Georgia Department of Public

# Acute Care Rotation Curriculum WIC Dietetic Internship Program



# Georgia Department of Public Health WIC Dietetic Internship Program

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Planned Activity: Conduct clinical quality improvement and outcomes study

CRD 1.1, CRD 1.3, CRD 1.5, CRD 2.2, CRD 2.5, CRD 2.8, CRD 2.11,

CRD 4.4, CRD 4.5, CRD 4.6

### Resources:

1. <a href="http://www.med.unc.edu/cce/files/education-training/QI%20methods.pdf">http://www.med.unc.edu/cce/files/education-training/QI%20methods.pdf</a>

2. <a href="http://www.jointcommission.org/">http://www.jointcommission.org/</a>

# **Learning Objective:**

1. The intern will be able to conduct quality monitoring activities, analyze results and make recommendations for improvement.

## **Intern Directions:**

- 1. Meet with preceptor to plan the activity. Discuss the role of nutrition in the Joint Commission Core Team and the nutrition department performance indicators and goals. Discuss the nutrition department operations and finance resources and decision making process. If possible, attend a Joint Commission Core Team meeting and/or a Performance/Quality Indicator meeting with preceptor or other department designee. Complete the reflection brief after attending these meeting(s).
- 2. With preceptor, determine a performance indicator goal to review. Collect the appropriate data to determine if the goal was met over a specified period (i.e., 1 month).
- Analyze the data and submit a written report of your data collection methods, analysis
  and findings. Include best practices identified as well as opportunities for improvement
  with recommendations on what might be done to make those improvements. Submit to
  preceptor for review, evaluation and discussion.
- 4. At the end of the rotation submit to DI Director via electronic format your reflection briefs and the written analysis/recommendation paper.

- 1. Lead discussion with intern on topics in number 2 of intern directions.
- 2. If possible, attend with the intern a Joint Commission Core Team meeting and/or a Performance/Quality Indicator meeting with preceptor or other department designee. Complete the reflection brief after attending these meeting(s). Review reflection briefs and discuss with intern filling in any knowledge or information gaps.
- 3. With intern, determine a performance indicator goal to review. Identity data sources for intern and demonstrate how data should be collected and review. Have the intern collect the appropriate data to determine if the goal was met over a specified period (i.e., 1 month). Review written report and discuss with intern. Instruct intern to make any corrections for resubmission. If resubmission required, review the resubmission and give feedback.
- 4. At the completion of the clinical rotation, using the Definition of Performance Standards, score the intern on overall performance in this area on the final evaluation form.



# Reflection Brief Name: \_\_\_\_\_ Date: \_\_\_\_\_ Write the learning objective and a brief description of the activity. Discuss how the activity/experience has impacted you personally. What does it mean to you? State and give an example of what knowledge, skill and/or ability you gained or enhanced from completing this activity. Discuss how the experience has impacted your professional practice.



Planned Activity: Perform Nutrition Care Process

CRD 1.1, CRD 1.2, CRD 2.1, CRD 2.6, CRD 2.7, CRD 2.11, and CRD 3.1

a-e, CRD 3.2, CRD 4.5

# **Learning Objectives:**

1. The intern will be able to appropriately complete nutrition assessments, distinguish nutrition diagnoses, write nutrition goals, plan nutrition interventions and identify parameters to monitor intervention success.

## Resources:

- 1. Completed clinical pre rotation modules
- 2. http://www.eatright.org/healthProfessionals/content.aspx?id=7077
- 3. ADA Pocket Guide to Nutrition Assessment, 2<sup>nd</sup> edition
- 4. Food Medication Interaction Handbook, 17th edition
- 5. Nutrition and Diagnosis Related Care, 7th edition
- 6. Nutrition Therapy&Pathophysiology, 2<sup>nd</sup> edition by Nelms, et al (Chapters 2, 3, 4, and 6)

### **Intern Directions:**

- 1. Review all resources.
- 2. Using the appropriate facility forms, conduct nutrition care process (nutrition assessment, diagnosis, intervention and goal, and monitoring/evaluation plan) on a variety of patients. (minimum of 6 per week of rotation)
  - a. Must to include those with diagnosis of (<u>diabetes, overweight, obesity, cancer, cardiovascular disease, gastrointestinal disorders, respiratory, enteral/parenteral feeding etc.</u>) in a variety of population groups (men, women, geriatric, adult, etc. as available)
  - b. Record all nutrition care contacts on conditions, populations and disciplines form.
- 3. Receive preceptor feedback on NCP performance.
- 4. At the completion of the rotation, submit completed conditions, populations and disciplines form.

