

The St. Cloud Hospital Dietetic Internship

Preceptor Handbook

2022-2023



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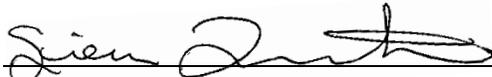
Dear valued preceptor,

First and foremost, the St. Cloud Hospital Dietetic Internship Program would like to thank you for your willingness to serve as a preceptor for dietetic interns. The experience can be challenging at times, but also very rewarding. Preceptors are essential for furthering the education of the next registered dietitians. You are making an impact in interns' lives and professions.

"Preceptors make a difference in the lives of students who are learning to become RDNs or NDTRs by acting as a mentor and training the dietetic professionals of the future. By [being] a preceptor, you can help increase training opportunities for future RDNs and NDTRs." –Academy of Nutrition and Dietetics

Sincerely,

The St. Cloud Hospital Dietetic Internship Leadership



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Program Background, Mission and Goals

The St. Cloud Hospital Dietetic Internship Program (SCH DI) received Full Accreditation status by the Accreditation Council for Education in Nutrition and Dietetics (ACEND) in August 2020. Graduates of the SCH DI Program will receive a Verification Statement that indicates they have completed the practice requirements successfully and will be eligible to apply to take the National Registration Examination for Dietitians.

Mission

The mission of the St. Cloud Hospital Dietetic Internship is to fully prepare graduates to enter the field as competent, entry-level registered dietitians, with an expertise in medical nutrition therapy, who put the care of people above all in a manner that reflects the healing mission of Jesus.

Goals and Objectives

Goal #1: The St. Cloud Hospital Dietetic Internship will prepare graduates to become competent entry-level registered dietitians.

Objective #1: Eighty percent of program graduates take the CDR credentialing exam for dietitian nutritionists within 12 months of program completion

Objective #2: The program's one-year pass rate (graduates who pass the registration exam within one year of the first attempt) on the CDR credentialing exam for dietitian nutritionists is at least 80%.

Objective #3: of graduates who seek employment, 80% are employed in nutrition and dietetics or related fields within 12 months of graduation

Objective #4: At least 80% of program interns complete program requirements within 12 months for full time interns and within 16 months for part time interns (150% of program length).

Objective #5: Twelve months post-graduation, 80% of employers will rank graduates as "meets expectations" or above in their preparation for entry-level practice.

Objective #6: Twelve months post-graduation, at least 80% of interns will rank themselves as "well prepared" or higher in their ability to perform what is required in their job description for their current position when they first started

Goal #2: The St. Cloud Hospital Dietetic Internship will prepare graduates who demonstrate a commitment to putting the care of people above all.

Objective #1: 80% of employers will rank graduates as "meets expectations" or above in standards of patient/client/customer centered care 12 months post-graduation

The St. Cloud Hospital Dietetic Internship program accepts up to 10 full-time interns for 34 (40 hour) weeks and up to six part-time interns for 49 (24 hour) weeks. The program participates in Spring Match and interns are present September through May (full time) or September through August (part time). Rotations are broken down as follows:

Calendar and Schedule

Orientation: 2 weeks

All interns will complete three days of general orientation prior to starting any other rotation. During this week, they will learn about the program, including mission, goals, objectives, policies and procedures, assignments, and program expectations.

Interns will have an additional week and a half of MNT orientation prior to the start of their MNT rotations in which they will learn the EPIC documentation system as well as review and practice many of the concepts learned in undergraduate studies.

Medical Nutrition Therapy: 18.5 weeks (Part Time Interns 29 weeks)

Interns will rotate through a variety of MNT settings, including hospitals, clinics, and long-term care facilities. Important during this time is for interns to obtain a firm understanding of all aspects of the Nutrition Care Process. After an initial training and shadowing period, interns will practice these skills with patients and clients. Other experiences could include observation of related procedures, tests, and/or surgeries, shadowing of related entities (lactation consultants, exercise therapists, etc.), developing education material, presenting to staff or other projects at the preceptor's discretion. *See page 11 for more specific information about MNT rotations.*



Community Nutrition: 4 weeks (Part Time Interns 6 weeks)

Interns will have varying experiences with organizations such as CentraCare Wellness, the University of MN Extension, WIC, Head Start, Coborn's grocery, etcetera. Experiences for the intern could include educating community members and/or staff, attending professional meetings, developing education material, teaching of community classes, updating websites or other projects at the preceptor's discretion.

Foodservice/Management: 6 weeks (Part Time Interns 9 weeks)

Interns will rotate with a hospital food service system and with a college or university or a public-school food service system. Experiences could include recipe and/or menu updates and development, working with food allergies, supervision of staff, education to staff, quality checks, safety and sanitation projects, or other projects at the preceptor's discretion.

Professional Development: 1 week (Part Time Interns 1-2 weeks)

This week is a time for interns to shadow various professions within the field. They are provided with a list of potential preceptors in the beginning of the program but can shadow anyone of their choosing as long as it fits within the guidelines provided by Program Leadership.

In order to successfully complete the program, SCH dietetic interns will need to have had a total of 1074 hours of supervised practice in addition to successful completion of all rotations and assignments.

Tips for Day One

1. Provide an orientation for the intern to the facility and staff.
2. Explain the typical workday.
3. Establish ground rules including dress code, timing, reporting.
4. Explain what is expected of them as interns specific to your entity.
5. Obtain information from the interns about their experiences thus far and their expectations and goals for the rotation
6. Review Preparation Sheets if applicable.
 - If you have not developed a Rotation Preparation Sheet for your rotation, see page 34 for the suggested template. Feel free to make your own and send to the Program Director. These can be helpful for preparing the interns for your rotation and saving both of you time on the first day.

Example Introduction to Rotation: *“As a medical dietitian, I see a lot of patients with lung issues, heart failure, liver disease, infections, etc. My caseload is usually 12-15 patients per day, and I always start my day with nutrition support patients. I have report at 8:30 am and usually take a lunch break around noon. What other rotations have you had so far? What types of experiences have you had? What are you hoping to get out of this rotation? What is your learning style? I will have you shadow me today and write some chart notes. Tomorrow we will see if you are comfortable enough to lead the patient interview with me in the room with you. By the end of the week, we will try and get you to the point where you are comfortable seeing at least 2-3 patients on your own. Does that plan sound okay? Do you have any questions or concerns?”*

Role of a Preceptor

The Commission on Dietetic Registration (CDR) indicates the following are the most important roles of a good preceptor:

- Planner
- Role Model
- Information Provider
- Facilitator of Learning
- Resource Developer
- Assessor of Learning

CDR. Dietetics Preceptor Training Program [Online Module]. Retrieved from <http://www.cdrcampus.com/course/view.php?id=131&page=1545>



Training Versus Educating

It is important to note that there is a difference between training an intern to do your job and educating them on the concepts. Remember, the goal is for the intern to be ready to be a competent entry-level dietitian by the end of the program, so *they should understand the “why” as well as the “how.”* You do not always have to readily explain the information; sometimes it is beneficial to test their understanding first or to encourage them to find the answer on their own. Regardless, ensure that the intern is competent in the concepts behind why you do what you do by the end of the rotation.

