

PRACTICE TIPS: Using Practice Standards to Inform your Professional Development Portfolio

Whether you’re an expert in your field or a newly credentialed Registered Dietitian Nutritionist (RDN) or Nutrition and Dietetic Technician, Registered (NDTR), creating a Professional Development Portfolio (PDP) *can* be a confusing and overwhelming process. Regardless of where you are in your career path, this practice tip offers practical guidance for using the Revised 2024 Scope and Standards and the Focus Area Scope and Standards to identify your competency gaps, pinpoint your learning needs, and help you create a customized PDP to advance your practice and professional performance.

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Background Information

[Scope and Standards of Practice for the RDN and the NDTR](#)

The **Scope of Practice** defines **which** professional functions can be safely and effectively performed in the workplace based on the competence of the **individual practitioner**. The scope can include more or fewer professional functions depending on the practitioner’s education, credentialing, resources, workplace accreditation standards, state and federal regulations, national guidelines, and organization policy and procedures. The [Scope of Practice Decision Algorithm](#) is a helpful tool to determine individual scope of practice.

The **Standards of Practice** define **how** professional functions should be performed in a variety of professional settings and are based on the minimum competent level of practice for **all practitioners**. This component of the document defines minimum standards of practice and professional

performance that practitioners can use to evaluate and demonstrate their own professional practice and competence. Each standard has specific indicators that provide measurable action statements to illustrate how the standard can be applied to practice, regardless of setting.

[Focus Area Scope and Standards of Practice for the RDN](#)

Unlike the Revised 2024 Scope and Standards, which reflect the minimum competent level of practice, the Focus Area Scope and Standards of Practice define three levels of practice (competent, proficient, and expert) to convey the continuum of practice as RDNs attain increasing levels of knowledge, skill, experience, and judgment in 17 unique practice areas.

[Professional Development Portfolio \(PDP\)](#)

The three-step PDP process is intended to guide practitioners along a path of lifelong learning by updating and enhancing knowledge, skills, and behaviors required for continued competence, while ensuring compliance with the Code of Ethics. Information on the Academy’s [Career Development Webpage](#) can assist in this process and the CDR Professional Development Resource Center provides extensive resources in all areas of the PDP process. The PDP and its Resource Center can be found on the [CDR website](#) under “MyCDR” (login required).

Relevant Terms

Term	Definition
Competence	Competence is a principle of professional practice, identifying the ability of the provider to administer safe and reliable services on a consistent basis.
Competency(ies)	A Competency is a combination of observable and measurable knowledge, attitudes, technical skills, and abilities required to deliver safe, quality work. Competencies reflect effective performance and may be evaluated against well-accepted standards and quality indicators.
Individual Scope of Practice	An individual’s Scope of Practice is comprised of the following: <ul style="list-style-type: none"> • Scope of Practice; • State Laws; • Education and Credentials; • Federal and State Regulations and Interpretive Guidelines; • Accreditation Organizations; • Organization Policies and Procedures; and • Additional Individual Training/Credentials/Certifications (in specialty area eg, CSR, CSP).
Board Certified Specialist	Board Certified Specialists credentialed by the Commission on Dietetic Registration (CDR) have met empirically established criteria and have successfully completed a specialty certification examination that tests practice-related knowledge, skills or abilities. <ul style="list-style-type: none"> • Gerontological Nutrition (CSG) • Obesity and Weight Management (CSOWM) • Oncology Nutrition (CSO) • Pediatric Nutrition (CSP) • Pediatric Nutrition Critical Care (CSPCC) • Renal Nutrition (CSR) • Sports Dietetics (CSSD)

