

Central Washington University
Dietetic Internship
Accreditation Report Response

The following documents are submitted for documentation of compliance:

- DI General Guidelines
- Planned Experiences and Competencies
- School Food Service Management
- Intern Performance Evaluation: Food service Management Rotation
- Medical Nutrition Therapy A
- Medical Nutrition Therapy B
- Intern Performance Evaluation: Medical Nutrition Therapy
- Hospital Food Service Management Rotation
- Intern Performance Evaluation: Hospital Food Service Management
- Community Nutrition Rotation
- Intern Performance Evaluation: Community Nutrition Rotation
- Renal Rotation
- Intern Performance Evaluation: Renal Rotation
- Policy and Procedures
- Website Documentation

Criterion 2.3:

The included documents outline the Competencies/Learning Outcomes of the 2008 ERAS and the rotation and learning activity where the achievement of that competency occurs for the CWU DI supervised practice. Additionally, rotation documents have been included that outline the assignments, activities, and additional needed information for that specific rotation. Competencies/Learning Outcomes are listed for each rotation so that interns and preceptors clearly understand what competencies are being achieved during a specific rotation.

Intern Performance Evaluation forms have been developed for each rotation. Language in the evaluation form is consistent with the language of the competencies to assist in clarifying the link between activities and the achievement of competencies. Similarity in language has been maintained between rotations so that competencies that are not achieved in a specific rotation can be assessed and achieved in the subsequent rotation.

Points of discussion with preceptors have been included in the learning activities as outlined. Further training, review, and discussion will occur in the Preceptor Training planned for this summer. Conversations with preceptors have indicated limited time to evaluate additional assignments and an ongoing pressure for the same work load with less staff. Assignments and activities that are additional to patient care and would need to be reviewed by preceptors to provide appropriate feedback have not been increased. In the MNT rotation, care plans that are evaluated by the DI Director have been included to increase intern requirements to integrate all aspects for patient nutritional care in a more in-depth way. Those care plans are shared with the preceptors for a feedback and input; however, the evaluation of the multiple pages of written document is being done by the DI Director. Care plans are submitted electronically and

evaluation is completed using track changes so that the graded document can be returned electronically. Care plans have been in trial use with the current intern class with favorable comments from preceptors and interns. Interns have benefitted from the increased learning despite the increased work.

In response to intern comments, the decision was made to maintain the optional rotation of one week rather than assigning that time as a Research Rotation. Research competencies will be achieved through Seminar assignments/time and the Community Project. The research data collection can also be part of quality assurance, time temperature studies, or other rotation assignments and can be done within current rotation supervised practice time. Interns have expressed that the optional week is one of the "big draws" for the CWU Internship. With other opportunities for meeting the research competencies, the decision to maintain the optional rotation seemed prudent. Especially for those students who have already decided to attend CWU based on the optional rotation. Annual program review will give the opportunity to reconsider and revise the decision if needed.

Criterion 2.5:

Documents for the specific rotations list assessments with an area for preceptors to initial and date when assignments and activities have been completed. Those assignments/activities are rated as M (meets criteria) and initialed when the intern has appropriately completed the assignment/activity. Rotation evaluations are also listed and are scored as S (Satisfactory) or U (Unsatisfactory).

For each rotation, achieving an M (meets criteria) for all competencies of that rotation demonstrates entry-level knowledge and performance and results in an S (Satisfactory) score for the rotation. If any competencies on rotation evaluations are indicated as U (Unsatisfactory) but the preceptor has determined the student to have an S score for the rotation, those U competencies must be improved and rated as S in the subsequent rotation. S completion of the rotations within a defined quarter result in a S grade for the Dietetic Practicum course of that quarter.

In the past, interns submitted a portfolio as part of the end of rotation evaluation. This practice will be discontinued with the intern class of 2009-2010. Assignments/activities will be submitted to the preceptor or DI Director throughout the rotation to facilitate timely feedback to the intern. Written rotation documents will record for the intern when assignments/activities have been completed. Documents submitted to the DI Director will be electronic and will be evaluated/assessed using track changes and returned to the intern electronically. This new procedure should provide ongoing and timelier feedback, rather than submission at the end of the rotation. Interns will be encouraged to keep a portfolio of information from each rotation which would likely include the reviewed assignments/activities. Additionally, interns will be encouraged to collect resources, forms, educational materials, etc. that they might find helpful in preparing for the RD exam and/or for their future employment.

Criterion 2.7:

Preceptors from each of the supervised practice sites have been consulted for input as the attached documents have been developed. Their input has been incorporated. However, a formal meeting has not been possible to date due to the academic schedule, administrative issues at CWU, and an inability to achieve a time that would meet the needs of adequate numbers of preceptors.

Individual meetings for the three areas – Yakima Valley, Tri-Cities, and Wenatchee – will be scheduled for summer after the Spring quarter is over. The plan for that meeting is to include a discussion and review of the new documents as well as Preceptor Training with an outside speaker that would provide preceptors with CEU credits. Clarification and discussion of expectations of entry-level prepared interns will be planned as part of that meeting.

For the future, more routine Preceptor Training is being planned - annually, at a minimum. And more frequent when possible. Preceptors are also surveyed annually for their evaluation of the internship, student achievement, student preparation, and preceptor support. Increased attention is focused on nurturing preceptors and meeting their needs. They are the “backbone” of the internship and an invaluable asset.

Criterion 3.1.1: See the Policy and Procedure document below. Several new “Policy and Procedures” have been drafted in response to the site visit report. The complete “Policy and Procedures” document is attached. Each of the Policy/Procedures was reviewed and edited when necessary. Nutrition faculty and the Nutrition Program Director have also reviewed the written document. It will also be reviewed with the Advisory Board at the next meeting scheduled for June 8, 2009.

The following Policy and Procedures were changed and/or updated to be in compliance with the 2008 ERAS:

- Credit for Prior Learning
- Medical/Health and Professional Liability Insurance
- Background Checks
- Immunizations and Drug Screen
- Care of Injury or Illness While in Supervised Practice
- Program Completion Requirements
- DI Verification Statements
- Supervised Practice Evaluations
- Policy for Supervised Practice Facilities Selection and Evaluation
- Policy for Affiliation Agreements for Supervised Practice Facilities

Criterion 3.1.2: Please see discussion of Portfolio in Criterion 2.5.

Criterion 3.1.4: Please see Policy 14 addressing DI Verification Statements.

Criterion 3.1.7: see Criterion 2.7 above.

Criterion 3.1.8: Please see discussion above

Documents have been drafted with input from preceptors. As previously discussed, prior to using the new materials with the new class of 2009-2010, preceptor training will be held. As with any new process/documents, adjustments may be needed as interns, preceptors, and the DI Director use the materials. Adjustments will be made to assist in clarification/ease of use while maintaining the appropriate achievement of the 2008 ERAS.

Preceptors are surveyed each year for comments on rotations, preceptor support, and any suggestions they might have. All information received will be reviewed for its applicability and incorporated when possible.

Criterion 3.3.4:

Programming to increase Preceptor Training is planned for this summer. With new documents that are consistent with the 2008 ERAS, each supervised practice site will be provided with a new CWU Dietetic Internship Manual on disk. The manual will include all materials available for the intern on Blackboard – reading materials, rotation assignments/activities, rotation evaluations, preceptor evaluation forms, WWW links of interest, and CWU DI Policy and Procedures. Additional materials specific for the preceptors will also be included.

Criterion 3.4 and 3.8.3: Please see the Policy and Procedure document included and the discussion of Criterion 3.1.1 above. All areas of deficit cited in the site visit report have been addressed either with a new policy or a revised policy. All Policy and Procedures will be reviewed by the Nutrition Faculty, Nutrition Program Director, and the Advisory Board over the next month. Annual review of Policy and Procedures will be a part of the program ongoing review process. Policy and Procedures will be posted on the website and reviewed with each new class of interns. Interns will document by signature that they have received a copy of the Policies and Procedures and that they have reviewed them.

Criterion 3.6:

The department has recently updated its website which offered a great opportunity for updating and improving the CWU Dietetic Internship website. The new CWU DI web location is <http://www.cwu.edu/~hhpn/internship.html>. PDF documents of the pages are included in this document. All material indicated in the site visit report as missing have now been added to the website information. The CWU DI website is the location that will house all information about the CWU Dietetic Internship that is required in the 2008 ERAS.

Criterion 3.8.3: Please see Criterion 3.4 above.

Central Washington University Dietetic Internship

DI Rotation/Activity Guidelines

Competencies: The following competencies are not specific to any one rotation and are achievable throughout all rotations and all internship activities. The intern will demonstrate that he/she can:

- ❖ Practice in compliance with current federal regulations and state statues and rules, as applicable and in accordance with accreditation standards and the ADA Scope of Dietetics Practice Framework, Standards of Professional Performance and Code of Ethics for the Profession of Dietetics.
- ❖ Demonstrate initiative by proactively developing solutions to problems.
- ❖ Apply leadership principles effectively to achieve desired outcomes.
- ❖ Serve in professional and community organizations.
- ❖ Demonstrate professional attributes such as advocacy, customer focus, risk taking, critical thinking, flexibility, time management, work prioritization and work ethic within various organizational cultures.
- ❖ Perform self assessment, develop goals and objectives and prepare a draft portfolio for professional development as defined by the CDR.
- ❖ Develop and demonstrate effective communication skills using oral, print, visual, electronic and mass media methods for maximizing client education, employee training and marketing.

Prior to starting a rotation:

1. **At least one week prior to starting a rotation**, contact the preceptor for the rotation to verify starting date, time, place to report, and appropriate dress (foodservice vs professional). Remember that preceptors generally do not sit at a desk all day and you will likely need to leave a message and have them call you back. It may take several days for you and the preceptor to connect.
2. Review notes, handouts, guides, and any other information pertinent to the rotation. This includes information from summer class NUTR 541 and undergraduate classes.
3. Review rotation documents that are available as part of the Dietetic Internship Manual on Blackboard. Pay special attention to the listed competencies, activities, assignments, schedule, and any other information provided.
4. **Write at least three self-development goals for each rotation**, prior to beginning the rotation. Refer to the Professional Development Portfolio Process developed by the Commission on Dietetic Registration found in the General Section of the DI Manual on Blackboard. Along with the goals, include a brief assessment of intern's strengths and weaknesses coming into the rotation.
5. Check with other interns that have been through the rotation for any helpful hints that they may have. When sharing intern experiences, be positive. Each intern is a unique individual and will not have the same experience as another. Recognize that your expectations will affect your success in the rotation.

During the rotation:

1. Don't forget your **preceptors are busy people** who have full time jobs in addition to their responsibilities as a preceptor. If you take an active role in your learning by coming prepared to learn each day and having done your homework you will get the most you can out of each experience. Your preceptors are there to facilitate your learning. They are not expected to "teach you" but are available to mentor, guide, and facilitate your acquiring knowledge and skills that prepare you as an entry level dietitian.
2. Make sure that you know the established schedule for the rotation. Generally, the intern's schedule is the same as that of the preceptor they are assigned to. In some rotations, interns will work with more than one preceptor. **Be on time and ready to work and learn** at the appointed time. If it takes you time to organize yourself on site, arrive ahead of time to allow the needed time. If your preceptor works the weekend or evenings, you will be expected to maintain the weekend or evening schedule also.
3. Carry appropriate references and resources with you. Resources are often available on the nursing unit, but you need to be using and becoming familiar with your own resources. Additionally, you can notate and flag your resources to facility easy access specific to you.
4. **Report any absence** from a rotation to the Dietetic Internship Director and the preceptor. Absences other than unexpected illness must be arranged with the DI Director and preceptor ahead of time. Any absence in excess of 6 days and/or absences in a single rotation that interfere with a student's ability to meet the competencies of that rotation will require the student to make up the time.
5. Clarify a schedule for yourself. During the first week of the rotation **develop a calendar** of your activities for that rotation. Include your assignments and their due dates on that calendar.
6. Be Flexible!!! Be open to incorporating unexpected activities into your day.
7. **Maximize all learning opportunities to there fullest.** Don't be afraid to ask questions. But, don't expect an immediate factual response every time. The most successful interns explore possible answers/solutions before asking?
8. **Do extra background reading and research as necessary**- this is especially true for the clinical rotation. Use "DOWN" time wisely. Keep a list of terms and concepts that you need to look up and review each day. If you are provided written material by the preceptor, don't just file it away. Review it and be able to use the material.
9. Complete assignments, objectives, and additional work as directed by the preceptors. **Assignments that are contained in the manual (didactic assignments) should be completed on intern's own time!!**
10. Each intern is encouraged to develop a portfolio or other system for organizing information from each rotation. Assignments, evaluations, summaries, and reviews should all be kept for intern review. This material will be useful in reviewing for the RD Exam, interviewing for potential jobs, and as reference material for job responsibilities. With approval of the preceptor, gathering copies of forms, patient education materials, brochures, etc provides the intern with materials for future practice and studying also.
11. Keep the internship director informed of any problems or concerns you may have.
12. During the rotation, the intern is responsible for turning in assignments as completed and on the date due. Be sure to remove client/patient names from assessments (initials are ok).

Assignments have been developed that will provide information needed during the rotation. Leaving those assignments until the end of the rotation means the intern has missed the ability to use the information during the supervised practice experience.

13. The **intern is responsible** for scheduling the midpoint and final evaluations with the preceptor(s) and the Dietetic Internship Director.
14. **At least one-week prior to finishing** your rotation, provide the preceptor with a copy of the appropriate evaluation form – either hard copy or electronic format. Check with your preceptor(s) to determine which format is preferred. Also, check to be sure that you have submitted all assignments and activity reports to the preceptor(s) and/or Dietetic Internship Director, whichever is designated in the rotation directions.

At completion of the rotation:

1. **Schedule the final evaluation** with the internship director and the site preceptor(s). You can email the director with possible times that are convenient for the preceptors. Generally, the evaluation is during the last week of the rotation but can be earlier if needed for meeting everyone's schedule. Scheduling the evaluation earlier, rather than later, will facilitate finding a time convenient to preceptors and the Dietetic Internship Director. For rotations that are two weeks or less, it is not necessary for the internship director to attend the evaluation.
2. **Complete evaluation(s) of the preceptor(s)** that you worked with during the rotation. The evaluation form is available on Blackboard. Complete one form for each preceptor that you worked with enough that you feel you can provide an effective evaluation. Submit the form electronically. The evaluation(s) will be shared with the preceptor(s) in a summary format at the end of the internship year.
3. Share with the next intern rotating through that site any information you feel would be beneficial to their success there. Be positive when sharing those experiences.

Student Responsibilities

Placement in Affiliating Institutions

1. Placement of students in affiliating institutions is governed by contract between CUW and the affiliating institution. Neither facilities nor preceptors are compensated for the placement of students for supervised practice experience. Preceptors volunteer their time to work with students while maintaining responsibility for their usual work load.
2. Placement of students in the affiliating institutions is contingent upon a cleared Washington State Criminal Background check. Lack of timely completion of the background check or results showing criminal activity will likely result in refusal by the facility for accepting the student.
3. Students must comply with all the rules and regulations of the affiliating institutions at all times and conduct themselves in a professional manner.

Professional Behavior

- Responds to recommendations and feedback from preceptors without defensiveness and/or blaming others.
 - Completes assignments on time and in a professional manner (typed and printed) and provides those assignments as directed/requested.
 - Is reliable and punctual. Any absence or late arrival is prearranged with preceptors and notice is provided to the DI director.
 - Is available to work with the assigned preceptor and takes feedback as it is provided.
 - Respects the rights and opinions of others by not repeatedly advocating for their opinion to be agreed with.
 - Maintains a positive attitude while in the supervised practice facility and/or involved in dietetic internship activities.
 - Integrates unexpected duties into the work schedule.
 - Recognizes that professional courtesy precludes speaking negatively or derogatorily about preceptors, facilities, CWU, CWU faculty/staff, or fellow interns/students while involved in supervised practice or dietetic internship activities.
 - Demonstrates patience with individuals and systems, recognizing that clients, patients, preceptors and healthcare systems each have individual lists of priority that may be different from the interns.
4. Students may not copy or remove confidential information from the affiliating institutions. Any materials with client or patient identifiers must be left at the facility. Confidentiality about employee or patient information must be adhered to at all times.
 5. Student attire as well as their appearance must conform to the accepted standards of the affiliating institution. Lab coats may be required.

Dress Code

- Professional attire is required at all times.
- Skirts and dresses or dress slacks are appropriate.
- Jeans, T-shirts, Capri pants, overalls or low cut pants are not appropriate. Skirts should not be shorter than knee length. Revealing blouses/tops, showing cleavage or midriff are inappropriate.

- Shoes should be low heeled, fully enclose the foot, and have a soft sole. Pantyhose or socks should be worn.
 - Jewelry should be kept to a minimum. Visible body piercing is not allowed, except for earrings. A hair net may be required while working in the kitchen.
6. Students must have the following in place prior to placement in the affiliating institutions:
- Medical Malpractice insurance (\$1,000,000 minimum per occurrence/ \$3,000,000 aggregate).
 - A current Washington State Food Handler's Permit
 - A negative skin test for tuberculosis (within past 6 months), immunizations for Hepatitis B, Diphtheria, and Tetanus and an MMR in the past 3 years.
 - Negative drug screen.
 - Certificate training in Health Care Provider CPR, Bloodborne Pathogens/ Infectious Disease, and HIPPA.
 - A valid driver's license and auto insurance.
 - Personal health insurance. Students are responsible for all costs incurred for emergency treatment if injury or illness occurs during the supervised practice experience.
 - Students are asked to obtain a flu vaccine when it becomes available during the year.

DI Seminar

Competencies:

The listed competencies will be achieved through activities associated with the DI Seminar. The dietetic intern will demonstrate that he/she has entry-level skill and knowledge for the following competencies:

- ❑ Conduct research projects using appropriate research methods, ethical procedures and statistical analysis.
- ❑ Practice in compliance with current federal regulations and state statues and rules, as applicable, and in accordance with accreditation standards and the ADA Scope of Dietetic Practice Framework, Standards of Professional Performance, and Code of Ethics for the Profession of Dietetics.
- ❑ Perform self assessment, develop goals and objectives, and prepare a draft portfolio for professional development as defined by the CDR.
- ❑ Participate in public policy activities, including both legislative and regulatory initiatives.
- ❑ Develop a business plan for a product, program or service including development of a budget, staffing needs, facility requirements, equipment and supplies.

The weekly seminar is designed to allow the Internship Director to meet with dietetic interns for sharing of information, group problem solving and dietetic education. Seminars will be held by distance education technology on Wednesdays between 3:00 PM and 5:00 PM. A schedule of topics and dates will be provided.

Intern Responsibilities:

1. **Attendance at seminar is required** unless you are at a rotation site without distance education connection or unable to attend because of other assigned responsibilities. Any absence must be communicated to the Internship Director as soon as it is known and before the beginning of seminar. Since some distance education sites will only have one intern, knowing about potential absences of the intern can assist with the site scheduling.
2. **Be on time for seminar.** Connections between the sites are most easily verified when persons are in the distance education rooms. If you have a cell phone, carrying it to seminar can be helpful if there is difficulty with the connection. Also keep the roster of phone numbers for the interns and Internship Director with you. If you are not connected when you arrive at the Distance Education site, check for a Distance Education technician. If you can not find assistance, call the Internship Director. Cell phone reception is poor in some of the distant sites and may take more than one call. If the technicians are having difficulty with the connection, please maintain a quiet level of activity at the various sites so that the voice connection can be used to assess the status of the connection.
3. **Recognize the strengths and limitations** of the distance education environment. Be aware that regular classroom noise must be kept at a minimum to insure that the far-end site can hear. Turning pages in books and/or paper shuffling can be heard if your microphone is open. Additionally, all activity at one site is potentially being shown to other sites – even when mics are turned off.
4. **Come to seminar prepared to share something new you have learned or done during the past week in your current rotation.** Each intern will need to review the previous week and

focus on one item of special interest to share. Since interns are not all in the same sites, experiences can be different from site to site. Sharing experiences allows interns to learn from one another and from each other's experiences.

5. Bring questions and concerns to the meeting. This is a chance for you to **share and problem solve**. However, seminar is not a place to complain. Intern complaints should be directed to the Internship Director by email or personal conversation.
6. Bring a calculator, pen or pencil, and paper for taking notes.
5. There will be times when you will be given an assignment to complete in preparation for a seminar presentation or as part of a presentation. **You will be expected to come to seminar with this assignment completed.**
6. Some information discussed should be treated as confidential information and not shared outside the seminar. Example of this might include patient's seen, facility issues, or employees encountered during your foodservice rotation. HIPPA rules apply to the seminar discussions.

Community Nutrition Concentration

Competencies:

The dietetic intern will demonstrate that he/she can:

- ❑ Plan, implement, and evaluate a health and wellness event for the community
- ❑ Demonstrate assertiveness and negotiation skills while respecting life experiences, cultural diversity and educational background.
- ❑ Demonstrate active participation, teamwork, and contributions in group settings
- ❑ Demonstrate leadership skills by seeking out a local health/wellness group and develop an ongoing relationship.
- ❑ Develop collaborative relationships within the community with other healthcare/wellness providers or advocates.
- ❑ Plan, implement, and evaluate a National Nutrition Month activity or event
- ❑ Participate in professional and community organizations.
- ❑ Plan and deliver public presentations for target groups in the community.
- ❑ Participate in dietetic related activities for nutrition education or health/wellness screenings.

