/Medical Library/Research | 16 |  |
| Social Service/PT/OT/Speech Pathology | 8 |  |
| Long Term Care Facility | 40 |  |
| Staff Relief | 152 |  |
| Clinical Elective | 32 |  |
| **Course review/Study days** | 32 | **(32)** |
| **Total**  Rev 6/2019 |  | **1220** |

**Forms**

**Forms Section**

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**Menu Project Guidelines – 2019**

**You can complete this project by developing a Select Menu or a Room Service Menu. Remember that your menu focus is for patients, not cafeteria. Discuss the project with your preceptor to meet facility needs; project is flexible. What your facility requires takes priority over any guidelines here.**

**Select Menu**

* **Your menu should include 7 days, Sunday through Saturday.**
* **You need selections for each of the following diets:**
  + **Regular Diet**
  + **Carbohydrate Controlled/Diabetes Diet**
  + **Heart Healthy (Cardiac) Diet**
  + **Vegetarian Diet**
  + **Ground**
  + **Extra Credit – Renal Diet**
* **Each meal should include an appetizer (soup or salad, 2-3 entrée options, 2 starches, 2 vegetables, a fruit and a dessert option.**

**Room Service Menu**

* **Your menu should have enough entrees so that a patient who is here the typical average length of stay of 4 days has at least 4 different choices per day (a total of 16-20 entrees). Modify existing options for vegetarian diet when possible.**
* **Room Service menus typically offer more up-scale items than a traditional menu (money is saved by not routinely sending a tray to each patient, thus allowing for a higher quality menu).**
* **You need selections for each of the following diets:**
  + **Regular Diet**
  + **Carbohydrate Controlled/Diabetes Diet**
  + **Heart Healthy (Cardiac) Diet**
  + **Vegetarian Diet**
  + **Ground**
  + **Extra Credit – Renal Diet**
* **You also need to write the 7-day non-select menu for patients who are unable to choose from the Room Service menu.**
* **Your non-select menu should include an appetizer (soup or salad, entree, starch, vegetable, fruit and/or dessert.**

**Key points for either menu type:**

* **Ensure you focus on menu items appropriate for patients, rather than Cafeteria customers.**
* **Remember that you are dealing with individuals who are sick. Consider how that might affect the kinds of menu items that appeal to them.**
* **Determine your target audience. For example, menus for a rural hospital in the South may differ from menus for an urban hospital in the Midwest, or a hospital on either coast.**
* **Focus on menu items that appeal to the general hospital population – don’t allow your personal eating habits or beliefs to become the focus of your menus.**
* **Study the menus used at your current hospital – they are a great guide!**
* **All foods on your modified diet menus must comply with the diet.**
* **Your menu should include variety from a number of standpoints:**
  + **Beef, chicken, fish, and non-meat options**
  + **Muscle meats, pasta dishes, casseroles, sandwiches, salads, etc.**
  + **Side dishes that match the entrée**
  + **Fresh and canned or frozen vegetables**
  + **Fresh or canned fruits**
  + **Desserts should vary (cakes, pies, bars, ice cream, puddings, etc.)**
* **Your menu should not be repetitive – meal-to-meal, day-to-day, Saturday to Sunday.**
* **Consider staffing – develop your menu with items that are appropriate on the different diets or can be used “across the board.” Calculate FTEs.**
* **Calculate costs of your meal plan, ensure you are within budget.**
* **Use foods commonly available from your hospital’s usual vendors.**

Menu Template for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Diet

Meal (Breakfast, Lunch, Dinner)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Category | Sun | Mon | Tues | Wed | Thurs | Fri | Sat |
| Appetizer |  |  |  |  |  |  |  |
| Entrée #1 |  |  |  |  |  |  |  |
| Entrée #2 |  |  |  |  |  |  |  |
| Entrée #3 |  |  |  |  |  |  |  |
| Starch |  |  |  |  |  |  |  |
| Starch |  |  |  |  |  |  |  |
| Vegetable |  |  |  |  |  |  |  |
| Vegetable |  |  |  |  |  |  |  |
| Fruit |  |  |  |  |  |  |  |
| Dessert |  |  |  |  |  |  |  |
| Dessert |  |  |  |  |  |  |  |

Menu Template for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Menu Component

(Appetizer, Entrees, Starch, Vegetable, Fruit, Dessert)

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Diet | Sun | Mon | Tues | Wed | Thurs | Fri | Sat |
| Regular |  |  |  |  |  |  |  |
| Carb Control |  |  |  |  |  |  |  |
| Heart  Healthy |  |  |  |  |  |  |  |
| Vegetarian |  |  |  |  |  |  |  |
| Renal  (optional) |  |  |  |  |  |  |  |

**GENERAL INSTRUCTIONS FOR CASE STUDY**

The goal of the case studies is to show you have learned the basic skills of a clinical dietitian. You will need to thoroughly assess a patient’s nutritional needs while considering all factors that may affect these needs. Examine emerging research on the disease/condition(s) etiology and treatments. Also, include how you made a difference in the patient’s outcome using medical nutritional therapy. There are a total of 2 case studies:

One major case study: written and oral presentation required

One minor case study: written only

**Guidelines:**

1. Select an interesting medical case that will have enough data to fill approximately 10 to 12 double spaced pages and provide opportunity for enhanced learning (excluding title page, appendices and references).

2. Case studies should be written in the narrative form with correct spelling, punctuation and sentence structure. Consult a medical dictionary for approved spelling, abbreviations and use of scientific terms. Complete tables for labs, meds, etc.

3. Follow the case study outline for content and organization when writing the paper. Document and footnote as necessary. The case study must include a title page, bibliography, appendix and references.

4. **Use a minimum of five current references for the minor case study and 10 references for the major case study**. At least half of the required references need to be nutrition related journal articles published within the past five years. References such as medical dictionaries, PDR’s, and diet manuals are not to be cited.

5. Choose a patient who can be followed from admission to discharge and any subsequent readmissions. The initial assessment and all progress reports are the responsibility of the intern (preceptor will co-sign all chart notes).

6. Determine with the preceptor if the patient needs to be informed (or asked) that he/she is the subject of a case study. All patient information is confidential. Do not include the patient’s name, room number, or hospital name in the paper. Refer to the patient by initials only, such as J.S. for Joe Smith.

7. Carefully read through the entire medical chart to obtain the necessary information.

8. Visit the patient regularly to obtain important nutrition history data and verify any additional information. The preceptor will determine if it is the responsibility of the intern to provide nutrition education as ordered by the physician.

9. When writing your case study, concurrently discuss the disease state as described in the literature and the manifestations experienced by the patient. Compare theoretical treatment to the actual medical treatment of the patient.

10. Secondary or co-existing medical conditions are to be discussed only as they relate to the primary disease state.

11. **Review the case study with the appointed clinical preceptor for guidance on content, format, nutritional management, etc at least one week before the due date. It is not the responsibility of the preceptor to proof-read for corrections with grammar, spelling and punctuation. It is your responsibility to set an appointment with your preceptor. The preceptor will grade your case study with the DI case study rubric (and oral rubric for the major case study). It is the responsibility of the intern to turn the completed rubric to the DI program Director.**

12. Find a reviewer to read your paper/presentation before you submit the final copy to your preceptor. There is no requirement for who this must be, simply having someone else look over your work can be helpful as they may find spelling/grammar errors, or areas which do not flow well or are difficult to follow.

**CASE STUDY OUTLINE**

**Introduction: (5)**

* Patient’s initials
* Primary problem and other medical conditions
* Height
* Weight
* Age
* Sex
* BMI
* Reason patient was chosen for study
* Date the study began and ended
* Focus of this study

**Social History: (facts that have direct bearing on patient’s present condition) (5)**

Include such things as occupation, marital status, health insurance, number of children and ages, family responsibilities, home environment, standards of living, and religion.

**Normal anatomy and physiology of applicable body functions: (10)**

Explanation of disease process

**Past Medical History: (include previous admissions to hospital) (10)**

**Present Medical Status and Treatment (explain all medical terms including medication which are referenced) (20)**

* Theoretical discussion of disease condition (textbook)
* Usual treatment of the condition (textbook)
* Patient’s symptoms upon admission leading to present diagnosis (note those you have observed) and explain the etiology
* Laboratory findings and interpretation (compare with normal values)
* Medications: Explain use and purpose and drug/food interactions and side effects, if any observable physical and psychological changes in patient
* Treatment: Medical (mention any diagnostic tests and state the results obtained) and surgical procedures findings and results

**Medical Nutrition Therapy: (35)**

Nutrition history

* Usual eating pattern at home, past diets, time and place of meals, how food is prepared, who purchases the food and prepare meals, and foods that are avoided.
* Analysis of previous diet (24 hr recall)
* Calculation of food intake for sample day
* Current prescribed diet
  + State rationale for the diet and any diet changes, objectives of the dietary treatment, patient’s physical and psychological response to the diet, list nutrition-related problems with supporting evidence and evaluate present nutritional status.
* Kcal/protein/fluid needs
* Consider need for vitamin/mineral supplementation
* Consider need for alternative feeding methods: oral vs. TF vs. TPN

Other

* Evaluate food/nutrient intake (calorie count, TF/TPN rate, etc)
* Patient’s nutrition education process (explain factors influencing education such as language barrier, intelligence, comprehension, cooperation, family support)
* General conditions upon discharge and plan for follow-up
* **Discuss implications and guidance for vegetarian patients if patient is not vegetarian**

**Prognosis: (5) including patient motivation.**

**Summary & Conclusion (5) What I learned from this study (this is the only section that should be written in the first person)**

**Bibliography (3)**

The references should be indicated at the place of citation in the paper and listed at the end of the paper in order of usage, **Not Alphabetically.** See correct bibliographic form based on current practice in JAND.

Major: Minimum 10 references (current within the last 5 years)

Minor: Minimum 5 references (current within the last 5 years)

**Appendices (2)**

Include labeled appendices at the end of your paper. Appendices should include things like table of patient medications, or other relevant data which would be best displayed in a table format.

**SUGGESTED POSSIBLE CASE STUDY TOPICS**

- Complicated pregnancy

- Lipid abnormality

- Diabetes-adult onset or juvenile onset

- Alcoholic cirrhosis

- Hepatitis

- Pediatric- failure-to thrive

- GI- short bowel syndrome, malabsorption, sprue, diverticulosis, irritable bowel, colitis

- Cystic fibrosis

- Post gastrectomy

- Patient receiving TPN or TF

- Pancreatitis

- Cancer

- AIDS-HIV

- Lupus

- COPD

- Decubitus ulcers

- Renal

The intern must complete a MAJOR and MINOR case study during the course of the clinical rotations. The MINOR case study should be completed in the pediatric rotation unless otherwise directed by the site coordinator/preceptor. The MAJOR case study may be completed in any clinical rotation, with the approval of the site coordinator/preceptor. An important feature of the MAJOR case study is that you chose an unusual or atypical patient. Topics may be assigned by the site coordinator/preceptor, and must always be approved by the site coordinator/preceptor.

**NOTE:**

<http://libguides.andrews.edu/wellness> is a research resource you may utilize for projects.

**RESEARCH POWERPOINT and PRESENTATION OUTLINE**

The research powerpoint and presentation should be completed during the clinical portion of your internship. The specific topic may be assigned by your preceptor, or chosen from a suggested list supplied by your preceptor. They may also direct you to seek out your own topic. If applicable, implications related to a vegetarian lifestyle should be included.

**Introduction**

State what disease/condition is going to be the focus of your presentation and give a basic outline of what your paper is going to cover in the introduction.

**Content**

The content of your presentation should include the disease etiology, signs and symptoms, current MNT, and information regarding any applicable emerging research into the disease development and/or treatment. Remember, the goal of this presentation is to be educational to both you and your preceptor/the DI Director, so it is important to emphasize research and new information on your topic.

**Conclusion**

The conclusion should include a summary of the main points of your paper, as well as an application to Nutrition and Dietetics practice section, and what you personally found interesting and/or enlightening about the topic.

**Formatting guidelines**

* Citation style should be APA or format used by the Academy of Nutrition and Dietetics.
* The minimum number of sources is 10. Sources should be no older than 5 years (except landmark research studies).
* See example on learninghub.

**Presentation Guidelines**

* The presentation should be in PowerPoint format.
* Length of presentation should be approximately 20-30 minutes (or based on hospital preferences).
* Include introduction, summary of current research, application and recommendations for dietetics practice and MNT, and conclusions.
* Reference PPT per APA guidelines. Include complete list of references at the end of the presentation, and citations throughout the slides.
* Like the case studies, it is recommended you have someone review your presentation before submission to find errors and/or confusing passages.

**Evaluations**

**&**

**Rubrics**

**Andrews University Nutrition and Dietetics Internship Program**

**Food Service Performance Improvement Rubric**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Skills** | **Excellent**  **(5)** | **Acceptable**  **(4)** | **Needs improvement**  **(3)** | **Raw Score** | **Weight** | **Final Score** |
| **Customer Satisfaction/Quality Control Tool Assessment** | Conduct customer service quality management activities. Determine appropriate diagnostic tool to be used to collect more detailed data (patient tray accuracy, patient food temperature test trays, patient rounding, etc.) Data assessment is accurate. | Determine appropriate diagnostic tool to be used to collect more detailed data (patient tray accuracy, patient food temperature test trays, patient rounding, etc.) Missing some parts of the data assessment is accurate. | The diagnostic tool to be used to collect more detailed data (patient tray accuracy, patient food temperature test trays, patient rounding, etc.) is inappropriate. Data assessment is inaccurate. |  | 3 |  |
| **Comments:** | | | | | | |
| **Quality Diagnostic Statement** | Able to diagnose/identify casual factors for performance improvement initiative | Able to diagnose/identify partially factors for performance improvement initiative. | Unable to diagnose/identify factors for performance improvement initiative. |  | 3 |  |
| **Comments:** | | | | | | |
| **Action Plan and Goal (Plan)** | Operational action steps are defined with identified implementation date and responsible person identified.  New data goal to achieve after plan implementation developed is measurable. | Operational action steps are partially defined with identified implementation date and responsible person identified.  New data goal to achieve after plan implementation developed is measurable. | Operational action steps are not defined with identified implementation date and responsible person identified.  New data goal to achieve after plan implementation developed is not measurable. |  | 6 |  |
| **Comments:** | | | | | | |
| **Action Plan Implementation (Do)** | Implements steps according to plan. Plan steps are thoroughly communicated | Implements steps according to plan. Plan steps are not thoroughly communicated | Implements steps according to plan. Plan steps are not communicated. |  | 6 |  |
| **Comments:** | | | | | | |
| **Documentation (Check/Act)** | Follow up data is documented to see if goal is achieved. Policies and /or procedures are rewritten, if necessary, in appropriate format. If goal not achieved, action plan is rewritten. | Follow up data is partially documented to see if goal is achieved. Policies and/or procedures are rewritten, if necessary, in appropriate format. If goal not achieved, action plan is partially rewritten. | Fail to follow up data is documented to see if goal is achieved. Incomplete policies and /or procedures rewritten. Action plan is not rewritten. |  | 2 |  |
| **Comments: Total Score: % Passing grade is 80%** | | | | | | |

Preceptor signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Intern signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Andrews University Nutrition and Dietetics Internship Program**

**Menu Design Rubric**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- | --- | --- | --- |
| **Document** | **Excellent**  **(5)** | **Acceptable**  **(4)** | **Needs improvement**  **(3)** | **Raw Score** | **Weight** | **Final Score** |
| **Menu** | Menu includes all required components. Descriptive and creative wording is used. Menu includes good variety | Menu includes most required components. Descriptive and creative wording is not used consistently. Menu includes fair variety | Menu does not include all required components or is not submitted on time. Very little descriptive or creative wording is used. Menu is repetitive |  | 4 |  |
| **Modified Diets** | All items included on modified or therapeutic diet menus are acceptable for the diet | Most menu items included on modified or therapeutic menus are acceptable for the diet | Many menu items included on modified or therapeutic menus are not acceptable for the diet |  | 4 |  |
| **Final Standardized Recipes for Entrees Only** | Recipes for entrees are included for each menu item with sources referenced.  Includes vegetarian alternatives. All recipes are included and typed in a standardized format | Recipes for entrees are included for most items.  Some of the vegetarian alternatives are not acceptable. Most recipes are typed in a standardized format | Many recipes are missing. Sources are not referenced. Vegetarian alternatives are missing or not acceptable. Recipes are not typed in a standardized format |  | 4 |  |
| **Comments:** | | | | | | |
| **Grammar/**  **punctuation** | No grammatical or spelling errors, easy to read, and neat | 1 error, includes partial information | 2 or more errors, confusing |  | 2 |  |
| **Focused on the target audience** | Design menu according to the target audience, includes menu items that are familiar to target audience | Includes menu items familiar to the target audience most of the time | Occasionally Includes unfamiliar foods to target audience |  | 2 |  |
| **Guidelines for menu planning** | Follows all guidelines, no repetitions of foods, menu combinations are appropriate | Follow most of the guidelines. Some of the menu combinations can improve. | Follow some of the guidelines, has various menu combinations that are not appropriate |  | 2 |  |
| **Pride** | Intern shows great effort in developing the menu, reflects the intern’s best efforts | Work reflects a strong effort from this intern | Work reflects very little effort on the part of this intern |  | 2 |  |
| **Comments: Total score: % Passing grade is 80% This rubric needs to be done at least once in the outpatient setting. Up to 10 points extra credit for including Renal options.** | | | | | | |

