



Georgia Department of Public Health Dietetic Internship

Long Term Care Rotation Description

This placement will provide the intern with exposure to the role of the dietitian in a long-term care skilled nursing facility highlighting the special needs of institutionalized individuals. The intern will be able to complete the nutrition care process, including appropriate chart documentation. The intern will distinguish the roles of each health care member and participate in interdisciplinary team meetings, regulatory compliance activities and clinical quality care audits.

Before the rotation:

1. Contact preceptor two weeks before the start of the rotation to arrange the rotation schedule
2. Complete Long Term Care Rotation pre-readings
 - a. Review Federal Nursing Home Regulations power point at www.fmdrl.org/index.cfm?event=c.getAttachment&riid=3048
 - b. Review Guidance to Surveyors for Long Term Care Facilities at (with special attention to entries related to nutrition and hydration http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_pp_guidelines_ltc.pdf)
 - c. Nutrition Diagnosis and Related Care, 7th edition pages 56-66
3. Complete the clinical pre-rotation modules

Length of rotation: 3 to 5 weeks (72 – 120 hours) **Standard hours:** TBD by rotation preceptor

Expectations:

1. Interns have completed clinical pre rotation modules entirely before the first day of any clinical rotation
2. Interns will have completed LTC pre-readings prior to the beginning of the rotation
3. Interns will meet with preceptor on the first day of rotation to discuss the preceptor/intern task list and pre rotation module
4. Interns will abide by all internship policies

Resources needed for rotation:

1. Calculator and black ink pen
2. Food Medication Interaction Handbook, Nutrition Assessment Pocket Guide and Nutrition Care Process Pocket Guide, Nutrition and Diagnosis Related Care Textbook, Nutrition Diagnosis and Intervention: Standardized Language for the Nutrition Care Process, Nutrition Therapy & Pathophysiology, 2nd edition
3. Completed clinical pre-rotation module
4. Computer and internet access
5. Transportation

**Activities:**

1. Nutrition Care Process on a variety of patients/residents
2. Regulatory compliance review
3. Meal rounds and supplement review
4. Interdisciplinary care team meetings

Learning Objectives:

1. The intern will be able to utilize technology to access credible scientific sources to research nutrition related question and apply evidence-based guidelines
2. The intern will be able to appropriately complete nutrition assessments, distinguish nutrition diagnoses, plan nutrition interventions and identify parameters to monitor intervention success
3. Intern will be able to confidently and effectively work as part of an interdisciplinary care team to provide high quality patient care
4. Intern will be able to conduct quality monitoring activities, analyze results and make recommendations for improvement
5. The intern will be able to identify, propose and use procedures to reduce waste and protect the environment.

Competencies:

1. CRD 1.1: Select indicators of program quality and/or customer service and measure achievement objectives
2. CRD 1.2: Apply evidence-based guidelines, systematic reviews and scientific literature (such as the Academy's Evidence Analysis Library and Evidence-based Nutrition Practice Guidelines, the Cochrane Database of Systematic Reviews and the U.S. Department of Health and Human Services, Agency for Healthcare Research and Quality, National Guideline Clearinghouse Web sites) in the nutrition care process and model and other areas of dietetics practice
3. CRD 1.3: Justify programs, products, services and care using appropriate evidence or data
4. CRD 2.1: Practice in compliance with current federal regulations and state statutes and rules, as applicable and in accordance with accreditation standards and the Scope of Dietetics Practice and Code of Ethics for the Profession of Dietetics
5. CRD 2.5: Demonstrate active participation, teamwork, and contributions in group settings
6. CRD 2.6: Assign patient care activities to DTRs and support personnel as appropriate
7. CRD 2.7: Refer clients and patients to other professionals and services when needs are beyond individual scope of practice
8. CRD 2.8: Apply leadership skills to achieve desired outcomes
9. CRD 2.10: Establish collaborative relationships with other health professionals and support personnel to deliver effective nutrition services
10. CRD 2.11: Demonstrate professional attributes within various organizational cultures



11. CRD 3.1: Perform the Nutrition Care Process (a through e below) and use standardized nutrition language for individuals, groups and populations of differing ages and health status, in a variety of settings
 - a. Assess the nutritional status of individuals, groups, and populations in a variety of settings where nutrition care is or can be delivered
 - b. Diagnose nutrition problems and create problem, etiology, signs and symptoms (PES) statements
 - c. Plan and implement nutrition interventions to include prioritizing the nutrition diagnosis
 - d. Monitor and evaluate problems, etiologies, signs, symptoms, and the impact of interventions on the nutrition diagnosis
 - e. Complete documentation that follows professional guidelines, guidelines required by the health care systems and guidelines required by the practice setting
12. CRD 3.2: Demonstrate effective communication skills for clinical and customer services in a variety of formats
13. CRD 4.2: Perform management functions related to safety, security and sanitation that affect employees, customers, patients, facilities and food
14. CRD 4.4: Conduct clinical and customer service quality management activities
15. CRD 4.5: Use current informatics technology to develop, store, retrieve and disseminate information and data
16. CRD 4.7: Propose and use procedures as appropriate to the practice setting to reduce waste and protect the environment
17. CRD 4.11: Code and bill for dietetic/nutrition services to obtain reimbursement from public or private insurers

Evaluation:

1. Intern activities and assignments will be evaluated by the preceptor using grading definitions included in final evaluation form.
2. Interns will be given a final evaluation at the end of the rotation using the GDPH DI final evaluation form.
3. The final evaluation form will include grades from all activities/assignments as well as a review of professionalism parameters

After the rotation:

1. Submit electronically to DI Program Director
 - a. Signed and dated rotation orientation check list
 - b. Completed signed and dated rotation goals and reflections form
 - c. Documentation from all activities and assignments
 - d. All signed and dated activity logs for the entire LTC rotation
 - e. Completed, signed and dated rotation hours summary form
 - f. Completed and signed rotation final evaluation form