Examples:

Training

“Food service managers work out of the offices at the end of the hallway.”

“This is where you find the patient’s chemotherapy record.”

“This is how you obtain a blood sample to find the client’s hemoglobin level.”

Educating

VS “The retail manager shares an office with the purchasing specialist because they need to communicate often in order to minimize food costs.”

VS “If you see that a patient is actively receiving chemotherapy, it is important to research the type, route, and side effects so that you can best anticipate their nutritional needs.”

VS “Do you know why we are concerned about the hemoglobin levels of women, infants and children?”



How to Give and Receive Feedback Effectively

1. At the beginning of the rotation, remind students as *specifically* as possible what he/she is expected to know and to do.
2. Focus on *observed behaviors* that you personally witness rather than vague general impression.
3. If your sense of the student's knowledge, skills, attitudes, and competencies differ from those of other preceptors, you may want to discuss this with other preceptors prior to talking with the student
4. Back up comments with *evidence* and *examples*.
5. Share information in a timely manner – *an intern should not hear about a concern for the first time at the end of the rotation during their evaluation*.
6. Consider what the student noted in their self-assessment if applicable.
7. Identify strengths first, and then areas for improvement.
8. Plan for *follow up* throughout the rotation and develop an action plan if needed.

CDR. Dietetics Preceptor Training Program [Online Module]. Retrieved from <http://www.cdrcampus.com/course/view.php?id=131&page=1545>

Program Leadership encourages preceptors to take some time halfway through the rotation to *intentionally consider* if there are any issues that need to be addressed, either with the intern or with a Program Manager and to do so if needed. It is also recommended to *set aside 10-15 minutes in the last day or two of the rotation* to allow for *verbal discussion* about the intern's evaluation as well as the intern's evaluation of the preceptor and the rotation.

Tips for Filling out an Intern Evaluation

1. Read the definitions of the scoring first so you are familiar with the 1-5 numbering system.
2. Be honest – it can be difficult to give negative feedback, but it is the only way that the intern has the potential to improve. It is also the best way for Program Leadership to be aware of the intern's progress.
 - It can help to use phrases such as, "What I appreciate about you is..." and "I feel you could be more effective if..."
3. Be specific - use evidence and examples in the comment sections.

Program Leadership would also like to remind preceptors how to accept constructive feedback. Preceptors should *remain curious*. No one is perfect and feedback from interns is an opportunity to learn and grow as a professional. Also, it is also important that interns feel safe to give feedback. When receiving criticism as a preceptor, the following ABC's may foster a successful outcome:

Agree: agree with the intern on the parts of their criticism in which you agree.

Build: if you feel the intern has some feedback but is being passive, encourage them to communicate with you.

Compare: when you do not agree with all or portions of what the intern has said, do not tell them they are wrong. Instead, compare your two views.

Patterson, K., Grenny, J., McMillan, R., Switzler, A. (2012). *Crucial conversations (2nd Ed)*. New York: McGraw Hill.

Benefits of Interns

Professional Growth: “One of the best ways to learn is through teaching and mentoring others” (Commission on Dietetic Registration [CDR], 2016). This is because interns often challenge our thoughts with questions.

New Perspectives: “Students often come from different backgrounds have different experiences, or have different perspective than we do, and they can help us see our jobs and responsibilities in a whole new way” (CDR, 2016).

A Resource: “Students require time; however, they also can help you to accomplish your work through their research and projects” (CDR, 2016)

Fair Labor Standards Act

Remember that an intern must be supervised at all times. If you need to come late or leave early, please be sure to appoint a contact person at your facility that the intern can go to with questions. Preceptors should also be sure to follow up on any work that an intern completes at home to check for questions and check the intern’s comprehension.

Note the following from the U.S. Department of Labor:

- The internship, even though it includes actual operation of the facilities of the employer, is similar to training which would be given in an educational environment;
- The internship experience is for the benefit of the intern;
- The intern does not displace regular employees, but works under close supervision of existing staff;
- The employer that provides the training derives no immediate advantage from the activities of the intern; and on occasion its operations may actually be impeded;
- The intern is not necessarily entitled to a job at the conclusion of the internship;
- The employer and the intern understand that the intern is not entitled to wages for the time spent in the internship.

<http://www.dol.gov/whd/regs/compliance/whdfs71.htm>

We realize that there will be situations in which a preceptor may need an intern to help with a project that is more beneficial for the facility than for the intern’s learning experience. As long as these situations are occasional and something that a dietitian might also have to do, it is allowed. For example, there might be an “all hands on deck” situation when an oven breaks down in the kitchen and all available employees need to make sandwiches. This does not contribute directly to an intern’s learning experience, but it is a real-life situation that a dietitian may encounter.



Frequently Asked Questions

What do I do if my intern is tardy?

If an intern is more than 15 minutes late or leaves more than 15 minutes early (unexcused) on more than one occasion during the same rotation, the preceptor is to notify the Program Director who will address the issue.

What do I do if my intern is absent?

Interns are instructed to notify their preceptor as well as the Program Director prior to the start of the day if they are not able to be present for any reason. The Program Director will manage their potential make-up time. If an intern is absent without notifying the preceptor, the preceptor is to inform the Program Manager.

What if my intern asks to leave early for an appointment?

Interns are taught in orientation that they should tell the Program Director as well as their preceptor if they need to be absent for any amount of time. You should allow interns to leave as requested and assume that they took the correct measures; however, be sure to deduct the hours absent from their total rotation hours indicated in their intern evaluation. If ever in doubt, feel free to check with the Program Director.

What do I do on days I am not working?

Interns are allowed one day off for any holiday recognized by the preceptor's organization.

If the preceptor has an unforeseen absence (sick day, family leave, etc), and there is no one else that will fill in to take the intern, they are requested to call their intern promptly so that they are aware to not come in. They are then to email the Program Director at their earliest convenience. St. Cloud Hospital preceptors do not need to take this action as a relief dietitian will be available to mentor the intern.

Interns are not required to be with the same preceptor throughout each entire rotation. In fact, it can be beneficial for interns to work with other staff. For example, during community nutrition rotations, they may work with dietitians and nutrition educators mostly, but a shadow day with a public health nurse would still be considered related experience for the intern.

What if the intern is not succeeding in my rotation?

If there are concerns that the intern is not meeting minimum expectations, these concerns should be discussed with the intern immediately and a plan of action should be put in place. The Program Director can be contacted as needed in these situations. By the end of the rotation, if they are not averaging at least a "3" on their evaluation, they will have failed the rotation. Program Leadership will develop a learning plan with the intern, which may require repetition of the rotation.

Can an intern educate my clients in the outpatient setting?

Yes, interns can complete the counseling and education with clients in the outpatient setting as long as there is a licensed dietitian present for the entire appointment. They can also document in Hospital Outpatient Departments (HOD). Interns **cannot**, however, document in the outpatient clinic/ambulatory setting.