Activities:

1. Each intern will take an active role in planning, implementing, and evaluating the “Family Field Day” event that occurs in May each year. Interns are responsible for active games and nutrition messages. Partner organizations provide other activities such as soccer, tennis, kayaking, etc. Attendance at the event in 2009 was 360 participants. The event has grown each year. Planning will begin in the late fall to allow sufficient time for planning and implementation to occur through seminar via distance education. Interns will determine the method of evaluation to be used for the event.

2. Each intern will select a health/wellness agency, organization, or support group that they can be involved with over the period of supervised practice (9 months). The intent is for the intern to gain the following:

- ❖ Skills in working with diverse groups
- ❖ Leadership and collaboration skills
- ❖ Knowledge of organizational components that support health/wellness in the community
- ❖ Expanded knowledge of the methods different groups use to gain behavioral change

The intern can serve as a volunteer within the organization and offer nutrition expertise to the community based organization.

3. Each intern, alone or in pairs, will plan and implement a National Nutrition Month activity. This activity can be housed within the rotation site or can be community based.

4. The intern will attend at least 3 local/regional professional meetings and 1 state professional meeting.

5. The intern will plan and deliver 3 public presentations for target groups within the community.

6. The intern will participate in 3 dietetics related activities such as health screenings or Diabetes Fairs.

*Return to Self Study
front of
white
notebook*

Exp & Comp _ May 09

Planned Experiences and Competencies

| | Competencies/Learning Outcomes | Rotation/Course | Learning Activity | Evaluation | Evaluator |
|---|---|--|--|---|---|
| 1: Scientific and Evidence Base of Practice: integration of scientific information and research into practice. | | | | | |
| DI 1.1 | DI graduates are able to select appropriate indicators and measure achievement of clinical, programmatic, quality, productivity, economic or other outcomes. | MNT B FS Management NUTR 543 | Nutrition care of assigned patients Time and Motion Study Temperature Study Oral case study presentation (team) | Rotation Evaluation Study Reports Rotation Evaluation | Preceptors Preceptor Instructor |
| DI 1.2 | DI graduates are able to apply evidence-based guidelines, systematic review and scientific literature in the nutrition care process and model and other areas of dietetics practice | MNT B NUTR 545 | MNT Case Study Presentation Patient Care Staff Relief Care Plan Assignment Team Presentation of Topic from EAL | Rotation Evaluation Written Care Plan Written and oral presentation | Preceptors DI Director Instructor |
| DI 1.3 | DI graduates are able to justify programs, products, services and care using appropriate evidence or data. | FS Management NUTR 547 | Food Specification Assignment Equipment Specification Assignment Written Term Paper with Oral Presentation | Written reports Rotation Evaluation Written Evaluation | Preceptor Instructor/Peers |
| DI 1.4 | DI graduates are able to evaluate emerging research for application in dietetics practice | NUTR 543 NUTR 545 | Oral Case Study Presentation (team) Team Presentation of Topic from EAL | Written Evaluation Written Evaluation | Instructor/Peers Instructor |
| DI 1.5 | DI graduates are able to conduct research projects using appropriate research methods, ethical procedures and statistical analysis. | DI Seminar and selected DI rotation | Plan and conduct research project. May utilize assigned rotation activities as research topic, ie. Client/patient satisfaction surveys, time/temperature studies, etc. | Written report with self evaluation. | DI Director |

| 2. Professional Practice Expectations: beliefs, values, attitudes and behaviors for the professional dietitian level of practice. | | | | | |
|--|--|--------------------------------------|---|--|--------------------------------------|
| DI 2.1 | DI graduates are able to practice in compliance with current federal regulations and state statutes and rules, as applicable and in accordance with accreditation standards and the ADA Scope of Dietetics Practice Framework, Standards of Professional Performance and Code of Ethics for the Profession of Dietetics. | DI Seminar | Reads and discusses ADA Scope of Dietetics Practice Framework, Standards of Professional Performance and Code of Ethics for the Profession of Dietetics | Attendance at Seminar | DI Director |
| | | All rotations | Intern practices in compliance with the professional standards of ADA, CWU, and the individual practice site. | Rotation Evaluation | Preceptor |
| DI 2.2 | DI graduates are able to demonstrate professional writing skills in preparing professional communications (e.g. research manuscripts, project proposals, education materials, policies and procedures. | Research Project | Intern completes report of research project demonstrating professional and scientific writing skills. | Project Report Evaluation | DI Director CWU Nutrition Faculty |
| | | FS Management | Policy/Procedure Assignment Equipment Order Justification | Written Policy/Procedure Written Justification Rotation Evaluation | Preceptor |
| DI 2.3 | DI graduates are able to design, implement and evaluate presentations considering life experiences, cultural diversity and educational background of the target audience. | NUTR 540 | Written Nutrition Curriculum for Target Group with Presentation (team) | Written evaluation | Instructor and peers |
| DI 2.4 | DI graduates are able to use effective education and counseling skills to facilitate behavior change | Community Food Service Management | Plan and conduct in-service training session. | Rotation Evaluation | Preceptor and participants |
| | | Any Rotation | Plan and implement public presentations for target audiences. | Rotation Evaluation | Preceptor and participants |
| DI 2.5 | DI graduates are able to demonstrate active participation, teamwork and contributions in group settings | Community Project | Actively participates in planning, implementing, and conducting group activities. | Written Evaluation | DI Director and Peers |
| | | NUTR 540 | Written Nutrition Curriculum for Target Group with Presentation (team) | Written Evaluation | Instructor and peers |

| | | | | | |
|------------|--|-----------------------------------|--|---|-------------|
| DI 2.6 | DI graduates are able to assign appropriate patient care activities to DTRs and/or support personnel considering the needs of the patient/client or situation, the ability of support personnel, jurisdictional law, practice guidelines and policies within the facility. | MNT A and B Community | Intern makes appropriate referrals to other support personnel and healthcare team members. | Rotation evaluation | Preceptor |
| DI 2.7 | DI graduates are able to refer clients and patients to other professionals and services when needs are beyond individual scope of practice. | | | | |
| DI 2.8 | DI graduates are able to demonstrate initiative by proactively developing solutions to problems. | All rotations | Utilizes appropriate critical thinking skills and is proactive in finding solutions. | Rotation Evaluation | Preceptor |
| DI 2.9 | DI graduates are able to apply leadership principles effectively to achieve desired outcomes. | Throughout DI year | Intern will utilize leadership skills by seeking out a local health/wellness group and develop ongoing relationship. | Summary and self evaluation of participation and leadership strengths and weaknesses. | DI Director |
| DI 2.10 | DI graduates are able to serve in professional and community organizations. | Throughout DI year | Intern participates in district and state professional/dietetic meetings. | Record of attendance and written summary of activities. | DI Director |
| DI 2.11 | DI graduates are able to establish collaborative relationships with internal and external stakeholders, including patients, clients, care givers, physicians, nurses and other health professionals, administrative and support personnel to facilitate individual and organizational goals. | MNT A and B Community Renal | Intern practices as a team member and refers patients/clients when appropriate. | Rotation Evaluation | Preceptor |
| | | FS Management | Intern works with kitchen employees and staff to meet goals of facility | Rotation Evaluation | Preceptor |
| DI 2.12 | DI graduates are able to demonstrate professional attributes such as advocacy, customer focus, risk taking, critical thinking, flexibility, time management, work prioritization and work ethic within various organizational cultures. | All rotations | Intern demonstrates professional values, beliefs, and practices during all internship activities/rotations. | Rotation Evaluation | Preceptor |

| | | | | | |
|-------------------|--|---|--|---|------------------------------|
| DI 2.13 | DI graduates are able to perform self assessment, develop goals and objectives and prepare a draft portfolio for professional development as defined by the CDR. | DI Seminar All rotations | Participate in review and discussion of CDR Portfolio procedures. Complete self assessment and develop goals and objectives for each rotation | Complete draft portfolio Goals and objectives submitted to preceptor and DI Director | DI Director Preceptor |
| DI 2.14 | DI graduates are able to demonstrate assertiveness and negotiation skills while respecting life experiences, cultural diversity and educational background. | Community Community Concentration | Client interviewing and care Community presentations to diverse groups | Rotation Evaluation | Preceptor |
| DI 3.1 | Clinical and Customer Services: development and delivery of information, products and services to individuals, groups and populations. | | | | |
| DI 3.1.a | DI graduates are able to assess the nutrition status of individuals, groups and populations in a variety of settings where nutrition care is or can be delivered | MNT A and B Community Renal Long Term Care | Provides appropriate care for assigned patients/clients. | Rotation Evaluation | Preceptor |
| DI 3.1.b | DI graduates are able to diagnose nutrition problems and create problem, etiology, signs and symptoms (PES) statements. | Staff Relief | Independently provides appropriate nutrition care for assigned patients. | Rotation Evaluation | Preceptor |
| DI 3.1.c | DI graduates are able to plan and implement nutrition interventions to include prioritizing the nutrition diagnosis, formulating a nutrition prescription, establishing goals and selecting and managing intervention. | | | | |
| DI 3.1.d | DI graduates are able to monitor and evaluate problems, etiologies, signs, symptoms and the impact of interventions on the nutrition diagnosis. | NUTR 541 | Completes written and oral presentation of assigned case studies. | Written Evaluation | Instructor |
| DI 3.2 | DI graduates are able to develop and demonstrate effective communication skills using oral, print, visual, electronic and mass media methods for maximizing client education, employee training and marketing. | Any rotation | Plan and conduct inservice and/or client education presentations. | Rotation Evaluation | Preceptor |
| DI 3.3 | DI graduates are able to demonstrate and promote responsible use of resources including employees, money, time, water, energy, food and disposable goods. | Fd Service Management Hospital FSM | Plan and implement "Theme Meal" and/or catering event | Rotation Evaluation | Preceptor |

| | | | | | |
|--|--|---------------------------------------|--|---|---|
| DI 3.4 | DI graduates are able to develop and deliver products, programs, or services that promote consumer health, wellness and lifestyle management merging consumer desire for taste, convenience and economy with nutrition, food safety and health messages and interventions. | Community Project NUTR 540 | Actively participates in planning, implementing, and conducting community project. Written Nutrition Curriculum for Target Group with Presentation (team) | Written Report of Activity and Personal Contribution to Event Written Evaluation | DI Director Instructor and peers |
| DI 3.5 | DI graduates are able to deliver respectful, science-based answers to consumer questions concerning emerging trends. | NUTR 547 | Written term paper with oral presentation | Written Evaluation | Instructor/Peers |
| DI 3.6 | DI graduates are able to coordinate procurement, production, distribution and service of goods and services. | Fd Service Management | Conducts inventory, ordering, and receiving of food/equipment. | Rotation Evaluation | Preceptor |
| DI 3.7 | DI graduates are able to 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. | FS Management | Menu Assignment Recipe Standardization Assignment | Written Evaluation Review with Preceptor Rotation Evaluation | Preceptor |
| 4: Practice Management and Use of Resources: strategic application of principles of management and systems in the provision of services to individuals and organizations. | | | | | |
| DI 4.1 | DI graduates are able to use organizational processes and tools to manage human resources | FS Management | Reviews human resource management procedures with Preceptor and HR Dept Mock Employee Evaluation | Review with Preceptor Written Report Rotation Evaluation | Preceptor |
| DI 4.2 | DI graduates are able to perform management functions related to safety, security and sanitation that affect employees, customers, patients, facilities and food | FS Management | Sanitation and Safety Survey | Review with DI Director Rotation Evaluation | DI Director Preceptor |
| DI 4.3 | DI graduates are able to apply systems theory and a process approach to make decisions and maximize outcomes. | FS Management MNT B | Staff Relief | Rotation Evaluation | Preceptor |
| DI 4.4 | DI graduates are able to participate in public policy activities, including both legislative and regulatory initiatives. | Seminar | Participate in Public Policy Advocacy Activity | Record of Participation | DI Director |
| DI 4.5 | DI graduates are able to conduct clinical and customer service quality management activities. | Fd Service Management Hospital FSM | Temperature Study | Study report Rotation Evaluation | Preceptor |

| | | | | | |
|--|--|------------------------------|--|---|-------------------------|
| DI 4.6 | DI graduates are able to use current informatics technology to develop, store, retrieve and disseminate information and data. | MNT Community NUTR 540 | Medical record review of assigned patients Website evaluation | Rotation Evaluation Written report | Preceptor Instructor |
| DI 4.7 | DI graduates are able to prepare and analyze quality, financial or productivity data and develop a plan for intervention. | FS Management Hosp FSM | Quality Assurance Study designated by preceptor | Report, Review with preceptor Rotation Evaluation | Preceptor |
| DI 4.8 | DI graduates are able to conduct feasibility studies for products, programs or services with consideration of costs and benefits. | FS Management | Food Specification Assignment Equipment Spec Assignment | Written reports Rotation Evaluation | Preceptors |
| DI 4.9 | DI graduates are able to obtain and analyze financial data to assess budget controls and maximize fiscal outcomes | FS Management | Review Budget and Budgetary controls with preceptor | Review with preceptor | Preceptor |
| DI 4.10 | DI graduates are able to develop a business plan for a product, program or service including development of a budget, staffing needs, facility requirements, equipment and supplies. | Community Project | Business Plan for Community Project (group report) | Written Business Plan | DI Director |
| DI 4.11 | DI graduates are able to complete documentation that follows professional guidelines, guidelines required by healthcare systems and guidelines required by the practice setting. | MNT Community Renal | Assigned patients | Rotation Evaluation | Preceptor |
| DI 4.12 | DI graduates are able to participate in coding and billing of dietetic/nutrition services to obtain reimbursement for services from public or private insurers. | Community | Assigned patients | Rotation Evaluation | Preceptor |
| Community Nutrition Concentration | | | | | |
| | The DI graduate will be able to plan, implement, and evaluate a health and wellness event for the community. The DI graduate will demonstrate assertiveness and negotiation skills while respecting life experiences, cultural diversity and educational background | Community Project | Interns will plan, implement, and evaluate the Community Project | Written Report of Activity and Personal Contribution to event | DI Director/ Peers |

| | | | | | |
|--|---|---|---|--|--|
| | Demonstrate leadership skills by seeking out a local health/wellness group and develop an ongoing relationship. | Throughout DI year | Intern will actively participate with a local health/wellness group. | Summary and self evaluation of participation | DI Director |
| | The DI graduate will be able to develop collaborative relationships within the community. | | | | |
| | The DI graduate will be able to plan, implement, and evaluate a National Nutrition Month activity or event. | February and March of DI Year | Plan, implement, and evaluate a National Nutrition Month activity to be delivered within the community. | Summary and self evaluation Participant evaluation) | DI Director Participants |
| | Demonstrate active participation, teamwork, and contributions in group settings. | Community Project and National Nutrition Month activity | As above | As above | As above |
| | Participate in professional and community organizations | Throughout DI year | Attend/participate in 3 local or regional professional meetings: and 1 state professional meeting. | Record of attendance Summary of events | DI Director |
| | Plans and delivers public presentation for target groups in the community | Throughout the DI year. | Plan and deliver 3 public presentations | Presentation outline Self and attendee evaluation of presentation | DI Director Organizer/preceptor Participants |
| | Participate in dietetic related activities for nutrition education or health/wellness screenings. | Throughout DI year | Participate in 3 events | Record of attendance | Event organizer/Preceptor |

**Central Washington University
Dietetic Internship
School Food Service Management**

Rotation Sites:

| Facilities | Primary Preceptors |
|-----------------------------|---|
| Ellensburg School District | Gwen Sorenson, Food Service Director |
| Yakima School District | Margaret Turner, Child Nutrition Director |
| Selah School District | Jayne O'Hare, Child Nutrition Director Kari Oppliger, Child Nutrition Director |
| West Valley School District | Kristen Blair, Child Nutrition Director |
| Wenatchee School District | Kent Getzin, Chef/Food Service Manager |
| Pasco School District | Jo Donahoo, Child Nutrition Director |
| Richland School District | Denise Christensen, Child Nutrition Director |

Hours:

10 weeks, 40 hours/week, 400 clock hours

Competencies:

The dietetic intern will demonstrate that he/she can:

- DI 1.1: Selects appropriate indicators and measures achievement of quality and productivity outcomes.
- DI 4.8: Conduct feasibility studies for products with consideration of costs and benefits.
- DI 1.3: Justifies products and services using appropriate evidence or data.
- DI 3.3: Demonstrate and promote responsible use of resources.
- DI 3.6: Coordinate procurement, production, distribution and service of goods and services.
- DI 3.7: Develop and evaluate recipes and menus for acceptability and affordability for diverse customer groups.
- DI 4.1: Use organizational processes and tools to manage human resources.
- DI 4.2: Perform management functions related to safety and sanitation of the foodservice environment.
- DI 4.7: Prepare and analyze financial data to assess budget controls and maximize fiscal outcomes.
- DI 4.9: Obtain and analyze financial data to assess budget controls and maximize fiscal outcomes.
- DI 3.2: Communicate effectively through oral, written, electronic and other media.
- DI 1.2: Applies evidence-based guidelines and scientific literature in dietetics practice.
- DI 2.11: Establish collaborative relationships with personnel, staff, and others to facilitate goal attainment.
- DI 2.12: Demonstrates professional values, beliefs, and practices during all internship activities/rotations

Assessments:

- _____ Menu and written evaluation
- _____ Food Specifications for purchasing
- _____ Equipment Specifications, Selection, and Written Justification
- _____ Recipe Standardization (2 recipes)
- _____ Procedure for Equipment Operation and Cleaning
- _____ Time and Motion Study
- _____ Sanitation and Safety Survey
- _____ Catering Event (including cost calculations)
- _____ In-service training
- _____ Mock employee evaluation (written)
- _____ Policy/Procedure
- _____ Quality Assurance Project assigned by preceptor
- _____ Temperature Study
- _____ Rotation Evaluation

Preparation:

- Contact preceptor at least one week prior to the beginning of the rotation. Establish arrival time and location.
- Write 3-6 specific goals you would like to accomplish during this rotation. Include an evaluation of your strengths and weaknesses coming into this rotation. These goals are to be shared in a written format with your preceptor and the DI Director (submit via email) during the first week of the rotation.
- Prior to starting the Food Service Management rotation, review foodservice management resources that you have and those on Blackboard.

Checklist of Activities: The following checklist of activities can be used by the intern to monitor the completion of the FS Mgmt required activities. On the lines provided next to each activity include the completion date and the preceptor's initials.

Didactic Assignments:

- _____ Read:
 - Standards of Professional Practices for Dietetics Professionals in Management and Foodservice Settings
 - Position of the ADA, Society for Nutrition Education, and American School Food Service Association -- Nutrition Services: An Essential Component of Comprehensive School Health Programs
- _____ Complete the purchasing study guide (attached) and review with preceptor.
- _____ Become familiar with terminology used in food service management (see attached). Complete in written format.

Organizational Overview:

- _____ Review organization chart for the facility.

- ___ Review the facility's philosophy, goals, and policies.
- ___ Review foodservice policies and procedures and describe the relationship to organizational goals and policies.
- ___ Discuss importance of departmental objectives and discuss long range planning or strategic plan (10 year plan) with foodservice director.
- ___ Review job descriptions of dietary/foodservice personnel.
- ___ Observe and discuss relationship between foodservice department and other department directors.
- ___ Attend department meetings with foodservice director to observe interaction.
- ___ Identify those outside the department who impact the foodservice operation.

Food/Supply Purchasing and Menu Planning:

- ___ Read the chapter on food purchasing in your Foodservice Management textbook.
- ___ Review First Choice, A Purchasing Systems Manual for School Food Service, National Food Service Management Institute at:
<http://www.nfsmi.org/Information/firstchoice/fcindex.html>
- ___ Write a one month general menu. Prepare a written evaluation of the menu addressing: equipment usage, production flow, food purchasing, personnel needs, customer acceptability, nutritional adequacy, aesthetic quality, menu pattern, and potential for revenue generated. Discuss how the menu functions as a production control. Provide the menu and evaluation to preceptor and discuss with preceptor.
- ___ Write at least two food specifications for purchasing (assigned by your preceptor). Provide to preceptor for review and discussion.
- ___ Participate in food purchasing including taking inventory, writing orders to meet menu/production need, phoning and receiving orders. Complete a food order to a vendor following the procedures used in the facility.
- ___ Whenever possible, participate in interviews with sales representatives, and food brokers.

Equipment:

- ___ Review:
 - A Guide for Purchasing Foodservice Equipment, National Food Service Management Institute at:
<http://www.nal.usda.gov/fnic/schoolmeals/Training/equipment/equipment.html>
 - Developing Equipment Specifications attached
- ___ Identify one piece of equipment needed by the foodservice (check with your preceptor). Develop the desired specifications for that piece of equipment based on the facilities needs. Contact the equipment salesperson(s) and obtain necessary information on at *least two alternatives*. Compare these alternatives to the specifications you have developed and decide which alternative best meets the facilities needs. Review completed assignment with preceptor.
- ___ Prepare a written justification for purchase and write specifications for bid. Include as part of your justification: facility need, safety and sanitation considerations, cost, installation, maintenance, and other related factors. Share with your preceptor.

