Providing High-Quality Nutrition Care in a Variety of Settings
Systematic problem-solving method that dietetics professionals use to critically think and make decisions to address nutrition-related problems and provide safe, effective, high-quality nutrition care.
Today’s Objectives

- Identify steps and criteria
- Apply ADA’s Nutrition Care Process and Model in a variety of settings
- Describe how use of NCP and Model enhances value and performance of dietetics professionals

- Why a standardized Nutrition Care Process?
- What is it?
- Where can it be used?
- What’s next?
Keys to Quality

NCP provides framework for demonstrating how nutrition care improves outcomes

- Consistent, systematic structure and method
- Common language
- Evidence-based approach
Ensure Quality of Care

Quality:

“The degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge.”
**Demonstrating Quality**

**Content of Care:**
Best Evidence
- Scientific principles
- Protocols
- Guidelines

**Process of Care:**
Nutrition Care Process and Model

**Outcome:**
Improved quality of care and health status

Clients with needs + = Clients with needs met
NCP Incorporates Evidence-Based Practice

- Evidence-based practice validates nutrition care
- Tools to Implement the NCP include ADA MNT Evidence-Based Guides for Practice
MNT Effectiveness in Managing Chronic Disease

Dietetics professionals use the Nutrition Care Process and Model to demonstrate high-quality, patient-focused care that results in positive outcomes.
Steps and Systems

Nutrition Care Model
- Reflects key concepts of each step
- Illustrates context within which Nutrition Care Process is conducted

Supporting systems
- Screening and referral
- Outcomes management
Documentation

Ongoing - supports all steps in NCP

“Telling a story”

Elements of effective documentation include appropriate and thorough summary of nutrition care
- Assessment findings
- Nutrition diagnosis
- Goals
- Interventions
- Progress
Central Core

Relationship between client and dietetics professional

- Client or patient at center
- Client’s experiences influence relationship
- Dietetics professional draws on interpersonal skills
Outer Rings

- Strengths of dietetics professional
  - Knowledge
  - Critical thinking, collaboration, communication skills
  - Evidence-based practice

- Factors of external environment
  - Health-care system, practice setting
  - Social support, economics, education level
Nutrition Assessment

- Obtain, verify, interpret data
- Compare to relevant standards to help identify possible problem areas
- Review psycho-social, functional and behavioral factors in addition to dietary data
- Ongoing and dynamic
Example of Nutrition Assessment Content

Nutrition Assessment:
What data are most effective for identifying clients’ nutrition-related problem of interest?

Type of assessment Content component
- Nutritional adequacy
- Fat and cholesterol intake
- Trans fatty acid intake
- Health status
- Lipid profile
- BMI
- Waist circumference

What are reliable standards (ideal goals)?
- How well
- How much
- How long
How Do We Get from Assessment
Nutrition Diagnosis
Crucial element of providing quality nutrition care
...to Intervention?

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Nutrition Diagnosis

Purpose

- Identify and label nutrition problem
- Nutrition diagnosis ... not medical diagnosis
- Explicit statement of nutrition diagnosis
Nutrition Diagnosis Components

P-E-S Format

- **Problem:** (diagnostic label) describes alterations in client’s nutrition status
- **Etiology:** cause or contribution risk factors
- **Signs or Symptoms:** defining characteristics

Problem -- related to -- Etiology -- as evidenced by -- Signs or symptoms

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PES Relationships

Nutrition  Nutrition  Nutrition  Nutrition
Assessment  Diagnosis  Intervention  Mon & Eval
Problem  Etiology  Signs & Symptoms
PES Relationships

Nutrition Assessment   Nutrition Diagnosis   Nutrition Intervention   Nutrition Mon & Eval

Problem Etiology Signs & Symptoms

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PES Relationships

Nutrition | Nutrition | Nutrition | Nutrition
Assessment | Diagnosis | Intervention | Mon & Eval

Problem | Etiology | Signs & Symptoms
PES Relationships

- Nutrition Assessment
- Nutrition Diagnosis
- Nutrition Intervention
- Nutrition Mon & Eval

- Problem
- Etiology
- Signs & Symptoms
PES Relationships

Nutrition (Re)-Assessment
Nutrition Diagnosis
Nutrition Intervention
Nutrition Mon & Eval

Problem Etiology Signs & Symptoms
Standardized Nutrition Diagnostic Terminology

- Initial list of 61 Nutrition Diagnostic Terms have been identified and described
  - Term
  - Brief Description
  - Reference Sheet
- Can be used as Problem, Etiology or Signs & Symptoms

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Inadequate protein intake related to changes in taste and appetite as evidenced by average daily protein intake 40 percent less than estimated requirements.

