

**Be Well Solutions Dietetic Internship Program**

Community & Public Health Prior Assessed Learning

Rotation Competency Assessment Form

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

The objective of this assessment is to determine the employee’s eligibility to receive prior assessed learning credits to apply to BWS DI’s Community/Public Health rotation. Candidates with sufficient experience in terms of both skill development and duration will be permitted to opt out of some or all supervised practice hours and CRDNs assigned to the community rotation. Our aim is to facilitate a collaborative evaluation between the employee and supervisor.

**Employee Instructions**: Listed below are the ACEND-required learning competencies (CRDN) assigned to the BWS DI Community & Public Health 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. If there is documentation to support the experience, please include it in the PAL Portfolio, mentioned in the application, and reference it here in the “PAL Portfolio Documentation” 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.

**Supervisor Instructions:** Please indicate a grade for each competency utilizing the performance standards listed below. The employee must receive a 4 or better to receive PAL credit for the competency. Please include additional comments as needed to explain your ratings.

**Grade Scale**

*Definition of Performance Standards:*

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| 1 = N/A | Not available or not applicable Please make every effort to provide experiences that allow the intern to meet all competencies listed as some competencies are only available in one rotation. Thus, having competencies with N/A next to them necessitates that those competencies be incorporated into another rotation that may or may not be appropriate for that rotation/facility. If you are unsure how to include a competency in an activity, please contact the Dietetic Internship Director. |
| 2 = 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. Displays unprofessional behavior or negative attitude. This score is only applicable when the intern is required to perform a task or produce an end product. |
| 3 = Assisted | Tasks are completed with initial directions and frequent feedback, frequent supporting cues, over a delayed time period as a result of the intern’s work, 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. A score of ‘3’ would indicate attendance. |
| 4= 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. Offers analyses and evaluations of obvious factors. Sometimes demonstrates a comprehensive approach. Projects are detailed and organized. 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. A score of ‘4’ would indicate a positive attitude, thoughtful questions, and insightful comments. |
| 5 = Independent | Tasks are completed with minimal initial directions, minimal supporting cues, in an expedient time period, with intern frequently demonstrating critical thinking skills. Thoughtfully analyzes and evaluates all factors and demonstrates a comprehensive approach. Draws warranted judicious conclusions. Demonstrates “linking” previous knowledge to current situation. Projects are detailed, organized, and complete. Completes all tasks in a professional manner, displaying a positive attitude. This score is only achievable when the intern is required to perform a task or produce an end product. |

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|  | **Employee’s Section** | | **Supervisor’s Section** |
| **Competencies** | **Description of Learning Experience/Responsibilities** | **PAL Portfolio Documentation** | **Supervisor’s Evaluation** |
| **Scientific and Evidence Base of Practice: Integration of scientific information and translation of research into practice.** | | | |
| CRDN 1.1 Select indicators of program quality and/or customer service and measure achievement of objectives. | *(Example: Created educational sessions for WIC participants and*  *developed surveys to measure the participants’ knowledge attained*  *and interest in session content)* | *(Example: Participant Survey for the “Breastfeeding 101” Session)* | |  |  |  |  |  | | --- | --- | --- | --- | --- | | 1 | 2 | 3 | 4 | 5 |   Comments: |
| CRDN 1.3 Justify programs, products, services and care using appropriate evidence or data. |  |  | |  |  |  |  |  | | --- | --- | --- | --- | --- | | 1 | 2 | 3 | 4 | 5 |   Comments: |

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| **Professional Practice Expectations: Beliefs, values, attitudes, and behaviors for the nutrition and dietetics practitioner level of practice.** | | | |
| CRDN 2.2 Demonstrate professional writing skills in preparing professional communications. |  |  | |  |  |  |  |  | | --- | --- | --- | --- | --- | | 1 | 2 | 3 | 4 | 5 |   Comments: |
| CRDN 2.7 Apply change management strategies to achieve desired outcomes. |  |  | |  |  |  |  |  | | --- | --- | --- | --- | --- | | 1 | 2 | 3 | 4 | 5 |   Comments: |
| CRDN 2.9 Actively contribute to nutrition and dietetics professional and community organizations. |  |  | |  |  |  |  |  | | --- | --- | --- | --- | --- | | 1 | 2 | 3 | 4 | 5 |   Comments: |
| CRDN 2.10 Demonstrate professional attributes in all areas of practice. |  |  | |  |  |  |  |  | | --- | --- | --- | --- | --- | | 1 | 2 | 3 | 4 | 5 |   Comments: |
| CRDN 2.11 Show cultural humility in interactions with colleagues, staff, clients, patients and the public. |  |  | |  |  |  |  |  | | --- | --- | --- | --- | --- | | 1 | 2 | 3 | 4 | 5 |   Comments: |

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| **Practice Management and Use of Resources: Strategic application of principles of management and systems in the provision of services to individuals and organizations.** | | | |
| CRDN 4.4 Apply current information technologies to develop, manage and disseminate nutrition information and data. |  |  | |  |  |  |  |  | | --- | --- | --- | --- | --- | | 1 | 2 | 3 | 4 | 5 |   Comments: |
| CRDN 4.8 Develop a plan to provide or develop a product, program or service that includes a budget, staffing needs, equipment and supplies. |  |  | |  |  |  |  |  | | --- | --- | --- | --- | --- | | 1 | 2 | 3 | 4 | 5 |   Comments: |

**Additional Comments:**

**Total hours of experience: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Employee’s 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 that received a 4 or better in my assessment.

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