Grievances

Interns and preceptors may direct minor internship-related concerns to a Program Director. The Program Director will communicate with the individual to develop an action plan to resolve issues if needed. There will be no retaliation from Program Leadership for reports of grievances. *Preceptors can provide input to the program at any time.*

Intern Grievances Regarding a Preceptor and/or Rotation

Significant concerns from interns with a specific preceptor will be addressed promptly. Interns are directed to take the following actions:

1. Discuss the concern with the preceptor in question. If unable to resolve,
2. Submit the concern in writing to the Program Director. If unable to resolve, the Program Director will
3. Submit the concern in writing to the Manager of the CNS Department. If unable to resolve, the CNS Manager will
4. Submit the concern in writing to the Section Director of Medical Specialties

Significant Complaints from Interns or Preceptors Regarding the SCH DI Program

Significant complaints or concerns about the internship program are to be addressed by taking the steps listed below.

1. Contact Program Leadership informally about the concern to clarify the situation.
2. Submit a significant concern to a Program Director, in writing on the “Significant Concern” form, available in the student handbook or from the Program Director.
3. If successful resolution of the problem is not made, the complaint must be submitted by the Program Director to the Manager of the CNS department in writing using the “Significant Concern” form.
4. If successful resolution of the problem is not made, the complaint must be submitted by the CNS Manager in writing to the Section Director for Medical Specialties, using the “Significant Concern” form.
5. As a last resort, if a satisfactory resolution is still not identified and the issue is related to ACEND’s standards, the intern may submit their complaint to ACEND.

Contact information for the Program Director and the CNS Manager is in the front of the handbook.

The contact information for ACEND is listed below:

Mailing Address:

120 Riverside Plaza, Suite 2190

Chicago, IL, 60606

Phone: 312-899-5400

E-mail: ACEND@eatright.org

For more information on ACEND standards, visit the website: <https://www.eatrightpro.org/acend/>

Additional Information for Inpatient MNT Preceptors

Before your intern starts:

1. Check the schedule to look ahead and see if you are expecting an intern
2. Interns will email you one week (on Monday) before they start – if you will be on vacation for that week, be sure to connect with them, or let the Program Director know, so that the intern knows where/when to meet you.
3. Respond to the intern by Friday of that week so they know what to do on Monday morning
4. Check their “SCH Inpatient Skill Checklist” in SharePoint. This will tell you which areas they have already mastered.

While your intern is with you (in addition to preceptor responsibilities on p. 5):

1. Even if the intern is responsible for seeing and charting on some of the patients, the preceptor should still review those charts as if they are going to see the patients for themselves. This ensures the intern did not miss anything in the assessment (the note can be correct and ready for co-signing, but that does not always mean that the intern captured the accurate information of the patient).
2. For telemetry, neurology, medical, oncology and surgical rotations, encourage the intern to complete the entire Nutrition Care Process on 2-3 patients per day by the end of the first week and at least half of the patients per day by the end of the second week for two-week rotations. For staff relief, interns should be able to complete the entire workload independently under the preceptor’s supervision.
3. For telemetry and cardiac care units, please ensure that the intern is competent in basic diet education by the end of the rotation. This may require role-playing if there are not enough appropriate patients during the rotation.
4. For medical, oncology and neurology rotations, please ensure that the intern is competent in basic nutrition support by the end of the rotation. This may require the preceptor to create hypothetical situations for practice if there are not enough actual nutrition support patients during the rotation.
5. If you are coming late or leaving early, make sure to appoint another inpatient RD to be a contact for the intern if they need assistance during your absence.
6. Please initial and date their “SCH Inpatient Skill Checklist” in SharePoint when they have mastered a new skill. The interns should be reminding their preceptors to do this.

Tips for Staff Relief:

1. Assure space for yourself and for your intern(s). Confirm you are both aware of the intern contact phone number and the dietitian contact pager or phone number.
2. On day one, assess your intern(s). Ask what they are comfortable doing.
 - Beginner: Intern is still unsure of role. RD plans the day and gives intern referrals as they are capable.
 - Lots of assistance: intern is comfortable preparing for the day but would like direction on each patient
 - Some assistance: intern is comfortable preparing for the day, would like assistance with EN and PN and other pts PRN.
 - Minimal assistance: intern is comfortable preparing for the day, would like to talk through EN and PN prior to charting.

- No assistance: Intern is comfortable doing the work alone, but RD should be available for questions.
3. Even for the intern that requests no assistance, make sure to look through the charts of the patients they are seeing as if you were to chart on them yourself to ensure you are aware of what the intern should be addressing.
 4. Remind intern about time management. Cosign periodically throughout the day – make sure to also double-check their orders, discharge recommendations, education tab, problem list entry, etc as needed.
 5. Ask for updates and inquire if help is needed minimally TID. Help with time management and see a few patients if needed.
 6. Provide feedback to the intern – constructive criticism and encouragement/compliments as needed so that they can improve each day. They may require “pushing” to finish the work in a timely manner.
 7. As time allows, dietitians can assist other RDs, complete CBTs, etc.
 8. At the end of the day, assure that all notes are cosigned. Plan for the following day.



Ideas for When Patient Care is Slow (or TOO busy)!

-have intern review a patient's chart and look up all medications. Record what they are used for and look at any drug/food interactions or side effects. Have them report back to you.

-have intern review a patient's chart and look up all labs. If they are not WDL, explain whether there might be a nutritional reason for the abnormal value. Have them report back to you.

-have interns review a related and current journal article and report findings back to you

-give intern a specific disease state and have them review handbooks or the Nutrition Care Manual and report appropriate nutrition interventions back to you

-have intern look through previous continuing ed PP presentations

-give interns hypothetical patient situations (such as nutrition support) and have them figure out diagnosis, intervention and follow up. For example, "pretend the patient in S251 is starting on ng tube feedings. Determine their nutritional needs, formula, start rate, goal rate, water flushes, etc." Review it with them when finished.

-pick a fad diet or other hot topic in nutrition for the intern to research and present for a Disambiguation Day.

-have intern study for the RD exam – check with Program Director if there is a practice exam to administer to the intern.

-have intern help with assignments or projects you are currently involved with

-have intern work on/review their clinical notebook



FORMS

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St. Cloud Hospital Dietetic Internship (SCH DI) Intern Evaluation: **MNT IP or LTC**

Intern name:

preceptor name:

1 Not acceptable	2	3 achieving what is expected of an intern	4	5 demonstrating competence of a RDN			Comments?		
How many days was the intern late or left early?			0 days	1 day	2 days	3+ days			
How many hours of supervised practice did the intern complete during this rotation?									
1. Clothes/appearance complied with dress code			1	2	3	4	5		
2. Demonstrated patient (or client)/family-centered care/mentality <ul style="list-style-type: none"> • Demonstrates dignity and respect toward patients/families • Encourages the participation of patients/families in their care 			1	2	3	4	5	N/A	
3. Intern was motivated and engaged throughout rotation, asking questions when appropriate			1	2	3	4	5		
4. Demonstrated active participation, teamwork and contribution in group settings (CRDN 2.3)			1	2	3	4	5	N/A	
5. Work collaboratively with NDTRs and/or support personnel in other disciplines (catering associates, RN's, etc) (CRDN 2.5).			1	2	3	4	5	N/A	
6. Referred clients/patients to other professionals when needs are beyond individual scope of practice (CRDN 2.6)			1	2	3	4	5	N/A	
7. Function as a member of interprofessional teams (CRDN 2.4)									
8. Demonstrated professional attributes of taking initiative, proactively developing solutions and/or risk taking (CRDN 2.10)			1	2	3	4	5		
9. Demonstrated professional attributes of flexibility and time management (CRDN 2.10)			1	2	3	4	5		
10. Showed cultural humility in interactions with colleagues, staff, clients, patients, and the public (CRDN 2.11)			1	2	3	4	5	N/A	
11. Implemented culturally sensitive strategies to address cultural biases and differences (CRDN 2.12)			1	2	3	4	5	N/A	
12. Assessed the nutritional status of individuals appropriately (CRDN 3.1)			1	2	3	4	5	N/A	
13. Diagnosed nutrition problems and created appropriate PES statements for			1	2	3	4	5	N/A	

a variety of ages, health status and settings (CRDN 3.1)						
14. Used effective education and counseling skills to facilitate behavior change, including respectful, science-based answers to patient/client questions regarding emerging trends. (CRDN 3.7 & 3.10)	1	2	3	4	5	N/A
15. Demonstrated effective general communication skills for clinical and client services in a variety of formats (verbal, email, documentation, EMR, etc). (CRDN 3.7)	1	2	3	4	5	N/A
16. Planned and implemented nutrition interventions to include prioritizing the nutrition diagnosis, formulating a nutrition prescription, establishing goals and selecting and managing interventions (CRDN 3.1)	1	2	3	4	5	N/A
17. Competently managed nutrition support (assessing needs, selecting an appropriate formula, calculating rates/flushes, determined appropriate plan, etc).	1	2	3	4	5	N/A
18. Competently recommended bowel regimens, micronutrient supplementation, such as thiamine, and/or other pharmacotherapy plans as/if appropriate (CRDN 3.3)	1	2	3	4	5	N/A
19. Completed documentation that follows professional guidelines (CRDN 3.1)	1	2	3	4	5	N/A
20. Practiced in compliance with current federal regulations and state statutes and rules, as applicable/in accordance with accreditation standards, the Scope of Dietetics Practice, and the Code of Ethics for the Profession of Dietetics (CRDN 2.1)	1	2	3	4	5	
21. OVERALL, how did the intern perform in this rotation?	1 Not acceptable	2 achieving what's expected for intern	3	4	5 demonstrating competence of RDN	
Strengths						
Areas for Improvement						
Other comments						
Preceptor Signature:					Date:	

St. Cloud Hospital Dietetic Internship (SCH DI) Intern Evaluation: MNT OP

Intern name:		preceptor name:							
1	2	3	4	5			Comments?		
Not acceptable	achieving what is expected of an intern		demonstrating competence of a RDN						
How many days was the intern late or left early?			0 days	1 day	2 days	3+ days			
How many hours of supervised practice did the intern complete during this rotation?									
1.	Clothes/appearance complied with dress code		1	2	3	4	5	N/A	
2.	Demonstrated patient (or client)/family-centered care/mentality <ul style="list-style-type: none"> • Demonstrates dignity and respect toward patients/families • Encourages the participation of patients/families in their care 		1	2	3	4	5	N/A	
3.	Intern was motivated and engaged throughout rotation, asking questions when appropriate		1	2	3	4	5		
4.	Used effective education and counseling skills to facilitate behavior change, including respectful, science-based answers to questions (CRDN 3.10 & 3.12)		1	2	3	4	5	N/A	
5.	Provide instruction to clients/patients for self-monitoring blood glucose considering diabetes medication and medical nutrition therapy plan. (CRDN 3.4)		1	2	3	4	5	N/A	
6.	Demonstrated effective communication skills for clinical services in a variety of formats and settings, including telehealth (CRDN 3.7)		1	2	3	4	5	N/A	
7.	Demonstrated professional attributes of taking initiative, proactively developing solutions and/or risk taking (CRDN 2.10)		1	2	3	4	5		
8.	Demonstrated professional attributes of flexibility and time management (CRDN 2.10)		1	2	3	4	5		
9.	Demonstrated ability to take on assigned projects and work well independently		1	2	3	4	5	N/A	
10.	Demonstrated assertiveness when needed while respecting life experiences, culture, etc (CRDN 2.8)		1	2	3	4	5	N/A	
11.	Show cultural humility in interactions with clients, colleagues and staff. (CRDN 2.11)		1	2	3	4	5	N/A	
12.	Assessed the nutritional status of individuals appropriately (CRDN 3.1)		1	2	3	4	5	N/A	
13.	Diagnosed nutrition problems and created appropriate PES statements (CRDN 3.1)		1	2	3	4	5	N/A	

14. Planned and implemented nutrition interventions to include prioritizing the nutrition diagnosis, formulating a nutrition prescription, establishing goals and selecting and managing interventions (CRDN 3.1)	1	2	3	4	5	N/A	
15. Competently managed nutrition support (assessing needs, selecting an appropriate formula, calculating rates/flushes, determined appropriate plan, etc).	1	2	3	4	5	N/A	
16. Monitored and evaluated problems, etiologies, signs, symptoms and the impact of interventions on the nutrition diagnosis (CRDN 3.1)	1	2	3	4	5	N/A	
17. Completed documentation that follows professional guidelines (CRDN 3.1 & 3.7)	1	2	3	4	5	N/A	
18. Practice in compliance with current federal regulations and state statutes and rules, as applicable and in accordance with accreditation standards and the Scope of Dietetics Practice, and the Code of Ethics for the Profession of Dietetics (CRDN 2.1)	1	2	3	4	5		
19. OVERALL, how did the intern perform in this rotation?	1	2	3	4	5		
	Not acceptable	achieving what's expected for intern		demonstrating competence of RDN			
Strengths							
Areas for Improvement							
Other comments							
Preceptor Signature:				Date:			

St. Cloud Hospital Dietetic Internship (SCH DI) Intern Evaluation: **MNT STAFF RELIEF**

Intern name:

preceptor name:

1 Not acceptable	2	3 achieving what is expected of an intern	4	5 demonstrating competence of a RDN			Comments?	
How many days was the intern late or left early?		0 days	1 day	2 days	3+ days			
How many hours of supervised practice did the intern complete during this rotation?								
1. Clothes/appearance complied with dress code		1	2	3	4	5		
2. Demonstrated patient (or client)/family-centered care/mentality <ul style="list-style-type: none"> • Demonstrates dignity and respect toward patients/families • Encourages the participation of patients/families in their care 		1	2	3	4	5	N/A	
3. Intern was motivated and engaged throughout rotation, asking questions when appropriate		1	2	3	4	5		
4. Used effective education and counseling skills to facilitate behavior change (CRDN 3.10)		1	2	3	4	5	N/A	
5. Function as a member of interprofessional teams (CRDN 2.4).		1	2	3	4	5	N/A	
6. Worked collaboratively with catering associates and/or other support personnel in other disciplines (CRDN 2.5)								
7. Referred clients/patients to other professionals when needs are beyond individual scope of practice (CRDN 2.6)		1	2	3	4	5	N/A	
8. Demonstrated professional attributes of taking initiative, proactively developing solutions and/or risk taking (CRDN 1.5)		1	2	3	4	5		
9. Demonstrated professional attributes of flexibility and time management (CRDN 1.5)		1	2	3	4	5		
10. Appropriately and effectively utilized interpreter services and/or other strategies to address cultural biases and differences (CRDN 2.12)		1	2	3	4	5	N/A	