**Preceptor signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Intern signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Andrews University** **Nutrition and Dietetics Internship Program:** **Theme Meal/ Recipes Rubric**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- | --- | --- | --- |
| **Document** | **Excellent**  **(5)** | **Acceptable**  **(4)** | **Needs improvement**  **(3)** | **Raw Score** | **Weight** | **Final Score** |
| **Menu Theme Parameters** | A unique theme is identified. All areas are adequately described. Creativity in theme meal planning is evident. Identify effective use of equipment, staff and time constraints. | A unique theme is identified. Most areas are adequately described. Creativity in theme meal planning is somewhat evident. Use somewhat effectively the equipment, staff and time constraints. | Theme is not appropriate as a unique occasion. Descriptions are inadequate to visualize theme. Limited or no creativity is evident. Don’t use effectively the equipment, staff and doesn’t meet time constraints. |  | 2 |  |
| **Menu and/or Recipes** | Menu includes all required components. Descriptive and creative wording is somewhat used. Recipes are included for each menu item with sources referenced. Menu and recipes are appropriate for theme. | Menu includes all required components. Descriptive and creative wording is not used. Recipes are included. Menu and recipes are appropriate for theme. | Menu does not include all required components or is not submitted. No descriptive or creative wording is used. Some recipes are missing. Sources are not referenced. Menu and recipes may not be appropriate for theme |  | 5 |  |
| **Final Standardized Recipes** | All recipes are included and typed in a standardized format. | All recipes are included and typed in a somewhat standardized format. | All recipes are included but not typed in a standardized format. |  | 6 |  |
| **Comments:** | | | | | | |
| **Recipe Costing Forms** | A recipe costing form is correctly completed for each recipe. Recipe costs fit within budget guidelines. | A recipe costing form is mostly correctly completed for each recipe. Recipe costs fit within budget guidelines | A recipe costing form is somewhat correctly completed for each recipe.  Recipe costs do not fit within budget guidelines. |  | 2 |  |
| **Purchase Order** | Purchase order is correctly completed with appropriate food specifications. Total food costs fit within budget guidelines. | P.O. is mostly correctly completed with appropriate food specifications. Total food costs fit within budget guidelines | P.O. is somewhat correctly completed with some food specifications missing information. Total food costs are slightly over budget guidelines. |  | 1 |  |
| **Budget**  **Report** | Budget report is complete, receipts are  included and all expenses are within budget guidelines | Budget report is mostly complete, receipts are included and all expenses are within budget guidelines | Budget report is somewhat complete, receipts are included. Expenses are slightly over budget guidelines. |  | 1 |  |
| **Production Schedule** | Responsible for the production schedule. Takes initiative to be in the kitchen assisting with prep. Coordinate the overall flow of meal from planning to serving. | Missed some of the steps of the production schedule. Available assisting with prep. Able to coordinate overall flow of meal but needs guidance. | Missed several steps of the production schedule. Available assisting with prep. Able to coordinate overall flow of meal but needs much guidance |  | 2 |  |
| **Theme Meal Evaluation** | Prepares a measurable tool to evaluate customer satisfaction. Includes recommendations based on results of the evaluation. | Prepares a measurable tool to evaluate customer satisfaction. The recommendations were not fully targeting customer satisfaction results. | The evaluation tool doesn’t provide measurable results. Therefore the recommendations were not acceptable. |  | 1 |  |
| **Comments: Total Score: %**  **Passing grade is 80%** | | | | | | |

**Preceptor signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Intern signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Andrews University Nutrition and Dietetics Internship Program**

**Clinical Performance Improvement Rubric**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- | --- | --- | --- |
| **Skills** | **Excellent**  **(3)** | **Acceptable**  **(2)** | **Needs improvement**  **(1)** | **Raw Score** | **Weight** | **Final Score** |
| **Customer Satisfaction/**  **Quality Control Tool Assessment** | Conduct clinical service quality management activities. Determine appropriate diagnostic tool to be used to collect more detailed data (nutrition screening compliance, timeliness of assessment and reassessment, appropriateness of nutrition support, etc.). Data assessment is accurate. | Determine appropriate diagnostic tool to be used to collect more detailed data (nutrition screening compliance, timeliness of assessment and reassessment, appropriateness of nutrition support, etc). Missing some parts of the data assessment is accurate. | The diagnostic tool to be used to collect more detailed data (nutrition screening compliance, timeliness of assessment and reassessment, appropriateness of nutrition support, etc) is inappropriate. Data assessment is inaccurate. |  | 5 |  |
| **Comments:** | | | | | | |
| **Quality Diagnostic Statement** | Able to diagnose/identify casual factors for performance improvement initiative | Able to diagnose/identify partially factors for performance improvement initiative. | Unable to diagnose/identify factors for performance improvement initiative. |  | 5 |  |
| **Comments:** | | | | | | |
| **Action Plan and Goal (Plan)** | Operational action steps are defined with identified implementation date and responsible person identified.  New data goal to achieve after plan implementation developed is measurable. | Operational action steps are partially defined with identified implementation date and responsible person identified.  New data goal to achieve after plan implementation developed is measurable. | Operational action steps are not defined with identified implementation date and responsible person identified.  New data goal to achieve after plan implementation developed is not measurable. |  | 10 |  |
| **Comments:** | | | | | | |
| **Action Plan Implementation (Do)** | Implements steps according to plan. Plan steps are thoroughly communicated | Implements steps according to plan. Plan steps are not thoroughly communicated | Implements steps according to plan. Plan steps are not communicated. |  | 10 |  |
| **Comments:** | | | | | | |
| **Documentation (Check/Act)** | Follow up data is documented to see if goal is achieved. Policies and /or procedures are rewritten, if necessary, in appropriate format. If goal not achieved, action plan is rewritten. | Follow up data is partially documented to see if goal is achieved. Policies and/or procedures are rewritten, if necessary, in appropriate format. If goal not achieved, action plan is partially rewritten. | Fail to follow up data is documented to see if goal is achieved. Incomplete policies and /or procedures rewritten. Action plan is not rewritten. |  | 3.3 |  |
| **Comments: Total Score: % (> 80% required for passing)** | | | | | | |

Preceptor signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Intern signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Andrews University Dietetic Internship Program: Nutrition Counselling Rubric**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- | --- | --- | --- |
| **Category** | **Excellent(5)** | **Acceptable(4)** | **Needs Improvement(3)** | **Raw Score** | **Weight** | **Final Score** |
| **Introduction** | States objectives of diet counseling and introduce herself/himself and check if correct client. | Fails to state the objectives **or** introduces herself/himself **or** failed to check if correct client | Fails to state the objectives **and** introduces herself/himself **and** check if correct client. |  | 1 |  |
| **Comments:** | | | | | | |
| **Oral/non- verbal communication** | Maintains eye contact most of the time and reads notes seldom. No vocalized pauses (uh, well, um, etc.) are noticed. | Maintains eye contact and reads some of the report. One to five vocalized pauses are noticed. | Reads all information with no eye contact. Speaks too quiet, mumbles incorrectly. Ten or more vocalized pauses are noticed. |  | 2 |  |
| **Comments:** | | | | | | |
| **Individualized counseling** | Begin counseling of the priority modifications for the nutrition issue of most concern to client’s health and well-being. Considers client’s cultural and education background. | Begin counseling of the priority modifications for the nutrition issue of most concern to client’s health and well-being but sometimes wanders to another topic. Considers client’s cultural and education background most of the time. | Counseling was not focused on nutrition issue of most concern to client’s health and well-being. Rarely considers client’s cultural and education background. |  | 3 |  |
| **Comments:** | | | | | | |
| **Nutrition counseling** | Assess client readiness for counseling and gear session based on his/her readiness. Provides correct information at all times, didn’t omit important information. Explained all terms in lay language. | Assess client readiness but didn’t gear the session based on his/her readiness. Provides correct information most of the time but omitted important information or didn’t explain one of the technical terms. | Failed to assess client readiness or didn’t gear the counseling based on his/her readiness. Provides correct information but had several errors or omitted important information or didn’t explain some of the technical terms. |  | 6 |  |
| **Comments:** | | | | | | |
| **Handouts and materials** | All handouts are appropriate for client’s degree of understanding | Some of the handouts have technical information that is not explained. | Not appropriate for client’s degree of understanding. |  | 3 |  |
| **Conducted feedback activity to assess client/patient learning** | Conducted an appropriate activity to assess client learning and help client set goals. | Either failed to conduct an appropriate activity to assess client learning or didn’t help client set goals. | Failed both to conduct an appropriate activity to assess client learning and didn’t help client set goals. |  | 2 |  |
| **Comments:** | | | | | | |
| **Preparation before counseling** | All anthropometrics, nutrient calculations, dietary assessment done ahead of time. | Didn’t complete all calculations or anthropometrics or assessment. | Failed to do calculations and/or anthropometrics or assessment |  | 3 |  |
| **Comments: Total score: % Passing grade is 80% This rubric needs to be done at least once in the outpatient setting.** | | | | | | |

**Preceptor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Intern Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Andrews University Nutrition and Dietetics Internship Program:Diet Education Rubric**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Midway:\_\_ Staff relief:\_\_\_

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| --- | --- | --- | --- | --- | --- | --- |
| **Category** | **Excellent(5)** | **Acceptable(4)** | **Needs Improvement(3)** | **Raw Score** | **Weight** | **Final Score** |
| **Purpose** | States objectives of diet instruction and introduce herself/himself and check if correct patient/client. | Fails to state the objectives **or** introduces herself/himself **or** failed to check if correct patient/client. | Fails to state the objectives **and** introduces herself/himself **and** check if correct patient/client. |  | 1 |  |
| **Comments:** | | | | | | |
| **Oral/non- verbal communication** | Maintains eye contact most of the time and reads notes seldom. No vocalized pauses (uh, well, um, etc.) are noticed. | Maintains eye contact and reads some of the report. One to five vocalized pauses are noticed. | Reads all information with no eye contact. Speaks too quiet, mumbles incorrectly. Ten or more vocalized pauses are noticed. |  | 2 |  |
| **Comments:** | | | | | | |
| **Individualized education** | Begin instruction of the priority modification for the nutrition issue of most concern to patient’s health and well-being. Considers patient’s cultural and education background. | Begin instruction of the priority modification for the nutrition issue of most concern to patient’s health and well-being but sometimes wander to another topic. Considers patient’s cultural and education background most of the time. | Education was not focused on the nutrition issue that patient has the most concern. Rarely considers patient’s cultural and education background. |  | 3 |  |
| **Comments:** | | | | | | |
| **Nutrition Content** | Provides correct information at all times, didn’t leave out important information. Explained all terms in lay language. | Provides correct information most of the time but stated one error in the information or left out some important information or didn’t explain one of the technical terms. | Provides correct information but had several errors or left out some important information or didn’t explain some of the technical terms. |  | 6 |  |
| **Comments:** | | | | | | |
| **Handouts and materials** | All handouts are appropriate for patient’s degree of understanding | Some of the handouts have technical information that is not explained. | Not appropriate for patient’s degree of understanding. |  | 3 |  |
| **Conducted feedback activity to assess client/patient learning** | Conducted an appropriate activity to assess patient/client learning and help patient set goals. | Either failed to conduct an appropriate activity to assess patient/client learning or didn’t help patient set goals. | Failed both to conduct an appropriate activity to assess patient/client learning and didn’t help patient set goals. |  | 2 |  |
| **Comments:** | | | | | | |
| **Preparation before education** | All anthropometrics, nutrient calculations, dietary assessment done ahead of time. | Didn’t complete all calculations or anthropometrics or assessment. | Failed to do calculations and/or anthropometrics or assessment |  | 3 |  |

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| --- |
| **Comments: Total score: % Passing grade is 80% NOTE: This rubric needs to be done by midway of the clinical section and during clinical staff relief** |

Preceptor Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Intern Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Andrews University Nutrition and Dietetics Internship Program: Diet Education Rubric**

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| --- | --- | --- | --- | --- | --- | --- |
| **Category** | **Excellent(5)** | **Acceptable(4)** | **Needs Improvement(3)** | **Raw Score** | **Weight** | **Final Score** |
| **Purpose** | States objectives of diet instruction and introduce herself/himself and check if correct patient/client. | Fails to state the objectives **or** introduces herself/himself **or** failed to check if correct patient/client. | Fails to state the objectives **and** introduces herself/himself **and** check if correct patient/client. |  | 1 |  |
| **Comments:** | | | | | | |
| **Oral/non- verbal communication** | Maintains eye contact most of the time and reads notes seldom. No vocalized pauses (uh, well, um, etc.) are noticed. | Maintains eye contact and reads some of the report. One to five vocalized pauses are noticed. | Reads all information with no eye contact. Speaks too quiet, mumbles incorrectly. Ten or more vocalized pauses are noticed. |  | 2 |  |
| **Comments:** | | | | | | |
| **Individualized education** | Begin instruction of the priority modification for the nutrition issue of most concern to patient’s health and well-being. Considers patient’s cultural and education background. | Begin instruction of the priority modification for the nutrition issue of most concern to patient’s health and well-being but sometimes wander to another topic. Considers patient’s cultural and education background most of the time. | Education was not focused on the nutrition issue that patient has the most concern. Rarely considers patient’s cultural and education background. |  | 3 |  |
| **Comments:** | | | | | | |
| **Nutrition Content** | Provides correct information at all times, didn’t leave out important information. Explained all terms in lay language. | Provides correct information most of the time but stated one error in the information or left out some important information or didn’t explain one of the technical terms. | Provides correct information but had several errors or left out some important information or didn’t explain some of the technical terms. |  | 6 |  |
| **Comments:** | | | | | | |
| **Handouts and materials** | All handouts are appropriate for patient’s degree of understanding | Some of the handouts have technical information that is not explained. | Not appropriate for patient’s degree of understanding. |  | 3 |  |
| **Conducted feedback activity to assess client/patient learning** | Conducted an appropriate activity to assess patient/client learning and help patient set goals. | Either failed to conduct an appropriate activity to assess patient/client learning or didn’t help patient set goals. | Failed both to conduct an appropriate activity to assess patient/client learning and didn’t help patient set goals. |  | 2 |  |
| **Comments:** | | | | | | |
| **Preparation before education** | All anthropometrics, nutrient calculations, dietary assessment done ahead of time. | Didn’t complete all calculations or anthropometrics or assessment. | Failed to do calculations and/or anthropometrics or assessment |  | 3 |  |
| **Comments: Total score: % Passing grade is 80% NOTE: This rubric needs to be done by midway of the clinical section and during clinical staff relief** | | | | | | |

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Midway:\_\_\_ Staff relief:\_\_\_

Preceptor Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Intern Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Andrews University Nutrition and Dietetics Internship Program：Nutrition Care Process Rubric**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Midway:\_\_\_ Staff Relief:\_\_\_

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| --- | --- | --- | --- | --- | --- | --- |
| **Category** | **Excellent(5)** | **Acceptable(4)** | **Needs Improvement(3)** | **Raw Score** | **Weight** | **Final Score** |
| **Nutrition Assessment** | Nutrition data is complete and accurate. Nutrition calculations are complete and accurate. | Nutrition data is complete but contains an error. Nutrition calculations are missing one component and/or contain an error. | Nutrition data is incomplete and contain more than one error. Nutrient calculations are incomplete and/or contain multiple errors. |  | 3 |  |
| **Comments:** | | | | | | |
| **Nutrition Diagnostic Labe** | Identifies the nutritional problem accurately. PES statement utilizing the NCP language is properly written. | Identifies the nutritional problem accurately. PES statement utilizing the NCP language contains one error. | Identifies the nutritional problem inaccurately. PES statement does not properly utilize the NCP language and/or contains errors. |  | 6 |  |
| **Comments:** | | | | | | |
| **Intervention and Goal** | Utilizes NCP language for intervention. Intervention(s) are appropriate; aimed at the etiology or the improvement of signs and symptoms. Goal(s) are measurable and realistic. | Utilizes NCP language for intervention. Intervention(s) are appropriate; aimed at the etiology or the improvement of signs and symptoms. Goal(s) are measurable and realistic. Contains one error. | Utilizes NCP language for intervention(s). Intervention(s) are not appropriate to the etiology and signs/symptoms. Goal is not measurable and realistic. Contains more than one error. |  | 5 |  |
| **Comments:** | | | | | | |
| **Nutrition Education** | Education is based on client/patient knowledge. Materials are complete and appropriate. | Education is based on client/patient knowledge. Uses appropriate materials but work is incomplete. | Education is not based on client/patient knowledge. Materials may not be appropriate and/or complete. |  | 3 |  |
| **Comments:** | | | | | | |
| **Documentation** | Uses approved abbreviations. Legible handwriting/correct typing. Signed and dated. | Uses approved abbreviations except for one error. Signed and dated. Legible. | Contains more than one incorrect abbreviation. Signature and/or date missing. |  | 3 |  |
| **Comments: Total score: %**  **Passing grade is 80% Note: This rubric needs to be done midway through the clinical section and during staff relief.** | | | | | | |