- 1. Demonstrate to and assist the intern in completing NCP as needed.
- 2. Arrange for the intern to complete nutrition care process on a variety of patients (demographic and disease variety).
- 3. At the completion of the clinical rotation, using the Definition of Performance Standards, score the intern on overall performance in this area on the final evaluation form.



Planned Activity: Interdisciplinary Care

Competencies: CRD 2.5, CRD 2.6, CRD 2.7, CRD 2.8, CRD 2.10, 2.11

# **Learning Objectives:**

1. Intern will be able to confidently and effectively work as part of an interdisciplinary care team to provide high quality patient care.

## Resources:

- 1. http://www.eatrightmich.org/pdf/HODBackgrounderIT.pdf
- 2. Nutrition Therapy&Pathophysiology, 2<sup>nd</sup> edition by Nelms, et al (Chapter 11 "Role of the Dietitian in the Health Care System").

### Intern Directions:

- 1. Review resources.
- 2. With preceptor, review policies and/or regulations on Interdisciplinary Care Team Conference/Meetings and referral protocols at the facility.
- 3. With preceptor, prepare for and attend interdisciplinary care team meetings and rounds and participate in meetings as directed by preceptor. *Complete the reflection brief after attending these meeting(s)*.
- Practice effective communication with medical care staff (MD, RN, SW, RD's, OT, ST, PT, RT, Pharmacy and others) and make referrals to other health professionals when deemed necessary.
  - a. Record all interdisciplinary care contacts on conditions, populations and disciplines form.
- 5. At the completion of the rotation submit completed conditions, populations and disciplines form as well as the reflection brief.

- 1. Review with intern all facility policies and/or regulations on Interdisciplinary Care Team Conference/Meetings and referral protocol.
- 2. Take intern to interdisciplinary care team meeting(s). Discuss the RD role in the care team and allow intern to participate as appropriate.
- 3. Orient intern to multidisciplinary referral resources and protocol for making referrals and allow the intern to make referrals to other disciplines as appropriate.
- 4. At the completion of the clinical rotation, using the Definition of Performance Standards, score the intern on overall performance in this area on the final evaluation form.



# Reflection Brief

Name:	Date:	
Write the learning objective and a brid	ief description of the activity.	
Discuss how the activity/experience h	has impacted you personally. What does	it mean to you?
State and give an example of what kr completing this activity.	nowledge, skill and/or ability you gained o	or enhanced from
Discuss how the experience has impa	pacted your professional practice.	



Planned Activity: Educational Material Development/Adaptation/Review

Competencies: CRD 1.2, CRD 1.4, CRD 2.2, CRD 2.3, CRD 3.2, CRD 3.3, CRD 3.4

# **Learning Objectives:**

1. The intern will be able to appropriately develop or adapt credible educational materials based on the needs of a target audience

## Resources:

- 1. A Guide to Creating and Evaluating Patient Materials
- 2. <a href="http://www.mainehealth.org/workfiles/MH\_LRC/MH\_Print%20Guidelines\_Intranet.pdf">http://www.mainehealth.org/workfiles/MH\_LRC/MH\_Print%20Guidelines\_Intranet.pdf</a>
- 3. <a href="http://snap.nal.usda.gov/professional-development-tools/health-literacy/developing-and-evaluating-materials">http://snap.nal.usda.gov/professional-development-tools/health-literacy/developing-and-evaluating-materials</a>
- 4. <a href="http://snap.nal.usda.gov/professional-development-tools/hot-topics-z/health-literacy">http://snap.nal.usda.gov/professional-development-tools/hot-topics-z/health-literacy</a>
- 5. <a href="http://www.health.gov/communication/literacy/guickguide/factsbasic.htm">http://www.health.gov/communication/literacy/guickguide/factsbasic.htm</a>
- 6. http://www.cdc.gov/healthliteracy/introduction.html
- 7. http://www.cdc.gov/healthliteracy/pdf/simply\_put.pdf
- 8. http://www.cdc.gov/healthliteracy/developmaterials/index.html

