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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 2017 Standards and the Focus Area Practice 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 of Practice for the RDN and 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.

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Standards of Practice in Nutrition Care and Standards of Professional Performance for the RDN and for the NDTR

The *Standards of Practice* defines *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 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. The Standards of Practice encompass two distinct continuums of providing nutrition-related services:

- The **Standards of Practice (SOP)** use the key steps of the Nutrition Care Process and workflow elements (i.e., nutrition screening, nutrition assessment, nutrition diagnosis, nutrition intervention/plan of care, monitoring and evaluation, and discharge planning and transitions of care) as a template to describe basic competencies that practitioners must demonstrate when working with patients, clients, and/or populations.

- The **Standards of Professional Performance (SOPP)** use six domains of professional performance (i.e., Quality in Practice, Competence and Accountability, Provision of Services, Application of Research, Communication and Application of Knowledge, and Utilization and Management of Resources) as a template to describe basic competencies that practitioners must demonstrate in all practice settings.

Focus Area Standards of Practice for the RDN

Unlike the 2017 Standards, which reflect the minimum competent level of practice, the Focus Area 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.
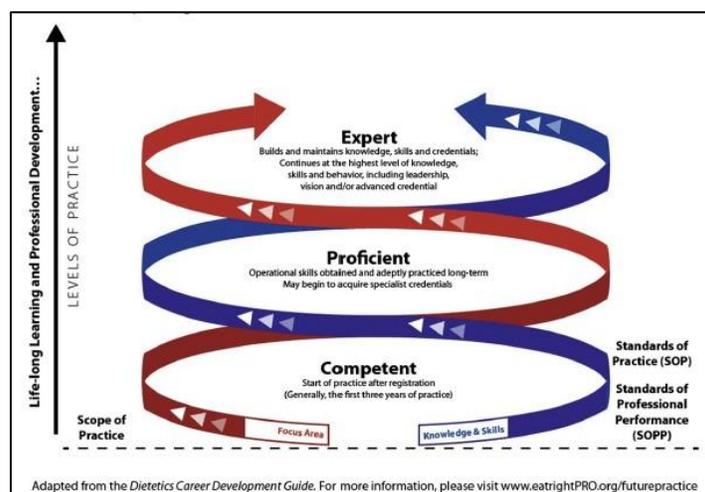

Figure 1: Dietetics Career Development Guide Helix illustrates how practice advances with the acquisition of knowledge, skills, and experiences using the Focus Area Standards

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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 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, attitude, skills, abilities, behaviors, and other characteristics that an individual needs to perform work roles or occupational functions successfully. Competencies specify the "how" of performing job tasks, or what the person needs to do the job successfully.
Individual Scope of Practice	Individual Scope of Practice is comprised of following components: Scope of Practice, state laws, education and credentials, federal and state regulations and interpretive guidelines, accreditation organizations, organization policies and procedures, additional individual training/credentials/certifications.
Board Certified Specialist	Board Certified Specialists are RDNs credentialed by the Commission on Dietetic Registration (CDR) who have met empirically established criteria and who have successfully completed a specialty certification examination that simulates and/or tests practice-related knowledge, skills, or abilities. Certifications include Pediatric Nutrition (CSP), Pediatric Nutrition Critical Care (CSPCC), Renal Nutrition (CSR), Gerontological Nutrition (CSG), Sports Dietetics (CSSD), Oncology Nutrition (CSO), and Obesity and Weight Management (CSOWM).
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).
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

Term	Definition
	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.
	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

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Figure 2: Sequence of Steps for Developing and/or Revising the
Professional Development Portfolio

Steps for Using the Practice Standards to Inform/Create your PDP

Step I: Conduct Professional Practice Self-Evaluation
RDNs and NDTRs should review the 2017 Standards for RDNs and any applicable Focus Area 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 the four SOP in Nutrition Care 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 six SOPP 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 with CDR Specialist Credentials or Focus Areas for RDNs, locate the relevant Focus Area Standards and continue the process as explained above (i.e., a pediatric dietitian

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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/Learning Needs
Review your self-evaluation and note the areas for which you think 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. Essential Practice 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 Professional Development Portfolio plan
   a. Go to www.cdrnet.org and select "myCDR login".
   b. Log in to myCDR account using your username & password.
   c. Select "[Competency Plan Builder Instructions](#)" or watch the [Competency Plan Builder video](#) for directions on how to get started creating your PDP.