Preceptor Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Intern Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Andrews University Nutrition and Dietetics Internship Program：Nutrition Care Process Rubric**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Midway:\_\_\_ Staff Relief:\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Category** | **Excellent**  **(5)** | **Acceptable**  **(4)** | **Needs Improvement**  **(3)** | **Raw Score** | **Weight** | **Final Score** |
| **Nutrition Assessment** | Nutrition data is complete and accurate. Nutrition calculations are complete and accurate. | Nutrition data is complete but contains an error. Nutrition calculations are missing one component and/or contain an error. | Nutrition data is incomplete and contain more than one error. Nutrient calculations are incomplete and/or contain multiple errors. |  | 3 |  |
| **Comments:** | | | | | | |
| **Nutrition Diagnostic Labe** | Identifies the nutritional problem accurately. PES statement utilizing the NCP language is properly written. | Identifies the nutritional problem accurately. PES statement utilizing the NCP language contains one error. | Identifies the nutritional problem inaccurately. PES statement does not properly utilize the NCP language and/or contains errors. |  | 6 |  |
| **Comments:** | | | | | | |
| **Intervention and Goal** | Utilizes NCP language for intervention. Intervention(s) are appropriate; aimed at the etiology or the improvement of signs and symptoms. Goal(s) are measurable and realistic. | Utilizes NCP language for intervention. Intervention(s) are appropriate; aimed at the etiology or the improvement of signs and symptoms. Goal(s) are measurable and realistic. Contains one error. | Utilizes NCP language for intervention(s). Intervention(s) are not appropriate to the etiology and signs/symptoms. Goal is not measurable and realistic. Contains more than one error. |  | 5 |  |
| **Comments:** | | | | | | |
| **Nutrition Education** | Education is based on client/patient knowledge. Materials are complete and appropriate. | Education is based on client/patient knowledge. Uses appropriate materials but work is incomplete. | Education is not based on client/patient knowledge. Materials may not be appropriate and/or complete. |  | 3 |  |
| **Comments:** | | | | | | |
| **Documentation** | Uses approved abbreviations. Legible handwriting/correct typing. Signed and dated. | Uses approved abbreviations except for one error. Signed and dated. Legible. | Contains more than one incorrect abbreviation. Signature and/or date missing. |  | 3 |  |
| **Comments: Total score: %**  **Passing grade is 80% Note: This rubric needs to be done midway through the clinical section and during staff relief.** | | | | | | |

**Preceptor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_Intern Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Andrews University Nutrition and Dietetics Internship Program：Oral Presentation Rubric**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Category** | **Excellent(5)** | **Acceptable(4)** | **Needs Improvement(3)** | **Raw Score** | **Weight** | **Final Score** |
| **Verbal** | Good flow. Some minor pauses which do not distract from the presentation. Speaks comfortably with only occasional use of notes. | Occasional pauses with poor flow. Some distracting uses of “um” or similar. Occasionally reads rather than speaking. | Noticeable pauses as presenter gets lost/loses flow frequently. Distracting amount of “ums, hold on, like” or similar. Reads presentation rather than speaking comfortably. |  | 2 |  |
| **Physical** | Good use of notes/technology which is largely unnoticeable by audience. Eye contact is maintained through majority of presentation. | Some fumbling with notes/technology observed occasionally, but does not distract from presentation. Some eye contact. | Fidgeting and/or fumbling with notes/technology are noted throughout and distract from presentation. Does not make eye contact. |  | 3 |  |
| **Interest** | Presenter is enthusiastic and engaged with the topic. Comfortable with audience and able to hold their attention. | Presenter is engaged with topic. Somewhat in tune with audience’ attention. | Presenter shows discomfort with topic or disinterest. Unable to maintain audience’ attention. |  | 2 |  |
| **Topic Knowledge** | Excellent working knowledge of topic demonstrating understanding of processes and research in the area, as well as its application for the audience. | General knowledge of the topic with some demonstration of understanding processes, research, and application for the audience. | Poor knowledge of the topic which lacks a demonstration of understand the processes, research, and application for the audience. |  | 3 |  |
| **Ability to Answer Questions** | Presenter is comfortable with topic and able to answer questions thoroughly, drawing on research and application. Able to point to references as appropriate. | Presenter is competent to answer most questions. Somewhat able to draw on research and applications. Makes some use of resources. | Presenter is unable to answer most questions. Does not make use of research and application knowledge. Does not utilize resources competently. |  | 3 |  |
| **Professionalism** | Demonstrates professionalism through thorough preparation, being early to prepare and setup on-site, appearance, cultural sensitivity and respect, and response constructive criticism from preceptors. | Demonstrates some professionalism through preparation, timeliness, dress, cultural sensitivity and respect, and acceptance of constructive criticism from preceptors. | Does not adequately demonstrate professionalism. Lacks in some areas such as preparation, timeliness, dress, cultural sensitivity and acceptance of feedback from preceptors. |  | 1 |  |
| **Visual Aids** | Slides are well organized, clear, and easy to follow. They enhance the presentation and show thoughtful preparation. | Slides are organized and go along with presenter’s flow adequately. They are not too wordy or confusing. | Slides are not well organized or clear; too wordy and/or not in line with presenters flow. |  | 2 |  |
| **Organization** | Clear introduction, body, and conclusion with good application of research. | Clear introduction, body, and conclusion with some application of research. | Unclear introduction, body, and/or conclusion. Lacking application of research. |  | 3 |  |
| **Resources** | Reliable and current sources. Presenter shows familiarity with contents of resources. Citations are formatted correctly. | Reliable sources which are mostly current. Presenter shows some familiarity with content. Citations are mostly formatted correctly with only a few minor errors. | Unreliable sources and/or out-of-date. Presenter seems unfamiliar with content of resources. Citations are not properly formatted. |  | 1 |  |
| **Passing grade is 80% *(This rubric can be used with any presentation you give)* Total score: %**  **Comments: *(may use back of sheet for additional comments)*** | | | | | | |

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Food Service:\_\_\_ Clinical:\_\_\_

**Preceptor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Intern Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Andrews University Nutrition and Dietetics Internship Program：Oral Presentation Rubric**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Category** | **Excellent (5)** | **Acceptable (4)** | **Needs Improvement (3)** | **Raw Score** | **Weight** | **Final Score** |
| **Verbal** | Good flow. Some minor pauses which do not distract from the presentation. Speaks comfortably with only occasional use of notes. | Occasional pauses with poor flow. Some distracting uses of “um” or similar. Occasionally reads rather than speaking. | Noticeable pauses as presenter gets lost/loses flow frequently. Distracting amount of “ums, hold on, like” or similar. Reads presentation rather than speaking comfortably. |  | 2 |  |
| **Physical** | Good use of notes/technology which is largely unnoticeable by audience. Eye contact is maintained through majority of presentation. | Some fumbling with notes/technology observed occasionally, but does not distract from presentation. Some eye contact. | Fidgeting and/or fumbling with notes/technology are noted throughout and distract from presentation. Does not make eye contact. |  | 3 |  |
| **Interest** | Presenter is enthusiastic and engaged with the topic. Comfortable with audience and able to hold their attention. | Presenter is engaged with topic. Somewhat in tune with audience’ attention. | Presenter shows discomfort with topic or disinterest. Unable to maintain audience’ attention. |  | 2 |  |
| **Topic Knowledge** | Excellent working knowledge of topic demonstrating understanding of processes and research in the area, as well as its application for the audience. | General knowledge of the topic with some demonstration of understanding processes, research, and application for the audience. | Poor knowledge of the topic which lacks a demonstration of understand the processes, research, and application for the audience. |  | 3 |  |
| **Ability to Answer Questions** | Presenter is comfortable with topic and able to answer questions thoroughly, drawing on research and application. Able to point to references as appropriate. | Presenter is competent to answer most questions. Somewhat able to draw on research and applications. Makes some use of resources. | Presenter is unable to answer most questions. Does not make use of research and application knowledge. Does not utilize resources competently. |  | 3 |  |
| **Professionalism** | Demonstrates professionalism through thorough preparation, being early to prepare and setup on-site, appearance, cultural sensitivity and respect, and response constructive criticism from preceptors. | Demonstrates some professionalism through preparation, timeliness, dress, cultural sensitivity and respect, and acceptance of constructive criticism from preceptors. | Does not adequately demonstrate professionalism. Lacks in some areas such as preparation, timeliness, dress, cultural sensitivity and acceptance of feedback from preceptors. |  | 1 |  |
| **Visual Aids** | Slides are well organized, clear, and easy to follow. They enhance the presentation and show thoughtful preparation. | Slides are organized and go along with presenter’s flow adequately. They are not too wordy or confusing. | Slides are not well organized or clear; too wordy and/or not in line with presenters flow. |  | 2 |  |
| **Organization** | Clear introduction, body, and conclusion with good application of research. | Clear introduction, body, and conclusion with some application of research. | Unclear introduction, body, and/or conclusion. Lacking application of research. |  | 3 |  |
| **Resources** | Reliable and current sources. Presenter shows familiarity with contents of resources. Citations are formatted correctly. | Reliable sources which are mostly current. Presenter shows some familiarity with content. Citations are mostly formatted correctly with only a few minor errors. | Unreliable sources and/or out-of-date. Presenter seems unfamiliar with content of resources. Citations are not properly formatted. |  | 1 |  |
| **Passing grade is 80% *(This rubric can be used with any presentation you give)* Total score: %**  **Comments: *(may use back of sheet for additional comments)*** | | | | | | |

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Food Service:\_\_\_ Clinical:\_\_\_

**Preceptor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Intern Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Andrews University Nutrition and Dietetics Internship Program：Oral Presentation Rubric**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Food Service:\_\_\_ Clinical:\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Category** | **Excellent (5)** | **Acceptable (4)** | **Needs Improvement (3)** | **Raw Score** | **Weight** | **Final Score** |
| **Verbal** | Good flow. Some minor pauses which do not distract from the presentation. Speaks comfortably with only occasional use of notes. | Occasional pauses with poor flow. Some distracting uses of “um” or similar. Occasionally reads rather than speaking. | Noticeable pauses as presenter gets lost/loses flow frequently. Distracting amount of “ums, hold on, like” or similar. Reads presentation rather than speaking comfortably. |  | 2 |  |
| **Physical** | Good use of notes/technology which is largely unnoticeable by audience. Eye contact is maintained through majority of presentation. | Some fumbling with notes/technology observed occasionally, but does not distract from presentation. Some eye contact. | Fidgeting and/or fumbling with notes/technology are noted throughout and distract from presentation. Does not make eye contact. |  | 3 |  |
| **Interest** | Presenter is enthusiastic and engaged with the topic. Comfortable with audience and able to hold their attention. | Presenter is engaged with topic. Somewhat in tune with audience’ attention. | Presenter shows discomfort with topic or disinterest. Unable to maintain audience’ attention. |  | 2 |  |
| **Topic Knowledge** | Excellent working knowledge of topic demonstrating understanding of processes and research in the area, as well as its application for the audience. | General knowledge of the topic with some demonstration of understanding processes, research, and application for the audience. | Poor knowledge of the topic which lacks a demonstration of understand the processes, research, and application for the audience. |  | 3 |  |
| **Ability to Answer Questions** | Presenter is comfortable with topic and able to answer questions thoroughly, drawing on research and application. Able to point to references as appropriate. | Presenter is competent to answer most questions. Somewhat able to draw on research and applications. Makes some use of resources. | Presenter is unable to answer most questions. Does not make use of research and application knowledge. Does not utilize resources competently. |  | 3 |  |
| **Professionalism** | Demonstrates professionalism through thorough preparation, being early to prepare and setup on-site, appearance, cultural sensitivity and respect, and response constructive criticism from preceptors. | Demonstrates some professionalism through preparation, timeliness, dress, cultural sensitivity and respect, and acceptance of constructive criticism from preceptors. | Does not adequately demonstrate professionalism. Lacks in some areas such as preparation, timeliness, dress, cultural sensitivity and acceptance of feedback from preceptors. |  | 1 |  |
| **Visual Aids** | Slides are well organized, clear, and easy to follow. They enhance the presentation and show thoughtful preparation. | Slides are organized and go along with presenter’s flow adequately. They are not too wordy or confusing. | Slides are not well organized or clear; too wordy and/or not in line with presenters flow. |  | 2 |  |
| **Organization** | Clear introduction, body, and conclusion with good application of research. | Clear introduction, body, and conclusion with some application of research. | Unclear introduction, body, and/or conclusion. Lacking application of research. |  | 3 |  |
| **Resources** | Reliable and current sources. Presenter shows familiarity with contents of resources. Citations are formatted correctly. | Reliable sources which are mostly current. Presenter shows some familiarity with content. Citations are mostly formatted correctly with only a few minor errors. | Unreliable sources and/or out-of-date. Presenter seems unfamiliar with content of resources. Citations are not properly formatted. |  | 1 |  |
| **Passing grade is 80% *(This rubric can be used with any presentation you give)* Total score: %**  **Comments: *(may use back of sheet for additional comments)*** | | | | | | |

**Preceptor’s Signature**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Intern’s Signature**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Andrews University Nutrition and Dietetics Internship Program：Written Case Study Rubric**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Case title \_\_\_\_\_\_\_\_ Major: Minor:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Category** | **Excellent**  **(5)** | **Acceptable**  **(4)** | **Needs Improvement**  **(3)** | **Raw Score** | **Weight** | **Final Score** |
| **Introduction** | The introduction presents the overall topic and draws the reader into the presentation. | The introduction presents the overall topic somewhat clearly and draws the reader into the presentation. | The introduction does not present the overall topic clearly. The reader is not drawn to the presentation. |  | 1 |  |
| **Comments:** | | | | | | |
| **Content/knowledge**\* | The content is written clearly and concisely with logical progression of ideas and supporting information. Follows the case study outline for content and organization. All elements of the case study are present.  Shows knowledge of disease process and medications. Recommends appropriate interventions. | The content is written concise but may be unclear. Some parts of the case study lose a logical progression of ideas and may miss supporting information. Follows the case study outline for content and organization most of the time. Shows knowledge of disease process & medications. Recommends appropriate interventions most of the time. | The content is written unclearly with illogical progression of ideas and supporting information. Follows the case study outline for content and organization most of the time. Doesn’t have a clear understanding of disease process. May or may not recommend appropriate interventions. |  | 6 |  |
| **Comments:** | | | | | | |
| **MNT/Calculations:** | Applies evidence-based guidelines in the Nutrition Care Process. Justifies choice of MNT based on evidence. Nutrient calculations are accurate. Accurate analysis of previous diet is included. | Misses some elements of the Nutrition Care Process. 1 nutrient calculations is inaccurate. Analysis of previous diet is included with some inaccuracies. | No evidence of using the best MNT. 2 or more calculations are incorrect. Analysis of previous diet is missing. |  | 6 |  |
| **Comments:** | | | | | | |
| **Text Elements/ Mechanics:** | The fonts are easy to read. The layout is visually pleasing and contributes to overall message. The text is written with one error or less in grammar, capitalization, punctuation, and spelling. Cover page with title is present. | The fonts are easy to read. The layout is good. The text is written with 2-3 errors in grammar, capitalization, punctuation, and spelling. Cover page is incomplete | The fonts are not easy to read. The layout is average. The text is written with more than 3 errors in grammar, capitalization, punctuation, and spelling. No cover page. |  | 2 |  |
| **Comments:** | | | | | | |
| **Research/Citations:** | Evaluates emerging research for application of dietetic practice. Research of disease process is complete. Sources of information are properly cited and not more than 5 years old (exception if a classic citation) There are 10 or more citations for the major case study and 5 citations for the minor case study | Incomplete evaluation of research. Sources of information are properly cited and not more than 5 years old. Missing 2 citations for major case study & 1 for minor case study. | Missing major evaluations of research. Sources of information are not properly cited or some citations are older than 5 years. Missing more than 2 citations for major case study & more than 1 for minor case study. |  | 5 |  |
| **Comments: Total score: %**  **\*See Case Study Outline for content. 10% deduction for turning in later than due date. Passing grade is 80%. (Please include corrected case study with rubric)** | | | | | | |

**Preceptor’s Signature**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Intern’s Signature**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Andrews University Nutrition and Dietetics Internship Program**