Food Production:

- _____ Read chapter on Food Production in your Foodservice Management textbook
- _____ Review Recipe Standardization Process by Food Service Management Institute at:
<http://www.nfsmi.org/Information/stdrecipes/process.pdf>
- _____ Develop and standardize two recipes. Conduct taste panel to determine acceptability. Calculate nutrient content and cost per serving. See information attached. Review with preceptor.
- _____ Work under the direction of a supervising cook in each production station (vegetable prep, entree, baking, salad pre, modified diet, and sandwich).
- _____ Observe the flow of food from receiving to service. Identify the procedures used to assure safe, efficient food production.
- _____ Operate all major kitchen equipment under the supervision of a trained operator.
- _____ Write an operating (including safety features) and cleaning procedure for one piece of equipment. Ask your preceptor which piece of equipment s/he would like you to do. Provide your preceptor with a copy of the procedure.
- _____ Complete a written report on the types of production/service systems in foodservice: conventional, commissary, ready prepared (include both cook-chill and cook-freeze), and assembly/serve. See A Guide to Centralized Foodservice Systems by National Foodservice Management Institute at:
<http://www.nfsmi.org/Information/cfs/cfsindex.html>.
- _____ While working in the production area, observe and identify any current production problems. Suggest modifications of production schedule as needed. Communicate changes to the appropriate manager or your preceptor. (e.g. substitution of items, different prep methods, equipment utilization, ect.) to assure control measures are effectively utilized.
- _____ Conduct time and motion study of employee completing a single task. Plan and implement work simplification technique. Summarize in written report.
- _____ Review records pertaining to food usage and production. Explain each type of record produced.
- _____ For the last two weeks of your rotation, assist in supervising all food service operations for an assigned site. (Work with your preceptor to identify the site). Complete all checklists and necessary paperwork.

Safety and Sanitation:

- _____ Read the chapter on Foodservice Sanitation in your Foodservice Management textbook.
- _____ Conduct a sanitation and safety survey of an assigned area or kitchen (with the Dietetic Internship Director). Use sanitation checklist as a guide. Write a memo containing your findings. Submit to the preceptor and the DI Director.
- _____ Schedule and make rounds with a Sanitarian from health district.

Cafeteria Service:

- _____ Observe the service of food to the customer; diagram the flow of food through the cafeteria line. Determine if there are 'bottle necks' in service which could be improved. Offer possible solutions. Share your findings with the preceptor.
- _____ Monitor portion control in cafeteria to include: proper yield from service pans, plate appearance, use of correct serving utensils.

_____ Observe cafeteria employees in safe and sanitary food handling and in the operation of equipment.

_____ Abstract two articles on customer relations, future trends, personnel, or service concept related to school or university foodservice. Provide a copy to your preceptor.

Catering:

_____ Plan, supervise, and serve a catered event for 15 or more people. (Work with your Preceptor to identify this event.) This will consist of the overall planning for the event including menu planning, purchasing of food/supplies, employee scheduling, set-up, and clean-up. It may involve working outside normal hours.

_____ Complete temperature check sheet for catered event to assure proper serving temperatures.

_____ Prepare a written report of the catered event, include menu planning, purchasing needs, production needs, set-up of event (diagram), evaluation of service, sanitation principles involved and final evaluation. Calculate food cost, manpower hours, and labor efficiency.

Training and Education:

_____ Identify in-service training needs of staff with your preceptor. Plan and deliver an in-service. Provide outline, self-critique and three participant critiques to preceptor and DI Director.

_____ Develop informational materials/ displays to promote nutrition and provide factual information in the cafeteria. Materials may relate to National Nutrition Month.

Human Resource Management:

_____ Read the chapter on Human Resource Management in your Foodservice Management textbook.

_____ Prepare a work schedule for an assigned position. (Check with your preceptor regarding the position). Work with an employee who does the position for at least one day prior to writing the work schedule. Provide a copy to your preceptor. Review with preceptor.

_____ Write one mock evaluation for a foodservice employee, preferably an employee with whom you have had an opportunity to work. Review with your preceptor.

_____ Develop or revise a policy/procedure as assigned by the preceptor. See the handout on writing a policy and procedure in your notebook as a guide.

_____ Review with your preceptor the processes of recruiting and filling a food service staff position. Include job description, review/development, and requisition, posting procedure, interviewing, and hiring.

_____ Review with your preceptor, procedures for orientation to include: setting up an employee file, physical exam, orientation, dietetics department orientation, employee handbook, evaluations, and schedules.

_____ If possible, participate in the interviewing and hiring of a new employee. Make an appointment with the human resource department at your facility to discuss the hiring procedures used by the organization.

Fiscal Resource Management:

_____ Read the following:

- The Chapter on Financial Planning in your Foodservice Management textbook
- Quality Financial Decision Making, National Foodservice Management Institute.

_____ Review and discuss with the preceptor the principles of budgeting, including the importance of statistical data in compiling budgets.

_____ Review monthly cumulative summary report of operations and discuss its significant the preceptor.

_____ Review the inventory report, weekly inventory payment schedule, and meal conversion form with the preceptor and determine weekly costs per meal.

_____ Calculate in writing: food cost per meal, non-food cost per meal, and total cost per meal, variances in budgeted food cost vs. actual (can use catered meal).

Quality Assurance:

_____ Read the chapter on Quality Assurance in your Foodservice Management textbook

_____ Conduct a quality assurance study under the direction of your preceptor. Write report of the study.

_____ Abstract one article related to quality assurance (related to school foodservice or institutional foodservice and share with your preceptor).

_____ Conduct a temperature study for two day's meal deliveries to assess adequacy of delivery system. Monitor temperatures and length of exposure to danger zone temperatures of the different deliveries. If the temperatures are not appropriate, evaluate why this may have occurred and make recommendations about possible solutions to correct the problem.

Prepare written report with recommendations for your preceptor.

_____ Conduct a plate waste study.

At the Completion of the Food Service Management Rotation:

- Schedule the final evaluation of the rotation. See the DI General Guidelines for further instructions.
- Complete a summary of your experiences during this rotation. The summary should include if and how the self-development goals written prior to the rotation were met. It should also include a detailed evaluation of the "whole" experience, including the preceptor, the assignments, and how the experience benefitted you, the intern, both personally and professionally. Submit the summary electronically.
- Complete the evaluation form for the preceptor(s) you worked with during the rotation. The evaluation form is available on Blackboard. Complete one form for each preceptor that you worked with enough that you feel you can provide an effective evaluation. Submit the form electronically. The evaluation(s) will be shared with the preceptor(s) in a summary format at the end of the internship year.

**Central Washington University
Dietetic Internship
Intern Performance Evaluation
Food Service Management Rotation**

Performance Level:

- **E = Exceeds the performance criteria**
- **M = Meets the performance criteria**
- **U = Unable to meet the performance criteria**

Provide comments as appropriate to support the rating.

| Performance Criteria | Rating (M, E, U) | Comments to Support Rating |
|--|---------------------|----------------------------|
| DI 1.1: Select appropriate indicators and measure achievement of programmatic, quality, productivity, economic or other outcomes. | | |
| Uses outcome of time motion study for appropriate quality and productivity outcomes. Temperature | | |
| Conducts temperature studies and determines appropriate corrective actions when needed. | | |
| DI 3.7: 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. | | |
| Plans menus which take into consideration the needs of the customers and the foodservice operation. | | |
| Standardizes a recipe using appropriate procedures. | | |
| Understands the various aspects of food production including principles of food preparation. | | |
| DI 1.3: Justify programs, products, services and care using appropriate evidence or data. | | |
| Develops appropriate food specifications considering the needs of the facility. | | |
| Develops appropriate equipment specifications considering the needs and capabilities of the facilities. | | |

| Performance Criteria | Rating (M, E, U) | Comments to Support Rating |
|---|---------------------|----------------------------|
| DI 2.2: Demonstrate professional writing skills in preparing professional communications. | | |
| Develops letter of justification for equipment purchase appropriate for administration or other stakeholders. | | |
| Develops written materials that are clear and concise, appropriate for the audience and neat and organized. <ul style="list-style-type: none"> ➤ Policy/Procedure ➤ Equipment Operation and Cleaning ➤ Other documents as assigned | | |
| DI 2.3: Design, implement and evaluate appropriate presentations for diverse target audiences. | | |
| DI 2.4: Use effective education skills to facilitate behavior change. | | |
| Conducts an effective in-service training session. | | |
| DI 2.11: Establish collaborative relationships with cooks, staff, administrators and support personnel to facilitate goal attainment. | | |
| Demonstrates an appreciation for all employee positions within the kitchen and can assist with the position when needed. | | |
| Is able to effectively supervise employees in the completion of a task. | | |
| DI 3.3: Promote responsible use of resources including employees, money, time, water, energy, food and disposable goods. | | |
| DI 3.6: Coordinate procurement, production, distribution and service of goods and services. | | |
| Demonstrates understanding the principles of inventory control and the impact on purchasing and maintaining appropriate stock. | | |
| DI 4.1: Use organizational processes and tools to manage human resources | | |
| Participates in the hiring, training, and evaluating of employees. | | |
| DI 4.2: Perform management functions related to safety and sanitation that affect employees, customers, patients, facilities and food. | | |
| Identifies appropriate safety and sanitation concerns. Develops realistic solutions. | | |

| Performance Criteria | Rating (M, E, U) | Comments to Support Rating |
|---|---------------------|----------------------------|
| DI 4.5: Conduct clinical and customer service quality management activities. | | |
| Makes appropriate recommendations based on quality assurance data gathered. | | |
| DI 4.7: Prepare and analyze quality, financial or productivity data and develop a plan for intervention. | | |
| DI 4.9: Obtain and analyze financial data to assess budget controls and maximize fiscal outcomes. | | |
| Demonstrates understanding of basic cost accounting. | | |
| Can accurately cost food, equipment, and meal production. | | |
| DI 2.1: Practice in compliance with current federal regulations and state statues and rules, as applicable and in accordance with accreditation standards and the ADA Scope of Dietetics Practice Framework, Standards of Professional Performance and Code of Ethics for the Profession of Dietetics. | | |
| DI 2.8: Demonstrate initiative by proactively developing solutions to problems. | | |
| DI 2.12: Demonstrate professional attributes such as advocacy, customer focus, risk taking, critical thinking, flexibility, time management, work prioritization and work ethic within various organizational cultures. | | |
| Observes the policies and procedures of the facility: ➤ Maintains confidentiality regarding patient information and hospital affairs ➤ Adheres to department dress code | | |
| Communicates effectively with preceptors, support personnel, and facility employees. Consistently delivers a clear message. | | |
| Demonstrates good “people skills” – works effectively with people. Is a team player. | | |
| Attend to health and personal matters in a manner that does not conflict with work schedule. | | |
| Demonstrates initiative; can work independently if needs. | | |
| Takes responsibility for own learning. Seeks additional learning experiences. | | |
| Demonstrates dependability/reliability. Follows through with assigned responsibilities. | | |

| Performance Criteria | Rating (M, E, U) | Comments to Support Rating |
|---|---------------------|----------------------------|
| Conducts self in a professional manner. ➤ Provides assistance to patients/families in a courteous and timely manner. ➤ Completes assignments on time. ➤ Compiles information in a concise, logical, neat manner. | | |

Intern Strengths:

Areas for continued growth:

Overall Grade:

_____ S = Satisfactory - Meets or exceeds criteria
 _____ U = Unsatisfactory – Does not meet performance criteria

Days Missed: _____ Reason: _____ Time made up: _____

Evaluators: _____ Date _____ Evaluators: _____ Date _____
 Evaluators: _____ Date _____ Evaluators: _____ Date _____
 Intern: _____ Date _____ DI Director: _____ Date _____

**Central Washington University
Dietetic Internship
Medical Nutrition Therapy A – Community Hospital**

Rotation Sites:

| Facilities | Primary Preceptors |
|------------------------------------|--------------------------|
| Toppenish Hospital | Nancy Truit, RD |
| Kennewick General Hospital | Ariel Erben, RD |
| Kittitas Valley Community Hospital | MaryJo Morrissey, MS, RD |
| Central Washington Hospital | Carla Ruhs, RD |

Hours:

4 weeks, 40 hours/week, 160 clock hours

Competencies:

The dietetic intern will demonstrate that he/she can consistently:

- Accurately assesses nutrition status of individuals and groups.
- Appropriately diagnose nutrition problems and creates accurate PES statements.
- Plan and implement appropriate nutrition intervention(s) including prioritizing the nutrition diagnosis, formulating a nutrition prescription, establishing goals, and selecting and managing intervention(s).
- Monitor and evaluate problems, etiologies, signs, symptoms, and the impact of the nutrition intervention on the nutrition diagnosis.
- Communicate effectively through oral, written, electronic and other media.
- Complete documentation that follows professional guidelines, healthcare system guidelines, and facility guidelines.
- Establish collaborative relationships with patients, healthcare personnel, staff, and others to facilitate goal attainment.

Assessments:

As the following assessment tools are completed, have the preceptor initial and date. .

_____ Nutrition Education (type) _____

_____ Nutrition Education (type) _____

_____ Care Plan #1: Diagnosis _____

_____ Care Plan #2: Diagnosis _____

_____ Rotation Evaluation _____

Preparation:

- Contact the primary preceptor early in the week prior to your assigned start date for the MNT A rotation. Determine the time and location for beginning the rotation.
- Write 3-6 specific goals you would like to accomplish during this rotation. Include an evaluation of your strengths and weaknesses coming into this rotation. These goals are to be shared in a written format with your preceptor and the Internship Director (submit via email) during the first week of your rotation.

- ❑ Prior to starting the MNT rotation, obtain “Outline of Disease States” assignment from Internship Manual on Blackboard. Complete first four diseases/conditions prior to beginning MNT A. The other conditions/diseases must be completed prior to beginning MNT B.
- ❑ Establish arrival and departure hours for this rotation with preceptor. Interns are expected to maintain established hours and stay additional time if needed to accomplish assignments and/or patient care.
- ❑ Turn in disease states assignment to Preceptor. (Diabetes Mellitus, Coronary Artery Disease, Congestive Heart Failure, and Hypertension are to be complete at this time. Continue to work on the remaining diseases/conditions. Assignment is to be complete before beginning MNT B rotation.)
- ❑ Read chapters in your MNT text that relate to DM, CAD, CHF, and HTN. Complete the MNT A assignment that is posted on Blackboard.

Week 1

- ❑ Introduction to diet changes/nutrition risk identification.
- ❑ Observe dietitians complete diet changes.
- ❑ Review and demonstrate charting consistent with format used by the facility.
- ❑ Review screening criteria.
- ❑ Review nutrition risk classification criteria used by facility.
- ❑ Observe basic nutrition education when available.
- ❑ Look through computer printouts, charts, clipboards, and/or cardexes with RD for pertinent information related to patient care including;
 - Not tolerating diet
 - Prolonged NPO, poor intake, supplement needs
 - Weight loss
 - Dysphagia
 - New diagnosis (i.e. cancer, diabetes)
 - New nutrition support
 - Pt education needs
 - Change in medical status (i.e. surgery, dialysis, GI dysfunction) that may alter nutrition needs or plan of care.
- ❑ Review nursing cardexes and/or other means that nursing uses to communicate about patient care.
- ❑ Review common supplement products and usages.

Week 2

- ❑ Participate in diet changes/nutrition risk identification as assigned
- ❑ Observe RD in the assessment and documentation process for patients. *Note taking and questions are strongly encouraged and expected.*
- ❑ Begin assessing nutritional status including energy needs with preceptor.
- ❑ Begin developing nutrition support care plans with preceptor.
- ❑ Initiate data collection from charts with assistance from RD.
- ❑ Use available resources to review any medical terminology, lab values, and diagnoses unfamiliar to you.

- ❑ Select patient for care plan with assistance of preceptor. Diagnosis should include one of the following: DM, CAD, CHF, HTN. Select a patient that is not too complex at this time. However, very few patients present with a single diagnoses. Turn in care plan to DI Director and a copy to preceptor by Monday morning of week 3– email to DI Director.

Week 3 and 4

- ❑ Care plan due to DI Director and preceptor on Monday morning of week 3 and week 4.
- ❑ Independently participate in diet changes, correctly identifying patients at high nutrition risk.
- ❑ Continue to build skills for independently reviewing charts, collecting data, and completing draft assessments and follow-ups with appropriate documentation of care plan. Review notes with preceptor prior to placing in chart.
- ❑ Recommend appropriate enteral or parenteral nutrition support as needed.
- ❑ Observe RD provide nutrition education as available.
- ❑ Provide 2 educations independently with RD observation and evaluation
- ❑ Continue to use available resources to review any medical terminology, lab values, and diagnoses unfamiliar to you.
- ❑ During week 3, select another patient for care plan with the assistance of your preceptor. The patient should include one of the following diagnoses: DM, CAD, CHF, HTN. And, the patient should be somewhat more complex than the one from week 2 – a combination of diagnoses or increasing complexity to plan of care. Turn in care plan to DI Director and a copy to preceptor by Monday morning of week 4 – email to DI Director.

At the Completion of the Medical Nutrition Therapy A Rotation:

- ❑ Schedule the final evaluation for the rotation. See the DI General Guidelines for further instructions.
- ❑ Complete a summary of your experiences during this rotation. The summary should include if and how the self-development goals written prior to the rotation were met. It should also include a detailed evaluation of the “whole” experience, including the preceptor, the assignments, and how the experience benefited you, the intern, both personally and professionally. Submit the summary electronically.
- ❑ Complete the evaluation of the preceptor(s) you worked with during the rotation. The preceptor evaluation form is on Blackboard. Submit the completed evaluation form electronically. The evaluation(s) will be shared with the preceptor(s) in a summary format at the end of the internship year.

**Central Washington University
Dietetic Internship
Medical Nutrition Therapy B – Large Hospital**

Rotation Sites:

| Facilities | Primary Preceptors |
|---|--------------------------|
| Kadlec Medical Center Richland, Washington | Mary Ceto, RD, CD, CNSD |
| Yakima Valley Memorial Hospital Yakima, Washington | Katie Wolff, RD, CD |
| Yakima Regional Medical Center Yakima Washington | Patricia Edwards, RD, CD |
| Central Washington Hospital Wenatchee, Washington | Carla Ruhs, RD, CD |

Hours:

7 weeks, 40 hours/week, 280 clock hours

Competencies:

The dietetic intern will demonstrate that he/she can consistently:

- Accurately assesses nutrition status of individuals and groups.
- Appropriately diagnose nutrition problems and creates accurate PES statements.
- Plan and implement appropriate nutrition intervention(s) including prioritizing the nutrition diagnosis, formulating a nutrition prescription, establishing goals, and selecting and managing intervention(s).
- Monitor and evaluate problems, etiologies, signs, symptoms, and the impact of the nutrition intervention on the nutrition diagnosis.
- Communicate effectively through oral, written, electronic and other media.
- Complete documentation that follows professional guidelines, healthcare system guidelines, and facility guidelines.
- Select appropriate indicators and measure achievement of clinical outcomes.
- Applies evidence-based guidelines and scientific literature in dietetics practice.
- Assigns appropriate patient care activities to DTRs and other support personnel.
- Establish collaborative relationships with patients, healthcare personnel, staff, and others to facilitate goal attainment.

Assessments:

As the following assessment tools are completed, have the preceptor initial and date.

_____ Nutrition Education (type)/Self Eval _____

_____ Nutrition Education (type)/Preceptor _____

_____ Nutrition Education (type)/Self Eval _____

_____ Nutrition Education (type)/Preceptor _____

_____ Care Plan #1: Diagnosis _____

_____ Care Plan #2: Diagnosis _____

_____ Care Plan #3: Diagnosis _____

_____ Rotation Evaluation

Preparation:

- Contact the primary preceptor early in the week prior to your assigned start date for the MNT B rotation. Determine the time and location for beginning the rotation.
- Complete the “Outline of Disease States” assignment that was started in MNT A. The completed assignment is to be turned into your preceptor at the beginning of MNT B.
- Write 3-6 specific goals you would like to accomplish during this rotation. Include an evaluation of your strengths and weaknesses coming into this rotation. These goals are to be shared in a written format with your preceptor and the Internship Director (submit via email) during the first week of your rotation.
- Prior to starting the rotation, complete Medical Terminology and Laboratory Assessment assignment.

Schedule of Activities:

- **The following schedule is suggested to assist in developing similar expectations for both the intern and preceptor. Schedule adjustments are likely, depending on facility staffing, intern progress, opportunities for activities, and other facility demands.**
- **Interns should expect constructive criticism throughout this rotation. Preceptors are trying to give you the best learning experience and prepare you for the RD exam.**
- **Internet use while in the facility should be reserved for research related to work at the facility.**
- **Completion of case studies, assignments, and projects should be completed on your own time unless all patients have been assessed/followed and you have checked with your preceptor.**

Week 1: Screening/Introduction to MNT at facility

Hours are _____, unless otherwise specified. Intern is responsible to ask the preceptor to identify scheduled hours.

Preparation: Monday Hours: _____

- Turn in “Outline of Disease States” assignment to preceptor. Assignment is to be complete and include all diseases/conditions.
- Turn in Medical Terminology and Laboratory Assessment assignments. Discuss with preceptor. Keep in notebook for reference.
- Spend afternoon with RD reviewing screening process.

