

University of Vermont, Master of Science in Dietetics Program Required Activities & Assignments: Long-Term Care

General Information

Below is a list of all activities and assignments that must be completed in the long-term care supervised practice experience concentration area. Students will be evaluated on each of these learning activities at the conclusion of their rotation experience.

In the event that a student is unable to complete one or more of the assignments at a particular rotation site, the student and or preceptor must contact the UVM MSD Program Director to discuss a comparable alternative activity or assignment.

Note that, at a minimum, students must complete these activities and assignments to satisfy MSD program requirements. Time permitting, preceptors may request or require that students participate in or complete additional activities and assignments. In this case, the appropriate CRDN must be added to the competency evaluation form.

Beyond the activities and assignments outlined here, students are expected to spend a significant portion of their time in these rotations shadowing and engaging with practicing dietetic professionals. Where possible and relevant, students are encouraged to observe and engage with other professionals at the facility. This may be in the form of shadowing staff, or attending talks, conferences, or other special events.

Required Activities & Assignments

1. Apply NPUAP guidelines for Nutrition in Pressure Ulcer Prevention and Treatment to create a 1 day therapeutic menu for a resident with Skin Ulcer. Complete a written summary describing what informed your meal planning process.

CRDN 1.2

2. Complete a literature review and prepare a written report on a topic relevant to the provision of nutrition care in the older adult population. Include possible recommendations for facility-specific changes related to the findings.

CRDN 1.4

3. Review federal regulations and CMS surveyor guidelines related to nutrition services in long term care. Discuss impact on clinical nutrition practice with preceptor.

CRDN 2.1

4. Participate in 2 relevant care planning meetings (falls, wounds, weight, etc.). Discuss an appropriate food and nutrition support and care with preceptor. Share recommendations with other members of interprofessional team.

CRDN 2.4

5. Observe RD making referrals to other professionals to understand the process of knowing when and how to make appropriate referrals (rehab, SLP, social services, etc). For at least 2 patients who are referred by the RD to another professional prepare a written summary including the following: Identify why the referral was made, explain how the needs of the patient are outside the scope of practice for the RD, and identify indicators that help the RD to determine when to refer out.

CRDN 2.6

6. Observe RD implementing nutrition care process. Create and implement a nutrition care plan using the Nutrition Care Process Model (ADIME) for at least 2 patients, at least one of which must be a new admit, including writing a PES statement.

CRDN 3.1

7. Visit and interact with at least 5 residents during meal time. Share observations and discuss the value of meal rounds with preceptor.

CRDN 3.3

8. Create, implement, and evaluate an in-service for nursing staff or dietary staff on a topic to be agreed upon with preceptor. In-service should include lesson plan with a goal, learning objectives, and assessment prior to delivery.

CRDN 3.4

9. Prepare a brief literature review on nutrition therapy for dysphagia (include at least 3 peer-reviewed citations). Shadow a speech-language pathologist during a swallowing evaluation. Observe residents with dysphagia (and altered texture diets) at meal rounds. Write a summary identifying the risks (to the patient and to the facility) inherent in providing the wrong texture foods. Explain how facilities accommodate the residents right to decline a texture - modified or therapeutic diet within safety and liability concerns.

CRDN 4.10