**Written Case Study Rubric**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Case title \_\_\_\_\_\_\_\_ Major: Minor:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Category** | **Excellent**  **(5)** | **Acceptable**  **(4)** | **Needs Improvement**  **(3)** | **Raw Score** | **Weight** | **Final Score** |
| **Introduction** | The introduction presents the overall topic and draws the reader into the presentation. | The introduction presents the overall topic somewhat clearly and draws the reader into the presentation. | The introduction does not present the overall topic clearly. The reader is not drawn to the presentation. |  | 1 |  |
| **Comments:** | | | | | | |
| **Content/knowledge**\* | The content is written clearly and concisely with logical progression of ideas and supporting information. Follows the case study outline for content and organization. All elements of the case study are present.  Shows knowledge of disease process and medications. Recommends appropriate interventions. | The content is written concise but may be unclear. Some parts of the case study lose a logical progression of ideas and may miss supporting information. Follows the case study outline for content and organization most of the time. Shows knowledge of disease process & medications. Recommends appropriate interventions most of the time. | The content is written unclearly with illogical progression of ideas and supporting information. Follows the case study outline for content and organization most of the time. Doesn’t have a clear understanding of disease process. May or may not recommend appropriate interventions. |  | 6 |  |
| **Comments:** | | | | | | |
| **MNT/Calculations:** | Applies evidence-based guidelines in the Nutrition Care Process. Justifies choice of MNT based on evidence. Nutrient calculations are accurate. Accurate analysis of previous diet is included. | Misses some elements of the Nutrition Care Process. 1 nutrient calculations is inaccurate. Analysis of previous diet is included with some inaccuracies. | No evidence of using the best MNT. 2 or more calculations are incorrect. Analysis of previous diet is missing. |  | 6 |  |
| **Comments:** | | | | | | |
| **Text Elements/ Mechanics:** | The fonts are easy to read. The layout is visually pleasing and contributes to overall message. The text is written with one error or less in grammar, capitalization, punctuation, and spelling. Cover page with title is present. | The fonts are easy to read. The layout is good. The text is written with 2-3 errors in grammar, capitalization, punctuation, and spelling. Cover page is incomplete | The fonts are not easy to read. The layout is average. The text is written with more than 3 errors in grammar, capitalization, punctuation, and spelling. No cover page. |  | 2 |  |
| **Comments:** | | | | | | |
| **Research/Citations:** | Evaluates emerging research for application of dietetic practice. Research of disease process is complete. Sources of information are properly cited and not more than 5 years old (exception if a classic citation) There are 10 or more citations for the major case study and 5 citations for the minor case study | Incomplete evaluation of research. Sources of information are properly cited and not more than 5 years old. Missing 2 citations for major case study & 1 for minor case study. | Missing major evaluations of research. Sources of information are not properly cited or some citations are older than 5 years. Missing more than 2 citations for major case study & more than 1 for minor case study. |  | 5 |  |
| **Comments: Total score: %**  **\*See Case Study Outline for content. 10% deduction for turning in later than due date. Passing grade is 80%. (Please include corrected case study with rubric)** | | | | | | |

**Preceptor’s Signature**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Intern’s Signature**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Andrews University Internship Program of Nutrition & Dietetics：Research Presentation Rubric**

**Intern’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Research Topic \_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Category** | **Excellent(5)** | **Acceptable(4)** | **Needs Improvement(3)** | **Raw score** | **Weight** | **Final score** |
| **Introduction** | The introduction presents the overall topic and draws the reader into the body of the presentation. | The introduction presents the overall topic somewhat clearly and draws the reader into the body of the presentation. | The introduction does not present the overall topic clearly. The reader is not drawn to the body of the presentation. |  | 1 |  |
| **Comments:** | | | | | | |
| **Content/knowledge**\* | The content is written clearly and concisely with logical progression of ideas and supporting information. Organized logically. Shows knowledge of disease process or specialty area as well as current research and application for dietetics practice and MNT. | The content is written concisely but may be unclear. Some parts of the presentation are not in a logical progression and may miss supporting information. Shows some knowledge of disease process or specialty area, as well as current research and applications and MNT. | The content is written unclearly with illogical progression of ideas and a lack of supporting information. Doesn’t show a clear understanding of disease process or specialty area, and does not adequately address current research and applications and MNT. |  | 6 |  |
| **Comments:** | | | | | | |
| **MNT/Calculations:** | Explains reasoning for common MNT interventions or prevention. Examines current research with possible applications for MNT. Any relevant nutrient calculations are accurate. | Misses some elements of current recommended MNT interventions or prevention. Examines some current research with only minor discussion of applications for MNT. 1 relevant nutrient calculation is inaccurate. | No discussion of current MNT interventions or prevention. Does not adequately examine current research for applications in MNT. 2 or more relevant nutrient calculations are inaccurate. |  | 5 |  |
| **Comments:** | | | | | | |
| **Text Elements/ Mechanics:** | The fonts are easy to read. The layout is visually pleasing and contributes to overall message. The text is written with one error or less in grammar, capitalization, punctuation, and spelling. Title is present, along with name of presenter. | The fonts are easy to read. The layout is good. The text is written with 2-3 errors in grammar, capitalization, punctuation, and spelling. Title or presenter information is incomplete. | The fonts are not easy to read. The layout is average. The text is written with more than 3 errors in grammar, capitalization, punctuation, and spelling. Title or presenter information is missing. |  | 2 |  |
| **Comments:** | | | | | | |
| **Research/Citations:** | Evaluates emerging research for application of dietetic practice. Research of disease process is complete. Sources of information are properly cited and not more than 5 years old (exception if a classic citation). The recommended minimum # of citations is met. | Incomplete evaluation of research. Sources of information are properly cited and not more than 5 years old. Short 1-2 citations. | Missing major evaluations of research. Sources of information are not properly cited or some citations are older than 5 years. Missing more than 2 citations to meet the minimum. |  | 6 |  |
| **Comments: Total score: %**  **\*See Research Paper Outline for content. 10% deduction for turning in later than due date. Passing grade is 80%.** | | | | | | |

*(Please include corrected paper with rubric)*

**Preceptor’s Signature**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Intern’s Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_ **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Name: Date:** | | | | | | | |
| **CATEGORY** | **Explanations** | **3** | **2** | **1** | **Raw score** | **Weight** | **Final Score** |
| **Clear, organized, and professional format** | Cover page, table of contents, dividers are available and demonstrate the use of clear, well organized and accurate written communication. | Provides high quality work | Provides work that occasional needs to be checked/redone to ensure quality | Provides work that usually needs to be checked/redone to ensure quality |  | 6 |  |
| **Layout and Text Elements** | No grammatical or spelling errors, format easy to read. Fonts, point size, bullets, bold and indentations for headings | Generally is easy to read. Only 1 error is present. | 2-4 errors, partial information | more than 4 errors, format is difficult to read |  | 6 |  |
| **Comments:** | | | | | | |  |
| **Content/Reflections** | All parts of the portfolio are present. All reflections clearly identified and described professional growth goals of lifelong learning. | All parts of the portfolio are present, but missing one the reflections of the entries | Missing one part of the portfolio or missing two reflections of the entries | Missing more than one part of the portfolio or missing more than two of the reflections of the entries |  | 9 |  |
| **Comments:** | | | | | | | |
| **Quality of entries** | Consistently the qualities of the entries are neat and represent the section of the portfolio. | One of the entries doesn’t represent the section correctly. | More than one entry doesn’t represent the section accurately. | More than two entries don’t represent the section accurately. |  | 7 |  |
| **Pride** | Intern shows great effort in developing the portfolio | Work reflects a strong effort from this intern. | Work reflects some effort from this intern. | Work reflects very little effort on the part of this intern. |  | 5.3 |  |
| **Comments: Total Score: %**  **Passing grade is 80%** | | | | | | | |

**Andrews University Internship Program of Nutrition & Dietetics**

**E- Portfolio Rubric**

**Preceptor signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Intern signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Andrews University Internship Program of Nutrition & Dietetics**

**Policy Letter Rubric**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| --- | --- | --- | --- | --- | --- | --- |
| **Document** | **Excellent**  **(5)** | **Acceptable**  **(4)** | **Needs improvement**  **(3)** | **Raw Score** | **Weight** | **Final Score** |
| **Introduction:** | The introduction presents the overall topic, introduces the author of the letter and draws the reader in. | The introduction presents the overall topic, introduces the author of the letter but fails to grab the reader’s attention. | The introduction does not clearly introduce the topic or the author, and fails to grab the reader’s attention. |  | 4 |  |
| **Comments:** | | | | | | |
| **Formatting:** | The letter is laid out in a logical manner and easy to read. It expertly covers the info without being overly wordy. | The letter is laid out in a semi-logical manner and easy to read. It adequately covers the topic but is somewhat wordy. | The letter is laid out in an illogical manner and not easy to read. It insufficiently covers the topic and/or is overly wordy. |  | 3 |  |
| **Content/knowledge:** | The letter shows a thorough understanding of the topic and conveys the information in a clear way. | The letter shows some understanding of the topic and conveys the information in a clear way. | The letter does not show a good understanding of the topic and does not communicate information clearly. |  | 5 |  |
| **Comments:** | | | | | | |
| **Topic Importance:** | The letter clearly explains why the issue being addressed is important and is convincing to the reader. | The letter somewhat explains why the issue of the letter is important and somewhat convincing. | The letter fails to convey the importance of the topic and is not convincing. |  | 4 |  |
| **Comments:** | | | | | | |
| **Solution Proposal:** | The intern proposes a clear and reasonable solution or a course of action which the reader can take to address the issue. | The intern proses a clear solution or course of action which is partially possible for the reader to take. | The intern does not propose a reasonable or clear solution or course of action for the reader to take. |  | 4 |  |
| **Comments: Total Score: %**  **Passing grade is 80%** | | | | | | |

**Internship Director signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Intern signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**



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**Community Nutrition**

**CURRICULUM FOR SUPERVISED PRACTICE: For Andrews University Internship Program in Nutrition & Dietetics**

**Names of Facilities/Affiliations\*** Johnson County WIC Program, Butler county WIC program, County Department WIC program,

Intercare community Health Network, Orange County WIC Program, St. Joseph County WIC program,

Public Health Dayton and Montgomery County WIC Program, Kent County Health Department WIC Program, **Type of Experience/Rotation** WIC

Floyd County Health Department and Kane County WIC program, Access Health WIC Program

**Weeks of Supervised Practice**  1.0 **Practice Hours**  40 **Didactic Hours** 0

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| **Competencies** | **Evaluation Strategies** | **Example of Planned Experiences**  **(These serve only as guidelines; they are not requirements. Your preceptor may plan different experiences to meet the competency.)** |
| **Scientific and Evidence Base of Practice: integration of scientific information and research into practice** | | |
| CRDN 1.3: Justify programs, products, services and care using appropriate evidence or data | Review all CRDNs with supervising RD and include activities in Bi-Weekly Report(s).**Turn in a written report to the DI Director with bi-weekly report following WIC rotation**. | CRDN 1.3Discuss program costs/benefits with preceptor. . Work with WIC clients to assess needs and the benefits they may receive. |
| **Scientific and Evidence Base of Practice: integration of scientific information and research into practice** | | |
| CRDN 2.2: Demonstrate professional writing skills in preparing professional communications (Tip: Examples include research manuscripts, project proposals, education materials, policies and procedures).  CRDN 2.4: Function as a member of interprofessional teams.  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. | Turn in **written report** to the DI director. Place a copy of your **handout or teaching materials** and report in your portfolio. Include a photo of your bulletin board if applicable. | CRDN 2.2 Conduct a nutrition education class on a food & nutrition topic and develop educational materials for a class/clients in accordance with the needs of your WIC facility. You may also create a bulletin board on a topic requested by the facility.  Write a one page report of the experience.  CRDN 2.4 Work with WIC staff to understand the function of different professionals in the setting and contribute to completion of workload.  CRDN 2.10 Work respectfully with team members. Be timely and courteous.  CRDN 2.11 Be aware of different needs/beliefs of the client population and act accordingly. Be sensitive to all team members and staff. |
| **Clinical and Customer Services: development and delivery of information, products and services to individuals, groups, and populations** | | |
| 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 literacy level of the audience. |  | CRDN 3.3 Speak clearly with clients and team members. Ensure written communications are clear. Educate clients at appropriate level of knowledge and give appropriate handouts.  CRDN 3.4 Conduct a nutrition education class on a food & nutrition topic if possible. Educate clients on topics relevant to their situation (i.e. nutrition needs for nursing/pregnant women, newborns/toddlers).  CRDN 3.5 Create and edit handouts per needs of facility, ensuring appropriateness for target audience. |

**\*For a comprehensive list of affiliated sites, please see learninghub.**

**CURRICULUM FOR SUPERVISED PRACTICE: For Andrews University Internship Program in Nutrition & Dietetics**

Names of Facilities/Affiliations Upton Middle School/St Joseph Public Schools, Grand Rapids Public Schools,

Kettering City Schools, Valley View School District, Birdville Public Schools, Muscogee County Public Schools, **Type of Experience/Rotation**

Orange County Head Start Program, Head Start Greater Dallas, Berrien Springs Public Schools School Lunch Program or Head Start

Presence Health

**Weeks of Supervised Practice**  0.5 **Practice Hours**  20 **Didactic Hours** 0

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| **Competencies** | **Evaluation Strategy** | **Examples of Planned Experiences** |
| **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 | Review all CRDNs with supervising RD and include activities in Weekly Report(s).  Write a **Plate Waste** **Report** regarding the results/interpretation of the plate waste study. Discuss with supervising RD. Send a copy to the DI director with your weekly report. Be sure to include your sample size and a chart of how you recorded data. | CRDN 1.1 Review the federal government’s policies for children nutrition programs. Conduct plate waste study.  (A plate waste study should monitor what students take vs what they consume. Note any particular types of food or dishes which seem to be thrown out by students vs which are acceptable to them. Report on amount of food waste and suggest improvements to the menu/service style/etc as appropriate to reduce waste. Give attention to guidelines the facility may be required to follow such as national and state regulations). |
| **Clinical and Customer Services: development and delivery of information, products and services to individual, groups, and populations.** | | |
| CRDN 3.6: Use effective education and counseling skills to facilitate behavior change. | Include your teaching materials in your portfolio. | CRDN 3.6 Teach a basic nutrition class in the school system for children or adolescents. Develop educational materials for the class. |
| **Practice Management and Use of Resources: strategic application of principles of management and systems in the provision of services to individuals and organizations.** | | |
| CRDN 4.3: Conduct clinical and customer service quality management activities.  CRDN 4.5: Analyze quality, financial and 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. | Write a one page **Rotation Report** on your sites in School Lunch/Head Start and your teaching experience and send it to the DI program Director. | CRDN 4.3 Conduct plate waste study at one meal and evaluate results.  CRDN 4.5 Review facility food budget, use of government commodities, menu writing and the distribution systems used in the facility.  CRDN 4.6 Complete plate waste study and give feedback on facility’s use of resources. Talk with supervisor about school lunch program requirements which might affect resources. |

**CURRICULUM FOR SUPERVISED PRACTICE: For Andrews University Internship Program in Nutrition & Dietetics**

**Names(s) of Facility (ies)/Affiliations(s)** Andrews University, Florida Hospital Memorial Medical, Concordia University, St. Francis Hospital

Spectrum Health, Huguley Medical Center, Health Care Network, Notre Dame University,

Lakeland Health Care, Atrium Medical Center, Florida Hospital Zephyrhills, IU Health LaPorte Hospital,   
Memorial Hospital of South Bend **Type of Experience/Rotation:** Wellness

**Weeks of Supervised Practice**  2.0 **Practice Hours**  80 **Didactic Hours** 0

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| **Competencies** | **Evaluation Strategy** | **Examples of Planned Experiences** |
| **Scientific and Evidence Base of Practice: integration of scientific information and research into practice.** | | |
| CRDN 1.6: Incorporate critical-thinking skills in overall practice. | Review all CRDNs with supervising RD and include activities in Weekly Report(s). | CRDN 1.6 Apply critical-thinking skills when assessing clients in a variety of settings and when selecting topics and teaching methods appropriate for the population/individual and monitoring progress (Tip; critical thinking skill is the ability to analyze and evaluate an issue objectively to form a judgement). |
| **Professional Practice Expectations: beliefs, values, attitudes, and behaviors for the professional dietitian level of practice.** | | |
| CRDN 2.3: Demonstrate active participation, teamwork and contributions in group settings.  CRDN 2.9: Participate in professional and community organizations. | Written report on rotation to be sent to the DI program Director. Place a copy in your portfolio as well. | CRDN 2.3 Work with staff/volunteers at site to complete tasks as assigned by the preceptor.  CRDN 2.9 Attend meetings, work with local organizations to serve the community through food assistance, education, or other health/behavior improvements. |
| **Clinical and Customer Services: development and delivery of information, products and services to individual, groups, and populations.** | | |
| CRDN 3.4: Design, implement and evaluate presentations to a target audience.  CRDN 3.7: Develop and deliver products, programs or services that promote health, wellness and lifestyle management.  CRDN 3.8: Deliver respectful, science-based answers to client questions concerning emerging trends. | If applicable, include a copy of your project in your **portfolio**.  Send a summary of your learning from the Academy’s Position Statement on vegetarian diets to DI director. | CRDN 3.4 Conduct nutrition educations classes, conduct supermarket tours, run an educational booth at a health fair or other activities that the preceptor approves to fulfill this competency. Create a vegetarian blog post to be shared on the Internship Facebook and with your fellow interns via Zoom.  CRDN 3.7 Talk with supervising RD regarding needs of the placement and then develop a product, program or service to meet that need. This could be a pamphlet, bulletin board, a class curriculum, or other depending on the placement. Participation in a health class/health fair or similar would also be applicable.  CRDN 3.8 Research recent trends and read articles relevant to the setting to gain knowledge and answer questions. Read the Academy’s Position Statement on vegetarian diets and create a summary of learning to be sent to the DI director. |