11. Show cultural humility in interactions with colleagues, staff, clients, patients and the public. (CRDN 2.11)	1	2	3	4	5	N/A	
12. Assessed the nutritional status of individuals appropriately (CRDN 3.1)	1	2	3	4	5	N/A	
13. Diagnosed nutrition problems and created appropriate PES statements for a variety of ages, health status and settings (CRDN 3.1)	1	2	3	4	5	N/A	
14. Planned and implemented nutrition interventions to include prioritizing the nutrition diagnosis, formulating a nutrition prescription, establishing goals and selecting and managing interventions (CRDN 3.1)	1	2	3	4	5	N/A	
15. Competently managed nutrition support (assessing needs, selecting an appropriate formula, calculating rates/flushes, determined appropriate plan, etc).	1	2	3	4	5	N/A	
16. competently recommended bowel regimens, micronutrient supplementation, such as thiamine, and/or other pharmacotherapy plans (CRDN 3.3)	1	2	3	4	5	N/A	
17. Monitored and evaluated problems, etiologies, signs, symptoms and the impact of interventions on the nutrition diagnosis (CRDN 3.1)	1	2	3	4	5	N/A	
18. Completed documentation that follows professional guidelines (CRDN 3.7)	1	2	3	4	5	N/A	
19. Practiced in compliance with current federal regulations and state statutes and rules, as applicable/in accordance with accreditation standards, the Scope of Dietetics Practice, and the Code of Ethics for the Profession of Dietetics (CRDN 2.1)	1	2	3	4	5		
OVERALL, how did the intern perform in this rotation?	1	2	3	4	5		
	Not acceptable	achieving what's expected for intern		demonstrating competence of RDN			
Strengths							
Areas for Improvement							
Other comments							
Preceptor Signature:						Date:	

St. Cloud Hospital Dietetic Internship (SCH DI) Intern Evaluation: **Clinical Leadership**

Intern name:		Preceptor name:				
1	2	3	4	5		Comments?
Not acceptable	achieving what is expected of an intern			demonstrating competence of RDN		
How many days was the intern late or left early?		0 day	1 days	2 days	3+ days	
How many hours of supervised practice did the intern complete during this rotation?						
1. Clothes/appearance complied with dress code	1	2	3	4	5	
2. Intern was motivated and engaged throughout rotation, asking questions when appropriate	1	2	3	4	5	
3. Demonstrated professional attributes of flexibility and time management (CRDN 2.10)	1	2	3	4	5	
4. Demonstrated active participation, teamwork and contribution in group settings and department meetings (CRDN 2.3)	1	2	3	4	5	N/A
5. Apply change management strategies to achieve desired outcomes (CRDN 2.7)	1	2	3	4	5	
6. Demonstrated professional attributes of taking initiative and proactively developing solutions (CRDN 2.10)	1	2	3	4	5	N/A
7. Analyzed quality, financial, and productivity data for use in planning (CRDN 4.5)	1	2	3	4	5	N/A
8. Perform management functions related to safety, security and sanitation that affect employees, clients, patients, facilities, and/or food.	1	2	3	4	5	N/A
9. Participate in management functions of human resources (such as practice making the RD schedule) (CRDN 4.1)	1	2	3	4	5	
10. Conducted clinical service quality management activities (such as PI audits) (CRDN 4.3)	1	2	3	4	5	
11. Analyze risk in clinical practice (such as risks to achieving set goals and objectives, clinical liability, etc) CRDN 4.10	1	2	3	4	5	N/A
12. OVERALL, how did the intern perform in this rotation?	1	2	3	4	5	
	Not acceptable	achieving what's expected for intern		demonstrating competence of RDN		
Strengths						
Areas for Improvement						
Other comments						
Preceptor Signature:				Date:		

Clinical Leadership Week Competency Checklist

Intern Name _____

Date _____

Preceptor, please indicate the date in which the intern passed each activity and put your initials. This form needs to be given to the Internship Program Director after Clinical Leadership Week.

Initial/date	Activity
	Complete a performance improvement (PI) audit (CRDN 4.3 – conduct clinical and client service quality management activities)
	Obtain experience managing RD schedule (CRDN 4.1 – participate in management functions of human resources, such as training and scheduling)
	Obtain experience assessing budget (CRDN 4.5 – analyze quality, financial, and productivity data for use in planning)
	Advocating Assignment (CRDN 5.4 – advocate for opportunities in professional settings)
	Change Management Assignment (CRDN 2.7 – apply change management strategies to achieve desired outcomes)
	Lead Huddle (CRDN 5.6 – promote team involvement and recognize the skills of each member)

Preceptor Signature _____

St. Cloud Hospital Dietetic Internship (SCH DI) Program Intern Evaluation: **Community Nutrition**

Intern name: _____ **preceptor name:** _____

1 Not acceptable	2	3	4	5			Comments:	
achieving what is expected of an intern			demonstrating competence of RDN					
How many days was the intern late?			0 day	1 days	2 days	3+days		
How many hours of supervised practice did the intern complete during this rotation?								
1. Clothes/appearance complied with dress code			1	2	3	4	5	
2. Demonstrated client/family-centered care <ul style="list-style-type: none"> • Demonstrates dignity and respect toward patients/families • Encourages the participation of patients/families in their care 			1	2	3	4	5	
3. Intern was motivated and engaged throughout rotation, asking questions when appropriate			1	2	3	4	5	
4. Used effective education and counseling skills to facilitate behavior change (CRDN 3.10)			1	2	3	4	5	N/A
5. Demonstrate effective communication and documentation skills for clinical and client services in a variety of formats and settings, which include telehealth and other information technologies and digital media. (CRDN 3.7)			1	2	3	4	5	N/A
6. Develop nutrition education materials that are culturally and age appropriate and designed for the literacy level of the audience. (CRDN 3.9)			1	2	3	4	5	N/A
7. Actively contribute to nutrition and dietetics professional and community organizations (CRDN 2.9).			1	2	3	4	5	N/A
8. Show cultural humility in interactions with colleagues, staff, clients, patients, and the public (CRDN 2.11)			1	2	3	4	5	N/A
9. Implement culturally sensitive strategies to address cultural biases and differences (CRDN 2.12)			1	2	3	4	5	N/A
10. Perform routine health screening assessments including measuring blood pressure, conducting blood glucose and/or cholesterol testing, etc. (CRDN 3.3)			1	2	3	4	5	N/A
11. Designed, implemented and evaluated presentations to a target audience (CRDN 3.8)			1	2	3	4	5	N/A