### Intern Directions:

- 1. Review all resource material listed above. Review all items in the Health Literacy section in the Clinical Rotation content folder on Coursesites.
- 2. With preceptor, review facility patient education materials and using health literacy concepts, do one of the following as assigned by preceptor:
- 3. Develop new patient education material on a specified topic for a specified audience.
- 4. Adapt existing education material to fit patient literacy needs.
- 5. Write a brief review of currently used patient education materials noting those that comply with health literacy concepts and those that could be improved.
- 6. Submit to preceptor for review and evaluation.
- 7. At the completion of the rotation, submit to DI Director electronically, the material made/adapted and/or the written review.

- 1. Review health literacy concepts with intern and discuss how the organization approaches improving health literacy.
- 2. Review currently used patient education materials with the intern. Discuss the process by which education materials are selected at the organization.
- 3. Assign intern to complete option a, b, or c under step 2 in Intern Directions.
- 4. Review the completed assignment and provide feedback on performance.
- 5. At the completion of the clinical rotation, using the Definition of Performance Standards, score the intern on overall performance in this area on the final evaluation form.



Planned Activity: Clinical Evidence Analysis

Competencies: CRD1.2, CRD 1.4, CRD 1.5, CRD 2.2, CRD 3.4, CRD 4.5

# **Learning Objectives:**

 The intern will be able to utilize technology to access credible scientific sources to research nutrition related question and apply evidence-based guidelines to dietetics practice.

## Resources:

- www.eatright.org Journal of the Academy of Nutrition and Dietetics and Evidence Analysis Library
- 2. Evidence Analysis module from community rotation

### **Intern Directions:**

- 1. Meet with preceptor to determine what evidence analysis article or topic you will research.
- 2. Conduct your research on the assigned topic and write your report using the clinical evidence analysis assignment guidelines. Present your findings to your preceptor and others as available.
- 3. Submit written report to preceptor for grading.
- 4. Retain the research report, completed, graded and signed clinical research scoring guideline form and submit electronically to DI Director at the end of the clinical rotation; retain a copy for your files.

- 1. Assign a specific evidence analysis article or topic that you would like for the intern to research and present. Assist intern with locating resources as needed. **Note: The intern may be assigned more than one article for review or may be assigned a research paper project at the preceptor's discretion.**
- 2. Grade the research assignment using the clinical evidence analysis report question guidelines.
- 3. At the completion of the rotation, record score for this activity on the clinical rotation final evaluation form.



# **Clinical Evidence Analysis Report Questions**

Parameter	Total Points	Points Earned	Comments
What is the purpose of the article/research study? What was the scientific question or hypothesis?	5		
Does the methodology support the question? Explain.	10		
What was the conclusion of the study? Is it valid and reliable? What were the limitations of the study? Explain your answers.	30		
How can information from this article be used in your practice?	10		
Would you recommend this article to RD's? Why or why not?	10		
Format Double spaced with 12 point Times New Roman font Correct grammar and spelling Cited correctly in body and bibliography Includes aid such as table or chart to visually explain the information	10		
	75		

Score:/7	5 =			
4.0= 95-100	3.5=85-94	3.0=75-84	2.0=74 or less	



Planned Activity: Clinical Case Study

Competencies: CRD 1.2, CRD 2.2, CRD 3.1(a-e)

# **Learning Objective(s):**

1. The intern will be able to appropriately complete nutrition assessments, distinguish nutrition diagnoses, plan nutrition interventions and identify parameters to monitor intervention success.

