

**Be Well Solutions Dietetic Internship Program**

Clinical Supervised Practice Experience

PAL - Rotation Competency Form

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| **Employee’s Name:**  | **Facility Name**:  |
| **Supervisor’s Name:**  | **Dates of experience:**  |

**Instructions**: Listed below are the ACEND-required learning competencies (CRDN) assigned to the BWS DI Clinical Supervised Practice Experience. After reviewing each competency, please choose the CRDN(s) you feel you have fulfilled based on your prior experience and provide further explanation of that experience, being as detailed as possible. For each experience, describe the skills and level of expertise that you obtained (ex. “As an NDTR, I conducted 25-40 patient screenings weekly and presented my findings to the Registered Dietitian, helping me gain proficiency in assessing and recognizing malnutrition risk”). If there is documentation to support the experience, please include it in the PAL Portfolio and reference it here in bold in the “Skills Mastered” column for that corresponding CRDN. *For further examples of documentation, please refer to the PAL Portfolio instructions.* A given experience can be applied toward the fulfillment of more than one CRDN.

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| **Competencies** | **Description of Learning Experience/Responsibilities** | **Skills Mastered** |
| **Scientific and Evidence Base of Practice: Integration of scientific information and translation of research into practice.** |
| CRDN 1.2 Evaluate research and apply evidence-based guidelines, systematic reviews and scientific literature in nutrition and dietetics practice. |  |  |
| CRDN 1.5 Incorporate critical-thinking skills in overall practice. |  |  |
| **Professional Practice Expectations: Beliefs, values, attitudes, and behaviors for the nutrition and dietetics practitioner level of practice.** |
| 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. |  |  |
| CRDN 2.3 Demonstrate active participation, teamwork and contributions in group settings. |  |  |
| CRDN 2.4 Function as a member of interprofessional teams. |  |  |
| CRDN 2.5 Work collaboratively with NDTRs and/or support personnel in other disciplines. |  |  |
| CRDN 2.6 Refer clients and patients to other professionals and services when needs are beyond individual scope of practice. |  |  |
| **Clinical and Client Services: Development and delivery of information, products and services to individuals, groups and populations.**  |
| CRDN 3.1 Perform Medical Nutrition Therapy by utilizing the Nutrition Care Process including use of standardized nutrition terminology as part of the clinical workflow elements for individuals, groups and populations of differing ages and health status, in a variety of settings. |  |  |
| **Practice Management and Use of Resources: Strategic application of principles of management and systems in the provision of services to individuals and organizations.** |
| CRDN 4.3 Conduct clinical and client service quality management activities (such as quality improvement or quality assurance projects). |  |  |
| CRDN 4.5 Analyze quality, financial and productivity data for use in planning. |  |  |
| 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). |  |  |
| **Leadership and Career Management: Skills, strengths, knowledge and experience relevant to leadership potential and professional growth for the nutrition and dietetics practitioner.** |
| CRDN 5.4 Advocate for opportunities in the professional settings (such as asking for additional responsibility, practicing negotiating salary or wage or asking for a promotion). |  |  |

**Total hours of experience at the facility: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Employee Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Attestation**

By signing this, I attest that the experiences/responsibilities and/or knowledge outlined above were achieved during the employee’s position at our facility and I confidently believe they are competent in each of the learning competencies chosen above.

Supervisor’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_