Diet Changes: Starting Tuesday Hours: _____

- Introduction to diet changes/nutrition risk identification specific for facility.
- Observe dietitians complete diet changes.

Screening: Week One

- Review and observe DAR charting.
- Review screening criteria. Student able to verbalize screening process and demonstrate screening skills consistent with facility standards.
- Review nutrition risk classification criteria (specific to facility).

- ❑ Observe basic nutrition education by diet tech.
- ❑ Look through charts, clipboards and cardexes with RD or diet tech for pertinent information related to patient care including;
 - Not tolerating diet
 - Prolonged NPO, poor intake, supplement needs
 - Weight loss
 - Dysphagia
 - New diagnosis (i.e. cancer, diabetes)
 - New nutrition support
 - Pt education needs
- ❑ Change in medical status (i.e. surgery, dialysis, GI dysfunction) that may alter nutrition needs or plan of care.
- ❑ Review nursing cardexes.
- ❑ Review common supplement products and usages. Demonstrate our department's procedures and communication techniques to the diet office using MenuPlus for providing supplements to patients.

Screening Week Goals:

- ❑ Able to provide staff relief for diet tech
- ❑ Independently interview and correctly assess patients at low and moderate nutritional risk in a timely manner.
- ❑ Provide appropriate intervention by developing appropriate nutrition care plans.
- ❑ Observe at least two educations. Provide one nutrition education with RD observing and completing evaluation form.
- ❑ Develop your notebook to include notes and other resources to aid in accurate assessment and critical thinking skills.
- ❑ Independently research questions as they arise using all available resources.

Week 2: Clinical

Diet Changes: 7:30 a.m.

- ❑ Participate in diet changes/nutrition risk identification as assigned.

Monday 8:15 a.m.

- ❑ Observe RD in the assessment and documentation process for high-risk patients. *Note taking and questions are strongly encouraged and expected.*
- ❑ Begin assessing nutritional status including energy needs with preceptors.
- ❑ Begin developing nutrition support care plans for both enteral and TPN with preceptors.
- ❑ Initiate data collection from charts with assistance from RD.
- ❑ Use available resources to review any medical terminology, lab values, and diagnoses unfamiliar to you.

Tuesday to Friday

- ❑ Continue data collection from patient charts.
- ❑ Practice DAR charting, RD to review all notes before they are placed in the medical record.

- ❑ Ask Katie for case studies and knowledge test to be completed by the beginning of week 3.
- ❑ Select patient for care plan. Patient diagnoses should be increasing in complexity over that of your previous two care plans. Generally the patient selected should be moderate to high risk. Care plan is due Monday am of week 3 to DI Director (by email) and a copy to your preceptor.

By Friday

- ❑ Independently collect data from charts
- ❑ Initiate draft DAR charting, review note with RD **prior to** placing in chart.
- ❑ Continue to use available resources to review any medical terminology, lab values, and diagnoses unfamiliar to you.

Contact RD when ready to have chart signed. Dial 6 and enter pager # 286, 285 or other specified number followed by the extension where you are.

Week 3-4

- ❑ Independently participate in diet changes, correctly identifying patients at high nutrition risk.
- ❑ Review completed case studies and knowledge test with Katie or other RD.
- ❑ Identifying patients at nutrition risk due to:
 - Not tolerating diet
 - Prolonged NPO, poor intake, supplement needs
 - Weight loss
 - Dysphagia
 - New diagnosis (i.e. cancer, diabetes)
 - New nutrition support
 - Pt education needs
 - Change in medical status (i.e. surgery, dialysis, GI dysfunction) that may alter nutrition needs or plan of care.
- ❑ Independently review charts, collect data, and complete draft assessments and follow-ups with appropriate documentation of care plan. Review notes with RD prior to placing in chart. Should be able to accurately assess & complete the following:
 - SBO
 - Pancreatitis
 - DM
 - Renal
 - Cancer
- ❑ Recommend appropriate enteral or parenteral nutrition as needed.
- ❑ Prioritize patients appropriately. Complete consults and high risk patients first.
- ❑ Observe RD provide renal and diabetic educations.
- ❑ Provide 2 educations independently with RD observation and completion of evaluation form.
- ❑ Begin independent work on multi-disease nutrition assessments and follow-up (depending on census, staffing, and student abilities this may include: pediatric and ICU nutrition assessments).

- ❑ Continue to use available resources to review any medical terminology, lab values, and diagnoses unfamiliar to you.
- ❑ During week 3, select patient on enteral or parenteral nutrition for care plan. Care plan is due Monday am of week 4 to DI Director (by email) and a copy to your preceptor.

Week 5-7

- ❑ Complete diet changes individually.
- ❑ Advance to multi-disease high risk nutrition assessments and follow-up.
- ❑ Begin RD staff relief on basic high nutrition risk disease states.
- ❑ Provide patient education independently at the discretion of the RD.
- ❑ Continue to use available resources to review any medical terminology, lab values, and diagnoses unfamiliar to you.
- ❑ Continue building confidence, independence with education, documentation, and team participation.
- ❑ Complete staff relief as needed.

Checklist of Activities: The following checklist of activities can be used by the intern to monitor the completion of MNT required activities.

Nutrition Care Process

- _____ Review nutrition screening and nutrition care standards of the facility.
- _____ Conduct nutrition screening on new admits using nutrition care plan sheets, give to preceptors.
- _____ Observe preceptor in the nutrition care process to include: screening, interviewing, assessment of nutritional status, and writing, implementing, and evaluating care plans of clients.
- _____ Conduct nutrition screening, interviewing, assessment, and writing, implementing, and evaluation of care plans. Obtain preceptor’s co-signature on all work entered into the medical record. Assess 2-3 patients on Thursday and Friday of the second week and gradually increase your patient contacts.
- _____ Make appropriate referrals to community programs as needed in the nutrition care plan and evaluation of nutrition care.
- _____ Review nutrition care recommendations with nursing staff, physicians and other necessary health care professionals, e.g. speech therapy, social work, OT, PT etc.
- _____ Communicate nutrition care recommendations to diet clerks and food service staff.
- _____ Conduct at least one self-critique of a counseling session with a patient. Discuss with your preceptor and provide a copy to the internship director.
- _____ Ask the preceptor(s) to complete an Evaluation Form on two of your patient counseling sessions.

Use the following table to record the type of patients you have worked with.

| Patient Diagnosis | Pt Initials/Date | Pt Initials/Date | Pt Initials/Date | Pt Initials/Date |
|-------------------|------------------|------------------|------------------|------------------|
| Cardiology | | | | |
| Oncology | | | | |
| Enteral Feeding | | | | |

| | | | | |
|--------------------|--|--|--|--|
| Parenteral Feeding | | | | |
| Liver Disease | | | | |
| Pancreatitis | | | | |
| Other GI Disease | | | | |
| Decubitus Ulcer | | | | |
| Multiple Trauma | | | | |
| Pulmonary Disease | | | | |
| Obesity | | | | |
| Rehabilitation | | | | |
| DM Type 1 | | | | |
| DM Type 2 | | | | |
| Skilled Nursing | | | | |
| HIV or AIDS | | | | |
| Other: | | | | |
| Other: | | | | |

Observation of Allied Health Professionals

- _____ Observe the placement of a feeding tube.
- _____ Observe indirect calorimetry, if possible.
- _____ Observe a speech pathologist conduct a swallow evaluation.
- _____ Observe a case review of a rehab client.

Nutrition Education and Counseling

- _____ Observe your preceptor(s) providing nutrition counseling to patients.
- _____ Conduct a self-critique of a counseling session with a patient, which you have completed.
- _____ Discuss with your preceptor and provide a copy to the internship director.
- _____ Ask the preceptor to conduct a critique on one counseling session with a patient which you have done. Provide a copy to the internship director.

Therapeutic Diet

- _____ During the third week of your clinical rotation, follow a therapeutic diet of your choice for 2 -3 days (consult with Dietetic Internship Director or your preceptor). Keep a daily diary including all foods and drinks consumed feelings having a dietary restriction imposed upon you involuntarily. Write a summary of your experiences detailing how this experience will help you with your future counseling experiences. Examples of diets include: diabetic diet, renal diet, low sodium diet, low fat diet (40 gram), glute free diet, dash diet etc.

Special Project

- _____ Complete a project assigned by your preceptor.

Professional Development

- _____ Conduct and present library research for one patient case study (diagnosis selected jointly by student and preceptor). Arrange with your preceptor(s) to present your case study to them during the last two weeks of your rotation. You will also present your case study at the dietetic internship seminar. Submit a written copy of the references you used to

develop your case study at the time of case study presentation. See attached case study outline.

Staff Relief

- _____ Assume functions and responsibilities of a clinical dietitian for three weeks as assigned by preceptor.
- _____ Conduct nutrition screening, interviewing, assessment, and writing, implementing and evaluation of care plans. Obtain preceptor's co-signature on all work entered into the medical record.
- _____ Make appropriate referrals to community programs as needed in the nutrition care plan and evaluation of nutrition care.
- _____ Communicate with nursing staff, physicians and other health care professionals about nutrition care recommendations as appropriate.
- _____ Communicate nutrition care recommendations to diet clerks and foodservice staff.
- _____ Participate in staff meetings, patient care rounds and unit conferences.

At the Completion of the Medical Nutrition Therapy Rotation:

- Schedule the final evaluation for the rotation. See the DI General Guidelines for further instructions.
- Complete a summary of your experiences during this rotation. The summary should include if and how the self-development goals written prior to the rotation were met. It should also include a detailed evaluation of the "whole" experience, including the preceptor, the assignments, and how the experience benefited you, the intern, both personally and professionally. Submit the summary electronically.
- Complete the evaluation of the preceptor(s) you worked with during the rotation. The evaluation form is available on Blackboard. Complete one form for each preceptor that you worked with enough that you feel you can provide an effective evaluation. Submit the form electronically. The evaluation(s) will be shared with the preceptor(s) in a summary format at the end of the internship year.

**Central Washington University
Dietetic Internship
Intern Performance Evaluation
Medical Nutrition Therapy**

Performance Level:

- **E = Exceeds the performance criteria**
- **M = Meets the performance criteria**
- **U = Unable to meet the performance criteria**

Provide comments as appropriate to support the rating.

| Performance Criteria | Rating (M, E, U) | Comments to Support Rating |
|---|---------------------|----------------------------|
| DI 3.1a: Assesses the nutrition status of individuals and groups in a variety of settings. | | |
| Correctly identifies those patients at risk or with special nutritional care needs. | | |
| Obtains nutritionally relevant data from all sources, including the medical record, the patient (and patient family) and from other health care team members. | | |
| Uses appropriate interviewing skills, e.g. open-ended questions, closed-ended questions. | | |
| Correctly calculates energy, protein and fluid needs. | | |
| DI 3.1b: Diagnose nutrition problems and creates accurate PES statements. | | |
| DI 1.2: Applies evidence-based guidelines and scientific literature in dietetics practice. | | |
| Demonstrates knowledge of disease states and current nutritional practices. | | |
| Identifies desired nutrition outcomes based on the patient's medical and nutrition needs. | | |

| Performance Criteria | Rating (M, E, U) | Comments |
|--|---------------------|----------|
| DI 3.1c: Plan and implement appropriate nutrition intervention(s) including prioritizing the nutrition diagnosis, formulating a nutrition prescription, establishing goals, and selecting and managing intervention(s). | | |
| Selects appropriate methods for feeding patients (i.e. initial feeding, transitional feeding, consistency etc.) | | |
| Recommends appropriate ways to achieve nutritional requirements. | | |
| DI 3.1d: Monitor and evaluate problems, etiologies, signs, symptoms, and the impact of the nutrition intervention on the nutrition diagnosis. | | |
| Monitors patient and plan of care to assure that patients are receiving appropriate feedings. | | |
| DI 2.4: Use effective education and counseling skills to facilitate behavior change. | | |
| Communicates information to patient/families in an effective manner based on patient needs. | | |
| Uses open ended questions, active listening skills, etc. to make the most of the education process. | | |
| DI 2.11: Establish collaborative relationships with patients, healthcare personnel, staff, and others to facilitate goal attainment. DI 3.2: Communicate effectively through oral, written, electronic and other media. | | |
| Makes appropriate referrals. | | |
| Contributes to discussions with health care team members. | | |
| Participates in patient care conferences as appropriate. | | |

| Performance Criteria | Rating (M, E, U) | Comments |
|---|---------------------|----------|
| DI 4.11: Complete documentation that follows professional guidelines, healthcare system guidelines, and facility guidelines. | | |
| Develops entries for the medical record, which are accurate, concise, using correct grammar, spelling and terminology. | | |
| Documents counseling process including assessment of the patient/family's understanding/comprehension and plan to improve patient knowledge when it does not meet requirements. | | |
| DI 2.1: Practice in compliance with current federal regulations and state statues and rules, as applicable and in accordance with accreditation standards and the ADA Scope of Dietetics Practice Framework, Standards of Professional Performance and Code of Ethics for the Profession of Dietetics. | | |
| DI 2.12: Demonstrate professional attributes such as advocacy, customer focus, risk taking, critical thinking, flexibility, time management, work prioritization and work ethic within various organizational cultures. | | |
| Observes the policies and procedures of the facility: <ul style="list-style-type: none"> ➤ Maintains confidentiality regarding patient information and hospital affairs ➤ Adheres to department dress code | | |
| Communicates effectively with preceptors, support personnel, and facility employees. Consistently delivers a clear message. | | |
| Demonstrates good "people skills" – works effectively with people. Is a team player. | | |
| Attend to health and personal matters in a manner that does not conflict with work schedule. | | |
| Demonstrates initiative; can work independently if needs. | | |
| Takes responsibility for own learning. Seeks additional learning experiences. | | |
| Demonstrates dependability/reliability. Follows through with assigned responsibilities. | | |

| Performance Criteria | Rating (M, E, U) | Comments |
|---|---------------------|----------|
| Conducts self in a professional manner. ➤ Provides assistance to patients/families in a courteous and timely manner. ➤ Completes assignments on time. ➤ Compiles information in a concise, logical, neat manner. | | |

Intern Strengths:

Areas for continued growth:

Overall Grade:

- _____ S = Satisfactory - Meets or exceeds criteria
- _____ U = Unsatisfactory – Does not meet performance criteria

Days Missed: _____ Reason: _____ Time made up: _____

Evaluators: _____ Date _____ Evaluators: _____ Date _____

Evaluators: _____ Date _____ Evaluators: _____ Date _____

Intern: _____ Date _____ DI Director: _____ Date _____

**Central Washington University
Hospital Food Service Management
Self Development Goals**

Rotation Sites:

| Facilities | Primary Preceptors |
|---------------------------------|--------------------|
| Central Washington Hospital | Jenny Sorom, RD |
| Kadlec Hospital | Mary Ceto, RD |
| Yakima Regional Medical Center | Zella Nitz, RD |
| Yakima Valley Memorial Hospital | Katie Wolff, RD |

Hours:

3 weeks, 40 hours/week, 120 clock hours

Competencies:

The dietetic intern will demonstrate that he/she can:

- DI 1.1: Select appropriate indicators and measure achievement of programmatic, quality, productivity, economic or other outcomes.
- DI 3.7: 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.
- DI 2.2: Demonstrate professional writing skills in preparing professional communications.
- DI 2.3: Design, implement and evaluate appropriate presentations for diverse target audiences.
- DI 2.11: Establish collaborative relationships with cooks, staff, administrators and support personnel to facilitate goal attainment.
- DI 3.3: Promote responsible use of resources including employees, money, time, water, energy, food and disposable goods.
- DI 3.6: Coordinate procurement, production, distribution and service of goods and services.
- DI 4.1: Use organizational processes and tools to manage human resources
- DI 4.2: Perform management functions related to safety and sanitation that affect employees, customers, patients, facilities and food.
- DI 4.5: Conduct clinical and customer service quality management activities.

Assessments:

- _____ Theme Meal/Catering Event
- _____ Purchasing and receiving
- _____ Employee In-service
- _____ Patient Satisfaction Surveys
- _____ Food Costing Assignment
- _____ Quality Improvement Assignment
- _____ Rotation Evaluation

Preparation:

- ❑ Contact preceptor at least one week prior to the beginning of the rotation. Establish arrival time and location.
- ❑ Write 3-6 specific goals you would like to accomplish during this rotation. Include an evaluation of your strengths and weaknesses coming into this rotation. These goals are to be shared in a written format with your preceptor and the DI Director (submit via email) during the first week of the rotation.
- ❑ Prior to starting the Food Service Management rotation, review foodservice management resources that you have and those on Blackboard.

Activities/Assignments:

- _____ Review Organization chart for the facility
 - _____ Review Policies and procedures of the Department
 - _____ Review Diet manual
 - _____ Observe updating of patient cardexes/diet orders, nourishment orders, and trayline
- Look for:

- how nourishments are written out
- Could time in the diet office be used more effectively?
- problems with patient trayline
- common diets in the hospital
- average age of patients
- most common disease states
- how the patient cardex system works
- how patient diet orders are recorded, changed and followed
- how patient menus are collected
- how menu choices that vary from the menu are tallied
- the role of the late office clerk at lunch and at dinner
- how are nourishments are recorded
- how are patients screened

_____ From your work in the diet office, writes a short overview of our “typical” patient population. Include factors such as age, common diet prescription, common diagnoses, and ratio of males to females and which floors work with which patient diagnoses most often.

_____ Write a short summary of the different products that are sent to patients as nourishments. These items are found in the storeroom. Summary should include the name of the product, what disease states it is designed to be useful for and what characteristics make it unique for that disease state

Assignment: Record the following information for five food items: how long it took to make, what sanitation standards were met/not met when preparing this item, if the recipe was followed, initial temperatures, cooking time, end temperature, holding temperature (each half hour) and serving temperature (each half hour). Also include the ideal cooking, holding and serving temperatures for each of the five food items as well as a chart that rates the taste texture and appearance of each item.

WEEKS TWO & THREE - PROJECTS

The following projects are to be worked on throughout the second and third weeks of the hospital foodservice rotation. Time is to be scheduled by the intern. Projects are due by Wednesday of the last week. Please ask questions if any of the assignments seem unclear.

INVENTORY – During your rotations, you will need to perform one physical inventory. Have a management team member start you out in the inventory process. Inventory at least six items from the following product categories: paper, chemicals, dry food, produce, dairy, meat and frozen items. Be careful to watch for the units (i.e. boxes, cases, and eaches). ***The inventory sheets are due the day you perform the inventory so that the information can be verified (Tim).*** Also, make note of different can sizes, quantities that foods are purchased in, number of items in inventory and which products are carried in diet and regular forms.

THREE DAY CYCLE MENU – Design a consecutive three day cycle menu which is modified for a selected number of diets. The menu master will be provided as a guide. Diet modifications should include renal, soft, diabetic and regular. Please include exchanges for the diabetic version. Consider, color, texture and consistency in your design, as well as the impact of preparation time. Do not use entrée items on the current patient menu.

MEAL PLANNING/CATERING – If an event is available, you will be asked to be involved in the preparation and execution of a catering event during your rotation. If an event is not available, work with the Food Service Manager on planning a theme day in the cafeteria. Planning should include food purchasing, staff education, decorating, marketing and (if possible) execution of the event. Contact Cindy.

SCOOP AND PAN SIZES – In the cook's area, identify the different pans and serving scoops. For each pan, identify its dimensions, volume and, if possible, the common name of the pan. Determine how many ½ cup servings of gravy would be obtained from each pan. For each scoop, identify the scoop number, the volume of the scoop and how the volume of the scoop relates to the scoop number.

PURCHASING – Grocery orders are placed each Monday & Thursday @ YVMH. Ask Tim to let you observe him putting the grocery order together and placing the order.

PATIENT SATISFACTION – During the course of your rotation you are required to monitor patient satisfaction.

- 1) Perform and tally at least 35 patient satisfaction surveys. Surveys can be obtained from Cindy. Please record the date and the nursing unit for each survey.
- 2) Plan and perform three plate waste surveys on different meals. You will need to create your own form for this assignment. See Katie.

FTE/SCHEDULING PROJECT – Write a four-week rotating employee schedule for the following trayline employees:

- Jane (full time) Trayline #1 Starter
- Ralph (full time) Trayline #2 Cold Food
- Mark (full time) Trayline #3 Hot Food
- Rosemary (full time) Trayline #4 Beverage
- Linda (full time) Trayline #5 Checker
- Kathy (part time) Trayline #6 Relief
- Jacob (part time) Trayline #7 Relief
- Tom (part time) Trayline #8 Relief

Assume the following:

- Positions 1-5 should be scheduled 6:00 – 2:30, 7 days a week.
- Employees work an 8/80-hour overtime schedule (i.e. they are paid OT if they work more than 8 hours/day or 80 hours/2 weeks).
- Employees should have every third weekend off.
- No employee should work more than 5 days without at least one day off.
- Kathy can do 1, 2 and 3.
- Jacob can do 1, 3, 4 and 5.
- Tom can do 2, 4 and 5.

Your schedule should not include planned overtime. Determine how many FTE’s would be used for each two-week period, show your calculations.

SANITATION INSPECTION – During your rotation, watch for sanitation concerns and let one of the managers know what you find. Perform one formal inspection at least once during your rotation. Suggest solutions for any deficiencies found. Provide input on how the form can be improved.