12. Apply current information technologies to develop, manage, and disseminate nutrition information and data (social media, blogs, websites, etc.) (CRDN 4.4)	1	2	3	4	5	N/A	
13. Advocate for local, state, or national legislative and regulatory issues or policies impacting the nutrition and dietetics practice (CRDN 2.13)	1	2	3	4	5	N/A	
14. Demonstrated professional attributes of taking initiative, proactively developing solutions and/or risk taking (CRDN 2.10)	1	2	3	4	5		
15. Demonstrated professional attributes of flexibility and time management (CRDN 2.10)	1	2	3	4	5		
16. Assessed the nutritional status of individuals appropriately (CRDN 3.1)	1	2	3	4	5	N/A	
17. Completed documentation that follows professional guidelines (CRDN 3.1)	1	2	3	4	5	N/A	
18. Developed and delivered products, programs or services that promoted consumer health, wellness and lifestyle management (CRDN 3.11)	1	2	3	4	5	N/A	
19. Deliver respectful, science-based answers to client/patient questions concerning emerging trends (CRDN 3.12)	1	2	3	4	5	N/A	
20. Practice in compliance with current federal regulations and state statutes and rules, as applicable and in accordance with accreditation standards and the Scope of Dietetics Practice, and the Code of Ethics for the Profession of Dietetics (CRDN 2.1)	1	2	3	4	5		
21. OVERALL, how did the intern perform in this rotation?	1	2	3	4	5		
	Not acceptable	achieving what's expected for intern		demonstrating competence of RDN			
Strengths							
Areas for improvement							
Additional Comments:							
Preceptor Signature:				Date:			

St. Cloud Hospital Dietetic Internship (SCH DI) Intern Evaluation: **Food Service**

Intern name:

Preceptor name:

1 Not acceptable	2 achieving what is expected of an intern	3	4	5 demonstrating competence of RDN		Comments:
How many days was the intern late?		0 days	1 day	2 days	3+days	
How many hours of supervised practice did the intern complete during this rotation?						
1. Clothes/appearance complied with dress code	1	2	3	4	5	
2. Demonstrated patient/family-centered care/mentality <ul style="list-style-type: none"> • Demonstrates dignity and respect toward patients/families • Encourages the participation of patients/families in their care 	1	2	3	4	5	N/A
3. Intern was motivated and engaged throughout rotation, asking questions when appropriate	1	2	3	4	5	
4. Demonstrated active participation, teamwork and contribution in group settings (CDN 2.3)	1	2	3	4	5	N/A
5. Work collaboratively with NDTRs and/or support personnel in other disciplines. (CRDN 2.5)	1	2	3	4	5	N/A
6. Demonstrated professional attributes of taking initiative, proactively developing solutions and/or risk taking (CRDN 2.10)	1	2	3	4	5	
7. Demonstrated professional attributes of flexibility and time management (CRDN 2.10)	1	2	3	4	5	
8. Demonstrated assertiveness when needed while respecting life experiences, culture, etc with staff (CRDN 2.8)	1	2	3	4	5	N/A
9. Show cultural humility in interactions with clients, colleagues and staff. (CRDN 2.11)	1	2	3	4	5	N/A
10. Selected indicators of program quality and/or service and measured achievement of outcomes (CRDN 1.1)	1	2	3	4	5	N/A
11. Analyzed risk in practice (such as risks to achieving goals/objectives, risk management plan, foodborne illness, etc). (CRDN 4.10)	1	2	3	4	5	N/A
12. Coordinated procurement, production, distribution and service of goods/services (CRDN 3.13)	1	2	3	4	5	N/A
13. Developed and evaluated recipes, formulas and menus for acceptability and affordability that accommodate culture and	1	2	3	4	5	N/A

health needs of various populations, groups and individuals (CRDN 3.14)							
14. Performed management functions related to safety, security and sanitation (CRDN 4.2)	1	2	3	4	5	N/A	
15. Conducted clinical and customer service quality management activities (CRDN 4.3)	1	2	3	4	5	N/A	
16. Conducted feasibility studies for products, programs, or services with consideration of cost and benefits (CRDN 4.7)	1	2	3	4	5	N/A	
17. Propose and use procedures as appropriate to the practice setting to reduce waste and protect the environment (CRDN 4.6)	1	2	3	4	5	N/A	
18. Design, implement and evaluate presentations to a target audience (CRDN 3.8)	1	2	3	4	5	N/A	
19. Analyzed quality, financial, and productivity data for use in planning (CRDN 4.5)	1	2	3	4	5	N/A	
20. Develop a plan to provide or develop a product, program or service that includes a budget, staffing needs, equipment and supplies (CRDN 4.8)	1	2	3	4	5	N/A	
21. Practice in compliance with current federal regulations and state statutes and rules, as applicable and in accordance with accreditation standards and the Scope of Dietetics Practice, and the Code of Ethics for the Profession of Dietetics (CRDN 2.1)	1	2	3	4	5		
22. OVERALL, how did the intern perform in this rotation?	1 Not acceptable	2 achieving what's expected for intern	3	4	5 demonstrating competence of RDN		
Strengths:							
Areas for improvement:							
Comments:							
Preceptor Signature:				Date:			

Hospital Food Service Rotation Checklist for Competencies

Date, initials	Activity
	Complete 3 meal tray accuracy sheets
	Achieve a "3" or better on CRD 2.5: demonstrated active participation, teamwork and contribution in group settings
	Provide an education to catering associates
	Supervise tray line
P / F	Conduct meal rounds for 5 days
P / F	Complete a food waste study
P / F	Complete a sanitation checklist
	Demonstrated excellent planning and coordination/delegation with/to other staff when developing Theme Meal project

P= pass

F= fail

St. Cloud Hospital Dietetic Internship (SCH DI) Program Education Evaluation

Interns are to turn in 2 of these throughout MNT rotations. They are both due BEFORE staff relief. Ideally, the first eval and second eval will be minimally 1 month apart. This is to be filled out by the preceptor. Education must be for a diet related to chronic disease (cannot count an evaluation towards Coumadin-Vitamin K education), ONE OF WHICH MUST BE CARDIAC RELATED (post-PCI ed, heart failure ed, Pritikin, etc)

Intern Name:

Preceptor Name:

Topic of Education:

Date:

1 Not acceptable	2 achieving what is expected of an intern	3	4	5 demonstrating competence of RDN		N/A	Comments:
1. Chose and/or developed appropriate education materials	1	2	3	4	5	N/A	
2. Demonstrated effective communication skills using oral, print, visual, and/or other communication methods for maximizing client education (CRDN 3.3)	1	2	3	4	5		
3. Introduction of self and observer	1	2	3	4	5		
4. Established rapport and put the patient/client at ease	1	2	3	4	5		
5. Used appropriate language/terminology so patient/client could understand	1	2	3	4	5		
6. Organized the instruction in a logical manner	1	2	3	4	5		
7. Explained the purpose of the diet	1	2	3	4	5	N/A	
8. Used effective education and counseling skills to facilitate behavior change, including respectful, science-based answers to patient/client questions regarding emerging trends. (CRDN 3.7 & 3.10)	1	2	3	4	5		
9. Applied evidence-based guidelines in nutrition information provided (CRDN 1.2)	1	2	3	4	5		
10. Answered questions appropriately	1	2	3	4	5	N/A	
11. Ended discussion appropriately	1	2	3	4	5		
12. Showed cultural humility in interactions with patient/family if applicable (CRDN 2.11)	1	2	3	4	5	N/A	
13. Overall education score	1	2	3	4	5		

Strengths

Areas for improvement

Other Comments:

St. Cloud Hospital Dietetic Internship (SCH DI) Program **Malnutrition Evaluation**

Interns are to submit both Malnutrition Evals BEFORE staff relief. Ideally, the first eval and second eval will be completed minimally 1 month apart.
This is to be filled out by the preceptor.