**CURRICULUM FOR SUPERVISED PRACTICE: For Andrews University Internship Program in Nutrition & Dietetics**

**Names(s) of Facility(ies)/Affiliations(s)** Andrews University, Florida Hospital Memorial Medical, Concordia University, St. Francis Hospital

Spectrum Health, Huguley Medical Center, Health Care Network, Notre Dame University,

Lakeland Health Care, Atrium Medical Center, Florida Hospital Zephyrhills, IU Health LaPorte Hospital,   
Memorial Hospital of South Bend **Type of Experience/Rotation:** Community Elective

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| **Competencies** | **Evaluation Strategy** | **Examples of Planned Experiences** |
| **Professional Practice Expectations: beliefs, values, attitudes, and behaviors for the professional dietitian level of practice.** | | |
| CRDN 2.7 Apply leadership skills to achieve desired outcomes.  CRDN 2.9 Participate in professional and community organizations.  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. | Send a copy of your **letter** to the DI Director. It will be evaluated using the **Public Policy Rubric**.  Written **report** on rotation to be sent to the DI program Director. Place a copy in your portfolio as well. | CRDN 2.7 Be proactive in securing elective site. Work with staff to complete projects.  CRDN 2.9 Work with local community organizations to serve the public. Attend organization meetings.  CRDN 2:13 Incorporate public policy, community nutrition concerns and programs, and public health issues into your professional development plan.  CRDN 2:14 Write a letter to a congressman regarding an issue affecting nutrition and dietetics practice, public health/safety, or related topics. Utilize the Action Alerts feature on <http://www.eatrightpro.org/action-center> to find issues and ways to help which affect the profession of nutrition and dietetics. |
| **Clinical and Customer Services: development and delivery of information, products and services to individual, groups, and populations.** | | |
| 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 3.7: Develop and deliver products, programs or services that promote health, wellness and lifestyle management. | Include copies of any materials created in **portfolio**. | CRDN 3.4 Teach a class, worked at a health fair or community center event, or similar as specified by the preceptor.  CRDN 3.5 Create a pamphlet, educational booth, instructional materials or written presentation as directed by the preceptor.    CRDN 3.7 Promote healthy lifestyle behaviors based on scientifically proven principles of health and wellness. Incorporate health and wellness principles into health fair or event activities and materials. |

**Weeks of Supervised Practice**  0.3 **Practice Hours 16**  **Didactic Hours** 0

**Food Service Administration**

**CURRICULUM FOR SUPERVISED PRACTICE: For Andrews University Internship Program in Nutrition & Dietetics**

**Names of Facilities/Affiliations** Spectrum Health, Adventist Midwest Health,

Huguley Memorial Hospital, Kettering Healthcare Network, Lakeland HealthCare, Goshen Health   
Florida Hospital Waterman, St. Francis Hospital, Notre Dame University, Atrium Medical Center, Florida Hospital Zephyrhills,

IU Health LaPorte Hospital, Memorial Hospital of South Bend **Type of Experience/Rotation:** Food Production

**Weeks of Supervised Practice**: 2.0 **Practice Hours**: 80 **Didactic Hours**: 0

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| **Competencies** | **Evaluation Strategy** | **Examples of Planned Experiences\*** |
| **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.  CRDN 1.3: Justify programs, products, services, and care using appropriate evidence or data.  CRDN 1.5: Conduct projects using appropriate research methods, ethical procedures, and data analysis.  CRDN 1.6: Incorporate critical-thinking skills in overall practice. | Review all CRDNs with supervising RDN and include activities in Weekly Report(s). Complete self-assessment forms; both the MIDWAY and FINAL at times assigned on the respective forms.  Perform quality assessment using a test tray with dietary staff and discuss with supervisor. | CRDN 1.1 Assess facility for quality and/or customer service indicators which can include resource utilization, client satisfaction, profitability, adherence to nutrition guidelines, etc. (Tip: Outcomes may include clinical, programmatic, quality, productivity, economic, or other outcomes in wellness, management, sports, clinical settings, etc.).  CRDN 1.3 Analyze programs costs/benefits to gauge usefulness and identify possible areas for improvement.  CRDN 1.5 Use technology and facility guidelines to perform research for various projects during food service rotations.  CRDN 1.6 Perform test trays. Monitor food production for safety concerns. Work with patients/customers to meet their needs/expectations. Create and implement theme meal plan. (Tip; critical thinking skill is the ability to analyze and evaluate an issue objectively to form a judgement). |
| **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 statues 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 2.3: 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. | **Theme meal project. Rubric** to be assessed by preceptor. Turn in rubric and any associated project materials to the DI Director. | CRDN 2.1 Perform tasks as required by the rotation in compliance with all professional guidelines and facility rules and regulations.  CRDN 2.3 Work on theme meal project. Assist facility staff with meal prep. Give ideas when appropriate and accept constructive criticism.  CRDN 2.7 Be proactive in completing theme meal project. Work with Chef and facility staff to plan and implement meal. Communicate plans to ensure understanding and agreement.  CRDN 2.11 Be courteous and respectful to all staff and clients. Be aware of different needs/cultural norms in diet and work environment and act accordingly. |
| **Clinical and Customer Services: development and delivery of information, products and services to individual, groups, and populations.** | | |
| CRDN 3.9: Coordinate procurement, production, distribution and service of foods and services.  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. (Note, this includes the menu and theme meal projects).  CC3 MNT CONCENTRATION: Design a menu with modified diets with vegetarian alternatives. | Evaluate using **Menu Rubric** and **Theme Meal Rubric** with supervising RDN.  Place a copy of your **menu** in your **portfolio**.  Place a copy of your **theme meal rubric** in your **portfolio**. | CRDN 3.9 Work with facility staff to understand purchasing/inventory systems and look for opportunities to improve them. Understand the function of, and know how to use, production sheets. Assist with stocking any quick serve/grab and go stations and work on the serving line for food trays and/or the cafeteria.  (Tip: Interns should demonstrate and promote responsible use of resources including employees, money, time, water, energy, food, and disposable goods.)  CRDN 3.10 Learn the menu planning process of assigned facility. Utilize the facility’s system to create and (if applicable) execute a one week menu. Use these skills to create and execute a theme meal utilizing a budget, schedule, etc. Work with facility staff to complete.  CC3 MNT CONCENTRATION As part of the menu design project; design a menu with vegetarian alternatives built in. |
| **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 the 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 4.4: Apply current nutrition informatics to develop, store, retrieve and disseminate information and data.  CRDN 4.6: Propose and use procedures as appropriate to the practice setting to reduce waste and protect the environment.  CRDN 4.10: Analyze rick in nutrition and dietetics practice. |  | CRDN 4.1 Work with facility staff to understand scheduling, hiring, employee discipline, and dismissal procedures. If possible, observe interviewing process or discuss with supervisor.  CRDN 4.2 Learn safety and sanitation procedures at assigned facility; work with staff to ensure adherence to facility policies. Perform test tray to assess food safety if applicable.  CRDN 4.4 Learn the electronic programs used in the assigned facility for any applicable systems such as; inventory/procurement, production, client orders/diet information, and/or employee scheduling.  CRDN 4.6 Analyze facility processes with attention given to sustainability and care for the environment; follow procedures and propose improvements when applicable. Evaluate facility menus’ compliance with budget constraints and look for ways to reduce costs.  CRDN 4.10 Perform test trays and monitor food temperatures. Test food temperatures on the serving lines. Check freezer/refrigeration unit temperatures. Be aware of HACCP guidelines regarding critical control points and monitor the food production process for safety and best practices. |

\*Your site may have different planned experience that can meet the competency

**CURRICULUM FOR SUPERVISED PRACTICE: For Andrews University Internship Program in Nutrition & Dietetics**

**Names of Facilities/Affiliations** Spectrum Health, Adventist Midwest Health,

Huguley Memorial Hospital, Kettering Healthcare Network, Lakeland HealthCare, Goshen Health  
Florida Hospital Waterman, St. Francis Hospital, Notre Dame University, Atrium Medical Center, Florida Hospital Zephyrhills,

IU Health LaPorte Hospital, Memorial Hospital of South Bend

**Type of Experience/Rotation:** Cafeteria/ Nutrition, Accounting/Catering

**Weeks of Supervised Practice: 1.0 Practice Hours: 40 Didactic Hours: 0**

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| **Competencies** | **Evaluation Strategy** | **Examples of Planned Experiences\*** |
| **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. | Review all CRDNs with supervising RDN and include activities in Weekly Report(s). Complete self-assessment forms; both the MIDWAY and FINAL at times assigned on the respective forms. | CRDN 1.1 Learn facility’s assessment methods regarding food safety, budgeting, and customer satisfaction and utilize them to measure outcomes. |
| **Professional Practice Expectations: beliefs, values, attitudes, and behaviors for the professional dietitian level of practice.** | | |
| CRDN 2.10: Demonstrate professional attributes in all areas of practice. |  | CRDN 2.10 Complete assigned tasks in a timely and professional manner with respect for all parties involved. |
| **Practice Management and Use of Resources: strategic application of principles of management and systems in the provision of services to individuals and organizations.** | | |
| CRDN 4.3: Conduct clinical and customer service quality management activities.  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 4.10: Analyze risk in nutrition and dietetics practice. | Evaluate using the **Theme Meal Rubric** with supervising RDN.  Write a **market survey report** and send it to the DI program Director with the theme meal rubric (Report should include assessment of theme meal acceptability by clients and ideas for improvement). Include survey ad results.  *Place a copy of all components of the theme meal in your portfolio. Tip: The theme meal project is an excellent place to get good photos for your portfolio.* | CRDN 4.3 Apply knowledge regarding professional and facility standards for food safety, sanitation, and working conditions to ensure the facility meets quality objectives. Perform test trays. For theme meal project, gather information regarding client acceptance of theme meal components and write a market survey report.  CRDN 4.8 Plan (conceptualize, write a menu, staff, budget, order supplies for and execute a meal with regard to facility needs/limitations) a theme meal in accordance with facility needs.  CRDN 4.10 Monitor food temperatures in hot and cold holding areas. Test food temperatures on the serving lines. Be aware of HACCP guidelines regarding critical control points and monitor the food distribution process for safety and best practices.  Theme meal report (include menu). |

\*Your site may have different planned experience that can meet the competency

**CURRICULUM FOR SUPERVISED PRACTICE: For Andrews University Internship Program in Nutrition & Dietetics**

Names of Facilities/Affiliations: Spectrum Health, Florida Hospital, Adventist Midwest Health, Florida Hospital Zephyrhills,

Huguley, Memorial Hospital of South Bend, Kettering Healthcare Network, Lakeland HealthCare, Goshen Health **Type of Experience/Rotation:**

Florida Hospital Waterman, St. Francis Hospital, Notre Dame University, Atrium Medical Center Leadership/Management/Human Resources

**Weeks of Supervised Practice** 3.8 **Practice Hours** 144 **Didactic Hours** 0

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| **Competencies** | **Evaluation Strategy** | **Examples of Planned Experiences\*** |
| **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.  CRDN 2.7: Apply leadership skills to achieve desired outcomes  CRDN 2.8: Demonstrate negotiation skills. (Tip: Demonstrating negotiating skills includes showing assertiveness when needed, while respecting the life experiences, cultural diversity and educational background of the other parties.) (Note; this can include working with staff to complete projects like the theme meal, and things like service recovery when working with unsatisfied customers/patients).  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. | Review all CRDNs with supervising RDN and include activities in Weekly Report(s). Complete self-assessment forms; both the MIDWAY and FINAL at times assigned on the respective forms.  Evaluate using the **Theme Meal Rubric**. Place of a copy of the project and rubric in your **portfolio**.  Place a copy of your **professional development plan** in your **portfolio**. | CRDN 2.2 Prepare a job description in accordance with facility guidelines. Prepare an in-service for the facility with topic subject to the needs of the facility (your supervisor may suggest possibilities or assign a topic). (Tip: Examples include research manuscripts, project proposals, education materials, policies and procedures.)  CRDN 2.7 Utilize leadership qualities in planning and implementing the theme meal project and in completing tasks as assigned by the supervising RD. Complete work in a timely fashion and coordinate with staff to meet the needs of the facility and complete competencies.  CRDN 2.8 Work with facility staff and clients to complete tasks in a timely and professional manner. Work with patients who are unsatisfied in order to meet their needs. Work with facility staff (such as nursing, etc) in ensuring patients receive correct trays in accordance with diet orders.  CRDN 2.12 Work with supervisor to complete evaluations throughout the rotation and seek feedback regarding strengths and areas needing improvement. Create 1-2 goals for yourself during your MIDWAY FS evaluation. Progress on these goals will be assessed during the ACEND FS final evaluation.  CRDN 2.13 Begin to develop a professional development plan to maintain growth during the internship and beyond. Put your FS projects into an online portfolio. |
| **Clinical and Customer Services: development and delivery of information, products and services to individual, groups, and populations.** | | |
| CRDN 3.3: Demonstrate effective communication skills for clinical and customer services in a variety of formats and settings. (Tip: Formats include oral, print, visual, electronic, and mass media methods for maximizing client education, employee training, and marketing.)  CRDN 3.4: Design, implement and evaluate presentations to a target audience. (Tip: A quality presentation considers life experiences, cultural diversity and educational background of the target audience.) | Evaluate using the **Oral Food Service Presentation Rubric** with supervising RD. Place a copy of the in-service and the rubric in your **portfolio**. | CRDN 3.3 Prepare an in-service for the facility with topic subject to the needs of the facility (your supervisor may suggest possibilities or assign a topic).  CRDN 3.4 Present in-service to facility staff with respect for the diverse backgrounds and experience of the group. |
| **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 4.5: Analyze quality, financial and productivity data for use in planning.  CRDN 4.6: Propose and use procedures as appropriate to the practice setting to 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: Demonstrate negotiation skills. | Create a **job description** for a job at the facility and place a copy in your portfolio.  Write a **report on leadership** to be sent to DI program Director.  Your leadership report should include a brief description of leadership styles and what sort of style is utilized at your facility. Include strengths/weaknesses of the facility’s leadership style.  Evaluate using the **PI (performance improvement) Rubric** with supervising RDN. Place a copy of the rubric in your **portfolio**.  **Equipment specification project** to be sent to DI program Director. Include a copy in your **portfolio**. | CRDN 4.1 Work with facility staff to understand scheduling, hiring, employee discipline, and dismissal procedures. If possible, observe interviewing process or discuss with supervisor.  CRDN 4.2 Learn safety and sanitation procedures at assigned facility; work with staff to ensure adherence to facility policies. Perform test tray to assess food safety if applicable. If your in-service topic is on safety/sanitation it may also satisfy this competency.  CRDN 4.3 Apply knowledge regarding professional and facility standards for food safety, sanitation, and working conditions to ensure the facility meets quality objectives. Give attention to ways to improve the facility or new measures which could be utilized. Perform test trays to ensure quality. Survey (5) patients regarding their satisfaction with their food/service at the facility.  CRDN 4.5 Analyze facility data for PI project. Project focus may be chosen by intern based on suggestions from the supervising RD, or may be assigned based on the needs of the facility. Be aware of costs, production, and quality factors while working on the project.  CRDN 4.6 Be aware of sustainability and environmental concerns while working on PI project. Evaluate menus to reduce costs in accordance with facility budget criteria. Examine the facility for opportunities to incorporate recycling. Forecast food production needs.  CRDN 4.7 While working on PI project, give consideration to costs/benefits of proposed improvements. Research options to seek the best solution.  Work with facility staff to write an equipment specification report (an order for a piece of equipment with specifications regarding size, quality, price, etc) in accordance with the needs and policies of the facility.  CRDN 4.8 Work with facility staff to meet goals. Work with dissatisfied clients to recover service and meet their needs. |

**Weeks of Supervised Practice** 3.8 **Practice Hours** 144 **Didactic Hours** 0

\*Your site may have different planned experience that can meet the competency

**Clinical Nutrition**

**CURRICULUM FOR SUPERVISED PRACTICE: For Andrews University Internship Program in Nutrition & Dietetics**

**Names of Facilities/Affiliations:** Atrium Medical Center,Florida Hospital, Florida Hospital Waterman,

Grandview Hospital, Hinsdale Hospital, Huguley Memorial Hospital, Goshen Health,

Kettering Medical Center, Lakeland HealthCare, Floyd Medical Center, Spectrum Health, Florida Hospital Zephyrhills