FOODS COSTING – Calculate the total cost (raw food cost and labor) for four cafeteria specials, as specified by Cindy. Use invoices to obtain food/supply expenses. Don’t forget that for most foods, losses in volume or weight occur during production. As purchased (AP) is the amount of food bought before processing. Edible portion (EP) is the weight of an item without skin, bones, fat for eating after it is cooked. To obtain an accurate food cost you should consider any losses, which occur during production.

As a guide, the cooked yields of selected meat, poultry and fish products are:

| Product | Yield |
|---------------------------------|--------------|
| Ground Beef (80% lean) | 77% |
| Chicken breast (skin and bones) | 66% |
| Turkey, breast whole | 66% |

Fresh fruits and vegetables are often peeled, seeded and cooked and decrease in weight before consumption, as shown below:

| Product | Yield |
|--------------------------|--------------|
| Apples, cored and peeled | 80% |
| Bananas | 65% |
| Watermelon | 52% |

| | |
|-------------------------|-----|
| Pears | 57% |
| Broccoli | 78% |
| Carrots, cooked | 60% |
| Corn on the cob, cooked | 55% |
| Iceberg lettuce | 76% |

For additional information about product yield, please refer to *Food for Fifty* (Molt, 1977, page 9-20), Table 1.1 'Amounts of Food to serve 50' and Table 1.2 'Approximate Yield in the Preparation of Fresh Fruits and Vegetables'.

RECEIVING – Orders are received on Tuesday & Friday @ 5:30 a.m. On one of the days during your rotation, observe the receiving process with the person checking in the order. Find out who will be doing the receiving by discussing this assignment with Tim.

PATIENT TRAYLINE – It is a requirement that you observe/work at least one trayline per day during your rotation. For four of the traylines, record temperatures of foods just prior to trayline, the temperatures of the first tray taken off the cart on two floors and the temperatures of the last tray taken off the cart on those floors. So the patients are not disrupted, please add an extra tray to the beginning and the end of each cart for the floors you are monitoring. Analyze the patient service in writing, evaluating the benefits and drawbacks from the point of view of the kitchen staff as well as the customer.

EMPLOYEE INSERVICE CLASS – You will be scheduled to do an employee inservice class during your rotation. Inservices are held monthly and may not coincide with your Foodservice Rotation, it may be done during your Clinical Rotation. Discuss the topic for an inservice with your preceptor during the first week of the rotation.

BUDGET/DEPARTMENT STATISTICS – Review department statistics with the manager that pertain to volumes and expenses. Discuss a specific budgeting project with Cindy.

EMPLOYEE MANAGEMENT - Participate in at least two-employee management functions (interview, evaluation, discipline, etc). Discuss with manager your evaluation of the process. Research and write up criteria for handling one of these functions.

QUALITY IMPROVEMENT – Review QI program. Assist in gathering and tabulating data for one month. Suggest 2 new projects (from department/clinical observations). Document what should be tracked and how improvement will be monitored.

TIME & MOTION STUDY- Conduct a study on the cashiers in the cafeteria. Monitor the time it takes for a cash transaction as well as a check transaction. Discuss this assignment with Mike & Katie.

Budget Project Executive Board Dinner

Your budget project will be to plan & cost out a menu for an Executive Board Dinner. Listed below are the specifics in this assignment.

1. Plan menu that will include salad, entrée & dessert.
2. The entrée will include a meat, vegetable and starch.
3. You will need to cost out all food products to come up with a cost per guest.
4. Your budget will be only to spend \$200.00, total, and this dinner must be of the utmost quality.
5. There will be 20 people, which will give you a total of \$10.00 per person to spend.
6. You will also need to include in your cost; labor, linens and flowers.
7. To retrieve any information to help you in your project, please see Cindy Parkey.

At the Completion of the Hospital Food Service Management Rotation:

- Schedule the final evaluation of the rotation. See the DI General Guidelines for further instructions.
- Complete a summary of your experiences during this rotation. The summary should include if and how the self-development goals written prior to the rotation were met. It should also include a detailed evaluation of the “whole” experience, including the preceptor, the assignments, and how the experience benefitted you, the intern, both personally and professionally. Submit the summary electronically.
- Complete the evaluation form for the preceptor(s) you worked with during the rotation. The evaluation form is available on Blackboard. Complete one form for each preceptor that you worked with enough that you feel you can provide an effective evaluation. Submit the form electronically. The evaluation(s) will be shared with the preceptor(s) in a summary format at the end of the internship year.

**Central Washington University
Dietetic Internship
Intern Performance Evaluation
Hospital Food Service Management Rotation**

Performance Level:

- > **E = Exceeds the performance criteria**
- > **M = Meets the performance criteria**
- > **U = Unable to meet the performance criteria**

Provide comments as appropriate to support the rating.

| Performance Criteria | Rating (M, E, U) | Comments to Support Rating |
|--|---------------------|----------------------------|
| DI 1.1: Select appropriate indicators and measure achievement of programmatic, quality, productivity, economic or other outcomes. | | |
| Promotes outcome of time motion study for appropriate quality and productivity outcomes. | | |
| DI 3.7: 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. | | |
| Plans menus which take into consideration the needs of the customers and the foodservice operation. | | |
| Understands the various aspects of food production including principles of food preparation. | | |
| DI 2.2: Demonstrate professional writing skills in preparing professional communications. | | |
| Develops written materials that are clear and concise, appropriate for the audience and neat and organized. | | |
| DI 2.3: Design, implement and evaluate appropriate presentations for diverse target audiences. | | |
| Conducts an effective in-service training session. | | |
| DI 2.11: Establish collaborative relationships with cooks, staff, administrators and support personnel to facilitate goal attainment. | | |
| Demonstrates an appreciation for all employee positions within the kitchen and can assist with the position when needed. | | |
| Is able to effectively supervise employees in the completion of a task. | | |

| Performance Criteria | Rating (M, E, U) | Comments to Support Rating |
|---|---------------------|----------------------------|
| DI 3.3: Promote responsible use of resources including employees, money, time, water, energy, food and disposable goods. DI 3.6: Coordinate procurement, production, distribution and service of goods and services. | | |
| Demonstrates understanding the principles of inventory control and the impact on purchasing and maintaining appropriate stock. | | |
| DI 4.1: Use organizational processes and tools to manage human resources | | |
| Participates in the hiring, training, and evaluating of employees. | | |
| DI 4.2: Perform management functions related to safety and sanitation that affect employees, customers, patients, facilities and food. | | |
| Identifies appropriate safety and sanitation concerns. Develops realistic solutions. | | |
| DI 4.5: Conduct clinical and customer service quality management activities. | | |
| Makes appropriate recommendations based on quality assurance data gathered. | | |
| DI 4.7: Prepare and analyze quality, financial or productivity data and develop a plan for intervention. DI 4.9: Obtain and analyze financial data to assess budget controls and maximize fiscal outcomes. | | |
| Demonstrates understanding of basic cost accounting. | | |
| Can accurately cost food, equipment, and meal production. | | |
| | | |

| Performance Criteria | Rating (M, E, U) | Comments to Support Rating |
|--|---------------------|----------------------------|
| <p>DI 2.1: Practice in compliance with current federal regulations and state statues and rules, as applicable and in accordance with accreditation standards and the ADA Scope of Dietetics Practice Framework, Standards of Professional Performance and Code of Ethics for the Profession of Dietetics.</p> <p>DI 2.8: Demonstrate initiative by proactively developing solutions to problems.</p> <p>DI 2.12: Demonstrate professional attributes such as advocacy, customer focus, risk taking, critical thinking, flexibility, time management, work prioritization and work ethic within various organizational cultures.</p> | | |
| <p>Observes the policies and procedures of the facility:</p> <ul style="list-style-type: none"> ➤ Maintains confidentiality regarding patient information and hospital affairs ➤ Adheres to department dress code | | |
| <p>Communicates effectively with preceptors, support personnel, and facility employees. Consistently delivers a clear message.</p> | | |
| <p>Demonstrates good “people skills” – works effectively with people. Is a team player.</p> | | |
| <p>Attend to health and personal matters in a manner that does not conflict with work schedule.</p> | | |
| <p>Demonstrates initiative; can work independently if needs.</p> | | |
| <p>Takes responsibility for own learning. Seeks additional learning experiences.</p> | | |
| <p>Demonstrates dependability/reliability. Follows through with assigned responsibilities.</p> | | |
| <p>Conducts self in a professional manner.</p> <ul style="list-style-type: none"> ➤ Provides assistance to patients/families in a courteous and timely manner. ➤ Completes assignments on time. ➤ Compiles information in a concise, logical, neat manner. | | |

Intern Strengths:

Areas for continued growth:

Overall Grade:

_____ S = Satisfactory - Meets or exceeds criteria
_____ U = Unsatisfactory – Does not meet performance criteria

Days Missed: _____ Reason: _____ Time made up: _____

| | | | |
|-------------------|------------|--------------------|------------|
| Evaluators: _____ | Date _____ | Evaluators: _____ | Date _____ |
| Evaluators: _____ | Date _____ | Evaluators: _____ | Date _____ |
| Intern: _____ | Date _____ | DI Director: _____ | Date _____ |

**Central Washington University
Dietetic Internship
Intern Performance Evaluation
Community Nutrition Rotation**

Performance Level:

- **E = Exceeds the performance criteria**
- **M = Meets the performance criteria**
- **U = Unable to meet the performance criteria**

Provide comments as appropriate to support the rating.

| Performance Criteria | Rating (M, E, U) | Comments to Support Rating |
|---|---------------------|----------------------------|
| DI 3.1a: Assesses the nutrition status of individuals and groups in a variety of settings. | | |
| Correctly identifies those patients at risk or with special nutritional care needs. | | |
| Obtains nutritionally relevant data from all sources, including the medical record, the patient (and patient family) and from other health care team members. | | |
| Uses appropriate interviewing skills, e.g. open-ended questions, closed-ended questions. | | |
| Correctly identifies those clients at risk or with special nutrition needs. | | |
| DI 3.1b: Diagnose nutrition problems and creates accurate PES statements. | | |
| DI 1.2: Applies evidence-based guidelines and scientific literature in dietetics practice. | | |
| Demonstrates knowledge of disease states and current nutritional practices. | | |
| Identifies desired nutrition outcomes based on the patient's medical and nutrition needs. | | |

| Performance Criteria | Rating (M, E, U) | Comments |
|---|---------------------|----------|
| DI 3.1c: Plan and implement appropriate nutrition intervention(s) including prioritizing the nutrition diagnosis, formulating a nutrition prescription, establishing goals, and selecting and managing intervention(s). | | |
| Selects appropriate methods for feeding patients | | |
| Recommends appropriate ways to achieve nutritional requirements. | | |
| DI 3.1d: Monitor and evaluate problems, etiologies, signs, symptoms, and the impact of the nutrition intervention on the nutrition diagnosis. | | |
| Monitors patient and plan of care to assure that patients are receiving appropriate nutrition care. | | |
| DI 2.4: Use effective education and counseling skills to facilitate behavior change. DI 2.14: Demonstrate assertiveness and negotiation skills while respecting life experiences, cultural diversity and educational background. | | |
| Communicates information to patient/families in an effective manner based on patient needs. ➤ Literacy level ➤ Cultural differences | | |
| Uses open ended questions, active listening skills, etc. to make the most of the education process. | | |
| Establishes rapport, is pleasant, smiles, puts clients at ease and maintains eye contact | | |
| Keeps counseling session on track. | | |
| DI 2.6: Assigns appropriate patient care activities to other healthcare providers and support personnel. DI 2.7: Refer clients and patients to other professionals and services when needs are beyond individual scope of practice.. | | |
| Makes appropriate referrals. | | |
| Contributes to discussions with health care team members. | | |

| Performance Criteria | Rating (M, E, U) | Comments |
|---|---------------------|----------|
| DI 4.6: Use current informatics technology to develop, store, retrieve and disseminate information and data. DI 4.11: Complete documentation that follows professional guidelines, healthcare system guidelines, and facility guidelines. DI 4.12: Participate in coding and billing of dietetic/nutrition services to obtain reimbursement for services. | | |
| Develops entries for the medical record, which are accurate, concise, using correct grammar, spelling and terminology. | | |
| Documents counseling process including assessment of the patient/family's understanding/comprehension and plan to improve patient knowledge when it does not meet requirements. | | |
| DI 2.1: Practice in compliance with current federal regulations and state statues and rules, as applicable and in accordance with accreditation standards and the ADA Scope of Dietetics Practice Framework, Standards of Professional Performance and Code of Ethics for the Profession of Dietetics. DI 2.12: Demonstrate professional attributes such as advocacy, customer focus, risk taking, critical thinking, flexibility, time management, work prioritization and work ethic within various organizational cultures. | | |
| Observes the policies and procedures of the facility: ➤ Maintains confidentiality regarding patient information and hospital affairs ➤ Adheres to department dress code | | |
| Communicates effectively with preceptors, support personnel, and facility employees. Consistently delivers a clear message. | | |
| Demonstrates good "people skills" – works effectively with people. Is a team player. | | |
| Attend to health and personal matters in a manner that does not conflict with work schedule. | | |
| Demonstrates initiative; can work independently if needs. | | |
| Takes responsibility for own learning. Seeks additional learning experiences. | | |
| Demonstrates dependability/reliability. Follows through with assigned responsibilities. | | |

| Performance Criteria | Rating (M, E, U) | Comments |
|---|---------------------|----------|
| Conducts self in a professional manner. ➤ Provides assistance to patients/families in a courteous and timely manner. ➤ Completes assignments on time. ➤ Compiles information in a concise, logical, neat manner. | | |

Intern Strengths:

Areas for continued growth:

Overall Grade:

_____ S = Satisfactory - Meets or exceeds criteria

_____ U = Unsatisfactory –Does not meet performance criteria

Days Missed: _____ Reason: _____ Time made up: _____

Evaluators: _____ Date _____ Evaluators: _____ Date _____

Evaluators: _____ Date _____ Evaluators: _____ Date _____

Intern: _____ Date _____ DI Director: _____ Date _____

Central Washington University
Dietetic Internship
Community Nutrition Rotation

Rotation Sites:

| Facilities | Primary Preceptors |
|--|-----------------------|
| Benton Franklin Health Department Kennewick, WA | Annie Goodwin, RD, CD |
| Columbia Valley Community Health Wenatchee, WA | Laurie Riegert, RD |
| Quincy Community Health Center Quincy, WA | Wendy Shelly, RD |
| Yakima Valley Farm Worker's Clinic Yakima Valley (various sites) | Brianna Rasmussen, RD |
| Yakima Neighborhood Health Services Yakima Valley (various sites) | Chelsy Leslie, RD, CD |

Hours:

7 weeks, minimum of 32 hours/week, 224 clock hours minimum.

Competencies:

The dietetic intern will demonstrate that he/she can:

- DI 3.1a: Accurately assesses nutrition status of individuals and groups.
- DI 3.1b: Appropriately diagnose nutrition problems and creates accurate PES statements.
- DI 3.1c: Plan and implement appropriate nutrition intervention(s) including prioritizing the nutrition diagnosis, formulating a nutrition prescription, establishing goals, and selecting and managing intervention(s).
- DI 3.1d: Monitor and evaluate problems, etiologies, signs, symptoms, and the impact of the nutrition intervention on the nutrition diagnosis.
- DI 3.2: Communicate effectively through oral, written, electronic and other media.
- DI 4.6: Use current informatics technology to develop, store, retrieve and disseminate information and data.
- DI 4.11: Complete documentation that follows professional guidelines, healthcare system guidelines, and facility guidelines.
- DI 4.12: Participate in coding and billing of dietetic/nutrition services to obtain reimbursement for services from public or private insurers.
- DI 1.2: Applies evidence-based guidelines and scientific literature in dietetics practice.
- DI 2.6: Assigns appropriate patient care activities to DTRs and other support personnel.
- DI 2.7: Refer clients and patients to other professionals and services when needs are beyond individual scope of practice.
- DI 2.11: Establish collaborative relationships with patients, healthcare personnel, staff, and others to facilitate goal attainment.
- DI 2.14: Demonstrate assertiveness and negotiation skills while respecting life experiences, cultural diversity and educational background.

- DI 2.3: Design, implement and evaluate presentations considering life experiences, cultural diversity and educational background of the target audience.
- DI 2.4: Use effective education and counseling skills to facilitate behavior change.

Assessments:

- _____ Case Studies
- _____ Apply Your Knowledge
- _____ Article summaries
- _____ Pathophysiology
- _____ Client interaction/Self Evaluation
- _____ Client interaction/Preceptor Evaluation
- _____ Client education/Self Evaluation
- _____ Client interaction/Preceptor Evaluation
- _____ Literacy evaluation of education materials
- _____ In-service training
- _____ Mid rotation evaluation (optional)
- _____ Rotation evaluation

Preparation:

- Contact the primary preceptor early in the week prior to your assigned start date for the Community Rotation. Determine the time and location for beginning the rotation.
- Write 3-6 specific goals you would like to accomplish during this rotation. Include an evaluation of your strengths and weaknesses coming into this rotation. These goals are to be shared in a written format with your preceptor and the Internship Director (submit via email) during the first week of your rotation.
- Prior to starting the rotation:
 - Read the articles below that are asterisked.
 - Review the Community Nutrition Assignment. Answer as many questions as possible.
 - Review the materials on WIC formulas. They can be found on Blackboard under WIC.

Didactic Assignments:

Write a brief, one-page summary, outlining the main points of each article. You may complete the summary in paragraph or bullet format. Submit the summaries to your preceptor.

- _____ *Position of the American Dietetic Association: Nutrition and Lifestyle for Healthy Pregnancy Outcomes
- _____ Diabetes and Pregnancy
- _____ Infant feeding: a critical look at infant formulas
- _____ *Position of the American Dietetic Association: Promotion of Breast-Feeding
- _____ Initial Management of Breastfeeding
- _____ Barriers to the Use of WIC Services
- _____ *The Start Healthy Feeding Guidelines for Infants and Toddlers
- _____ Model for Multicultural Nutrition Counseling Competencies
- _____ Cultural Diversity: Eating in America, Mexican-American

_____ Position of the American Dietetic Association: Total Diet Approach to Communicating Food and Nutrition Information

_____ Read “*How to Get Your Kid to Eat...But not Too Much*”, or “*Feeding with Love and Good Sense*” by Ellen Satter or view the Ellen Satter videotape (usually available at the community clinics). With your summary, include a discussion of how the principles addressed in the book can be used during the community rotation.

_____ By the end of the first week: Complete the first set of questions (1-13). Give to your preceptor.

_____ By the end of the second week: Complete the “Cases Studies” and “Apply Your Knowledge” sections of the Community Nutrition Assignment. Give to your preceptor.

_____ By the end of the third week: Read the Ellen Satter book or watch the video tapes.

_____ By the end of the fourth week: Complete the “Pathophysiology” section of the Community Nutrition Assignment.

_____ By the fifth week: Finish reading all of the articles and write the article summaries.

Resources which might be helpful include:

- Trams, C and Pipes, P: Nutrition in Infancy and Childhood
- Bright Futures in Practice: Nutrition (available at the WIC site)
- Worthington-Roberts, B and Rodwell Williams, S: Nutrition in Pregnancy and Lactation

Organization Overview and Management:

_____ Discuss the facilities philosophy, goals, and policies with preceptor.

_____ Determine the organizational structure of the clinic and the responsibilities of the various persons working within the structure.

_____ Discuss with preceptor the role of impacting legislation and regulatory measures governing nutrition services programs.

_____ Participate in the management responsibilities of a WIC supervisor:

- Review with your preceptor his/her responsibilities as a manager.
- Complete chart reviews/audits to determine whether appropriate nutrition assessment and interventions have been initiated (assigned by your preceptor).

_____ Review the following sections of the WIC Manual: Dietary Assessment, Anthropometrics, Risk Factors, WIC High risk, & Formula Substitutions.

Nutrition Care Process:

- _____ Review high-risk criteria for MSS/WIC clients.

- _____ Observe preceptor in the nutrition care process to include: screening, interviewing, assessing nutrition status and implementing nutrition care.

- _____ Conduct nutrition screening, interviewing, assessing, and implementing of nutrition care for assigned clients: (consult with preceptor as necessary and obtain preceptor's co-signature on all work entered in the medical record). Indicate below when you have worked with the identified type of client by a check mark and your initials. All lines do not need to be filled in, but interns should attempt to see a variety of the type of clients listed.

| | | | |
|--|-------|-------|-------|
| Anemia (Low hematocrit) | _____ | _____ | _____ |
| Breast Feeding | _____ | _____ | _____ |
| Infants (Include < and> 6 mos.) | _____ | _____ | _____ |
| Pregnancy (wt loss) | _____ | _____ | _____ |
| Pregnancy (High wt gain) | _____ | _____ | _____ |
| Pregnancy (Adolescent) | _____ | _____ | _____ |
| Obesity (Wt for ht >95%) | _____ | _____ | _____ |
| Gestational Diabetes | _____ | _____ | _____ |
| Medical Patients (Specify diet modifications) | _____ | _____ | _____ |
| | _____ | _____ | _____ |
| | _____ | _____ | _____ |

- _____ Conduct self-critique on at least two client interactions. Use the Interview Observation Sheet that can be found on Blackboard. Discuss with preceptor and include Interview Observation Sheets in your portfolio.
- _____ Ask preceptor to conduct a critique of at least two client interactions. Include Interview Observation Sheets in your portfolio.
- _____ Participate in case management conference(s) with preceptor and participate in discussion with medical team.
- _____ Observe preceptor providing nutrition education to a group, if possible.
- _____ Accompany your preceptor or a home health nurse on a home visit, if possible.