Intern Name:

Preceptor Name:

Name of Unit:

Date:

1 Not acceptable	2	3 achieving what is expected of an intern	4	5 demonstrating competence of RDN			Comments:
1. Accurately calculated percent weight loss (if any) and/or growth velocity using ASPEN guidelines	1	2	3	4	5	N/A	
2. Appropriately assessed oral intake using ASPEN guidelines	1	2	3	4	5	N/A	
3. Appropriately assessed for muscle wasting (CRDN 3.2)	1	2	3	4	5	N/A	
4. Appropriately assessed for adipose tissue loss (CRDN 3.2)	1	2	3	4	5	N/A	
5. Appropriately assessed fluid accumulation	1	2	3	4	5		
6. Appropriately and accurately used hand grip meter to assess strength	1	2	3	4	5	N/A	
7. Established rapport with patient/family	1	2	3	4	5	N/A	
8. Obtained appropriate information during patient interview (duration/amount of weight loss, extent of decreased intake, etc)	1	2	3	4	5	N/A	
9. Organized visit in a logical manner	1	2	3	4	5		
10. Diagnosed malnutrition correctly using ASPEN criteria for signs/symptoms or was able to correctly defend that the patient was not malnourished	1	2	3	4	5		
11. Chose appropriate intervention(s)	1	2	3	4	5		
12. Chose appropriate follow up plan	1	2	3	4	5		
13. Overall score	1	2	3	4	5		

Strengths

Areas for improvement

Other Comments:

**St. Cloud Hospital Dietetic Internship
Diabetes Checklist**

Give this to your primary preceptor during your diabetes rotation on the **FIRST** day of the rotation.
Ensure all competencies are signed off on by the end of the diabetes rotation.

Competency	Pass / Fail	Date	RDN signature
Intern performed a routine health screening including measuring blood pressure and conducting blood glucose or cholesterol testing (CRDN 3.3)			
Intern provided instruction to a client, or to a clinician, for self-monitoring blood glucose considering diabetes medication and medical nutrition therapy plan (CRDN 3.4)			

Dietetic Intern Swallow Screen

Complete **minimally one** of these swallow screens during inpatient hospital rotations and have your preceptor sign and date.

Neuro/Stroke Swallow Screen			
1. Is the patient lethargic and unable to participate in swallow screen?	Yes	No	Unsure
2. Does the patient have a trach?	Yes	No	Unsure
3. Does the patient have a pneumonia diagnosis?	Yes	No	Unsure
4. Is the patient drooling?	Yes	No	Unsure
5. Does the patient have slurred speech that is new or worse?	Yes	No	Unsure
6. Does the patient have a facial droop that is new or worse?	Yes	No	Unsure
7. Are there any Yes answers in this group?	Yes	No	

Dysphagia/Post-Extubation Swallow Screen			
1. Has the patient been extubated less than 4 hours?	Yes	No	Unsure
2. RASS score less than 0 or greater than +1?	Yes	No	Unsure
3. Is the patient stridorous when breathing?	Yes	No	Unsure
4. Does the patient have a weak, ineffective cough?	Yes	No	Unsure
5. Does the patient drool?	Yes	No	Unsure
6. Oral suction needed to manage secretions?	Yes	No	Unsure
7. Does the patient have a wet sounding voice?	Yes	No	Unsure
8. Oxygen saturations less than 90% on current oxygen?	Yes	No	Unsure
9. Are there any Yes answers in this group?	Yes	No	

I acknowledge _____ appropriately conducted this swallow screen on _____.
(intern name) (date)

(preceptor signature)

(preceptor name, printed)

**St. Cloud Hospital Dietetic Internship (SCH DI)
Formal Complaint Form**

Directions:

1. Please refer to the Reporting Concerns Policy located in the Student and/or Preceptor Handbook prior to completing this form. This form is considered a formal complaint that has not been able to be successfully resolved with preceptors, Internship Leadership or others involved.
2. Please complete form in its entirety so that there is ample information to allow for appropriate action.
3. This complaint may be submitted anonymously; however, without contact information, internship leadership will be unable to respond to you directly regarding the matter.

Personal Information (if not desired to remain anonymous):

Your full legal name:

Status (prospective intern, current intern, graduated intern, preceptor):

Position, if applicable:

Year (or expected year) of program completion if applicable:

Mailing Address:

City:

State:

Zip:

Your preferred email address:

Telephone number:

Complaint Information:

1. First date on which the event(s) occurred:
2. Please indicate to what this complaint is referring (can select more than one):
 - Specific preceptor (indicate name and location) _____
 - More than one preceptor (indicate names and locations) _____
 - A specific rotation (indicate rotation) _____
 - The St. Cloud Hospital DI Program in general
3. Please describe your complaint in detail. Include the name(s) of individual(s) involved, locations and dates.
4. What attempts have you made to resolve this complaint up until now? Please include the name(s) of any individual(s) you contacted and what actions were made.
5. Why do you think the complaint was not able to be resolved in your prior attempts?
6. What resolution would you consider fair?
7. Any other information you would like to provide?
8. Is there any individual(s) that you do NOT want to know of your complaint? Please keep in mind that proper resolution may be difficult if an involved person cannot be asked to explain or respond. Also note that retaliation for making a complaint is prohibited and will be considered a serious violation of professional responsibility.

I hereby certify that the above information is true and correct to the best of my knowledge and belief. I grant permission for this complaint to be forwarded to St. Cloud Hospital Dietetic Intern officials for purposes of investigation and response and filed for future reference.