### Resources:

- <a href="http://www.eatright.org/healthProfessionals/content.aspx?id=7077">http://www.eatright.org/healthProfessionals/content.aspx?id=7077</a> Nutrition Care Process
- 2. ADA Pocket Guide to Nutrition Assessment, 2<sup>nd</sup> edition
- 3. Food Medication Interaction Handbook, 17th edition
- 4. Nutrition and Diagnosis Related Care, 7th edition
- 5. Nutrition Therapy&Pathophysiology, 2<sup>nd</sup> edition by Nelms, et a

### **Intern Directions:**

- 1. Meet with preceptor to plan activity.
- Using the I Case Study Guidelines Form compile information and prepare assigned case study and submit to preceptor along with a GDPH DI Case Study Guideline Form for grading.
- 3. Retain a copy of the typed case study and the completed and signed case study guideline form to be submitted electronically to the DI Program Director at the end of the rotation. Retain a copy for your files.

- 1. Assign a client for the case study activity.
- 2. Using the Case Study Guidelines Form; review the typed case study and assign a score for the case study.
- 3. At the completion of the rotation record the score for this activity on the clinical rotation final evaluation form.



# Case Study Guidelines

This outline is to be used as a guide for the development of your case study. Each major topic needs to be addressed but the orders and details can be changed to fit the specific case. All case studies should be typed

# I. General information (1 point)

Patient's initials

Patient's age

Nationality

Status in life – job title, marital status

# II. Report on Admission (5 points, 1 point each)

Date of admission

Present illness – onset, duration

Diagnosis

General condition upon admission

General orders – diet, medication, drugs, etc.

# III. Special history (12 points, 4 points each)

Past Medical History

Family History

Social conditions affecting health – economic, familial, emotional and/or psychological

### IV. Discussion of disease or condition (20 points)

History

Incidence

Etiology

Symptoms (Identify those reversible with nutritional intervention)

Clinical

Pathological

Treatment (Discuss those applicable) – medical, surgical, chemotherapy, dietary

**Prognosis** 

# V. Nutrition Care Process (42 points)

Nutrition Assessment (12 points, 2 points each)

Anthropometric Data

Pertinent Laboratory – explain what the value indicates, give normal ranges and bold abnormal values

Clinical Signs and symptoms

Dietary History and/or dietary recall

Medications and potential drug and nutrient interaction

Estimated nutritional needs

Nutrition Diagnosis (PES Statement) (10 points)

Nutrition Intervention with goals (10 points)



Nutrition Monitoring and Evaluation with goals (10 points)

# VI. Progress of this patient (10 points, 5 points each)

Medical and/or surgical treatment – List long-term complications

Dietary treatment – indicate and discuss any limitations the prescribed diet may have in terms of allowable foods

VII.	Summary	(5	points)
	<b>-</b> ,	`	P,

VIII. Bibliography (5 points)

4 = 90 - 100	3 .5 = 85 - 89	3.0 = 75 - 84	2.0 = less than 74	
Must earn at least a	3.0 to pass			
Total points earned <sub>-</sub>	/100	Number gra	ade	
Intern Signature:		Date:		
Preceptor Signature: _		Date:		



Planned Activity: Leadership and Management Staff Relief

Competencies: CRD 2.5, CRD 2.8, CRD 2.11, CRD 2.13, CRD 4.1

# **Learning Objectives:**

1. The intern will be able to work independently demonstrating competence at entry level.

### Resources:

- <a href="http://www.eatright.org/healthProfessionals/content.aspx?id=7077">http://www.eatright.org/healthProfessionals/content.aspx?id=7077</a> Nutrition Care Process
- 2. ADA Pocket Guide to Nutrition Assessment, 2<sup>nd</sup> edition
- 3. Food Medication Interaction Handbook, 17th edition
- 4. Nutrition and Diagnosis Related Care, 7th edition
- 5. Nutrition Therapy&Pathophysiology, 2<sup>nd</sup> edition by Nelms, et a

### **Intern Directions:**

- 1. Assume responsibility and management of an area in the nutrition department for a minimum of 1 week (24 hours) as assigned by preceptor.
- 2. Complete nutrition screenings, assessments, team rounds, and patient education as defined by assumed role.
- 3. Work collaboratively with nutrition and other staff to complete all tasks as required.
- 4. At the completion of this activity, complete the Leadership and Management Worksheet Submit to preceptor for review and discussion. Submit to DI Program Director at the completion of the rotation.

- 1. Make staff relief assignment to intern.
- 2. At the completion of the activity, discuss the experience with the intern.
- 3. Using the staff relief activity rubric, score the intern at the completion of the activity and record the score on the rotation final evaluation.