Education Materials:

- _____ Review three pieces of education materials used by the clinic. Evaluate the literacy level of each and the appropriateness of the materials for the intended population. Resources about Testing Readability of materials are available on Blackboard. Write a short report. Share with your preceptor. Include the report in your portfolio.

In-Service Training:

- _____ Plan and conduct an in-service training session assigned by your preceptor. Have your preceptor and 5 participants evaluate the session. Provide an outline of the training to your preceptor 1-week prior to the training. Write a self-critique of the training. Include outline, evaluations, and self critique in your portfolio.

Additional Experiences:

Food Bank:

- _____ Spend time observing at a food bank; help to prepare food boxes for clients served and distribute food boxes. Check with your preceptor/clinic staff for food bank locations.
- _____ Discuss with preceptor your experience. What types of foods are available? Where do they get the food? What types of clients does the food bank serve? Did you observe any special dietary needs?

At Completion of the Community Nutrition Rotation

- Schedule the final evaluation of the rotation. See the DI General Guidelines for further instructions.
- Complete a summary of your experiences during this rotation. The summary should include if and how the self-development goals written prior to the rotation were met. It should also include a detailed evaluation of the “whole” experience, including the preceptor, the assignments, and how the experience benefitted you, the intern, both personally and professionally. Submit the summary electronically.
- Complete the evaluation form for the preceptor(s) you worked with during the rotation. The evaluation form is available on Blackboard. Complete one form for each preceptor that you worked with enough that you feel you can provide an effective evaluation. Submit the form electronically. The evaluation(s) will be shared with the preceptor(s) in a summary format at the end of the internship year.

Community Nutrition Assignments

Please answer the following questions. The completed answers should be included in your Community Rotation Portfolio/Notebook for use throughout the rotation and submitted to the DI Director at the time of the Final Intern Evaluation.

1. WIC contracts with the state for infant formula in order to get a reasonable price. Review the information about WIC formulas that can be found on Blackboard under WIC Resources. Create a list of Standard Formulas and Therapeutic Formulas. List these according to milk-based and soy-based. In what circumstances would it be appropriate to use a specialized formula (example: failure to thrive). In what circumstances would a soy-based formula be used?
2. List the progression of solids during the infants first twelve months. Also include an assessment of feeding skills during each stage. When is it appropriate to introduce liquids from a cup?
3. List the appropriate nutritional intervention/advice for the following common feeding problems in children: poor appetite, picky eater, food jags, and exclusion of a food group (example: no vegetables). At what age should weaning from the bottle be initiated and at what age should this process be completed? What is baby bottle tooth decay and how can it be avoided?
4. How would you increase the caloric density of infant formula and why might this be necessary?
5. Identify the caloric and protein needs of infants and children. Briefly discuss the changes in recommended levels with age and growth.
6. What nutritional intervention/behavior changes would be appropriate for children \geq the 95th percentile for weight for height? (Hint: amount of juice, Kool-Aid, pop, candy, sweet, chips, Cheetos, etc. in the diet, when the child was weaned, environmental changes/stress, and genetics all play a part). What nutritional intervention/behavior changes would be appropriate for children \leq the 5th percentile for weight for height? (Hint: genetics, high calorie snacks, finger foods, etc).
7. What are the appropriate laboratory values for hematocrit and hemoglobin in women? Infants? Children? What is the difference between a low and a deficient hematocrit/hemoglobin level? What would be the appropriate nutrition intervention for both?
8. What is the appropriate weight gain for a pregnant woman within the range of IBW during the first trimester? During the second and third trimesters? For a woman having twins? A teenager? An underweight teenager? For someone who is \geq 120% IBW? Be sure to also list appropriate weight gain per week and per month during the second and third trimesters for each of the above.
9. What advice would you give to help relieve the following common problems of pregnancy: Nausea? Constipation? Heartburn?
10. List the benefits of breastfeeding. How would you go about promoting breastfeeding to a pregnant woman?
11. How would you determine corrected age for premature infants?
12. What adjustment would be made when assessing growth in children with Downs Syndrome (trisomy disorders)?

13. Name some of the common allergenic foods in infancy and childhood (example: milk protein, wheat, egg white, citrus, etc). What would be the appropriate nutritional therapy for each? At what age would you introduce honey to a child's diet? At what age would you introduce cow's milk?

CASE STUDIES

#1: FAILURE TO THRIVE

CS is a twelve month old male presenting with a decrease in weight and height velocity of approximately three to four months. Fat stores were severely depleted. Protein stores were normal. His height is 71.5 cm and weight is 7.2 kg. CS is being breastfed with no foods or supplements at this time. His mother follows a vegan diet with poor knowledge for nutrition.

Answer the following questions given the information above (Include a list of references used):

1. Plot CS on the appropriate growth grids.
2. Determine CS's ideal body weight for height age.
3. Determine CS's energy and protein needs.
4. Provide recommendations on how to solve CS's failure to thrive.

#2: GESTATIONAL DIABETES MELLITUS

Juanita is a 32 y.o. mother of five she is pregnant at twelve weeks gestation. She has been pregnant nine times (gravida 9). She has five children, ages 14, 12, 5, 2, and about 1. She has had two early spontaneous abortions (2 SpAb) and delivered one still-born. Her last two children weighed 8.5 pounds and 9 pounds, respectively, at birth. All of her children were breastfed and Juanita plans to nurse this child too. She gained 35 pounds with her last pregnancy and lost about 25 pounds before this conception. She is currently 62 inches, weighs 163 pounds, pre-pregnancy weight was 160 pounds, and her blood pressure is 120/80. Her Hct is 35% and her Hgb is 11 g. Her literacy level is approximately at the 8th grade level. She will be attending a Prenatal Nutrition class and will be receiving WIC.

A diet screen reveals consumption of mostly rice, beans, tortillas, chilies, eggs and occasionally meats. She likes milk, but usually drinks soft drinks with her meals.

Answer the following questions given the information above (include a list of references used):

1. List and explain five nutritional risk factors for Juanita.
2. Analyze her diet for deficiencies and make recommendations on what she should eat.
3. You are responsible for teaching the Prenatal Nutrition class. Describe four areas you would cover in your class.
4. Plot her weight at twelve weeks on the appropriate weight gain grid.

At 30 weeks Juanita has gained 30 pounds and the fetus appears large as evident by the ultrasound (US). The physician performs a glucose tolerance test (GTT) which reveals one hour plasma glucose of 165 mg/dl and two hour value of 130 mg/dl. Gestational diabetes mellitus (GDM) is diagnosed. The physician decides not to prescribe antihyperglycemics (insulin) at this time and wants to attempt control through diet. A referral is made to you for dietary counseling.

Answer the following questions given the information above (Include a list of references used):

1. What are normal GTT values and what is considered good control in GDM?
2. Describe the method and content of dietary counseling you would give.
3. What recommendations would you make about exercise?
4. Plot the following weight history:

| | |
|----------|------------|
| 18 weeks | 172 pounds |
| 24 weeks | 185 pounds |
| 33 weeks | 195 pounds |

#3: DIETARY ASSESSMENTS

Analyze the following diets on diet recall forms. What recommendations would you make for each woman based on your dietary assessment?

16 y.o. pregnant woman:

| | | |
|---------------|---------------------|----------|
| Breakfast: | Chocolate milk (2%) | 12 oz. |
| | glazed donut | 1 |
| Snack: | apple | 1 |
| | Pepsi | 12 oz. |
| School Lunch: | bologna | 2 oz |
| | white bread | 2 slices |
| | mayonnaise | 1 Tbsp. |
| | mustard | 1 Tbsp. |
| | carrot sticks | 2 |
| | cookies | 2 |
| | milk (2%) | 8 oz. |
| | Snack: | Doritos |
| | cheese | 2 oz. |
| | salsa | 1/8 cup |
| Dinner: | macaroni & cheese | 1 ½ cup |
| | green beans | ½ cup |
| | roll | 1 |
| | butter | 1 Tbsp. |
| | Pepsi | 12 oz. |

35 y.o. pregnant woman:

| | | |
|-----------------|---------------------|--------|
| Snack (in bed): | saltine crackers | 10 |
| Breakfast: | fried egg | 1 |
| | hash browns | ½ cup |
| Lunch: | whole milk | 8 oz. |
| | Top Ramen | 2 cups |
| | Saltine crackers | 8 |
| | orange juice | 8 oz. |
| Snack: | apple | 1 |
| Dinner: | hot dogs (with bun) | 2 |
| | mustard | 2 tsp. |
| | baked beans | ½ cup |
| | coleslaw | ½ cup |
| | whole milk | 16 oz. |

OPTIONAL CASE STUDIES:

The following three case studies are optional. However, they may be assigned during certain rotations. They contain good information on children with special health care needs and, if you can find the time, would be beneficial and informational for you to complete. Topics included are congenital heart disease, cerebral palsy, and cystic fibrosis. Include the case studies in your portfolio if you complete them.

#4 (optional): CYSTIC FIBROSIS

AL is a female with CF who was diagnosed at 4 months of age. Her treatment included a high calorie, high protein formula, pancreatic enzymes and vitamins. She achieved good linear growth at around the 50th percentile. Her weight fluctuated between the 5th and 25th percentile.

AL had pulmonary complication from an early age. At about six years of age, AL was noted to have worsening pulmonary status indicated by an increase number of pulmonary complications, hospitalizations of IV antibiotic therapy, and decreased pulmonary function tests. Her mother also reported that AL had a poor appetite and a decreased caloric intake.

AL's physician recommended a gastrostomy tube (G-tube) for long-term supplemental feedings since she was not able to meet her nutrition needs by diet alone. Her mother was very receptive to this idea. Her tube feedings were gradually increased to 3 ½ ounces/hour of Osmolite from 8 PM to 6 AM daily via a feeding pump. She takes her pancreatic enzymes before the feedings begin.

1. Define cystic fibrosis. What are the nutritional implications?
2. Why are pancreatic enzymes needed?
3. Why was Osmolite the preferred formula?
4. Calculate AL's current energy needs and the amount of energy she is receiving from supplemental G-tube feedings. Answer in SOAP format.

#5 (optional): FEEDING PROBLEMS OF CHILDREN: TEAM APPROACH

Suzy is a four-year-old child with cerebral palsy. She was referred for a feeding evaluation and intervention related to the lack of weight gain and inadequate intake of food.

Dietary information indicated that the mother was giving a total of 10-12 jars of assorted strained baby foods. Her usual caloric intake was 900 kilocalories and 42 grams of protein. Her nutrition assessment indicated height and weight below the 5th percentile, with little or no gain in weight in the past year.

Suzy has had problems tolerating milk, and receives approximately 6-8 ounces per day. Analysis of a three-day dietary record indicated a low intake of calcium, folic acid, and zinc. In addition she consumed very little water and fiber and had frequent problems with constipation.

Suzy had poor head and trunk control, was unable to sit unassisted, and was poorly positioned and fed in her mother's lap at home. From an oral-motor assessment, Suzy was identified as a child with tongue thrust and hypersensitivity to unfamiliar tactile stimulation inside her mouth.

1. Define the following terms: tongue thrust, cerebral palsy.
2. Using a team approach, what other disciplines would be seeing Suzy and why?
3. What are some strategies for enhancing nutrition status, both in terms of weight gain, growth and correction of vitamin or mineral deficiencies? Put into a SOAP note.

#6 (optional): CONGENITAL HEART DISEASE

AT was born at 38 weeks gestational age with a birth weight of 3.1 kg and length of 47 cm. A diagnosis of severe tricuspid valve stenosis was made the day after birth, and she underwent several surgeries over the first year of life. Cardiac problems continued after these procedures related to mitral incompetence sustained following a cardiopulmonary arrest at 4 months of age.

Nutritional problems experienced by AT were as varied and complicated as her cardiac course. After her initial surgery, oral feeds were attempted but a weak suck and poor rooting reflex were noted. A neurology consult suggested exaggerated deep tendon reflexes and hypertonia secondary to diffuse cerebral abnormalities. Naso-gastric feeds of concentrated 24 kcal/oz formula were begun as the primary source of energy, while oral feeding therapy continued. She experienced several episodes of mild to moderate congestive heart failure for which she was admitted to the hospital. She was managed with fluid restriction, Digoxin, Lasix, Aldactone, and Captopril. At the same time AT began showing frequent vomiting and failure to thrive. An upper GI series confirmed the diagnosis of gastro-esophageal reflux. Because of the high risk of aspiration and AT's continued growth failure, a Missen fundoplication and gastrostomy tube insertion were performed at 4½ months of age.

Although vomiting ceased to be a problem, oral feeding problems continued, primarily because of tachypnea and cyanosis, leading to fatigue during feeding. The gastrostomy tube provided the majority of calories using a 24 kcal/oz infant formula with added MCT oil to make a 27 kcal/oz. Because the baby was quite fluid sensitive, she was fluid restricted. She also received daily digitalis and diuretic therapy.

Because AT's poor nutritional status was felt to negatively affect her developmental progress (crawling and weight bearing activities), a program of night time gastrostomy feeds was initiated to supplement her caloric intake. Initially, weight gain resulted, but development of significant facial edema after continuous, low rate feeding limited the extent to which this therapy could be used.

Although solids had been introduced at approximately 6 months of age, the child's inconsistent oral feeding skill and reliance on tube feedings prevented the normal progression of food introduction. Solid foods became a significant part of the diet at 17 months of age.

At 26 months of age, AT is eating a mixed diet, drinking 30 kcal/oz supplements 2 times per day and has recently had her gastrostomy tube removed. She is still below the fifth percentile for weight, but has reached the fifth percentile for height. Her weight/height ratio is less than the fifth percentile. She is still maintained on diuretics and has been hospitalized twice in the past year for CHF.

Define tricuspid valve stenosis, congestive heart failure, tachypnea, and cyanosis.

1. Describe the purpose for AT's 4 medications. What are some nutritional implications these medications possess?
2. In SOAP format, provide a nutritional assessment when the gastrostomy tube was placed at 4 ½ month.

APPLY YOUR KNOWLEDGE

Provide a brief answer to the following questions:

1. A new mother is concerned that her baby may not be receiving enough breast milk. What clues can you tell her to watch for?
2. A new mother is concerned that her new born is not taking enough formula. How often and how much should a new born feed?
3. How would you respond to the following question from a young mother? "My baby is 2 months old and I'm nursing him. My mother tells me that I need to start giving him solids. However, the nurse who gave my baby his immunizations said not to start nay solid food until the baby is at least 4 months old. Why should I wait to start solids for so long?"
4. A young pregnant woman tells you that her mother has suggested that she avoid salt and carefully watch her weight gain during pregnancy in order to prevent the development of "toxemia." How would you advise the young woman?
5. Compare the RDA's for the pregnant adolescent to those for the adult woman. Which nutrients relevant to mineral metabolism are needed in increased amounts by the pregnant adolescent?
6. Amy, a 14 y.o. girl, is referred to you for prenatal nutrition counseling. She is three months pregnant and is still experiencing fairly severe morning sickness. She resides with her grandmother who lives on Social Security. Amy now weighs 116 pounds and is 68 inches tall. Her usual weight is 120 pounds and she began menstruating at age 12.
 1. Describe how you would initiate counseling with Amy. What kind of information would be important to obtain form Amy in your initial interview?
 2. What suggestions would you make for treating the morning sickness?
 3. What information would you give in regards to optimal prenatal weight gain expectancies?
7. The following nutritional assessment data is obtained from a 5 y.o. girl who has a history of multiple allergies, chronic emesis, and diarrhea:

| | | |
|-------------------------|--------------------|---------|
| <u>At birth:</u> | weight | 3.6 kg |
| | length | 51 cm |
| | head circumference | 34.5 cm |

| | | |
|-------------------------|--------------------|--------|
| <u>At 5 y.o.</u> | weight | 15 kg |
| | length | 105 cm |
| | head circumference | 50 cm |

1. What are the patient's percentiles for age at birth and at 5 years?
2. The child is referred for dietary counseling for a milk-free, wheat-free diet. Her usual dietary intake is as follows: 6 oz. Isomil formula, 1 egg, 1 cup rice, 3 oz. Meat, 1 cup juice, ½ cup vegetables, and one 3.5 oz. bag of corn chips. Write a SOAP note summarizing her nutritional status and your recommendations for energy and protein intake.

SUGGESTED REFERENCES

The following references are very helpful in assessing pregnant women, children, and infants. They may be used throughout the whole assignment.

Manual of Pediatric Nutrition by Kristy Hendricks and W. Allan Walker
Neonatal Nutrition and Metabolism by William Hay
Food Intolerance in Infancy by Robert Hamburger
Nutrition During Pregnancy, Institute of Medicine, National Research Council

PATHOPHYSIOLOGY

Briefly define the following disease states so that you will be familiar with them during your rotation. Include appropriate nutritional therapy if indicated. Include this assignment in your Community Rotation Portfolio/Notebook.

1. Hyperemesis Gravidarum
2. Gestational Diabetes
3. Pregnancy Induced Hypertension (PIH)
4. Cerebral Palsy (CP)
5. Celiac Disease
6. Cystic Fibrosis
7. Phenylketonuria (PKU)
8. Hydrocephalic Shunt
9. Gastroesophageal reflux in infants
10. Failure to Thrive (FTT)
11. Down's Syndrome
12. Prematurity
13. Low Birth Weight (LBW)
14. Lesch-Nyhan Disease
15. Short Bowel Syndrome in Infants
16. Bronchopulmonary Dysplasia (BPD)
17. Acute Respiratory Failure
18. Prader Willi Syndrome
19. Attention Deficit Disorder

**Central Washington University
Dietetic Internship
Renal Rotation**

Rotation Sites:

| Facilities | Primary Preceptors |
|---|--------------------|
| DaVita Inc, Yakima Dialysis | Gerri Jennings, RD |
| DaVita Inc, Mt Adams Dialysis Center DaVita Inc, Union Gap Dialysis Center | Brenda Collins, RD |
| DaVita Inc, Mid-Columbia Kidney Center | Lisa March, RD |
| Tri-Cities Kidney Center | Carol Fellows, RD |
| Central Washington Dialysis Center | Linda Jastad, RD |

Hours:

2 weeks, 40 hours/week, 80 clock hours

Competencies:

The dietetic intern will demonstrate that he/she can consistently:

- DI 3.1a: Assesses nutrition status of individuals and groups.
- DI 3.1b: Appropriately diagnose nutrition problems and creates accurate PES statements.
- DI 3.1c: Plan and implement appropriate nutrition intervention(s) including prioritizing the nutrition diagnosis, formulating a nutrition prescription, establishing goals, and selecting and managing intervention(s).
- DI 3.1d: Monitor and evaluate problems, etiologies, signs, symptoms, and the impact of the nutrition intervention on the nutrition diagnosis.
- DI 3.2: Communicate effectively through oral, written, electronic and other media.
- DI 4.11: Complete documentation that follows professional guidelines, healthcare system guidelines, and facility guidelines.
- DI 2.11: Establish collaborative relationships with patients, healthcare personnel, staff, and others to facilitate goal attainment.

Assessments:

_____ Rotation Evaluation

Preparation:

- Contact the preceptor early in the week prior to your assigned start date for the Renal Rotation. Determine the time and location for beginning the rotation.
- Write 3-6 specific goals you would like to accomplish during this rotation. Include an evaluation of your strengths and weaknesses coming into this rotation. These goals are to be shared in a written format with your preceptor and the Internship Director (submit via email) during the first week of your rotation.
- Prior to starting the Renal Rotation, review renal disease in your MNT references.

Didactic Assignments:

Write a summary of the following articles and share with your preceptor.

- _____ A Review of Guidelines for Nutrition Care of Renal Patients
- _____ Cardiac Calcification in Renal Disease – New Insights into a Common Problem
- _____ Management of Protein and Energy Intake in Dialysis Patients

Overview of Organization:

- _____ Review organization chart for renal dialysis unit and identify the role(s) and responsibilities of various health care professionals.
- _____ Review polices and standards of practice applicable to the renal dialysis unit, including the standards for nutrition care.
- _____ Review the job description for the renal dietitian.
- _____ Spend time with dialysis RN reviewing procedures for hemo- and peritoneal dialysis.
- _____ Review any training materials for patients on dialysis.

Nutrition Care Process:

- _____ Interview 2 dialysis patients about their feeling regarding dialysis.
- _____ Observe your preceptor in the nutrition care process: screening, interviewing, assessing nutritional status, implementing care and charting recommendations.
- _____ Review five comprehensive nutrition assessments conducted by your preceptor.
- _____ Conduct nutrition screening on 5-6 patients or more if time allows. Follow the facility policy regarding signing/cosigning of notes in the medical record.
- _____ Review enteral products appropriate for renal disease.
- _____ Review education materials used for patient education.
- _____ *Complete special project(s) assigned by your preceptor.
- _____ Complete a home visit with your preceptor, as appropriate.
- _____ Attend Multidisciplinary and patient/family conference(s), as appropriate.