Term	Definition
Advanced Practitioner Certification in Clinical Nutrition (RD-AP/RDN-AP)	The Advanced Practitioner Certification in Clinical Nutrition is granted in recognition of an applicant's documented practice experience and successful completion of an examination administered by the Commission on Dietetic Registration (CDR). Advanced clinical nutrition practice is the provision of direct nutrition care to individuals and/or groups.
Focus Area of Nutrition and Dietetics Practice	A Focus Area of Nutrition and Dietetics Practice is a defined practice area that requires focused knowledge, skills, and experience.
Competent Level of Practice	Competent Level of Practice is demonstrated by practitioners who achieve credentialing as an RDN or NDTR and consistently provide safe and reliable services by employing appropriate knowledge, skills, behaviors and values in accordance with accepted standards for the profession. Competent practitioners critically evaluate their own practice; improve performance based on self-awareness, applied science, and feedback from others; and engage in continuing education to enhance skills, proficiency and knowledge. Self-evaluation is particularly important when shifting roles throughout the practitioner's career.
Proficient Level of Practice	Proficient Level of Practice is demonstrated by an RDN or NDTR who is three or more years beyond credentialing and entry into the profession. A proficient practitioner has obtained operational job performance knowledge and skills, and consistently provides safe and reliable service. Proficient practitioners critically evaluate their own practice; improve performance based on self-awareness, applied science, and feedback from others; and engage in continuing education.
Expert Level of Practice	Expert Level of Practice is demonstrated by an RDN or NDTR who is recognized within the profession and has mastered the highest degree of skill in and knowledge of nutrition and dietetics. Expert level achievement is acquired through ongoing critical evaluation of practice and feedback from others with additional knowledge, experience, and training. An expert has the ability to quickly identify "what" is happening and "how" to approach the situation. An expert can easily utilize nutrition and dietetics skills to become successful through demonstrating quality practice and leadership, and to consider new opportunities that build upon nutrition and dietetics.
Note: Definitions are listed in the order of appearance in this Practice Tip and are located in the Definition of Terms List: www.cdrnet.org/definitions	

Steps for Developing and/or Revising the Professional Development Plan

Step I: Conduct Professional Practice Self-Evaluation

All credentialed practitioners should review the Revised 2024 Scope and Standards and any applicable Focus Area Scope and Standards at the start of each 5-year PDP cycle and regularly throughout each cycle. Using the Standards to self-evaluate your competency in various areas can help identify opportunities to improve and enhance your practice and professional performance. The Standards are written in broad terms to be relevant and useful for all practitioners, regardless of practice setting and level of competence.



1. Review Standard 7, which focuses on indicators related to the Nutrition Care Process and Workflow elements and assess your competency for each indicator that applies to your practice role, setting, performed activities, and/or performance expectations. While these indicators are most applicable for practitioners providing direct care to patients/clients, the Nutrition Care Process framework can be used by all practitioners, as it provides a structured, problem-solving process for critical thinking and evidence-based decision making. If you work in a non-clinical practice area, review the “Examples of Outcomes” at the end of each standard for ideas on how the indicators can be adapted for application in non-clinical settings.
2. Review the Standards 1-6 and assess your competency for each indicator that applies to your practice role/setting, performed activities, and/or performance expectations.

If you are currently practicing in and/or would like to expand your competency in one or more of the Focus Areas for RDNs, locate the relevant [Focus Area Standards](#) and continue the process as explained above (eg, a pediatric dietitian should understand and utilize the Focus Area Standards for RDNs in Pediatric Nutrition). Additional resources can be found on the [Dietetic Practice Group \(DPG\) websites](#).

Step II: Identify Gaps in Practice Competence and/or Learning Needs

Review your self-evaluation and note the areas for which you feel additional education and training may be necessary to advance your practice and professional performance.

Step III: Create Learning Plan

Use the Competency Plan Builder to identify relevant Essential Practice Competencies that reflect your learning needs. These competencies define the knowledge, skill, judgment, and attitude requirements throughout a practitioner’s career, across practice, and within focus areas. Competencies provide a structured guide to help identify, evaluate, and develop the behaviors required for continuing competence.

1. Access your PDP plan
 - a. Go to www.cdrnet.org and select “myCDR login”
 - b. Log into your dashboard using your username & password
 - c. For detailed instructions on how to create your PDP plan, review the [Competency Plan Builder Instructions](#) and/or watch the [Competency Plan Builder video](#)
2. Choose Sphere(s) and Competencies
 - a. Click “Submit a Learning Plan”
 - b. Choose the appropriate Spheres and Competencies based on your learning needs
 - c. Click “Next Step” to view Performance Indicators (PIs) listed under each chosen Competency. While you won’t choose PIs, they can help you gauge the appropriateness of your chosen Competencies, as they describe how a CPE activity will enhance your skillset, behavior, performance, abilities, attitude, etc.