# Leadership and Management Worksheet

Ecadership and management Workshield
Briefly discuss successes and contributions during staff relief weeks.
Briefly discuss challenges during staff relief week.
Briefly discuss use of negotiation and communication skills
Briefly discuss your management style
Briefly discuss your leadership style
State and give an example of what knowledge, skill and/or ability you gained or enhanced fror completing this activity.



Parameter Evaluated

# Georgia Department of Public Health Dietetic Internship Acute Care Clinical Rotation Curriculum

# **Staff Relief Evaluation**

5 4 3 2 0 Points

Indicate the frequency that the intern displayed the following behavior during the staff relief activity. 5=always 4=usually 3=sometimes 2=rarely 0= never

						Earned
Attention to Duty: Thorough and conscientious work;						
meets responsibilities in a timely manner						
Dependability: Works independently; punctual						
Judgment: Displays logical thinking and good decision making skills, stays within scope of practice						
Initiative: Works independently; takes an active role in						
self-learning; finds answers and problem solves independently						
Communication: Tactful, displays good verbal and written communication with colleagues, patients, and others						
Theoretical Knowledge: Relates theory to practice;						
performs assessment, identifies needs and solutions						
appropriately						
Quantity of Work: Produces the expected quantity of						
work in assigned area						
Quality of Work: Produces the expected quality (accuracy, neatness) of work in the assigned area						
Cooperation: Works well with others; assumes						
appropriate share of work load; calm under pressure						
Attitude: Displays self- confidence, optimism,						
professional demeanor, accepts responsibility for						
mistakes, displays no defensiveness when receiving						
constructive criticism						
Total						
4 = 90 -100 3.5 = 85-89 3.0 = 75-84 2.0 = 74 or less		Pas	sing s	score	is 3 (	or more
Total Points Earned/50 Number Grade						
rotal i cinto Lamba Lamba Cidao		_				
Please comment on interns strengths:						
Please comment on intern opportunities for improvement:						
Intern Signature [	Date_					
Preceptor Signature [	Date_					



# **Professional Behaviors Evaluation**

Directions – At the end of the rotation, complete the evaluation and record the score on the rotation final evaluation

Scoring Definitions:

5 = Always 4 = Frequently 3 = Sometimes 2 = Rarely 0 = Never

Behavior	Score	Comment
Attention to Duty – Thorough and conscientious work		
ethic, meets responsibilities in a timely manner and		
displays professional appearance		
Dependability – Less amount of supervision needed,		
works independently, punctual, completes assignment		
and follows through		
Judgment - Displays decision making skills (logical		
and critical thinking), calm demeanor and is mindful of		
intern scope of practice		
Initiative – Displays initiative and active role in		
learning, demonstrates resourcefulness to find		
answers independently, volunteers for assignments and displays leadership		
Communication – Displays good oral and written		
communication – bisplays good oral and written		
appropriately, displays tact and diplomacy, initiates		
discussions with others when appropriate		
Theoretical Knowledge – Relates theory to practice,		
appropriately assesses situations/problems, identifies		
needs/solutions		
Quantity of Work – Demonstrates planning and time		
management		
Quality of Work – Demonstrates attention to detail as		
evidence by accurate, organized, and neat		
submissions		
Cooperation – Works with and helps others, maintains		
positive relationships, assumes appropriate share of		
work, accepts responsibility for mistakes, cooperates		
under stress, others seek interns assistance		
Attitude – Displays tact, self-confidence, positive and		
unbiased approach, integrity, and professional		
demeanor, incorporates constructive criticism to make improvements, self-reflects		
Total	/50	
Total	/50	

4 = 90 - 100

3.5 = 80 - 89

3.0 = 75 - 79

2.0= less than 75

Strongest Areas:

Areas for Improvement:



## **Acute Care Clinical Rotation Final Evaluation**

Definition of Performance Standards:

- **4** = Independent. Tasks are completed with minimal initial directions, minimal supporting cues, in an expedient time period, with intern always demonstrating critical thinking skills. The intern thoughtfully analyzes and evaluates all factors and demonstrates a comprehensive approach. Intern demonstrates "linking" previous knowledge to current situation. Projects are detailed, organized and complete. All tasks are completed in a professional manner. The intern consistently displays a positive attitude. **This score is only achievable when the intern is required to perform a task or produce an end product.**
- **3.5** = Mostly Independent. Tasks are completed with initial directions and few supporting cues in a reasonable time period with intern frequently demonstrating critical thinking skills. The intern thoughtfully analyzes and evaluates the majority factors and demonstrates a comprehensive approach. Intern demonstrates "linking" previous knowledge to current situation. Projects are detailed, organized and complete. Intern completes all tasks in a professional manner. The intern consistently displays a positive attitude. **This score is only achievable when the intern is required to perform a task or produce an end product.**
- **3** = Supervised: Tasks are completed with initial directions and periodic feedback, occasional supporting cues, in a reasonable time period, with intern occasionally demonstrating critical thinking skills. The intern offers analyses and evaluations of obvious factors. Sometimes demonstrates a comprehensive approach. Projects are detailed and organized. The intern completes all tasks in a professional manner, displaying a positive attitude. **This score also applies to the projects in which the intern observes a process or event and in projects where the intern is required to perform a task or produce an end product. For observation assignments, a score of '3' would indicate a positive attitude, thoughtful questions and insightful comments.**
- 2 = Assisted: Tasks are completed with initial directions and frequent feedback, frequent supporting cues, over a delayed time period, with intern rarely demonstrating critical thinking skills) Completes tasks in a professional manner, usually displaying a positive attitude. This score also applies to the projects in which the intern observes a process or event and in projects where the intern is required to perform a task or produce an end product. For observation assignments, a score of '2' would indicate attendance but lack of thoughtful questions and insightful comments.
- 1= Incomplete: Work is technically inaccurate or incomplete. Tasks do not meet expectations and are thrown together without much thought. Projects lack detail and/or are unorganized. The intern displays unprofessional behavior or negative attitude. *This score also applies to the projects in which the intern observes a process or event and in projects where the intern is required to perform a task or produce an end product. For observation assignments, a score of '1' would indicate absence or tardiness to the event and/or lack of participation and/or unprofessional behavior and negative attitude.*



Planned Experience	Competency Met	Score	Comments
Clinical Quality Study	CRD 1.1 CRD 1.3 CRD 1.5 CRD 2.2 CRD 2.5 CRD 2.8 CRD 2.11 CRD 4.4 CRD 4.5 CRD 4.6	4.0 3.5 3.0 2.0 1.0	
Nutrition Care Process	CRD 1.1 CRD 1.2 CRD 2.1 CRD 2.6 CRD 2.7 CRD 2.11 CRD 3.1 a-e CRD 3.2 CRD 4.5	4.0 3.5 3.0 2.0 1.0	
Interdisciplinary Care	CRD 2.5 CRD 2.6 CRD 2.7 CRD 2.8 CRD 2.10 CRD 2.11	4.0 3.5 3.0 2.0 1.0	
Nutrition Education Material Adaptation/Review	CRD 1.2 CRD 1.4 CRD 2.2 CRD 2.3 CRD 3.2 CRD 3.3 CRD 3.4	4.0 3.5 3.0 2.0 1.0	
Clinical Evidence Analysis	CRD 1.2 CRD 1.4 CRD 2.2 CRD 3.4 CRD 4.5	4.0 3.5 3.0 2.0 1.0	
Case Study	CRD 1.2 CRD 2.2 CRD 3.1 a-e	4.0 3.5 3.0 2.0 1.0	



Planned Experience	Competency Met	Score				Comments	
Staff Relief	CRD 2.5 CRD 2.8 CRD 2.11 CRD 2.13 CRD 4.1	4.0	3.5	3.0	2.0	1.0	
Professional Behaviors	CRD 2.1 CRD 2.7 CRD 2.11	4.0	3.5	3.0	2.0	1.0	

Add up total score/32 X 100=	%		
Did the intern score a 75% or above on the ro	tation? (circle one)	YES	NO
Did the intern satisfactorily complete this rota	ation? (circle one)	YES	NO
Do you have ANY reservations about the advebelow.	ancement of this intern? If	yes, pleas	se elaborate
Intern Signature:	Date		
Preceptor Signature	Date		