IU Health LaPorte Hospital, Memorial Hospital of South Bend

**Type of Experience/Rotation** General Clinical - Diet History/Assessment/Counseling Skills

**Weeks of Supervised Practice**  1.0 **Practice Hours**  40 **Didactic Hours** 0

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| **Competencies** | **Evaluation Strategy** | **Examples of Planned Experiences** |
| **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.  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 nutrition and 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. | Review all CRDNs with supervising RD and include activities in Weekly Report(s).  For MINOR case study, evaluate using the **Case Study Rubric**.  For MAJOR case study, evaluate using the **Case Study Rubric** and the **Oral Presentation Rubric**. Place a copy of the rubric(s) in your portfolio. The rotation in which you do your case study is subject to the needs of the facility and patient availability. Each intern is required to perform one MAJOR and one MINOR case study during the internship. | CRDN 1.1 Review quality indicators for the department and measure current progress. Based on facility protocol, conduct patient nutrition care process using standard intake, biochemical anthropometric and physical evaluation methods.  CRDN 1.2 Select and implement a nutrition care plan based on current research and practice. Utilize Nutrition Care Manual website for evidence based practice material (your site should have access). Suggest how nutrition plan could be adjusted for different cultures and various religious groups.  CRDN 1.3 Justify appropriate use of nutritional supplements, enteral or/and parenteral formulas. Develop appropriate nutritional intervention and plan based on patient/client disease process; Monitor patient/client response to nutritional plan of care.  CRDN 1.2, 1.4, 1.5 Perform literature search on nutrition-related topic, locate desired articles and make application to patient care. Conduct and report applied research to supervising RD when feasible.  CRDN 1.6 Apply critical-thinking skills when assessing clients in a variety of settings and when selecting MNT and monitoring progress (Tip; critical thinking skill is the ability to analyze and evaluate an issue objectively to form a judgement). |

Type of experience / rotation: **General Clinical—Diet History, Assessment, Counseling Skills, and Medical Records**

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| **Competencies** | | | **Examples or planned experiences** | | **Evaluation strategies** |
| **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 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. (Note: This can mean working with physicians, dietary staff, nurses, and allied health professionals to obtain information, teach, refer, or generally handle patient care).  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 2.9 Participate in professional and community organizations.  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 2.15 Practice and/or role play mentoring and precepting others. (Note; this may include teaching RDs or other staff, assigning tasks to others, giving feedback on others’ work, or simulated experiences). | | | Complete **Clinical Self/Preceptor-Evaluation** after week 10 of clinical rotations. Send a copy to the DI program Director.  Email a copy of your **portfolio** to DI program Director at end of internship.  If the intern chooses to complete 2.15 without doing a presentation, a one page **report** must be sent to the DI director explaining how they met the CRDN requirement and any feedback on their precepting skills.  If the intern presents an in-service, an **oral presentation rubric** is required. | | CRDN 2.1 Compare performance to Competency Statements for Supervised Practice and the Code of Ethics for the Profession of Dietetics. Identify weaknesses and plan, implement, and evaluate a self-development program.  Maintain patient confidentiality.  Review master menu for patient acceptance in compliance with facility guidelines, procurement details and specifications.  CRDN 2.2 Review clinical nutrition policies with supervising RD. Develop or revise one clinical nutrition policy (when applicable). Demonstrate professional attributes when communicating with staff; verbal and written.  CRDN 2.3 Attend rounds/discharge-planning conference. Investigate role of members.  CRDN 2.4 Attend rounds, staff meetings, manager meetings and other activities as recommended by preceptor.  CRDN 2.5 Demonstrate familiarities with NCP policies and procedures. Conduct screenings and length of stay per policy and procedures. Evaluate admission assessments for new patients. Complete nutrition screens and delegate to nutrition care team as appropriate.  CRDN 2.6 Enlist help of other health care professionals as deemed appropriate. Discuss nutrition care of patient in interdisciplinary conference. Refer patient to another health professional when the situation requires specialized/additional assistance. I.e. PT/OT/Speech etc.  CRDN 2.9 Attend meetings for professionals such as local RDN meetings, and community organizational meetings related to health and wellness. Note: One meeting is required, multiple are encouraged.  CRDN 2.12 Complete a self-assessment and review with preceptor. Create 1-2 goals for yourself as you progress through the clinical rotations when performing the self/preceptor evaluation. Progress on these goals will be assessed in the staff relief evaluation.  CRDN 2.13 Complete and turn in electronic portfolio.  CRDN 2.15 Talk to students about career opportunities in healthcare, work with fellow interns to practice counselling, giving and receiving constructive criticism, or work with another healthcare provider. The intern can provide feedback to RDs after observing counselling or other activities.  The intern might also present an in-service to the RDs on an unfamiliar topic. |
| **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 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 3.5: Coordinate procurement, production, distributions and service of goods and services.  (Tip: Students/interns should demonstrate and promote responsible use of resources including employees, money, time, water, energy, food, and disposable goods.)  CRDN 3.6: Use effective education and counseling skills to facilitate behavior change. | Evaluate using **Nutrition Care Process Rubric** with supervising RD (for feedback purposes; not to be sent to DI program Director). | | CRDN 3.1 Perform NCP and document in medical record.  CRDN 3.2 Assess patients’ nutritional status using physical findings in accordance with standards of the facility and Nutrition and Dietetics practice.  CRDN 3.5 Use technology and facility guidelines for evidence based practice material. Provide nutrition education materials in languages other than English when applicable; provide customized nutrition education. Utilize the Nutrition Care Manual.  CRDN 3.6 Instruct patients/family on prescribed diet using appropriate methods and techniques. Implement interventions as determined by NCP. | |
| **Practice Management and Use of resources; Strategic application of principles of management and systems in the provision of services to individuals and organizations** | | | | |
| CRDN 4.3: Conduct clinical and customer service quality management activities. |  | | CRDN 4.3 Visit patients at mealtimes to assess patient intake and tolerance of diet order. | |

**CURRICULUM FOR SUPERVISED PRACTICE:** For Andrews University Internship Program in Nutrition & Dietetics

**Names of Facilities/Affiliations** Atrium Medical Center,Florida Hospital, Florida Hospital Waterman,

Grandview Hospital, Hinsdale Hospital, Huguley Memorial Hospital, Goshen Health,  
Kettering Medical Center, Lakeland HealthCare, Floyd Medical Center, Spectrum Health, Florida Hospital Zephyrhills

IU Health LaPorte Hospital, Memorial Hospital of South Bend

**Type of Experience/Rotation** Medical/Surgical

**Weeks of Supervised Practice**  2.0 **Practice Hours**  80 **Didactic Hours** 0

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| **Competencies** | **Evaluation Strategy** | **Examples of Planned Experiences** |
| **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.  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. | Review all CRDNs with supervising RD and include activities in Weekly Report(s).  For MINOR case study, evaluate using the **Case Study Rubric**.  For MAJOR case study, evaluate using the **Case Study Rubric** and the **Oral Presentation Rubric**. Place a copy of the rubric(s) in your portfolio. The rotation in which you do your case study is subject to the needs of the facility and patient availability. Each intern is required to perform one MAJOR and one MINOR case study during the internship. | CRDN 1.1 Conduct patient assessment using standard intake, biochemical, anthropometric, and physical evaluation methods.  CRDN 1.2, 1.4 Select appropriate nutrition diagnosis and implement appropriate plan of nutritional intervention for medical/surgical patient. Design a nutrition care plan based on current research and practice.  Perform a literature search on nutrition-related topic and locate desired articles with application to patient care. Conduct and report applied research when feasible.  Select a medical/surgical patient to research as a case study and write a paper on your findings.  Note; the case study may be MAJOR or MINOR. If MAJOR, also create a presentation and present your case study to the RDs.  CRDN 1.6 Apply critical-thinking skills when assessing clients in a variety of settings and when selecting MNT and monitoring progress (Tip; critical thinking skill is the ability to analyze and evaluate an issue objectively to form a judgement). |
| **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.  CRDN 2.4: Function as a member of interprofessional teams. |  | CRDN 2.2 Write your case study and, if applicable, present it to dietitians and other health professionals.  Review clinical nutrition policies. Develop or revise one clinic nutrition policy (when applicable).  CRDN 2.4 As appropriate, discuss pertinent nutritional status/information with physicians/other health care professionals regarding specific patients. |
| **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 3.6: Use effective education and counseling skills to facilitate behavior change.  CRDN 3.8: Deliver respectful, science-based answers to client questions concerning emerging trends. | Evaluate using the **NCP (midway) rubric** with supervising RD. Send a copy to the DI program Director. | CRDN 3.1 Perform the NCP and document in medical records according to facility policy.  CRDN 3.6 Instruct all patients/family requiring instruction. Assess comprehension and document according to Competency Statements for Supervised Practice for medical charting.  CRDN 3.8 Use technology and facility guidelines for evidence based practice materials. |

**CURRICULUM FOR SUPERVISED PRACTICE: For Andrews University Internship Program in Nutrition & Dietetics**

**Names of Facilities/Affiliations** Atrium Medical Center,Florida Hospital, Florida Hospital Waterman, **Type of Experience/Rotation** Cardiac

Grandview Hospital, Hinsdale Hospital, Huguley Memorial Hospital, IU Health Goshen  
Kettering Medical Center, Lakeland HealthCare, Floyd Medical Center, Spectrum Health, Florida Hospital Zephyrhills

IU Health LaPorte Hospital, Memorial Hospital of South Bend

**Weeks of Supervised Practice**  2.0 **Practice Hours**  80 **Didactic Hours** 0

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| **Competencies** | **Evaluation Strategy** | **Examples of Planned Experiences** |
| **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.  CRDN 1.2: Apple 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. | Review all CRDNs with supervising RD and include activities in Weekly Report(s).  For MINOR case study, evaluate using the **Case Study Rubric**.  For MAJOR case study, evaluate using the **Case Study Rubric** and the **Oral Presentation Rubric**. Place a copy of the rubric(s) in your portfolio. The other opportunity to do a case study is in the Medical/Surgical rotation. Each intern is required to perform one MAJOR and one MINOR case study during the internship. | CRDN 1.1 Examine department goals and whether or not they are being met. Discuss patient satisfaction with preceptor and monitoring tools.  CRDN 1.2; 1.4 Select a patient, with approval from the supervising RD and permission from the patient, and perform a case study. Use technology and facility medical records data to gather data as well as interviews with chosen patient. Write a paper with findings.  Note; the case study may be MAJOR or MINOR. If MAJOR, also create a presentation and present your case study to the RDs.  CRDN 1.6 Use judgement in assessing patients and choosing MNT. |
| **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.  CRDN 2.4: Function as a member of interprofessional teams. | Evaluate using the **Case Study Rubric** with supervising RD. Place a copy of the report in your portfolio. | CRDN 2.2 Select one patient on cardiac unit and write a major/minor case study. Demonstrate professional attributes in communications with fellow health care professionals such as emails, phone calls, and medical record data entry.  CRDN 2.4 Work with fellow health care professionals to ensure patient care quality. This includes working with nursing staff, physicians, and other paramedical staff such as PT/OT/Speech. |
| **Clinical and Customer Services: development and delivery of information, products and services to individual, 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 3.3: Demonstrate effective communication skills for clinical and customer services in a variety of formats and settings. (Tip: Formats include oral, print, visual, electronic and mass media methods for maximizing client education, employee training and marketing.)  CRDN 3.6: Use effective education and counseling skills to facilitate behavior change.  CRDN 3.8: Deliver respectful, science-based answers to client questions concerning emerging trends.  CC3-B Design a menu with modified diets and individual meal plan with vegetarian alternatives. | Evaluate a teaching/education session with a patient using the **Diet Education Rubric** with supervising RD.  Have supervising RD correct one day meal plan and give feedback. Include a copy in your portfolio. | CRDN 3.1 Assess patient’s nutritional status utilizing medical, nutrition, and medication intake histories, anthropometric measurements, and laboratory data. Diagnose nutritional problem and write PES statement.  Select appropriate plan of nutrition intervention and take steps to initiate.  Design a nutrition care plan based on current research and practice.  Follow patients at nutritional risk to assess value of intervention.  CRDN 3.3 Attend Cardiac Rehabilitation classes to learn role of education, exercise and diet to cardiac rehabilitation. Give ducation to patients/a class regarding cardiac nutrition needs as relevant to the setting.  CRDN 3.6 Educate patients on relevant diets (low sodium, fluid restrictions, etc) and help patient set reasonable goals.  CRDN 3.8 Review relevant diet information and trends to help teach patients. Be polite and patient to work with patient where they are.  CC3-B Design an individualized meal plan for a person with cardiac disease that includes vegetarian alternatives. |

**Weeks of Supervised Practice**  2.0 **Practice Hours**  80 **Didactic Hours** 0

**CURRICULUM FOR SUPERVISED PRACTICE: For Andrews University Internship Program in Nutrition & Dietetics**

**Names of Facilities/Affiliations** Atrium Medical Center,Florida Hospital Waterman, Florida Hospital Zephyrhills,

Grandview Hospital, Hinsdale Hospital, Huguley Hospital, Goshen Health, Memorial Hospital of South Bend,  
Kettering Medical Center, Lakeland HealthCare, LaPorte Hospital, Spectrum Health,

**Type of Experience/Rotation:** Diabetes/Weight Reduction

**Weeks of Supervised Practice**  2.0 **Practice Hours**  80 **Didactic Hours** 0

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| **Competencies** | **Evaluation Strategy** | **Examples of Planned Experiences** |
| **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.    CRDN 1.2: Apply evidence-based guidelines, systematic reviews and scientific literature.  CRDN 1.6: Incorporate critical-thinking skills in overall practice. | Review all CRDNs with supervising RD and include activities in Weekly Report(s). | CRDN 1.1 Select appropriate indicators and measure advancement of clinical outcomes. Assess client/patient body weight and determine IBW, %IBW and BMI.  CRDN 1.2 Utilize technology/facility for evidence based practice material. Calculate appropriate number of CHO/calories required by a diabetic/weight reduction client.  CRDN 1.6 Apply critical-thinking skills when assessing clients in a variety of settings and when selecting MNT and monitoring progress (Tip; critical thinking skill is the ability to analyze and evaluate an issue objectively to form a judgement). |
| **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. | Review of **meal plan** with supervising RD. Include a copy in your portfolio. | CRDN 2.2 Complete the nutrition care process based on current research and practice. Develop an individualized meal plan for a patient with DM or for weight management. Include vegetarian alternatives. See concentration CC3-B on the next page. |
| **Clinical and Customer Services: development and delivery of information, products and services to individual, 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 3.3: Demonstrate effective communications skills for clinical and customer services in a variety of formats and settings.  CRDN 3.6: Use effective education and counseling skills to facilitate behavior change.  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. | Evaluation with nutrition counseling rubric by supervising RD. | CRDN 3.1 Conduct nutritional assessments and follow up utilizing the NCP.  CRDN 3.3 Work with clients to teach diet and reach client goals.  CRDN 3.6 Observe RD diet education session.  Instruct patient on modified meal plan, CHO counting or diabetes plate method using pre-printed materials.  Instruct client on use of meal plan using carb choices. Design a nutrition care plan based on current research and practice.  Discuss with client the basics of diabetes and how diet relates to management of disease.  Discuss importance of exercise program in management of diabetes/weight reduction.  Observe diabetes education class. Assist teaching future class. Topics covered should include diabetes plate method, carbohydrate counting, eating out, sick day management, and grocery shopping. Develop and review educational materials for management of diabetes.  CRDN 3.8 Study relevant materials to the rotation to keep information fresh, and study fads to prepare for client questions. Be courteous.  CRDN 3.9 Work with facility to acquire supplements, or be aware of process. Understand referring patients to other services as needed, and scheduling appts. for educations. |
| **Practice Management and Use of resources: strategic application of principles of management and systems in the provision of services to individuals and organizations.** | | |
| CRDN 4.9 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. (Note, resources posted on learninghub for intern to review). |  | CRDN 4.9 Discuss coding and billing process with supervising RD. Discuss different types of insurance/customer payment methods with supervising RD. Learn how to enter services into medical record so coding/billing may be done. |
| **MNT CONCENTRATION** | | |
| CC3-B Design a menu with modified diets and individual meal plan with vegetarian alternatives. | Have supervising RD correct one day meal plan and include a copy in your portfolio. | CC3-B Design an individualized one day meal plan for a person with diabetes or weight management that includes vegetarian alternatives. |

**CURRICULUM FOR SUPERVISED PRACTICE: For Andrews University Internship Program in Nutrition & Dietetics**

**Names of Facilities/Affiliations** Atrium Medical Center,Florida Hospital, Florida Hospital Waterman,

Grandview Hospital, Hinsdale Hospital, Huguley Memorial Hospital, Goshen Health,   
Kettering Medical Center, Lakeland HealthCare, Floyd Medical Center, Spectrum Health, Florida Hospital Zephyrhills