Note: Your goal can be as broad or detailed as you wish. Choosing Competencies 1-10 ([Core Essential Practice Competencies](#)) may help you achieve learning goals that apply to all credentialed practitioners regardless of role, area of practice, or setting. This may be particularly useful for newly

credentialed practitioners and/or retired practitioners who are maintaining registration but not practicing. As you become more specialized, you can update your Plan with Competencies 11-15 ([Functional Essential Practice Competencies](#)). The scope and depth of your Plan is a personal decision and is reflective of where you are in your career and where you see it leading.

Step IV: Implement Learning Plan

1. Identify and complete appropriate CPE activities based on your Learning Plan. Below are links to CPE opportunities (not all inclusive)
 - [CDR CPE Database](#)
 - [CDR Assess and Learn Modules](#)
 - [CDR Certificate of Training in Obesity for Pediatrics and Adults](#)
 - www.eatrightcpe.org
 - www.eatrightstore.org
 - [Academy Certificate of Training Programs](#)
 - [Dietetic Practice Groups](#)
2. Record the CPEs in your Activity Log
 - Go to www.cdrnet.org and select “myCDR login”
 - Log in to your dashboard using your username & password
 - Click on “Record your Activities”. See [FAQs](#) to help you complete your Activity Log

Step V: Review and/or Revise Learning Plan

As new learning needs arise (eg, career changes, professional interests, promotions, etc.) and at the start of a new 5-year professional development cycle, use the Revised 2024 Scope and Standards and/or Focus Area Scope and Standards of Practice to identify new competency gaps and identify appropriate CPE activities that will continually improve and expand your practice and professional performance.

NOTE: Updating your plan is encouraged, but not mandatory. When recording your CPEUs, choose the Spheres/Competencies that best define what you learned from the education, even if they are not listed on your Plan.

Case Studies

Scenario 1: Newly Credentialed RDN

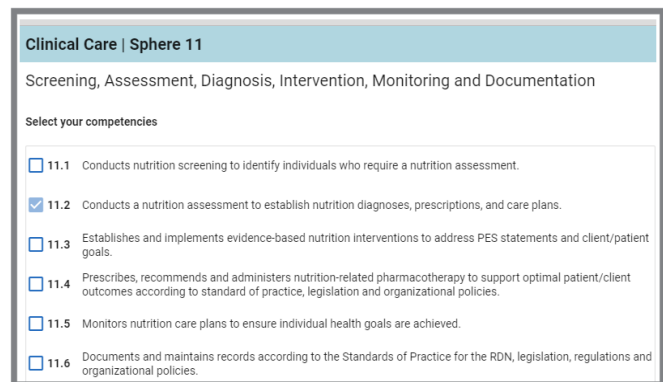
1. A newly credentialed RDN is creating their first PDP after accepting a position as an inpatient dietitian at a local hospital.
2. After completing a professional self-evaluation using the Revised 2024 Scope and Standards, the RDN observes several gaps in their competencies specific to new job responsibilities. An area in which the RDN feels the need for additional education and training is performing nutrition-focused physical exams (NFPE) (Indicator 7.2.5).

7.2 Conducts nutrition assessment	
7.2.1	Collects data and reviews data collected by the NDTR, other health care practitioner(s), patient/client/caregiver, or staff for factors that affect nutrition and health status.
7.2.2	Assesses current or past information related to personal, medical, family, and psychosocial/social history
7.2.3	Assesses anthropometric indicators, compares to reference data and individual patterns and history
7.2.4	Assesses laboratory profiles, and medical tests and procedures
7.2.5	Obtains and assesses findings from nutrition-focused physical exam (NFPE)

3. The RDN logs onto their MyCDR dashboard and clicks “Submit a Learning Plan” to start creating their PDP. The RDN identifies the “Clinical Care” Sphere as an appropriate area to start based on learning needs identified in the self-evaluation.