Your signature

Today's date

Competency	Date and/or rotation completed	How competency was met – specific method
<p>CRDN 1.1: Select indicators of program quality and/or customer service and measure achievement of objectives. <i>Tip: outcomes may include clinical, programmatic, quality, productivity, economic or other outcomes in wellness, management, sports, clinical settings, etc)</i></p>		
<p>CRDN 1.2: Evaluate research and apply evidence-based guidelines, systematic reviews and scientific literature in nutrition and dietetics practice.</p>		
<p>CRDN 1.3: Justify programs, products, services and care using appropriate evidence or data.</p>		
<p>CRDN 1.4: Conduct projects using appropriate research or quality improvement methods, ethical procedures and data analysis utilizing current and/or new technologies.</p>		
<p>CRDN 1.5: Incorporate critical-thinking skills in overall practice.</p>		
<p>CRDN 2.1: Practice in compliance with current federal regulations and state statutes and rules, as applicable, and in accordance with accreditation standards and the Scope of Practice for the Registered Dietitian Nutritionist, Standards of Practice, Standards of Professional Performance, and Code of Ethics for the Profession of Nutrition and Dietetics.</p>		
<p>CRDN 2.2: Demonstrate professional writing skills in preparing professional communications. <i>Tip: research manuscripts, project proposals, education materials, policies and procedures</i></p>		
<p>CRDN 2.3: Demonstrate active participation, teamwork and contributions in group settings.</p>		
<p>CRDN 2.4: Function as a member of interprofessional teams.</p>		
<p>CRDN 2.5: Work collaboratively with NDTRs and/or support personnel in other disciplines.</p>		
<p>CRDN 2.6: Refer clients and patients to other professionals and services when needs are beyond individual scope of practice.</p>		
<p>CRDN 2.7: Apply change management strategies to achieve desired outcomes.</p>		
<p>CRDN 2.8: Demonstrate negotiation skills. <i>Showing assertiveness when needed, while respecting life experiences, culture, etc.</i></p>		
<p>CRDN 2.9: Actively contribute to nutrition and dietetics professional and community organizations.</p>		
<p>CRDN 2.10: Demonstrate professional attributes in all areas of practice</p>		
<p>CRDN 2.11: Show cultural humility in interactions with colleagues, staff, clients, patients and the public.</p>		
<p>CRDN 2.12: Implement culturally sensitive strategies to address cultural biases and differences.</p>		
<p>CRDN 2.13: Advocate for local, state or national legislative and regulatory issues or policies impacting the nutrition and dietetics profession.</p>		

CRDN 3.1: Perform Medical Nutrition Therapy by utilizing the Nutrition Care Process including use of standardized nutrition terminology as a part of the clinical workflow elements for individuals, groups and populations of differing ages and health status, in a variety of settings.		
CRD 3.2: Conduct nutrition focused physical exams.		
CRDN 3.3: Perform routine health screening assessments including measuring blood pressure, conducting waived point-of-care laboratory testing (such as blood glucose or cholesterol), recommending and/or initiating nutrition-related pharmacotherapy plans (such as modifications to bowel regimens, carbohydrate to insulin ratio, B ₁₂ or iron supplementation).		
CRDN 3.4: Provide instruction to clients/patients for self-monitoring blood glucose considering diabetes medication and medical nutrition therapy plan.		
CRDN 3.5: Explain the steps involved and observe the placement of nasogastric or nasoenteric feeding tubes; if available, assist in the process of placing nasogastric or nasoenteric feeding tubes.		
CRND 3.6: Conduct a swallow screen and refer to the appropriate health care professional for full swallow evaluation when needed.		
CRDN 3.7: Demonstrate effective communication and documentation skills for clinical and client services in a variety of formats and settings, which include telehealth and other information technologies and digital media.		
CRDN 3.8: Design, implement and evaluate presentations to a target audience.		
CRDN 3.9: Develop nutrition education materials that are culturally and age appropriate and designed for the literacy level of the audience.		
CRDN 3.10: Use effective education and counseling skills to facilitate behavior change.		
CRDN 3.11: Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management.		
CRDN 3.12: Deliver respectful, science-based answers to client/patient questions concerning emerging trends.		
CRDN 3.13: Coordinate procurement, production, distribution and service of goods and services, demonstrating and promoting responsible use of resources.		
CRDN 3.14: 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.		
CRDN 4.1: Participate in management functions of human resources (such as training and scheduling).		
CRDN 4.2: Perform management functions related to safety, security and sanitation that affect employees, clients, patients, facilities and food.		

CRDN 4.3: Conduct clinical and client service quality management activities (such as quality improvement or quality assurance projects).		
CRDN 4.4: Apply current information technologies to develop, manage and disseminate nutrition information and data.		
CRDN 4.5: Analyze quality, financial and productivity data for use in planning.		
CRDN 4.6: Propose and use procedures as appropriate to the practice setting to promote sustainability, reduce waste and protect the environment.		
CRDN 4.7: Conduct feasibility studies for products, programs or services with consideration of costs and benefits.		
CRDN 4.8: Develop a plan to provide or develop a product, program or service that includes a budget, staffing needs, equipment and supplies.		
CRDN 4.9: Engage in the process for coding and billing for nutrition and dietetics services to obtain reimbursement from public or private payers, fee-for-service and value-based payment systems.		
CRDN 4.10: Analyze risk in nutrition and dietetics practice (such as risks to achieving set goals and objectives, risk management plan, or risk due to clinical liability or foodborne illness).		
CRDN 5.1: Perform self-assessment that includes awareness in terms of learning and leadership styles and cultural orientation and develop goals for self-improvement.		
CRDN 5.2: Identify and articulate one's skills, strengths, knowledge and experiences relevant to the position desired and career goals		
CRDN 5.3: Prepare a plan for professional development according to Commission on Dietetic Registration guidelines.		
CRDN 5.4: Advocate for opportunities in professional settings (such as asking for additional responsibility, practicing negotiating a salary or wage or asking for a promotion).		
CRDN 5.5: Demonstrate the ability to resolve conflict.		
CRDN 5.6: Promote team involvement and recognize the skills of each member.		
CRDN 5.7: Mentor others.		
CRDN 5.8: Identify and articulate the value of precepting.		

Unit Rotation Prep Sheet

Unit(s):

Before the rotation:

- Email the preceptor(s) by Monday the week prior to the start of your rotation.
- Complete common terminology, medications, labs, diets and other questions prior to the first day of the rotation

Primary Preceptor(s):

Office Location:

Rotation hours:

Typical patient population:

Rounds:

Rotation Objectives:

Upon completion of the _____ rotation, the dietetic intern will be able to:

Preparation for the Rotation:

Complete prior to 1st day of rotation:

Terminology: Provide a brief definition/description of each term/diagnosis/procedure (10-20 total?):

Medications: Provide a brief description of what each medication is used for and any nutrition related interactions [preceptor, remove this for final draft: suggest including minimally 5-10 medications that you commonly list in your chart notes as "pertinent."]

Labs: Define each lab and how it relates to nutrition. Explain what a high or low lab could mean and what could be done (if anything) nutritionally to correct it. [preceptor, remove this for final draft: suggest including minimally 5-10 labs that you commonly list in your chart notes as "pertinent."]

Common diets: Be familiar with diets commonly used on this unit.

Other reading/preparation for rotation:

Assessment of learning:

Finish by last day of rotation. It is recommended to complete any corresponding assignments that are due to blackboard *during* the rotation or shortly after.

Assignment(s) that Correspond to Rotation (if applicable):

Additional assignment(s) given by preceptor (optional):

I have received and reviewed the 2022-2023 version of the Preceptor Handbook. I understand that I am requested to read the handbook in its entirety and to contact Internship Leadership regarding any questions regarding any information within or not included in the handbook. I acknowledge that the information in the handbook is subject to change and understand that major changes will be communicated by Internship Leadership.

Preceptor Signature

Date

Preceptor Name (printed)