IU Health LaPorte Hospital, Memorial Hospital of South Bend

**Type of Experience/Rotation** Oncology

**Weeks of Supervised Practice** 1.6 **Practice Hours** 64 **Didactic Hours** 0

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| **Competencies** | **Examples of Planned Experiences** | **Evaluation Strategy** |
| **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.  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. | Review all CRDNs with supervising RD and include activities in Bi-Weekly Report(s). | CRDN 1.1 Discuss patient outcomes and satisfaction with preceptor(s). Examine methods for monitoring these factors and suggest improvements if needed.  CRDN 1.2 Use guidelines in clinical practice to assess and assign MNT to patients.  CRDN 1.4 Read research articles and discuss with preceptor(s) implications and uses. Be aware of how to find reliable, recent information on nutrition topics.  CRDN 1.6 Apply critical-thinking skills when assessing clients in a variety of settings and when selecting MNT and monitoring progress (Tip; critical thinking skill is the ability to analyze and evaluate an issue objectively to form a judgement). |
| **Professional Practice Expectations: beliefs, values, attitudes, and behaviors for the professional dietitian level of practice.** | | |
| CRDN 2.3: Demonstrate active participation, teamwork and contributions in group settings. |  | CRDN 2.3 Attend and participate in a discharge planning meeting on oncology unit. Investigate role of each member of team. |
| **Clinical and Customer Services: development and delivery of information, products and services to individual, 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 3.6: Use effective education and counseling skills to facilitate behavior change.  CRDN 3.8: Deliver respectful, science-based answers to client questions concerning emerging trends. | Evaluate using **Diet Education Rubric** with supervising RD. Send a copy to the DI program Director. | CRDN 3.1 Assess patients’ nutritional status and document in medical record. Discuss special considerations for oncology patients with supervising RD and utilize facility guidelines as well as professional resources for professionals in Nutrition and Dietetics in regards to patient diet/nutritional needs.  CRDN 3.6 Instruct patient/family on prescribed meal plan of nutrition support measures to follow after discharge.  CRDN 3.8 Read up on recent trends and fads in order to prepare for client questions. Be courteous and respectful with answers. |

**CURRICULUM FOR SUPERVISED PRACTICE: For Andrews University Internship Program in Nutrition & Dietetics Names of Facilities/Affiliations** Atrium Medical Center, Florida Hospital, Florida Hospital Waterman,

Grandview Hospital, Hinsdale Hospital, Huguley Memorial Hospital, Goshen Health, **Type of Experience/Rotation** Renal  
Kettering Medical Center, Lakeland HealthCare, Floyd Medical Center, Spectrum Health, Florida Hospital Zephyrhills

IU Health LaPorte Hospital, Memorial Hospital of South Bend

**Weeks of Supervised Practice** 1.0 **Practice Hours** 40 **Didactic Hours** 0

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| **Competencies** | **Evaluation Strategy** | **Examples of Planned Experiences** |
| **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.  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 nutrition and dietetics practice.  CRDN 1.6: Incorporate critical-thinking skills in overall practice. | Review all CRDNs with supervising RD and include activities in Weekly Report(s).  Review with supervising RD.  Write a one page **report on renal MNT**. Review with supervising RD. Send a copy to the DI program Director.  Do **three (3) calculated one day diet plans** and evaluate with supervising RD.  One of the calculated diet plans should be for a vegetarian person. | CRDN 1.1 Learn rationale for use of formulas for kinetic modeling, urea reduction ratio, and PET (peritoneal equilibration test).  CRDN 1.2 Review basic physiology. Learn terms used in kidney disease.  Review and observe process of   1. hemodialysis 2. CAPD (Continuous Ambulatory Peritoneal Dialysis)   Calculate:   1. energy needs 2. protein 3. sodium and fluids 4. potassium 5. phosphorus 6. vitamins   Learn common medicines in ESRD.  CRDN 1.3; 1.4 Calculate meal plan for hemodialysis client and CAPD client.  Learn rationale for diet restrictions after transplant. Learn about immunosuppressant medicines.  CRDN 1.6 Apply critical-thinking skills when assessing clients in a variety of settings and when selecting MNT and monitoring progress (Tip; critical thinking skill is the ability to analyze and evaluate an issue objectively to form a judgement). |
| **Professional Practice Expectations: beliefs, values, attitudes, and behaviors for the professional dietitian level of practice.** | | |
| CRDN 2.3: Demonstrate active participation, teamwork and contributions in group settings.  CRDN 2.4: Function as a member of interprofessional teams. | CRDN 2.3 Participate in the interdisciplinary team conferences and refer patients to appropriate community programs. Work with facility staff to ensure patient comfort and that their needs are met.  CRDN 2.4 Work with staff to complete projects and assignments in a timely manner. |  |
| **Clinical and Customer Services: development and delivery of information, products and services to individual, 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 3.6: Use effective education and counseling skills to facilitate behavior change.  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. | Evaluate using the **Nutrition Care Process** **Rubric** with supervising RD.  Place a copy in your portfolio. | CRDN 3.1 Perform the nutrition care process for patients with ESRD. Assess client’s knowledge of, and adherence to, diet restrictions for CRF (chronic renal failure).  CRDN 3.6 Counsel hemodialysis client on individual meal plan or specific aspect of dietary non-compliance.  Provide nutritional instruction for patient with renal disease.  CRDN 3.8 Research current fads and topics to prepare for client questions. Be courteous.  CRDN 3.9 Work with facility to refer patients as needed, give educations and treatments, and be aware of budgets, insurance costs, etc. |

**CURRICULUM FOR SUPERVISED PRACTICE: For Andrews University Internship Program in Nutrition & Dietetics**

**Names of Facilities/Affiliations** Atrium Medical Center, Florida Hospital, Florida Hospital Waterman,

Grandview Hospital, Hinsdale Hospital, Huguley Memorial Hospital, Goshen Health,   
Kettering Medical Center, Lakeland HealthCare, Floyd Medical Center, Spectrum Health, Florida Hospital Zephyrhills

IU Health LaPorte Hospital, Memorial Hospital of South Bend, Florida Hospital Tampa

**Type of Experience/Rotation** OB / Pediatrics

**Weeks of Supervised Practice** 1.4 **Practice Hours** 56 **Didactic Hours** 0

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| **Competencies** | **Evaluation Strategy** | **Examples of Planned Experiences** |
| **Scientific and Evidence Base of practice: integration of scientific information and research into practice.** | | |
| CRDN 1.2: Apply evidence-based guidelines, systematic reviews and scientific literature.  CRDN 1.6: Incorporate critical-thinking skills in overall practice. | Review all CRDNs with supervising RD and include activities in Weekly Report(s).  Write a **research paper** and review with supervising RD. Send a copy to the DI program Director and include a copy in your portfolio. | CRDN 1.2 Research and learn disease processes. Select a topic (or you may be assigned a topic by your preceptor) and write a research paper.  CRDN 1.6 Apply critical-thinking skills when assessing clients in a variety of settings and when selecting MNT and monitoring progress (Tip; critical thinking skill is the ability to analyze and evaluate an issue objectively to form a judgement). |
| **Professional Practice Expectations: beliefs, values, attitudes, and behaviors for the professional dietitian level of practice.** | | |
| CRDN 2.3: Demonstrate active participation, teamwork and contributions in group settings. |  | CRDN 2.3 Attend and participate in a rounds/discharge planning process on pediatrics unit. Observe roles of other health professionals. |
| **Clinical and Customer Services: development and delivery of information, products and services to individual, 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 3.3: Demonstrate effective communication skills for clinical and customer services in a variety of formats.  CRDN 3.6: Use effective education and counseling skills to facilitate behavior change. | Write a **one day** **meal plan** for a Gestational DM patient. Review with supervising RD. Include a copy in your portfolio. | CRDN 3.1 Perform the NCP and document in medical record.  CRDN 3.3 Design a meal plan for a Gestational DM patient  CRDN 3.6 Instruct child/guardian on appropriate nutritional guidelines. Instruct gestational diabetic patient on appropriate nutritional guidelines. Observe and teach expectant parents’ class. |

**CURRICULUM FOR SUPERVISED PRACTICE: For Andrews University Internship Program in Nutrition & Dietetics Names of Facilities/Affiliations** Atrium Medical Center, Florida Hospital, Florida Hospital Waterman,

Grandview Hospital, Hinsdale Hospital, Huguley Memorial Hospital, Goshen Health,

Kettering Medical Center, Lakeland HealthCare, Floyd Medical Center, Spectrum Health, Florida Hospital Zephyrhills

IU Health LaPorte Hospital, Memorial Hospital of South Bend **Type of Experience/Rotation** Performance Improvement

**Weeks of Supervised Practice** 0.2 **Practice Hours** 8 **Didactic Hours** 0

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| **Competencies** | **Evaluation Strategy** | **Examples of Planned Experiences** |
| **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.  CRDN 1.5: Conduct projects using appropriate research methods, ethical procedures and data analysis.  CRDN 1.6: Incorporate critical-thinking skills I overall practice. | Review all CRDNs with supervising RD and include activities in Weekly Report(s).  Evaluate using **PI Rubric** with supervising RD. Place a copy in your portfolio. | CRDN 1.1 Review and analyze quality assurance system. Collect and analyze costs for one area of patient care. Make recommendations for Performance Improvement (PI) and cost containment.  Identify one critical indicator for measurement of Performance Improvement.  Create a measurement tool that can be utilized to evaluate the new indicator.  CRDN 1.5 Research measurements tools online to use for PI project.  CRDN 1.6 Apply critical-thinking skills when assessing clients in a variety of settings and when selecting MNT and monitoring progress (Tip; critical thinking skill is the ability to analyze and evaluate an issue objectively to form a judgement). |
| **Practice Management and Use of Resources: strategic application of principles of management and systems in the provision of services to individuals and organizations.** | | |
| CRDN 4.3: Conduct clinical and customer service quality management activities.  CRDN 4.5: Analyze quality, financial and productivity data for use in planning.  CRDN 4.6: Propose and use procedures as appropriate to the practice setting to reduce waste and protect the environment.  CRDN 4.7: Conduct feasibility studies for products, programs or services with consideration of costs and benefits. |  | CRDN 4.3 Complete PI project.  CRDN 4.5 Review and analyze current clinical Performance Improvement monitors.  CRDN 4.6: Conduct clinical performance monitoring.  CRDN 4.7 Determine feasibility of measurement (i.e. time required for documentation, cost, and medical record review). |

**CURRICULUM FOR CURRICULUM FOR SUPERVISED PRACTICE: For Andrews University Internship Program in Nutrition & Dietetics**

**Names of Facilities/Affiliations** Atrium Medical Center, Florida Hospital, Florida Hospital Waterman,

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IU Health LaPorte Hospital, Memorial Hospital of South Bend, Florida Hospital Tampa

**Type of Experience/Rotation** Nutrition Support

**Weeks of Supervised Practice** 2.0 **Practice Hours** 80 **Didactic Hours** 0

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| **Competencies** | **Evaluation Strategy** | **Examples of Planned Experiences** |
| **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.  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. | Review all CRDNs with supervising RD and include activities in Bi-Weekly Report(s). | CRDN 1.1 Identify patients at nutritional risk. Assess patients that have automatic nutritional screening due to low albumin, NPO, or clear liquid diet order.  CRDN 1.2: Follow guidelines in creating PN/EN recommendations.  CRDN 1.4 Read current research to prepare for rotation. Discuss and incorporate new research with approval of preceptor(s) and facility.  CRDN 1.6 Apply critical-thinking skills when assessing clients in a variety of settings and when selecting MNT and monitoring progress (Tip; critical thinking skill is the ability to analyze and evaluate an issue objectively to form a judgement). |
| **MNT Concentration** | | |
| CC1: (CRDN 2.9; 2.4; 2,10; 3.4) Participate actively in nutrition support or medical rounds.  CC2: (CRDN 2.10; 3.1) Design a transitional feeding plan for a patient in a ventilator or on nutrition support in a critical care unit/intensive care unit. | Write a report detailing your **transitional feeding plan.**  Review with supervising RD. Include a corrected sample in your portfolio. | CC1 Participate in the nutrition support or medical rounds. Give recommendations.  CC2 Develop and implement a transitional feeding plan such as conversion of TPN to tube feedings to an oral diet.  Select and evaluate complex enteral and/or parental nutrition regimens. |
| **Professional Practice Expectations: beliefs, values, attitudes, and behaviors for the professional dietitian level of practice.** | | |
| 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 2.3 Attend unit rounds/discharge meetings. Suggest plans for nutrition support when appropriate and in accordance with facility guidelines.  CRDN 2.4 Enlist the help of other members of health care team as appropriate.  CRDN 2.6 Refer patients to other health care professional when appropriate |
| **Clinical and Customer Services: development and delivery of information, products and services to individual, 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 | Evaluate using the **Nutrition Support evaluation** with RD. Place evaluation in your portfolio. | CRDN 3.1.Assess patient nutritional status utilizing medical, nutrition, and medication intake histories, anthropometric measurements, and laboratory data  Adjust feedings as necessary based on monitoring.  Calculate nutritional requirements for no less than five nutrition support patients.  Calculate appropriate enteral/parenteral formula based on patient’s nutritional needs.  Monitor patient’s progress, tolerance, lab values, and hydration to assess tolerance to feedings.  Adjust patient’s progress and adjust feedings as necessary, based on monitoring.  Develop and implement a transitional feeding plan such as conversion of TPN to tube feeding to an oral diet. |

**CURRICULUM FOR SUPERVISED PRACTICE: For Andrews University Internship Program in Nutrition & Dietetics**

**Names of Facilities/Affiliations** Atrium Medical Center, Florida Hospital, Florida Hospital Waterman,

Grandview Hospital, Hinsdale Hospital, Huguley Memorial Hospital, Goshen Health, **Type of Experience/Rotation** Clinical Elective  
Kettering Medical Center, Lakeland HealthCare, Floyd Medical Center, Spectrum Health, Florida Hospital Zephyrhills

IU Health LaPorte Hospital, Memorial Hospital of South Bend

**Weeks of Supervised Practice**  0.6 **Practice Hours**  24 **Didactic Hours** 0

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| **Competencies** | **Evaluation Strategies** | **Examples of Planned Experiences** |
| **Scientific and Evidence Base of Practice: Integration of scientific information and research into practice.** | | |
| CRDN 1.6 Incorporate critical-thinking skills in overall practice. | Review all CRDNs with supervising RD and include activities in Bi-Weekly Report(s). | CRDN 1.6 Apply critical-thinking skills when assessing clients in a variety of settings and when selecting MNT and monitoring progress (Tip; critical thinking skill is the ability to analyze and evaluate an issue objectively to form a judgement). |
| **Professional Practice Expectations: beliefs, values, attitudes, and behaviors for the professional dietitian level of practice.** | | |
| CRDN 2.7 Apply leadership skills to achieve desired outcomes.  CRDN 2.10: Demonstrate professional attributes in all areas of practice.(Tip: Professional attributes include showing initiative and proactively developing solutions, advocacy, customer focus, risk taking, critical thinking, flexibility, time management, work prioritization and work ethic.) | Write a **clinical elective report** on the rotation and send it to the DI program Director. | CRDN 2.7 Choose a clinical area of interest to learn more in depth, upon approval of site coordinator.  CRDN 2.10 Learn in-depth the clinical rotation that you have chosen; i.e. advanced skills/ techniques in the selected area. |
| **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 3.1 Assess patient nutritional status and give MNT recommendations. Monitor and evaluate outcomes. |

**CURRICULUM FOR SUPERVISED PRACTICE: For Andrews University Internship Program in Nutrition & Dietetics**

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Kettering Medical Center, Lakeland HealthCare, Floyd Medical Center, Spectrum Health, Florida Hospital Zephyrhills

IU Health LaPorte Hospital, Memorial Hospital of South Bend **Type of Experience/Rotation** Outpatient Clinic

**Weeks of Supervised Practice** 0.4 **Practice Hours** 24 **Didactic Hours** 0

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| **Competencies** | **Evaluation Strategy** | **Examples of Planned Experiences** |
| **Scientific and Evidence Base of Practice: Integration of scientific information and research into practice.** | | |
| CRDN 1.6: Incorporate critical-thinking skills in overall practice. | Review all CRDNs with supervising RD and include activities in Bi-Weekly Report(s). | CRDN 1.6 Apply critical-thinking skills when assessing clients in a variety of settings and when selecting MNT and monitoring progress (Tip; critical thinking skill is the ability to analyze and evaluate an issue objectively to form a judgement). |
| **Professional Practice Expectations: beliefs, values, attitudes, and behaviors for the professional dietitian level of practice.** | | |
| CRDN 2.6: Refer clients and patients to other professionals and services when needs are beyond individual scope of practice.  CRDN 2.8: Demonstrate negotiation skills.  CRDN 2.11: Show cultural competence/sensitivity in interactions with clients, colleagues and staff. |  | CRDN 2.6 Refer patient to another health professional as the situation requires.  CRDN 2.8 Work with staff to create and implement plans to complete projects.  CRDN 2.11 Be aware of dietary restrictions for different cultures/ethnicities. Be courteous and respectful of all people. |
| **Clinical and Customer Services: development and delivery of information, products and services to individual, 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 3.3: Demonstrate effective communication skills for clinical and customer services in a variety of formats.  CRDN 3.4: Design, implement and evaluate presentations to a target audience.  CRDN 3.6: Use effective education and counseling skills to facilitate behavior change.  CRDN 3.8 Deliver respectful, science-based answers to client questions concerning emerging trends. | Evaluate using **Nutrition Counseling** **Rubric** with supervising RD. | CRDN 3.1 Perform NCP and document in medical record.  CRDN 3.3 Demonstrate professionalism when communicating with other professionals and clients via verbal or written communications.  CRDN 3.4 Teach a class or client(s) about diets using handouts or in a presentation format.  CRDN 3.6 Interview client to obtain pertinent information (i.e. medical history, lab values for successful counseling to occur). Observe and then counsel client/family on prescribed diet. Assess comprehension. Document in medical record.  CRDN 3.8 Evaluate and participate in a nutrition program. Teach a class if possible.  (Subject of class may vary with needs of facility; such as DM, cardiac, weight mngt, etc). |
| **Practice Management and Use of Resources: strategic application of principles of management and systems in the provision of services to individuals and organizations.** | | |
| CRDN 4.9 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 4.9 Discuss coding and billing with preceptor; become familiar with process for entering types of services rendered into medical records for tracking/coding/billing. |