4. Within this Sphere, the RDN chooses Competency 11.2, which describes key learning objectives that meet their identified learning needs. To complete their Learning Plan, the RDN selects additional Spheres and Competencies and then clicks “Next Step”.



5. Before submitting their Plan, the RDN clicks “Review Performance Indicators” under selected Competencies to further gauge whether their Plan is consistent with identified learning needs. In this case, Performance Indicator 11.2.5 describes anticipated outcomes of CPE activities.

11.2 Conducts a nutrition assessment to establish nutrition diagnoses, prescriptions, and care plans.	
11.2.1	Selects valid and reliable tools to conduct comprehensive nutrition assessments.
11.2.2	Interviews clients/patients and reviews health records to collect information about medical history and food and nutrition intake.
11.2.3	Collects information related to client/patient use of medications, dietary supplements and integrative and functional medicines to identify potential adverse drug and nutrient interaction.
11.2.4	Assesses client/patient physical activity levels to determine nutrition requirements.
11.2.5	Conducts nutrition-focused physical examinations to determine nutritional statuses of clients.

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6. The RDN locates a [Nutrition Focused Physical Exam Training Workshop](#) on the Academy’s website.
7. After completing the workshop and recording the CPE in their Activity Log, the RDN works with an RDN mentor/supervisor to assess skills and verify competence. Finally, the RDN provides documentation of CPE attendance and competency to update personnel files.
8. The RDN continues to identify CPE activities to address learning needs and for advancing practice.

Scenario 2: Newly Credentialed NDTR

1. A newly credentialed NDTR is creating their first PDP after accepting a position with the Expanded Food and Nutrition Education Program (EFNEP) to provide nutrition education to diverse audiences.
2. After completing a professional self-evaluation using the Revised 2024 Scope and Standards for NDTRs, the NDTR observes several gaps in their competencies specific to their new job responsibilities. One area in which they feel the need for additional education and training is creating and communicating nutrition content that reflect the needs and barriers of diverse audiences (Indicator 2.1 and sub-indicators).

2.1 Addresses social determinants of health, nutrition security, food insecurity, and malnutrition	
2.1.1	Documents and communicates food security defined as factors affecting applicable population and access to a sufficient quantity of safe, healthful food and water, as well as food/nutrition-related supplies
2.1.2	Participates in development of tools and processes that capture the needs of diverse populations, accurately measures health outcomes, and recognizes and minimizes bias, inequity, and health disparities associated with social determinants of health
2.1.3	Investigates and uses knowledge of the individual’s/target population’s cultural beliefs and practices, health conditions and/or business objectives to contribute to the design and delivery of individual-/population-centered care and services that support health equity

3. On their MyCDR dashboard, the NDTR clicks “Submit a Learning Plan” to start creating their PDP. The NDTR identifies the “Ethics”, “Health Equity”, and “Communications” Spheres as the appropriate areas to start based on learning needs identified in the self-evaluation.

Ethics (required) 2 competencies selected EDIT	Health Equity 0 competencies selected ADD	Communications 1 competencies selected EDIT	Leadership and Advocacy 3 competencies selected EDIT
Critical Thinking and Decision Making 0 competencies selected ADD	Informatics 2 competencies selected EDIT	Research and Scholarship 3 competencies selected EDIT	Quality Management 1 competencies selected EDIT
Food, Nutrition and Dietetics 4 competencies selected EDIT	Education and Counseling 6 competencies selected EDIT	Clinical Care 8 competencies selected EDIT	Business, Industry, and Product Development 1 competencies selected EDIT
Community, Population, and Global Health 4 competencies selected EDIT	Foodservice Systems and Management 0 competencies selected ADD	Organization Management 1 competencies selected EDIT	

4. Within these Spheres, the NDTR chooses Competencies 1.7, 2.1 and 3.1, as they describe key learning objectives of CPE activities that meet identified learning needs. To complete their Learning Plan, the NDTR selects additional Spheres and Competencies and then clicks “Next Step”.