At the Completion of the Medical Nutrition Therapy A Rotation:

- ❑ Complete a summary of your experiences during this rotation. The summary should include if and how the self-development goals written prior to the rotation were met. It should also include a detailed evaluation of the “whole” experience, including the preceptor, the assignments, and how the experience benefited you, the intern, both personally and professionally. Submit the summary electronically.
- ❑ Complete the evaluation of the preceptor(s) you worked with during the rotation. The preceptor evaluation form is on Blackboard. Submit the completed evaluation form electronically. The evaluation(s) will be shared with the preceptors in a summary format at the end of the internship year.

**Central Washington University
Dietetic Internship
Intern Performance Evaluation
Renal Rotation**

Performance Level:

- **E = Exceeds the performance criteria**
- **M = Meets the performance criteria**
- **U = Unable to meet the performance criteria**

Provide comments as appropriate to support the rating.

| Performance Criteria | Rating (M, E, U) | Comments to Support Rating |
|---|---------------------|----------------------------|
| DI 3.1a: Assesses the nutrition status of individuals and groups in a variety of settings. | | |
| Correctly identifies those patients at risk or with special nutritional care needs. | | |
| Obtains nutritionally relevant data from all sources, including the medical record, the patient (and patient family) and from other health care team members. | | |
| Uses laboratory values to evaluate the clients nutrition needs. | | |
| Correctly calculates energy, protein and fluid needs. | | |
| DI 3.1b: Diagnose nutrition problems and creates accurate PES statements. | | |
| Demonstrates knowledge of disease states and current nutritional practices. | | |
| Identifies desired nutrition outcomes based on the patient's medical and nutrition needs. | | |
| Analyzes assessment data appropriately; uses critical thinking skills. | | |

| Performance Criteria | Rating (M, E, U) | Comments |
|---|---------------------|----------|
| DI 3.1c: Plan and implement appropriate nutrition intervention(s) including prioritizing the nutrition diagnosis, formulating a nutrition prescription, establishing goals, and selecting and managing intervention(s). | | |
| Identifies desired outcomes and client education needs as appropriate. | | |
| Recommends appropriate ways to achieve nutritional requirements. | | |
| DI 3.1d: Monitor and evaluate problems, etiologies, signs, symptoms, and the impact of the nutrition intervention on the nutrition diagnosis. | | |
| Monitors patient and plan of care to assure that patients are receiving appropriate feedings. | | |
| DI 3.2: Communicate effectively through oral, written, electronic and other media. | | |
| Contributes to discussions with health care team members. | | |
| DI 4.11: Complete documentation that follows professional guidelines, healthcare system guidelines, and facility guidelines. | | |
| Develops entries for the medical record, which are accurate, concise, using correct grammar, spelling and terminology. | | |
| DI 2.1: Practice in compliance with current federal regulations and state statues and rules, as applicable and in accordance with accreditation standards and the ADA Scope of Dietetics Practice Framework, Standards of Professional Performance and Code of Ethics for the Profession of Dietetics. | | |
| DI 2.12: Demonstrate professional attributes such as advocacy, customer focus, risk taking, critical thinking, flexibility, time management, work prioritization and work ethic within various organizational cultures. | | |
| Observes the policies and procedures of the facility: ➤ Maintains confidentiality regarding patient information and hospital affairs ➤ Adheres to department dress code | | |
| Communicates effectively with preceptors, support personnel, and facility employees. Consistently delivers a clear message. | | |
| Demonstrates good “people skills” – works effectively with people. Is a team player. | | |

| Performance Criteria | Rating (M, E, U) | Comments |
|---|---------------------|----------|
| Attend to health and personal matters in a manner that does not conflict with work schedule. | | |
| Demonstrates initiative; can work independently if needs. | | |
| Takes responsibility for own learning. Seeks additional learning experiences. | | |
| Demonstrates dependability/reliability. Follows through with assigned responsibilities. | | |
| Conducts self in a professional manner. <ul style="list-style-type: none"> ➤ Provides assistance to patients/families in a courteous and timely manner. ➤ Completes assignments on time. ➤ Compiles information in a concise, logical, neat manner. ➤ Accepts constructive criticism ➤ Respects the rights and opinions of others. ➤ Exemplifies a positive attitude and self confidence. | | |

Intern Strengths:

Areas for continued growth:

Overall Grade:

_____ S = Satisfactory - Meets or exceeds criteria
 _____ U = Unsatisfactory – Does not meet performance criteria

Days Missed: _____ Reason: _____ Time made up: _____
 Evaluators: _____ Date _____ Evaluators: _____ Date _____
 Evaluators: _____ Date _____ Evaluators: _____ Date _____
 Intern: _____ Date _____ DI Director: _____ Date _____

Central Washington University Dietetic Internship Program Policies and Procedures

1. Supervised Practice Rotations
2. Dietetic Intern Schedules and Assignments
3. Credit for Prior Learning
4. Medical/Health and Professional Liability Insurance
5. Background Checks
6. Immunizations and Drug Screen
7. Liability for Travel
8. Student Illness or Absence
9. Care for Injury or Illness While in Supervised Practice
10. Equal Opportunity
11. Retention of Student Records
12. Access to Personal Files
13. Program Completion Requirements
14. DI Verification Statements
15. Supervised Practice Evaluations
16. Didactic Course Evaluation
17. Unsatisfactory Student Performance
18. Discipline and Termination
19. Grievance Procedures
20. Withdrawal and Reinstatement in the Dietetic Internship Program
21. Privacy of Information
22. Program Evaluation
23. Supervised Practice Facilities Selection and Evaluation
24. Affiliation Agreements for Supervised Practice Facilities
25. Review of Policies and Procedures

1. Supervised Practice Rotations

Policy: Supervised practice rotation sites are used to provide experiences for meeting the competencies required to be a qualified entry level dietitian. Placement of interns in supervised practice rotations is for educational purposes. Interns will not be used to replace facility employees and require preceptor supervision throughout the rotation.

Procedure:

1. Interns will be placed in supervised practice sites that have affiliation agreements with Central Washington University.
2. Affiliation agreements will designate that students are not employees of the facility and are not to replace employees.

2. Dietetic Intern Schedules and Assignments

Policy: The dietetic internship director is responsible for planning the supervised practice rotation schedule for each of the students. The affiliating institutions that provide the supervised practice rotations for students will be responsible for planning student experiences and making student assignments under the direction of the dietetic internship director.

Procedure

1. Students will participate in his/her learning experiences on the days of the week and the times scheduled by the affiliating institution. Students may be scheduled to work holidays and/or weekends at the discretion of the internship preceptors in the affiliating institutions.
2. Each student will be given a one-week vacation during the internship.

3. Absences from assigned rotations are made up at the discretion of the internship director and internship preceptors based on the students' progress in the rotation.
4. Students may be excused from supervised practice rotations for special meetings and workshops, which have been approved by the internship director. These meetings and workshop will be considered 'on-duty' time for the intern. However, they will not relieve the intern from successfully completing the competencies and assignments of the rotation.
5. In the event of extenuating circumstances and or special requests* the student will obtain permission from the internship director and make arrangements with the affiliating institution to be absent from a scheduled rotation.
6. The intern is responsible for completing any assigned work and or special projects by the given deadline. This may require being present in the affiliating institution or facility at time other than when the student is scheduled.

*Definition of extenuating circumstances: Death or critical illness in family or personal health needs

*Definition of Special Requests: Job interviews or Family Celebrations

3. Credit for Prior Learning

Policy: Previously completed didactic graduate work will not routinely be considered for credit toward program requirements. A student requesting credit will need to provide sufficient documentation of equivalency of course work and demonstrated competency in the subject. Credit will not be given for previously completed supervised practice from another program, work experience, independent study, or life experience.

Procedure:

1. After acceptance to the dietetic internship, the student may formally request substitution of a previously completed graduate course for a graduate course required in the program.
2. The course must be equivalent in credit hours of instruction.
3. The student must be able to demonstrate equivalency in course content through written documents such as the class syllabus, schedule, and/or work documents from the class. A committee of current faculty will review the submitted materials to determine if sufficient equivalency is found.
4. The student must demonstrate adequate knowledge of the topic by completing a challenge exam for the course with an 80% or better score.
5. Supervised practice from another program, independent study, work experience, or life experience will not be counted towards the scheduled supervised practice hours that are part of the CWU Dietetic Internship. However, significant experience in a specific area of practice will be taken into account when scheduling rotation practice sites. When/where possible, if students demonstrate competency attainment to the preceptor and dietetic internship director, alternate experiences that expand their learning rather than repeat prior experiences will be scheduled.

4. Medical/Health and Professional Liability Insurance

Policy: The affiliation agreements between the dietetic internship program and the institutions or organizations which provide supervised practice experiences for dietetic interns specify that each intern must carry their own medical/health insurance and professional liability insurance. Proof of insurance must be available prior to being placed in the institution or organization.

Procedure:

1. Students must provide the dietetic internship director with proof of medical/health insurance. A copy of the policy or health card, indicating the intern as a covered plan member, is acceptable proof of coverage. (Student Health Insurance is available through the Business Services and Contracts office at CWU.)
2. Professional liability insurance (Student Medical Malpractice Insurance) can be obtained through the Business Services and Contracts office at CWU. Students will provide a copy of the Certificate of Insurance to the DI Director prior to being placed in any supervised practice rotation.

5. Background Checks

Policy: The affiliation agreements between the dietetic internship program and the institutions or organizations which provide supervised practice experiences for dietetic interns specify that each intern must be asked to obtain a criminal history background record from the Washington State Patrol, to release a copy of that record to the school, and to authorize the school to transmit that record to the supervised practice site. Supervised practice sites may refuse placement of students who do not provide the requested records or have a record of prior criminal conduct. (Select facilities/organizations request an agency provided background check specified in their procedures. Students placed in those facilities will be required to also complete the facility specific procedures.) Cost of obtaining background checks are the responsibility of the student.

Procedure:

1. A Fingerprint Card will be provided to the student. Students must arrange for completion of the fingerprints through the local county office or another office within Washington State. A fee (\$10.00 - \$20.00) is usually charged for having the fingerprints completed.
2. The completed card and the processing fee, in the form of a money order (\$40.00), are to be provided to the DI Director during the first 2 weeks of the first summer session. The DI Director will mail the fingerprint cards to the Washington State Patrol for processing.
3. Processing of the fingerprints can take 6 weeks or longer. Students who do not complete the card and submit it to the DI Director in the first 2 weeks of the summer session are at risk of not having the background check completed prior to the beginning of the supervised practice rotations. Students who are unable to be placed in supervised practice rotation sites will be dismissed from the Dietetic Internship Program.
4. Processed fingerprint cards and criminal record reports will be maintained in the student file during the internship year. Cards will be returned to students at the end of the second summer session upon their request.
5. Interns scheduled in facilities that require an agency completed background check will be provided those instructions approximately 4 weeks prior to beginning that supervised practice rotation. The intern will be responsible for completing the designated background check according to the site specific instructions. These background checks have usually cost \$40.00-\$60.00.

6. Immunizations and Drug Screen

Policy: The affiliation agreements between the dietetic internship program and the institutions or organizations which provide supervised practice experiences for dietetic interns specify that the Dietetic Internship will obtain evidence of current immunizations for the following: 1) diphtheria, 2) tetanus, 3) poliomyelitis, 4) measles (rubeola), 5) mumps, 6) rubella (or a positive titer), 7) history of chickenpox or chickenpox immunity titer, 8) hepatitis B immunity status documented by a protective titer, and 9) up-to-date annual PPD testing with history of a two step procedure included. The Dietetic Internship will provide this information to supervised practice sites when requested. All costs for maintaining current immunizations are the responsibility of the student.

Procedure:

1. Students will provide copies of medical documents or immunization records demonstrating currency of status for each of the above immunities to the DI Director prior to being scheduled for supervised practice rotations.
2. Students are also encouraged to take flu vaccine when it becomes available each year. Facilities that request flu vaccine may have the student sign a waiver if the flu vaccine is declined.
3. Additional immunizations or changes in needed immunizations may occur during the year as the affiliation agreements are renewed on a rolling schedule. Students may need to meet those new or changed requirements to be placed in their assigned supervised practice site.

7. Liability for Travel

Policy: Students in the dietetic internship program will provide proof of a valid driver's license and auto insurance upon entering the internship program. Automobile insurance and costs of travel are the responsibility of the dietetic intern.

Procedure:

Each student will provide proof of a valid driver's license and automobile insurance before s/he will be scheduled for the internship rotations in the affiliating institutions. All costs associated with travel to and from supervised practice sites is the responsibility of the student.

8. Student Illness or Absence

Policy: A student will be required to make up dietetic internship experiences if six (6) or more days are missed from the program. In the event that a student misses time in any one rotation, which interferes with the student's ability to meet the competencies of the rotation, the student will be required to make up this time.

Procedure:

1. The preceptors in affiliating institution will notify the internship director of any days missed by the student during his/her rotation. The student will also be responsible for notifying the internship director of any personal absences.
2. Students may be required to make up missed time in the following ways:
 - a. The student may be required to continue in the supervised practice beyond the end of the scheduled rotation.
 - b. If appropriate, the student may be schedule to work extended hours/day or 6 days/week until the time is made up.

9. Care for Injury or Illness While in Supervised Practice

Policy: Affiliation agreements with supervised practice sites provide for emergency health care or first aid for accidents occurring in their facilities. This care is available to the student when they are in the facility for the purpose of supervised practice activities. The cost of the care is the responsibility of the student.

Procedure:

Supervised practice facilities are not responsible for non work related injury or illness. A student who in injured or develops a work related illness should immediately report the circumstance to their preceptor or another facility supervisor, if the preceptor is not available. Emergency care will be provided by the facility. As soon as reasonable, the student should notify the Dietetic Internship Director of the injury or illness. Extended care will be the responsibility of the Dietetic Intern.

10. Equal Opportunity

Policy: Student appointments, rotations, and affiliations are made in accordance with Central Washington University policies and practices that affirm and actively promote the rights of all individuals to equal opportunity in education without regard to race, color, religion, nation origin, sex, sexual orientation, age, marital status, disability or Vietnam era veterans.

Procedure:

1. Inquiries regarding violations of this policy and further information on federal equal opportunity mandates should be directed to the Affirmative Action Office, central Washington University.
2. The Minority Affairs Office is responsible for planning and implementing programs for recruiting, admission, retention and graduation of ethnic minority and economical disadvantaged students into the health profession.

11. Retention of Student Records

Policy: The contents of student records shall be consistent (as listed below) and shall be retained for five years after completion of the program. After this period, unnecessary student records will be destroyed following University procedures.

Procedure:

1. The student records shall contain the following:
 - a. All program application materials
 - b. Official transcript showing undergraduate degree
 - c. Verification Statement of completion of DPD
 - d. Verification Statement of Completion of DI (after completion of program)
 - e. All program performance appraisals
 - f. Copies of special projects and reports
 - g. Communication with the student following completion of the program.
2. These records shall be maintained on file in the internship director's office for a minimum of five years following completion of the dietetic internship program.
3. After a period of five years, the internship director will destroy the following records:
 - a. All student performance evaluation
 - b. All copies of reports and projects, unless necessary for records of the University.
4. The reduced student records, containing Verification Statements, all original application materials, and communications from the student will be retained permanently.

12. Access to Personal Files

Policy: A student is entitled to access to her/his personal records at any time.

Procedure

1. All dietetic intern records are on file in the internship director's office. This includes performance appraisals from affiliating instructions and agencies.
2. The student may request access to his/her record at any time and may review them in the presence of the internship director. A student may not have access to another student's file.
3. Prior to showing the student his/her file, the internship director will remove any program application recommendations, which the intern has waived his/her right to review.

13. Program Completion Requirements

Policy: Students must successfully complete all didactic coursework and supervised practice rotations in the dietetic internship program in order to receive verification of completion of the dietetic internship program.

Procedure:

1. Students must receive an S (satisfactory) grade in each of the Dietetic Practicum courses (NUTR 492a, 492b, 492c), in sequence. To receive the S grade, interns must:
 - a. Satisfactorily complete all assignments for each rotation in the assigned/designated length of time with a M (meets criteria).
 - b. Demonstrate entry-level knowledge and performance skills for competencies indicated for the rotation by receiving a M (meets criteria).
 - c. Receive an S (satisfactory) score on each rotation evaluation that occurs within the Dietetic Practicum course period.
 - d. If any competencies on rotation evaluations are indicated as U (unsatisfactory) but the preceptor has determined the student to have an S score for the rotation, those U competencies must be improved and rated as S in the subsequent rotation.
 - e. A student must arrange in advance, with the internship director, to correct or make up missed assignments or assignments which do not meet the completion criteria.

- f. Additional time in any rotation must be arranged in advance with the dietetic internship director. Additional time will be allowed only for extenuating circumstances and when good progress has been made during the rotation.
2. In the event a Dietetic Practicum course is not successfully completed, it may not be repeated.
3. Students must receive a grade of C or better in all didactic courses.
4. Students must maintain a 3.0 or higher GPA (4.0 scale)
5. Students must successfully complete all didactic coursework and supervised practice rotations within 24 months of beginning the program.

14. DI Verification Statements

Policy: DI Verification Statements will be issued to interns who successfully complete the dietetic internship, including all supervised practice rotations and didactic course work. A copy of the DI Verification Statement will be kept indefinitely to satisfy Accreditation Standards of the Commission on Accreditation for Dietetics Education and to be able to meet requests for DI Verification Statements from students.

Procedure:

1. When DI Verification Statements are completed, 6 copies will be issued with original signature of the DI Director.
2. Four (4) copies will be given to the intern graduate. One (1) copy will be placed in the intern student file held in the DI Director's office. The final copy will be maintained in a file of "Verification Statements" that is a permanent file and will be maintained indefinitely in the DI Director's office.
3. Should the program be discontinued, the "Verification Statements" file will.....

15. Supervised Practice Evaluations

Policy: Supervised practice rotations that exceed five calendar days and include demonstration of competency attainment will include formal performance evaluation using the Supervised Practice Evaluation specific to the rotation. Evaluations will be based on determination of professional behaviors, knowledge and theory, and technical competencies.

Procedure:

1. The student is responsible for consulting the preceptor and Dietetic Internship Director to determine an appropriate time during the last week of the rotation for the rotation evaluation. The Dietetic Internship Director will participate in final and mid rotation evaluations whenever possible. .
2. If for some reason a time for the evaluation is not possible during the last week of the rotation, it should be made as soon as possible after the end of the rotation (within the next week if possible).
3. The student and preceptor will use a written form for the appraisal. The student is responsible for providing the appraisal form to the preceptor. The preceptor will complete the evaluation form and review it with the intern. The intern will conduct a self evaluation using the same form and review it with the preceptor. .
4. The evaluation form completed by the preceptor should be signed by the dietetic intern and preceptor. The signed evaluation form and the dietetic intern's self evaluation should be submitted to the Dietetic Internship Director at the end of the evaluation session or within one week of the evaluation date.
5. All assignments for the rotation without an earlier due date *must* be completed prior to the performance evaluation. Assignments should be given to the preceptor and the Internship Director prior to the evaluation or by a prearranged due date.

16. Didactic Course Evaluation

Policy: Didactic course grades are determined by the course instructor according to the course syllabi provided at the beginning of the course.

17. Unsatisfactory Student Performance

Policy: The student who is not performing satisfactorily in a supervised practice rotation will be notified of his or her unsatisfactory performance as soon as possible to allow for appropriate changes in performance prior to the completion of the rotation.

Procedure:

1. The preceptor will notify the internship director of the student's unsatisfactory performance.
2. The preceptor and/or internship director shall notify the student of his/her unsatisfactory performance as soon as possible.
3. A conference will be held including the student, the preceptor and the program director to discuss the students' performance. The purpose of the conference is to discuss the student performance and to arrive at a plan for correction of the unsatisfactory performance.
4. A written plan will be developed to allow for the student to improve his or her performance. If necessary, a student may be asked to spend additional time in a supervised practice rotation to assure competence.
5. In the event that a student is unable to meet the requirements of the supervised practice experience, a grade of unsatisfactory will be given to the student and the student will not be allowed to proceed in the internship program.

18. Discipline and Termination

Policy: Students who fail to adhere to the policies and procedures of the University, the Dietetic Internship Program, and/or the affiliating institutions or who exhibit inappropriate behavior may be subject to disciplinary action and termination from the program.

Procedure:

1. Students are expected to comply with the policies and procedures of the University, the Dietetic Internship Program, and the affiliating institutions in which they are placed for supervised practice.
2. Disciplinary action, including termination from the program, may occur if a student fails to comply with these policies and procedures.
3. Inappropriate behavior which would be cause for disciplinary action includes, but is not limited to the following:
 - a. Disruptive and disorderly conduct,
 - b. Academic dishonesty, including copying another student's papers,
 - c. Forgery or alteration of records including student records,
 - d. Theft or destruction or misuse of property,
 - e. Harassment of any sort,
 - f. Recklessly engaging in conduct, which creates a substantial risk of physical harm to another person,
 - g. Disclosure of confidential information, including confidential patient information,
 - h. Use of alcohol or illegal drugs while in class or on duty in an assigned affiliation,
 - i. Behavior or conduct, which may interfere with the activities of the affiliating institution(s), the Dietetic Internship Program, or the University.
4. Students may be removed from an affiliating institution and or placed on suspension during the time an investigation is occurring regarding an incident or complaint.
5. Procedures for disciplinary action are outlined in the Central Washington University Undergraduate/Graduate Catalogue -Initiation, Investigation and Disposition of Complaints.