- Select the (P): nutrition diagnostic term
- Next verify/select (S): signs and symptoms from the assessment data that document the presence of the nutrition diagnosis
- Then evaluate the assessment data that documents the (E): etiology
Nutrition Intervention

Purpose

- Plan and implement purposeful actions to address identified nutrition problem
  - Bring about change
  - Set goals and expected outcomes
  - Client-driven
  - Based on scientific principles, best available evidence
Nutrition Intervention
Components: Plan and Implement

Sub Step 1
Plan nutrition intervention
- Prioritize diagnoses
- Identify ideal goals and expected outcome
- Select intervention strategies
- Consult Evidence-Based Guides for Practice, other nationally developed guidelines
Nutrition Practice Guidelines/Protocols

Links best external scientific evidence—or knowledge from experts—about nutrition care to a specific health problem.

Evidence-based guides integrate content of care with process of care components.
Nutrition interventions are purposefully planned actions designed with the intent of changing a nutrition-related behavior, risk factor, environmental condition, or aspect of health status.

Type of intervention

**Content component**
- Macronutrients
- Micronutrients
- Meal planning
- Supplements
- Meal replacements
- Exercise

**Dose, frequency and duration of intervention component**
- How much, how often
Plan the Intervention: Example

Nutrition Diagnosis

Excessive fat intake related to frequent consumption of high-fat meals as evidenced by fat calories greater than 55 percent of total calories per day
Plan the Intervention: Example

Examples of Expected Outcomes
- Limits foods high in cholesterol, saturated fat
- Uses food sources of mono-unsaturated fat as preferred fat

Examples of Evidence-Based Ideal Goals
- Percentage of total kcal from fat: 25-35 percent
- Less than 7 percent saturated fat
- Up to 10 percent polyunsaturated fat
- Up to 25 percent mono-unsaturated fat

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Nutrition Intervention

Components: Plan and Implement

Sub Step 2
Implement nutrition intervention
  - Jointly develop for nutrition care plan with client
  - Select behavioral change strategy/approach
  - Dietetics professionals may…
    ✓ Directly carry out the intervention
    ✓ Delegate or coordinate care provided by others
    ✓ Collaborate with other professionals
  - Continue data collection, modify plan and strategies as condition or response change
Implement the Intervention: Example

Nutrition Diagnosis

Excessive fat intake related to frequent consumption of high-fat meals as evidenced by fat calories greater than 55 percent of total calories per day

Nutrition Intervention

- Provide explanation and definitions of fat
- Review types and sources of fat
- Discuss methods to prepare or select meals with less total fat (focusing on saturated fat)
- Select self management strategies (recording intake, etc)
Nutrition Monitoring and Evaluation

Purpose
- Determine progress being made toward client’s goals or desired outcomes

Monitoring involves:
  - Review and measurement of status at scheduled times

Evaluation involves:
  - Systematic comparison with previous status, intervention goals, reference standard
Nutrition Monitoring and Evaluation Components

Sub Step 1: Monitor progress
- Check client’s understanding and adherence
- Determine if intervention is being implemented as planned
- Determine if client’s status is or is not changing
- Identify other positive or negative outcomes
- Gather information indicating reasons for any lack of progress
Nutrition Monitoring and Evaluation Components

Sub Step 2: Measure outcomes

- Select outcome indicators that are relevant to...
  - Signs or symptoms, nutrition goals, medical diagnosis and outcomes or quality management goals
- Use standardized indicators to...
  - Increase validity and reliability of measure
  - Facilitate electronic charting, coding and outcomes measurement
What Gets Measured?