Ethics | Sphere 1 (Required)

Identifies with and adheres to the code of ethics for the profession.

Select at least one Ethics competency for your plan

- 1.1 Demonstrates and maintains competence in practice.
- 1.2 Demonstrates integrity in personal and organizational behaviors and practices.
- 1.3 Recognizes and manages situations with ethical implications.
- 1.4 Respects client autonomy to make decisions about proposed services.
- 1.5 Recognizes and maintains appropriate relationships and boundaries.
- 1.6 Adheres to confidentiality and privacy legislation, standards and policies.
- 1.7 Applies cultural competence and consideration for social determinants of health to show respect for individuals, groups and populations.

Health Equity | Sphere 2

Advocates for health equity in nutrition and dietetics care and services, mindful of unavoidable, unfair or remediable differences among individuals or populations.

Select your competencies

- 2.1 Provides nutrition and dietetics services (eg, nutrition care, education, research, advocacy) respectfully and mindfully to individuals, groups and populations with unique identities, characteristics and backgrounds.
- 2.2 Reflects in the delivery, management or education of nutrition care and services an understanding of the impact of differing life experiences, beliefs, values, skills, religion, and cultural norms to effectively interact with, respect, and support the needs of individuals or populations.
- 2.3 Demonstrates social responsibility to provide fair and equitable nutrition and dietetics care and services.
- 2.4 Develops and disseminates knowledge to enable advocacy for local, state, and national policies and programs to reduce nutrition and health disparities and increase nutrition security throughout the lifecycle.

Communications | Sphere 3

Communicates and collaborates with others to achieve common goals and enhance relationships in the provision of nutrition and dietetics services.

Select your competencies

- 3.1 Adapts communication methods and skills to meet the needs of audiences.
- 3.2 Demonstrates effective communication skills.
- 3.3 Collaborates with inter- and intra-professional team members to achieve common goals and to optimize delivery of services.
- 3.4 Employs strategies for and facilitates team building skills.

5. Before submitting their Plan, the NDTR clicks “Review Performance Indicators” under selected Competencies to further gauge whether their Plan is consistent with identified learning needs. In this case, multiple Performance Indicators within each Competency describe anticipated outcomes of CPE activities.

1.7 Applies cultural competence and consideration for social determinants of health to show respect for individuals, groups and populations.

- 1.7.1 Recognizes and respects cultural and racial diverse backgrounds to effectively interact and build meaningful relationships with others (e.g., clients, employees, inter- and intra-professional team members and community and professional groups).
- 1.7.2 Recognizes the importance of diversity, orientation, social and cultural norms that may have an impact on individuals, groups and plans of care.
- 1.7.3 Develops awareness of one's own personal beliefs and values to inform and reduce biases.
- 1.7.4 Implements strategies and creates culturally sensitive and diverse resources to support diverse populations.
- 1.7.5 Applies knowledge of cultural foods, religious traditions, eating patterns and food and nutrition trends.
- 1.7.6 Applies knowledge of health determinants when planning, developing and implementing services, programs, interventions, meal plans and menus.

2.2 Reflects in the delivery, management or education of nutrition care and services an understanding of the impact of differing life experiences, beliefs, values, skills, religion, and cultural norms to effectively interact with, respect, and support the needs of individuals or populations.

- 2.2.1 Recognizes and respects varied backgrounds to effectively interact and build meaningful relationships with others (e.g., clients, students/interns, employees, inter- and intra-professional team members and community and professional groups).
- 2.2.2 Recognizes the importance of differences, orientation, social and cultural norms that may have an impact on individuals, groups and plans of nutrition care, services or education.
- 2.2.3 Implements strategies to identify or create culturally sensitive resources to support the needs of target population(s) through multiple mediums.

3.1 Adapts communication methods and skills to meet the needs of audiences.

- 3.1.1 Assesses the communication needs of individuals, groups and populations to provide effective communication.
- 3.1.2 Identifies and addresses barriers to effective communication.
- 3.1.3 Tailors messages and communication methods to meet the needs of target audiences.
- 3.1.4 Uses a variety of media to deliver information.
- 3.1.5 Evaluates the effectiveness of communication methods used to ensure understanding of presented information.