19. Grievance Procedures

Policy: A student has the right to appeal an evaluation of performance believed to be unfair.

Procedure:

1. Immediately after receiving an appraisal believed to be unfair, the student should discuss the appraisal with the appropriate preceptor and internship director.

2. The student should notify the internship director in writing of his/her disagreement with an evaluation within one week after the evaluation has been given.
3. The student may proceed in one of two ways:
 - a. The student may request that a rebuttal statement concerning all or portions of the appraisal be attached to the evaluation in question. A copy of this rebuttal will be sent to the preceptor and the internship director. The preceptor has the right to issue an explanation, which will also be attached to the appraisal with a copy given to the student.
 - b. The student may request a conference with the internship director and the preceptor. If the student feels that satisfactory settlement is not reached, he/she may write a rebuttal statement to attach to the evaluation.
4. In the event that no agreement is reached, the student may initiate a formal appeal through the following the Academic Appeals Process which can be found on the CWU website under the Division of Student Affairs and Enrollment Management. .

20. Withdrawal and Reinstatement in the Dietetic Internship Program

Policy: A student who has satisfactorily completed at least 12 weeks and who withdraws from the internship program in good standing can re-enter the program within a three-year period from the date of withdrawal.

Procedure:

1. A student who wishes to withdraw from the internship program must submit a letter of withdrawal to the internship director.
2. There will be no tuition reimbursement for the student who has withdrawn from the program. Students re-enrolling will be required to pay tuition at the current rate until the program is completed.
3. A former student seeking reinstatement to the internship must notify the internship director of his/her desire to be reinstated.
4. The internship director will determine the length of time and type of experience(s) required to complete the program and the starting date to complete the program.
5. Reinstatement in to the program and completion of program requirements will be made considering the needs of the affiliating institution and the current students in the program. Current students in the program will be given first consideration.

***Reasons for withdrawal in good standing:**

1. Health problems
2. Unforeseen family commitments
3. In cases of an acute personal illness, an intern who has satisfactorily completed at least 6 weeks in the program may be considered for reinstatement.

21. Privacy of Information

Policy A Student's assignments and performance appraisals are a private matter between the student and his/or her supervisors.

Procedure:

1. Student assignments and evaluations are to be discussed in private with only the student, supervising preceptor, and/or the dietetic internship director present. The only exception will be if the student, preceptor, or dietetic internship director requests another person or persons to be present. In this case, the student, preceptor, and internship director must agree to the presence of another party.
2. The student will be given a written copy of all evaluations.
3. The dietetic internship director will keep selected assignments and all written evaluations. All written evaluations will remain part of the student file for five years.
4. Assignments will be returned to the student after they are reviewed.
5. Before any assignments are shared with another student or interested party, the preceptor or dietetic internship director will obtain permission from the student to share the information.

22. Program Evaluation

Policy: A number of methods are used to assess Central Washington University Dietetic Internship Program effectiveness and outcomes. The results of this evaluation are used to make changes in the Program, as appropriate.

Procedures: Program evaluation includes the following components.

Student Education and Experiences

1. Student evaluations of individual program experiences, including evaluations of assignments and of individual Preceptors occur as the student finishes each affiliation experience. These evaluations are confidential and will be shared in summary format with the affiliating institution annually.
2. At the end of the program, students will be asked to evaluate the entire Program, including classes, seminars, individual experiences, and the effectiveness of the Program Coordinator.
3. At the end of each internship year, affiliating Institutions, including the individual Preceptors, will be asked to evaluate the Program. This includes evaluating both the educational experiences and student assignments for the individual rotations.

Student Outcomes

1. Student achievement of the Registration examination is used as one measure of student outcomes. Particular attention is paid to student achievement on the specific areas of emphasis within the examination.
2. A survey of graduates of the internship and of the graduate's first employer will be conducted one year after graduation to determine preparedness for his or her first position as a dietitian.

Program Goals and Objectives

1. The results of the survey of Program Graduates is used to assist in evaluating program goals and objectives, including program effectiveness in preparing students for positions within the profession.
2. Feedback from the Program Advisory Committee is used to determine the Program's effectiveness, as well as the effectiveness of the Program in meeting the dietetic needs of the region and the state, including the future needs of the profession.
3. Informal and formal feedback from dietetic practitioners, customers and employers of dietetic practitioners regarding the program is continually sought at dietetic meetings and in other appropriate situations.

23. Supervised Practice Facility Selection and Evaluation

Policy: Facilities for supervised practice are selected to provide a breadth of experiences, opportunities for students to achieve required competencies, and qualified preceptors willing to mentor dietetic interns.

Procedure:

1. The dietetic internship director will annually review the list of currently used facilities. Facilities will be visited on site at least once every three years.
2. Intern completed evaluations of preceptors and rotations and informally gathered evaluative information will be used to determine if current facilities are meeting needs.
3. If areas of concern are identified, the dietetic internship director will meet with the primary preceptor at the facility to discuss the concerns. If no resolution can be reached about the concerns, the program will seek alternative facilities to provide the needed practice experience.

24. Affiliation Agreements for Supervised Practice Facilities

Policy: Affiliation agreements will be required for all facilities and rotations where students are participating in supervised practice activities that allow students to achieve competency.

Procedure:

1. Facilities that can provide the appropriate breadth of experiences, opportunities for students to achieve required competencies, and qualified preceptors will be identified by the dietetic internship director.

2. An initial discussion will be held with potential preceptors to determine the possible interest of the facility in being a supervised practice site for dietetic internship rotations. If common interest is found, the appropriate facility signatory for contracts will be determined.
3. Request for initiation of an affiliation agreement will be made by the dietetic internship director to the CWU Office of Business Services and Contracts (OBSC). The OBSC will be provided with the name and contact information of the signatory for the facility/organization and the type of facility (hospital, community clinic, food service site, etc.).
4. OBSC will initiate the affiliation agreement and negotiate any changes in terms requested by the facility.
5. When signed copies of the affiliation agreement are available, one will be made available to the dietetic internship director and kept on file in that office.
6. Affiliation agreements typically renew annually unless changes in terms are desired by the affiliating facility or CWU. OBSC monitors the renewal process.
7. Interns are not placed in an affiliating facility until the agreement has been signed by CWU and the affiliating facility/organization.

25. Review of Policies and Procedures

Policy: The policies and procedures of the dietetic internship program will be reviewed at least annually.

Procedure:

1. The dietetic internship director will review policies and procedures of the dietetic internship annually.
2. Recommendations for changes to the internship policies and procedures may be made at any time by contacting the dietetic internship director.
3. Major changes including additions or deletions of policies and procedures will be reviewed with the program faculty including the preceptors in the program and the advisory committee.
4. The policies and procedures of the program will be reviewed with the dietetic interns when they enter the program. A copy of the Policies and Procedures will be maintained on the Dietetic Internship website. Interns will sign an acknowledgment of having reviewed the Policies and Procedures document.



NEHS

CWU Dietetic Internship

Nutrition Programs »

Community College Transfers

Food and Nutrition Courses

CWU Online Catalog

Nutrition Science Club

Peer Nutrition Counseling

Food, Science, and Nutrition Alumni

Sports Nutrition

CWU Health Career Education Resources

American Dietetic Association

eat right. American Dietetic Association

Washington State Dietetics Association



Yakima Valley Dietetic Association

[Dietetic Internship Information](#)

The Dietetic Internship Program at Central Washington University (CWU) offers an accredited Dietetic Internship (DI) through the Department of Nutrition, Exercise, and Health Sciences. The Dietetic Internship is currently granted continuing accreditation by the Commission on Accreditation for Dietetics Education (CADE) of the American Dietetic Association, 120 South Riverside Plaza, Suite 2000, Chicago, IL 60606-6995, 312/899-0040 ext. 5400. This program provides the opportunity for:

- Certificate of completion of performance requirements for entry level dietitians through a 1200+ hour supervised practice and didactic experience
- Concentration in Community Nutrition
- Accredited supervised practice program experience required to become a Registered Dietitian
- Preparation to write the registration examination of the ADA

A Master of Science (MS) degree with an emphasis on Nutrition and Dietetics is optional and requires application and admission to the graduate school. That process can be completed during the spring of the Dietetic Internship.

[CWU Dietetic Internship Mission](#)

The mission of the CWU DI is to prepare competent entry level dietetic practitioners by providing academic and supervised practice experiences that satisfy the requirements for eligibility to take the exam to become a registered dietitian and promote the development of life-long learners.

The Dietetic Internship experience, in conjunction with the course work, provides a foundation for clinical application. Our program incorporates theory and practice to develop knowledge, skills, and attitudes essential to the practice of dietetics in accordance with the Standards of Practice in Nutrition Care for the Registered Dietitian and supports the learning and training environment to meet the needs of the preceptors and dietetic interns. The course work provides advanced study in nutrition, biochemistry, clinical and community nutrition, food systems management, and research. The graduate is prepared to function as a competent entry level dietitian and to obtain employment in dietetics-related fields.

View Program Goals and Outcome Measures [HERE](#)
View Program Program Policies & Procedures [HERE](#)

[Community Nutrition Emphasis](#)

The Community Nutrition emphasis builds on the routine activities of the WIC clinics and the School Food Service rotations. Interns work in the community to establish collaborative relationships and provide nutrition and health information to the community at large. They actively participate in community health/wellness groups, present public presentations on health and wellness, and plan and implement National Nutrition Month programs. The Community Nutrition Emphasis also includes the annual planning and implementation of Family Field Day - a community event involving numerous community partners that provides fun activities - tennis, soccer, kayaking, etc. - and healthy nutrition messages. In 2009, the event drew 360 community members as participants. Each year since 2006, the event has grown in participation numbers and reaches a more diverse population of individuals.

[Master of Science Degree](#)

CWU's DI Program is affiliated with its graduate program in nutrition. The 23 course work credits earned in the DI Program can be applied toward an M.S. degree following admission and acceptance into graduate school. A minimum of 45 credits and completion of a thesis or project is required for completion of an M.S. degree. Graduate assistantships are available and require an application process. GRE scores are required for admission to the graduate program.

[Dietetic Internship Admission Requirements](#)

- Baccalaureate degree from a US regionally accredited institution
- Verification of DPD completion or declaration of intent to complete DPD program
- GPA of 2.8 or higher (4.0 scale) in DPD courses and overall

A strong background in sciences and evidence of ability and willingness to work productively are expected of applicants for admission to the Dietetic Internship. Experience, whether paid or volunteer, in clinical nutrition, food service

management, or community nutrition is highly desirable. Intern applicant finalists will be evaluated in a short telephone interview.

Dietetic Intern applicants must complete an application packet including the following items. Further directions and forms for the packet are included in the Dietetic Internship Forms

- ADA Dietetic Internship application
- Letter of application
- Three letters of recommendation
- All official transcripts
- DPD Verification of Declaration of Intent
- Application fee

Dietetic Internship Forms

- [Application Procedures \[DOC\]](#)
- [Program Application \[DOC\]](#)
- [Waiver / Recommendation \[DOC\]](#)

Computer Matching

All applicants to the CWU DI must participate in the computer matching process through D&D Digital. Full instructions can be found at www.dnndigital.com. Applicants may complete the application and payment of the \$50 fee online or through the mail. This process must be completed prior to the mid February deadline for internship applications. Applicants may access matches on the D&D website (www.dnndigital.com) as early as midnight on the mid April match date.

D&D Digital Systems
304 Main Street
Ames, Iowa 50010
(515) 292-0490

Program Rotation Sites

Dietetic Interns complete their supervised practice experiences in a variety of sites under the direction of internship preceptors. At the current time, Interns are placed in three locations - the Yakima Valley area, Wenatchee, and the Tri-Cities. In each of these areas, the internship utilizes various health care facilities including hospitals, community clinics, health departments, and school district child nutrition service offices. The Yakima valley area and Wenatchee are located in the midst of the Washington fruit and wine country. The Tri-Cities is located further southeast of Ellensburg near the Columbia River.

Every attempt is made to assign students to one of the three areas and have them complete their supervised practice activities with a limited amount of commuting. However, commuting distances vary within the areas. Interns should be prepared for a variable amount of commuting. Additionally, interns will need to be prepared for that commuting to include winter driving conditions.

View Dietetic Internship Rotations [HERE](#).

Program Completion Requirements

- Satisfactory performance on competencies in each of the supervised practice rotations
- Complete each rotation in the scheduled sequence and within the designated time
- Achieve a C or better in each didactic course
- Maintain a GPA of 3.0 or higher (4.0 scale)

Interns must complete the required hours of supervised practice and demonstrate satisfactory performance and competency throughout program rotations as evaluated by CWU faculty members and facility preceptors. Supervised practice evaluations are completed at the conclusion of each rotation with mid evaluations for the longer rotations. After successful completion of the program requirements, interns are provided with copies of the Verification Statement for completion of the Dietetic Internship. The Verification Statement is required to be eligible to take the ADA registration exam for dietitians offered by the Commission of Dietetic Registration (CDR). After passing the RD exam, intern graduates are eligible to apply for the designation of Certified Dietitian in the state of Washington. Further information on certification can be found at <http://www.doh.wa.gov/hsqa/Professions/hpqa/links.htm>. Other states will have state specific requirements for licensure/certification.

The Curriculum

The DI Program is a 14-month (five quarter) program that begins each summer quarters. The student will complete 23 credits of course work during two summer sessions. During the fall, winter, and spring quarter, the student will complete 54 credits of supervised practice experience.

| Courses | Credits |
|---|---------|
| Summer: Year one | |
| NUTR 541: Applications in Dietetics | 5 cr |
| NUTR 543: Advanced Nutrition & Biochemistry | 3 cr |
| NUTR 545: Advanced Studies in Developmental Nutrition | 4 cr |
| Fall: Year one | |
| NUTR 492a: Dietetic Practicum | 18 cr |
| Winter: Year one | |
| NUTR 492b: Dietetic Practicum | 18 cr |
| Spring: Year one | |
| NUTR 492c: Dietetic Practicum | 18 cr |
| Summer: Year two | |
| NUTR 540: Nutrition Education | 3 cr |
| NUTR 547: Nutrition Update | 3 cr |
| HRM 381: Human Resource Management | 5 cr |

Approximate Costs

Program costs are calculated based on tuition and fees of 2009. Any of these costs may change without prior notice. The Dietetic Internship faculty and staff make every attempt to minimize costs to the student while maintaining quality of the program. Additional costs are associated with resources such as references that are considered to be essential for successful completion of the internship.

- Dietetic Internship Application Fee: \$35
- Computer Matching Fee: \$50
- CWU Admission Application Fee: \$35
- Tuition: Residents of the State of Washington: \$4,842.00 (for 3 quarters of Dietetic Practicum)
- Tuition: Nonresidents of the State of Washington: \$14,714.00 (for 3 quarters of Dietetic Practicum)
- Fees: \$375.00 (for 3 quarters of Dietetic Practicum)
- IT Fees: \$405 (for 3 quarters of Dietetic Practicum)
- Summer Registration: \$80 (\$40 per quarter; two summers)
- Summer Tuition \$3427.00 for 23 credits (2 summers)
- Textbooks: \$500 (varies depending on what student has available from past education)
- Lab Coat: \$35
- Professional Liability Insurance: \$20 per year
- Housing: Variable
- Professional Meetings: Variable
- Miscellaneous: Variable (Plan for a minimum of \$500)
- Transportation: A vehicle is needed to provide transportation to supervised practice sites. Travel expenses will

vary. Each student needs to plan for commuting to and from rotation sites.

- ADA Affiliate Membership: \$50 (variable depending on DPGs selected)

Financial Aid and Loan Deferment

As enrolled students, CWU Dietetic Interns may qualify for financial aid and loan deferment. Interns are referred to <http://www.cwu.edu/~finaid/> for further information on their specific eligibility and the application process. Information on CWU Scholarships can be found at <http://www.cwu.edu/~scholar/>.

Please direct any questions to Assistant Professor and Dietetic Internship Director, Linda Cashman, at cashmanl@cwu.edu.

Contact Information

Nutrition, Exercise, & Health Sciences
400 East University Way
Ellensburg, WA 98926-7572
Phone: 509-963-1911
Fax: 509-963-1848
e-mail: cashmanl@cwu.edu

Contact Information

Nutrition, Exercise, & Health Sciences
400 East University Way
Ellensburg, WA 98926-7572
Phone: 509-963-1911
Fax: 509-963-1848
e-mail: cashmanl@cwu.edu



Nutrition Programs »

Community College Transfers

Food and Nutrition Courses

CWU Online Catalog

Nutrition Science Club

Peer Nutrition Counseling

Food, Science, and Nutrition Alumni

Sports Nutrition

CWU Health Career Education Resources

American Dietetic Association

 American Dietetic Association

Washington State Dietetics Association



Yakima Valley Dietetic Association



Contact information

Nutrition, Exercise, & Health Sciences
 400 East University Way
 Ellensburg, WA 98926-7572
 Phone: 509-963-1911
 Fax: 509-963-1848
 e-mail: cashmani@cwu.edu

CWU Dietetic Internship


Program Goals and Outcome Measures

- The Dietetic Internship prepares competent entry-level practitioners who obtain employment in dietetics-related fields.
 - 90% of interns will complete the program within 21 months of enrollment (150% of our 14 month program)
 - Five year summary reports will show at least 80% of first time test takers pass the registration exam.
 - 90% of interns who seek employment will be employed in dietetics related fields within 3 months of program completion.
 - 90% of graduates will rate themselves as competent when surveyed one year after program completion.
 - 90% of employers will rate graduates as competent when surveyed one year after program completion.
- The Dietetic Internship prepares graduates committed to life long learning.
 - 25% of graduates will pursue an advanced degree in nutrition or related field.
 - 90% of graduates will report pursuing certification or participating in continuing education activities when surveyed one year after graduation.
- The Dietetic Internship provides preceptors with support which enable them to function effectively in their roles.
 - 90% of preceptors will report satisfaction with the support they receive when surveyed each year.

Please direct any questions to Assistant Professor and Dietetic Internship Director, Linda Cashman, at cashmani@cwu.edu.

Contact Information

Nutrition, Exercise, & Health Sciences
 400 East University Way
 Ellensburg, WA 98926-7572
 Phone: 509-963-1911
 Fax: 509-963-1848
 e-mail: cashmani@cwu.edu


CENTRAL WASHINGTON UNIVERSITY
Your future is Central.

Home | Calendar | Tuition & Fees

[Advanced Searches](#)
[A-Z Site Index](#)
[Site Search](#)

Nutrition Programs »

Community College Transfers

Food and Nutrition Courses

CWU Online Catalog


Nutrition Science Club

Peer Nutrition Counseling


Food, Science, and Nutrition Alumni

Sports Nutrition


CWU Health Career Education Resources



American Dietetic Association



Washington State Dietetics Association



Yakima Valley Dietetic Association

Contact Information

Nutrition, Exercise, & Health Sciences
 400 East University Way
 Ellensburg, WA 98926-7572
 Phone: 509-963-1911
 Fax: 509-963-1848
 e-mail: cashmanl@cwu.edu

CWU Dietetic Internship

List of rotations are included as part of the dietetic internship:

Medical Nutrition Therapy

Over an eleven-week period, the dietetic intern will gradually assume the responsibilities of the clinical dietitian and will develop the competencies for an entry-level dietitian. Medical Nutrition Therapy is completed in smaller community hospitals as well as larger hospitals.

Renal Nutrition

The dietetic intern will spend two weeks working with a registered dietitian in an outpatient renal dialysis unit. During this time the intern will have an opportunity to work directly with patients undergoing dialysis and provide appropriate nutrition therapy.

Community Nutrition

Over a seven-week period, the dietetic intern will actively participate and gradually assume the responsibilities of a dietitian in a community clinic. The intern will provide nutrition care to WIC clients and clients needing medical nutrition therapy education.

One additional week is spent in the following community settings to determine how nutritional services are provided - a diabetic clinic, an outpatient clinic for individuals with cancer, and an Infusion Care program for individuals receiving home enteral & parenteral nutrition.

Foodservice Management

Over a ten-week period, the dietetic intern will actively participate in the responsibilities of a dietitian or food service manager in a public school or other foodservice. During this rotation the intern will have an opportunity to develop his or her foodservice management skills including skills in menu planning, food production and service, food and equipment purchasing, and human resource management.

Hospital Foodservice Management

During the time spent in the healthcare setting the dietetic interns will also spend 3 weeks in hospital foodservice. This experience will include food production and service, quality assurance, foodservice sanitation, menu planning, and budgeting.

Long Term Care

Two weeks will be spent working directly with a consulting dietitian in long-term care and providing nutrition care to patients in this setting.

Optional Experience

A one-week optional experience allows the dietetic intern to design an individual rotation to explore an area of dietetics where registered dietitians are employed or could be employed.

Please direct any questions to Assistant Professor and Dietetic Internship Director, Linda Cashman, at cashmanl@cwu.edu.

Contact Information

Nutrition, Exercise, & Health Sciences
 400 East University Way
 Ellensburg, WA 98926-7572
 Phone: 509-963-1911
 Fax: 509-963-1848
 e-mail: cashmanl@cwu.edu

Recommended resolution is 1024 X 768