Nutrition Monitoring and Evaluation

Types of Outcomes

- Direct nutrition outcomes
- Clinical and health status outcomes
- Patient/client-centered outcomes
- Health care utilization

Intermediate-result outcome

End-result outcome
Sub Step 3: Evaluate outcomes

- Compare current findings with previous status, intervention goals, and/or reference standards
Support Systems: Screening and Referral System

- Identification of those who could benefit from special nutrition intervention
- Used by dietetics professionals and others
- Established system to connect to nutrition care
Support Systems: Outcomes Management System

- Management information system that links care processes and resource utilization with outcomes.
- Relevant data aggregated from many clients to determine overall effectiveness and efficiency of the process.
- Summary findings sent back to providers and reported to administrators, payors.
- Infrastructure required.

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MNT: An Application of the Nutrition Care Process

Nutrition Care Process
- Variety of settings
- Both individuals and groups
- Continuum of care
- Prevention and health promotion

Medical Nutrition Therapy (MNT)
- In-depth nutrition assessment
- Duration and frequency of care
- Uses Nutrition Care Process to manage disease

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NCP Example: Acute Care

Nutrition Assessment

- Large meat portions (greater than 6 oz. daily)
- Only use solid margarines (approx. 6 tbsp. daily)
- Could not identify foods with saturated fats
- Current intake of saturated fat > 15 percent calories
- No previous nutrition education

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Nutrition Diagnosis

- Excessive saturated fat intake related to regular use of solid margarine and large meat portions as evidenced by daily average of saturated fat in excess of 15 percent of calories
- Knowledge deficient related to no previous education as evidenced by client not able to name any foods that are sources of saturated fat
Nutrition Intervention

- Plan with client to determine expected outcomes ... Targeted at the causes
  - Large meat portions: decrease portion size and change the types of meat consumed
  - Use of solid margarine: use olive oil in cooking and eating
  - Little to no knowledge: provide appropriate materials to recognize foods and read labels
NCP Example: Acute Care

Nutrition Monitoring and Evaluation

- Monitor progress
  - Check for understanding
  - May provide follow-up phone call
- Measure outcomes
  - Average daily percent of saturated fat
- Evaluate outcomes
  - Compare with baseline diet history
NCP Example: Community/ Public Health

Nutrition Assessment

- Increased incidence of diabetes mellitus among adolescent population
- Increased BMI in middle school students
- Cuts in school budgets resulting in less recess time after lunch in middle schools
- No after-school programs
Nutrition Diagnosis

- Inadequate physical activity related to limited outside recess after lunch as evidenced by children returning immediately to the class after lunch
- Potential for increase in BMI related to inadequate physical activity
- Potential for increase in Type 2 diabetes related to increase in BMI in middle school students
Nutrition Interventions

Collaborate with community and school resources to...

- Reinstate school lunch recess
- Create additional means to increase physical activity
- Provide risk management information related to increase in Type 2 diabetes in overweight and inactive children, adults
NCP Example: Community/ Public Health

Nutrition Monitoring and Evaluation

- Track minutes/day of physical activity for children
- Track incidence of Type 2 diabetes
- Track BMI changes over time
- Evaluate knowledge of community education programs
Review of Key Points

- Standardized process
- Individualized care
- Common language
- High-quality care and better outcomes
What’s Next?

- Education and implementation
- Standardized language
Nutrition Diagnostic Terms

- Report submitted to HOD and BOD for action
- Information to be downloadable from website
- Publication will be available at FNCE
- Developing grassroots implementation network
- Developing process for members to submit proposed updates to list of terms annually
- Eventually terms will be integrated into electronic medical record coding systems
Nutrition Diagnostic Terms

- Initial terms and documentation formats being pilot tested at two facilities
  - Virginia Hospital Center
  - San Diego VA

- Initial terms integrated into 3 research studies
  - CARLE Medicare Demonstration Study
  - Charney’s doctoral research on reliability and comparing entry level-beyond entry level, and advanced practice
  - Dietetics Practice Based Research Network (DPBRN) study (being planned at end of March)

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Acknowledgements

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