6. Using the [CPE Database](#) and other CPEU resources (listed above), the NDTR locates CPE activities that reflect their learning needs.
7. After completing the CPE activity and recording it in their Activity Log, the NDTR works with an RDN mentor/supervisor to assess skills and verify competence. Finally, the NDTR provides documentation of CPE attendance and competency to update personnel files.
8. The NDTR continues to identify CPE activities to address learning needs and for advancing practice.

Scenario 3: RDN Changing Career Paths

1. An RDN who has worked in several clinically focused practice areas throughout their career has recently accepted a position as the Director of Dining Services for a group of childcare centers. While only one year into their PDP cycle, the RDN feels that it’s important to update their Plan, as their new position requires a different set of knowledge and skills than previous positions.
2. After completing a professional self-evaluation using both the Revised 2024 Scope and Standards and the [Focus Area Standards in Management of Food and Nutrition Systems](#) (MFNS), the RDN observes several gaps in their competencies specific to the new job responsibilities. A key requirement of the new position is to obtain a ServSafe Certification to ensure that the director has the essential skills and knowledge of specific laws and regulations for preparing and serving food safely to a preschool-age population (Revised 2024 Standards and MFNS SOPP Indicators 1.1 1.2 A).

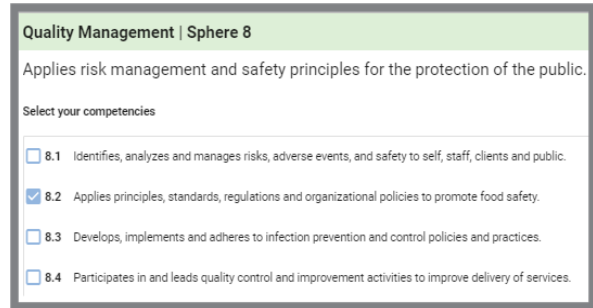
Indicators for Standard 1: Quality in Practice					
Bold Font Indicators are Academy Core RDN Standards of Professional Performance Indicators			The “X” signifies the indicators for the level of practice		
Each RDN:			Competent	Proficient	Expert
1.1	Complies with applicable laws and regulations as related to their area(s) of practice		X	X	X
	1.1A	Interprets and complies with federal, state, and local regulations and guidelines that impact areas of service	X	X	X
1.2	Performs within individual and statutory scope of practice and applicable laws and regulations		X	X	X
	1.2A	Maintains knowledge of and ensures compliance with all pertinent regulatory requirements related to food and nutrition services in settings relevant to job responsibilities	X	X	X

3. The RDN also notices that the Focus Area Standards are significantly different from the Revised 2024 Scope and Standards for RDNs. First, since Foodservice Managers do not routinely provide direct care to patients, only indicators related to professional performance are provided. Additionally, because the Standards are specifically written for RDNs practicing in foodservice management, competency expectations for three levels of practice (competent, proficient and expert) are provided, making the information especially useful for all RDNs, regardless of their level of practice in this area of practice.

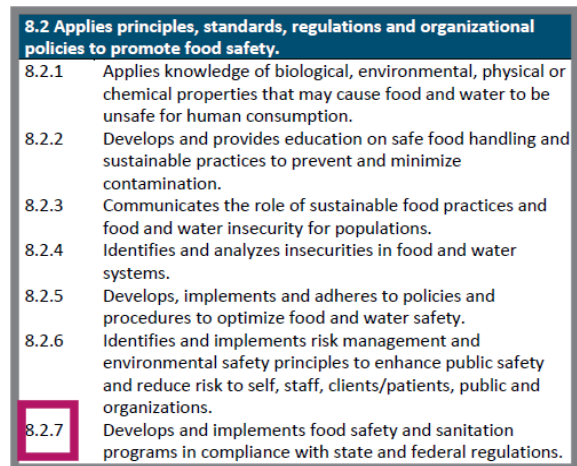
4. Since the RDN has already created a PDP, only the addition of Spheres and Competencies that reflect new learning needs is required. On their MyCDR dashboard, the RDN clicks “Submit a Learning Plan” and then “modify” to update their PDP. The RDN identifies the “Quality Management” Sphere as the appropriate area to start based on the self-evaluation.