**CURRICULUM FOR CURRICULUM FOR SUPERVISED PRACTICE: For Andrews University Internship Program in Nutrition & Dietetics**

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IU Health LaPorte Hospital, Memorial Hospital of South Bend

**Type of Experience/Rotation** Nutrition Education/Library/Research

**Weeks of Supervised Practice** 0.2 **Practice Hours** 16 **Didactic Hours** 0

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| **Competencies** | **Evaluation Strategy** | **Examples of Planned Experiences** |
| **Scientific and Evidence Base of practice: integration of scientific information and research into practice.** | | |
| 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.  CRDN 1.6: Incorporate critical-thinking skills in overall practice. | Review all CRDNs with supervising RD and include activities in Weekly Report(s).  **Research paper/presentation.** Send related rubric(s) to the DI Director along with a copy of your paper/presentation. | CRDN 1.2 Fully research and interpret topic and prepare a short written paper outlining topic for presentation.  CRDN 1.4 Discuss with other providers topic for nutrition-related in-service and establish date.  CRDN 1.5 Use medical library and medical literature research system to locate materials for projects.  CRDN 1.6 Apply critical-thinking skills when assessing clients in a variety of settings and when selecting MNT and monitoring progress (Tip; critical thinking skill is the ability to analyze and evaluate an issue objectively to form a judgement). |
| **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 Nutrition and Dietetics Practice and Code of Ethics for the Profession of Nutrition and Dietetics. |  | CRDN 2.1 Review the code of ethics and any related materials for your facility. |

**CURRICULUM FOR CURRICULUM FOR SUPERVISED PRACTICE: For Andrews University Internship Program in Nutrition & Dietetics**

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IU Health LaPorte Hospital, Memorial Hospital of South Bend

**Type of Experience/Rotation:** Social Service/PT/OT/Speech Pathology

**Weeks of Supervised Practice** 0.1 **Practice Hours** 8 **Didactic Hours** 0

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| **Competencies** | **Evaluation Strategy** | **Examples of Planned Experiences** |
| **Scientific and Evidence Base of Practice: integration of scientific information and research into practice.** | | |
| CRDN 1.6: Incorporate critical-thinking skills in overall practice. | CRDN 1.6 Apply critical-thinking skills when assessing clients in a variety of settings and when selecting MNT and monitoring progress (Tip; critical thinking skill is the ability to analyze and evaluate an issue objectively to form a judgement). | Review all CRDNs with supervising RD and include activities in Weekly Report(s). |
| **Professional Practice Expectations: beliefs, values, attitudes, and behaviors for the professional dietitian level of practice.** | | |
| CRDN 2.4: Function as a member of interprofessional teams. | Write a one page **report on placement experience (for PT/OT/Speech observation)** to be sent to the DI program Director. Place a copy in your portfolio. | CRDN 2.4 Discuss Social Service Department.  Observe the functions of Occupational and Physical Therapists, and Speech Pathologists. |

**CURRICULUM FOR CURRICULUM FOR SUPERVISED PRACTICE: For Andrews University Internship Program in Nutrition & Dietetics**

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IU Health LaPorte Hospital, Memorial Hospital of South Bend

**Type of Experience/Rotation:** Long Term Care or Rehab

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| **Competencies** | **Evaluation Strategy** | **Examples of Planned Experiences** |
| **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.  CRDN 1.6: Incorporate critical-thinking skills in overall practice. | Review all CRDNs with supervising RD and include activities in Bi-Weekly Report(s). | CRDN 1.1 Learn the parameters that are used for the geriatric patient to monitor patients at risk. Evaluate menus used in facility with guidelines set by the facility diet manual.  CRDN 1.6 Apply critical-thinking skills when assessing clients in a variety of settings and when selecting MNT and monitoring progress (Tip; critical thinking skill is the ability to analyze and evaluate an issue objectively to form a judgement). |
| **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 Nutrition and Dietetics Practice and Code of Ethics for the Profession of Nutrition and Dietetics.  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 2.1 Review contract with registered dietitian and long term care facility.  Review state requirements of Dietary Department in long term care facility.  CRDN 2.3 Attend interdisciplinary team conferences and participate in discharge planning.  CRDN 2.4 Work with health professionals from other disciplines to improve patient outcomes.  CRDN 2.6 Refer patients to other paramedical professionals as needed (such PT/OT/Speech, etc) to improve patient’ quality of life.  CRDN 2.10 Be timely and communicate schedule changes to preceptor(s). Complete projects on time. Be courteous to fellow staff. |
| **Clinical and Customer Services: development and delivery of information, products and services to individual, 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 3.9: Coordinate procurement, production, distribution and service of goods and services, demonstrating and promoting responsible use of resources. |  | CRDN 3.1 Complete nutritional assessment of resident in long term facility. Document assessment in medical record. Plan nutritional needs of geriatric patient.  Diagnose nutrition problem and write PES statement.  Prepare an intervention.  Monitor and evaluate interventions.  Complete documentation that follows professional guidelines.  CRDN 3.9 Work with facility to learn how they distribute meals and supplements, schedule educations if needed, and how their budget is set up. |
| **Practice Management and Use of Resources: strategic application of principles of management and systems in the provision of services to individuals and organizations.** | | |
| CRDN 4.4: Apply current nutrition informatics technology to develop, store, retrieve and disseminate information and data. |  | CRDN 4.4: Learn facility programs to find and document patient information. |

**Weeks of Supervised Practice** 1.0 **Practice Hours** 40 **Didactic Hours** 0

**CURRICULUM FOR CURRICULUM FOR SUPERVISED PRACTICE: For Andrews University Internship Program in Nutrition & Dietetics**

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IU Health LaPorte Hospital, Memorial Hospital of South Bend

**Type of Experience/Rotation** Staff Relief

**Weeks of Supervised Practice** 3.6 **Practice Hours** 144 **Didactic Hours** 0

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| **Competencies** | **Evaluation Strategy** | **Examples of Planned Experiences** |
| **Scientific and Evidence Base of Practice: integration of scientific information and evidence into practice.** | | |
| 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 nutrition and 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.  CC1: Participate actively in nutrition support or medical rounds. |  | CRDN 1.2 Keep up on current nutrition facts and guidelines, and apply them to practice.  CRDN 1.3 Document using patient interview and medical chart data to justify plan of care and use of resources.  CRDN 1.4 Read current nutrition literature and update fellow staff on relevant issues.  CRDN 1.5 Apply recent research and issues to projects, give credit and site sources appropriately, and correctly relate concepts to practice.  CRDN 1.6 Apply critical-thinking skills when assessing clients in a variety of settings and when selecting MNT and monitoring progress (Tip; critical thinking skill is the ability to analyze and evaluate an issue objectively to form a judgement).  CC1 Give feedback and suggest plans of care with fellow staff members as appropriate. Report on patient status to physicians and other care team members. Answer questions. |
| **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 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 2.5: Assign duties to NDTRs and/or support personnel as appropriate. (Note: this can include ordering calorie counts, meals, working with nurses or other aides, or other hospital staff and volunteers to meet patient needs).  CRDN 2.6: Refer clients and patients to other professionals and services when needs are beyond individual scope of practice.  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 2.15: Practice and/or role play mentoring and precepting others. | Review all CRDNs with supervising RDN and include activities in Weekly Report(s).  Evaluate using **NCP rubric (staff relief)** with supervising RD. Send a copy to the DI program Director.  Complete **Clinical Self/Preceptor-Evaluation** form with supervising RDN.  Complete **Electronic Portfolio** and send to DI program Director. | CRDN 2.1 Maintain patient confidentiality; behave in accordance with accreditation standards and the Scope of Dietetic Practice and Code of Ethics for the Profession of Dietetics.  CRDN 2.2 Document in patient charts, communicate with fellow healthcare staff, create reports and handouts appropriate to the audience.  CRDN 2.3 Work with nutrition staff and other healthcare professionals to coordinate patient care. Participate in rounds.  CRDN 2.5 Demonstrate familiarities with NCP policies and procedures. Conduct screenings and length of stay per policy and procedures. Evaluate admission assessments for new patients. Complete nutrition screens and delegate to nutrition care team as appropriate.  CRDN 2.6 Interact with other members of health care team. Discuss nutrition care of patient in interdisciplinary conference and refer patients to other professional services when needed.  Attend discharge planning if possible.  CRDN 2.9 Attend a local or state dietetic or diabetes educator meeting.  CRDN 2.10 Use critical thinking skills and provide appropriate solutions to problems as they arise in the unit. Prioritize your patient load according to hospital policies and procedures.  CRDN 2.11 Work cooperatively with fellow healthcare staff. Be respectful to patients and visitors.  CRDN 2.12 Complete a self-assessment and review with preceptor. Review progress on goals.  CRDN 2.13 Complete portfolio project; participate in continuing education seminars.  CRDN 2.15 Give feedback on performance to other interns/RDs in a real or simulated situation. Teach staff about nutrition concepts. Support staff, giving encouragement and ideas for improvement. |
| **Clinical and Customer Services: development and delivery of information, products and services to individual, 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 and settings.  CRDN 3.6: Use effective education and counseling skills to facilitate behavior change.  CRDN 3.8: Deliver respectful, science-based answers to client questions concerning emerging trends.  CRDN 3.9: Coordinate procurement, production, distributions and service of goods and services; demonstrating and promoting responsible use of resources. | Evaluate using **NCP (staff relief) Rubric** with supervising RD. Send a copy to the DI program Director.  Evaluate using **Diet Education Rubric** with supervising RDN. | CRDN 3.1. Perform NCP and document in medical record.  CRDN 3.2 Use physical findings in malnutrition diagnosis when applicable.  CRDN 3.3 Write and speak clearly and check for understanding.  CRDN 3.6 Instruct all patients/family requiring instruction. Assess comprehension and document according to Competency Statements for Supervised Practice for medical charting.  CRDN 3.8 Keep up to date on current literature in order to be prepared for questions on new trends and issues.  CRDN 3.9 Order TPN/EN/diet orders in accordance with facility policy. Work with kitchen and nursing staff to ensure proper delivery of food/nutrition support. |

**Competency Statements**

**(CRDNs)**

**CPEUs**

**Competencies for Registered Dietitians**

**Taken from Crosswalk of Knowledge and Competency Statements Between the**

**2019 and 2012 Accreditation Standards for CP, DI, DPD, FDE, IDE Programs**

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| **Domain 1. Scientific and Evidence Base of Practice: Integration of scientific information and research into practice.** | |
| **2019 Statement** | **Where Located in 2012 Standards** |
| **CRDN 1.1** *Select indicators of program quality and/or customer service and measure achievement of objectives*. | CRD 1.1 |
| **CRDN 1.2** *Apply evidence-based guidelines, systematic reviews and scientific literature*. | CRD 1.2 Reworded to remove sources of information |
| **CRDN 1.3** Justify programs, products, services and care using appropriate evidence or data. | CRD 1.3 |
| **CRDN 1.4** Evaluate emerging research for application in nutrition and dietetics practice. | CRD 1.4 |
| **CRDN 1.5** Conduct projects using appropriate research methods, ethical procedures and data analysis. | CRD 1.5 |
| **CRDN 1.6** Incorporate critical-thinking skills in overall practice. | New |

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| **Domain 2. Professional Practice Expectations: Beliefs, values, attitudes and behaviors for the professional dietitian nutritionist level of practice.** | |
| **2019 Statement** | **Where Located in 2012 Standards** |
| **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*. | CRD 2.1 |
| **CRDN 2.2** *Demonstrate professional writing skills in preparing professional communications*. | CRD 2.2 |
| **CRDN 2.3** *Demonstrate active participation, teamwork and contributions in group settings*. | CRD 2.5 |
| **CRDN 2.4** *Function as a member of interprofessional teams*. | CRD 2.10 Reworded to reflect interprofessional teams |
| **CRDN 2.5** *Assign duties to NDTRs and/or support personnel as appropriate.* | CRD 2.6 Reworded to include duties beyond just patient care |
| **CRDN 2.6** *Refer clients and patients to other professionals and services when needs are beyond individual scope of practice*. | CRD 2.7 |
| **CRDN 2.7** *Apply leadership skills to achieve desired outcomes*. | CRD 2.8 |
| **CRDN 2.8** *Demonstrate negotiation skills*. | CRD 2.13 |
| **CRDN 2.9** *Participate in professional and community organizations*. | CRD 2.9 |
| **CRDN 2.10** *Demonstrate professional attributes in all areas of practice*. | CRD 2.11 Reworded to reflect all areas of practice |
| **CRDN 2.11 Show cultural competence/sensitivity in interactions with clients, colleagues and staff.** | Guideline 11.1 learning activities reworded as competency |
| **CRDN 2.12 Perform self-assessment and develop goals for self-improvement throughout the program.** | CRD 2.12 Separated concepts of self-assessment and completion of CDR portfolio |
| **CRDN 2.13 Prepare a plan for professional development according to Commission on Dietetic Registration guidelines.** | CRD 2.12 Separated concepts of self-assessment and completion of CDR portfolio |
| **CRDN 2.14 Demonstrate advocacy on local, state or national legislative and regulatory issues or policies impacting the nutrition and dietetics profession.** | CRD 4.3 Reworded to focus on issues and policies impacting the profession |
| **CRDN 2.15 Practice and/or role play mentoring and precepting others.** | New |

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| **Domain 3. Clinical and Customer Services: Development and delivery of information, products and services to individuals, groups and populations.** | |
| **2019 Statement** | **Where Located in 2012 Standards** |
| **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*. | CRD 3.1 Reworded to remove subgroups as included in Nutrition Care Process; Guideline 10.1 |
| **CRDN 3.2** *Conduct nutrition focused physical exams.* | New |
| **CRDN 3.3** *Demonstrate effective communications skills for clinical and customer services in a variety of formats and settings.* | CRD 3.2 |
| **CRDN 3.4** *Design, implement and evaluate presentations to a target audience.* | CRD 2.3 |
| **CRDN 3.5** *Develop nutrition education materials that are culturally and age appropriate and designed for the literacy level of the audience*. | CRD 2.3 Tip |
| **CRDN 3.6** *Use effective education and counseling skills to facilitate behavior change*. | CRD 2.4 |
| **CRDN 3.7** *Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management*. | CRD 3.3 |
| **CRDN 3.8** *Deliver respectful, science-based answers to client questions concerning emerging trends*. | CRD 3.4 |
| **CRDN 3.9** *Coordinate procurement, production, distribution and service of goods and services, demonstrating and promoting responsible use of resources.* | CRD 3.5 Comment/Tip Reworded to include 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.* | CRD 3.6 |

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| **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.** | |
| **2019 Statement** | **Where Located in 2012 Standards** |
| **CRDN 4.1** *Participate in management of human resources*. | CRD 4.1 |
| **CRDN 4.2** *Perform management functions related to safety, security and sanitation that affect employees, customers, patients, facilities and food*. | CRD 4.2 |
| **CRDN 4.3** *Conduct clinical and customer service quality management activities.* | CRD 4.4 |
| **CRDN 4.4** *Apply current nutrition informatics to develop, store, retrieve and disseminate information and data*. | CRD 4.5 Reworded to incorporate term nutrition informatics |
| **CRDN 4.5** *Analyze quality, financial and productivity data for use in planning*. | CRD 4.6 , 4.9 Combined |
| **CRDN 4.6** *Propose and use procedures as appropriate to the practice setting to promote sustainability, reduce waste and protect the environment.* | CRD 4.7 Reworded to include term sustainability |
| **CRDN 4.7** *Conduct feasibility studies for products, programs or services with consideration of costs and benefits.* | CRD 4.8 |
| **CRDN 4.8** *Develop a plan to provide or develop a product, program or service that includes a budget, staffing needs, equipment and supplies*. | CRD 4.10 |
| **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*. | CRD 4.11 Reworded to lower level competence |
| **CRDN 4.10** *Analyze risk in nutrition and dietetics practice*. | New |

Source: www.eatrightpro.org/

**CPEUs**

**As of June 2019 preceptors can get CPEU credits. In order to receive CPEU credit;**

* The precepting must have been completed during the current recertification cycle.
* The preceptor must complete the Verification and Self-Reflection Form provided by the program director (form attached). The form must be signed and dated by the ACEND accredited program director. The form should be retained by the preceptor as documentation to be submitted to CDR if audited. The preceptor is welcome to email me their completed form directly. I’ll complete my portion, sign and send back.
* A maximum of 3 CPEUs per year or a total of 15 CPEUs per 5-year reporting period can be awarded to RDNs or RDs, and NDTRs or DTRs for this activity. Here is the link for more details <https://www.cdrnet.org/cpeu-credit-for-preceptors>