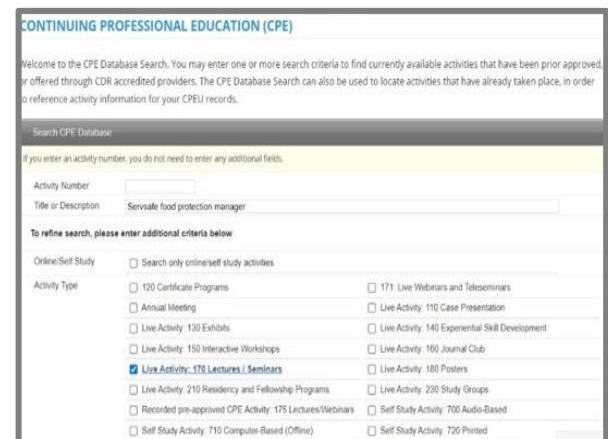
5. Within this Sphere, the RDN chooses Competency 8.2, as it describes key learning objectives of CPE activities that meet identified learning needs. To complete their updated Plan, the RDN selects additional Spheres and Competencies and then clicks “Next Step”.



6. Before submitting the Plan, the RDN clicks “Review Performance Indicators” under selected Competencies to further gauge whether their Plan is consistent with their identified learning needs. In this case, Performance Indicator 8.2.7 describes anticipated outcomes of CPE activities.



7. Using the [CPE Database](#), the RDN locates a live (Activity Code 170) National Restaurant Association ServSafe Manager’s Course at their local university that provides essential skills and knowledge of the laws and regulations for preparing and serving food safely and a ServSafe Certificate upon successful completion of the exam. **Note:** only live ServSafe courses are eligible for CPEUs.



8. After completing the CPE activity(ies) and recording it in their Activity Log, the RDN works with an RDN mentor/supervisor to assess skills and verify competence. Finally, the RDN provides documentation of CPE attendance and competency to update personnel files.

- The RDN continues to identify CPE activities to address learning needs and for advancing practice.

Scenario 4: Clinical RDN Moving into a Focus Area of Practice

- An RDN recently accepted a position as a Clinical Nutrition Manager in the hospital where they had worked as a clinical RDN for 10 years. While only one year into their PDP cycle, the RDN feels that it is important to update their Plan, as the new position requires a different set of knowledge and skills than previous positions.
- After completing a professional self-evaluation using the [Focus Area Standards for RDNs in Clinical Nutrition Management](#) (CNM), the RDN observes several gaps in their competencies specific to their new job responsibilities. One area in which the RDN feels the need for additional practice and skills is using tools to compare unit performance goals to Standards, as this is a key responsibility listed in the job description for the new position (CNM SOPP Indicator 1.2B).

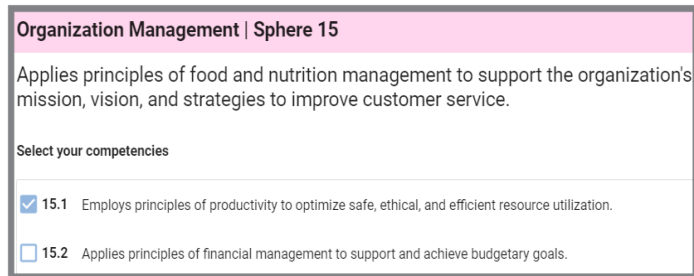
Indicators for Standard 1: Quality in Practice						
Each RDN in <u>CNM</u> possesses the following traits and embodies these through the actions identified based on their level of practice:			C	P	E	
1.1	Achievement Orientation: The RDN in <u>CNM</u> sets goals aimed at achieving or exceeding standards of excellence and improving unit performance and the quality and effectiveness of practice.					
1.2	Performance Measurement: Uses statistical and financial methods and metrics to set goals and measure clinical and organizational performance and outcomes. The RDN in <u>CNM</u> views these actions as a continuous cycle, identifying opportunities for improvement as additional techniques, technology, and information become available.					
<u>1.2A</u>	Uses national quality and safety data (eg, National Academies of Sciences, Engineering, and Medicine: Health and Medicine Division, National Quality Forum, Institute for Healthcare Improvement) to improve the quality of services provided and to enhance customer-centered services			X	X	X
<u>1.2B</u>	Compares actual performance to performance goals (ie, Gap Analysis, SWOT Analysis [Strengths, Weaknesses, Opportunities, and Threats], PDCA Cycle [Plan-Do-Check-Act], DMAIC [Define, Measure, Analyze, Improve, Control])			X	X	X

- The RDN also notices that the Focus Area Standards are significantly different from the Revised 2024 Scope and Standards they had been using in the past. First, since clinical nutrition managers do not routinely provide direct care to patients, only indicators related to professional performance are provided. Additionally, because these Standards are specifically written for RDNs in leadership roles, the indicators have been expanded to reflect three levels of practice (competent, proficient, and expert) for the unique competence expectations for the RDN practicing in that focus area. Because the RDN is new to this position, they focus on the indicators that provide “competent” level of practice, with the understanding that they will strive towards the “proficient” and “expert” levels of practice as they gain experience and skill.

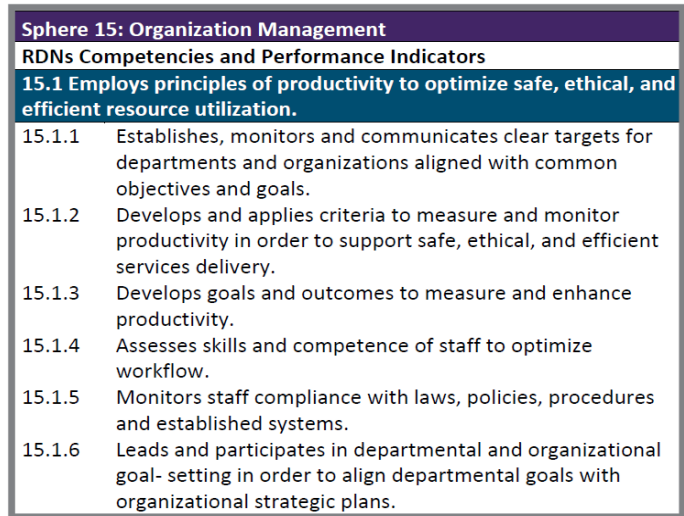
4. Since the RDN has already created a PDP, only the addition of Spheres and Competencies that reflect new learning needs is required. On their MyCDR dashboard, the RDN clicks “Submit a Learning Plan” and then “modify” to update their PDP. The RDN identifies the “Organizational Management” Sphere as the appropriate area to start based on the self-evaluation.



5. Within this Sphere, the RDN chooses Competency 15.1, as it describes key outcomes of CPE activities that meet identified learning needs. To complete their updated Plan, the RDN selects additional Spheres and Competencies and then clicks “Next Step”.



6. Before submitting the Plan, the RDN clicks “Review Performance Indicators” under selected Competencies to further gauge whether their Plan is consistent with their identified learning needs. In this case, the RDN observes multiple Performance Indicators that describe anticipated outcomes of CPE activities.



7. Using the CPEU resources (listed above), the RDN locates activities that reflect their learning needs.

8. After completing the CPE activity(ies) and recording in their Activity Log, the RDN works with an RDN mentor/supervisor to assess skills and verify competence. Finally, the RDN provides documentation of CPE attendance and competency to update personnel files.

9. The RDN continues to identify CPE activities to address learning needs and for advancing practice.

In this Practice Tips, the Academy/CDR has chosen to use the term RDN to refer to both registered dietitians (RD) and registered dietitian nutritionists (RDN) and to use the term NDTR to refer to both dietetic technician, registered (DTR) and nutrition and dietetics technician, registered (NDTR).