2. Choose appropriate Sphere(s) and Competencies.
   a. Click on "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: You may create a general Learning Plan which doesn't need to relate to "role specific" areas of practice. This may be particularly useful for retired practitioners who are maintaining registration. Optionally choosing from the "Core Essential Practice Competencies" 1-9 may help you accomplish learning goals that apply to all credentialed practitioners regardless of role, area of practice, or setting. As you become more specialized, you may elect to update your Plan with "Functional Essential Practice Competencies" 10-14. 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](#)

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2. Record the CPEs in your Activity Log.
   - Go to www.cdrnet.org and select "myCDR login".
   - Log in to myCDR account using your username & password.
   - Click on "Record your Activities". See FAQs to help you complete your Activity Log.

Step V: Review/Revise Learning Plan

As new learning needs arise (i.e., career change, professional interests, promotion, etc.) and at the start of a new 5-year professional development cycle, use the 2017 Standards and/or Focus Area 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 the learning, even if they are not listed on your Plan.

Case Studies
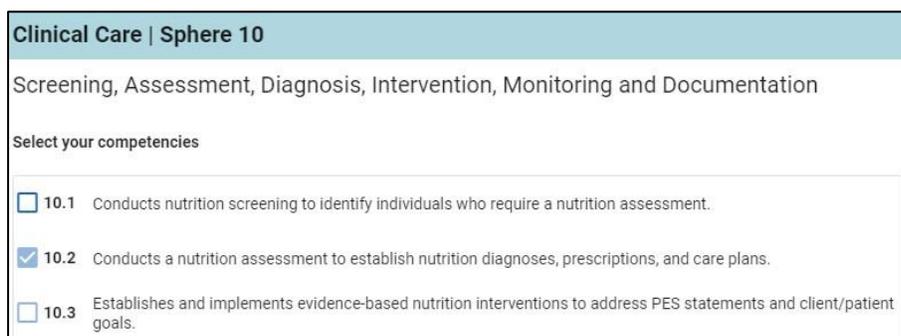
Scenario 1: Newly Credentialed RDN

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 2017 Standards for RDNs, the RDN observes several gaps in their competencies specific to their new job responsibilities. An area in which the RDN feels the need for additional education and training is performing nutrition-focused physical exams (NFPE) (SOP Indicator 1.4).

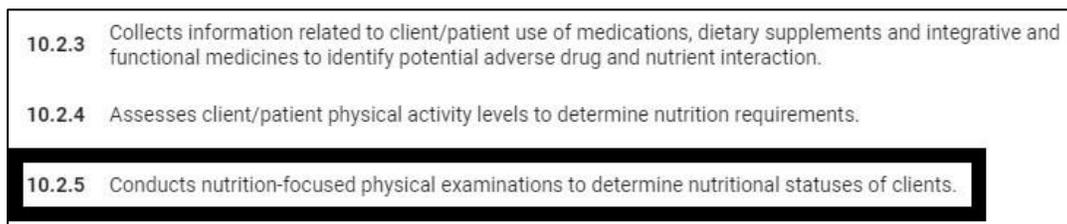| Indicators for Standard 1: Nutrition Assessment	
Each RDN:	
1.1	Patient/client/population history: Assesses current and past information related to personal, medical, family, and psychosocial/social history
1.2	Anthropometric assessment: Assesses anthropometric indicators (eg, height, weight, body mass index [BMI], waist circumference, arm circumference), comparison to reference data (eg, percentile ranks/*z*-scores), and individual patterns and history
1.3	Biochemical data, medical tests, and procedure assessment: Assesses laboratory profiles (eg, acid−base balance, renal function, endocrine function, inflammatory response, vitamin/mineral profile, lipid profile), and medical tests and procedures (eg, gastrointestinal study, metabolic rate)
1.4	Nutrition-focused physical examination (NFPE) may include visual and physical examination: Obtains and assesses findings from NFPE (eg, indicators of vitamin/mineral deficiency/toxicity, edema, muscle wasting, subcutaneous fat loss, altered body composition, oral health, feeding ability [suck/swallow/breathe], appetite, and affect)

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3. On the MyCDR website, the RDN 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 10.2 to describe key learning objectives of a CPE activity that meets identified learning needs. To complete their Learning Plan, the RDN selects additional Spheres and Competencies and then clicks "Next Step".

Clinical Care | Sphere 10

Screening, Assessment, Diagnosis, Intervention, Monitoring and Documentation

Select your competencies

☐ 10.1 Conducts nutrition screening to identify individuals who require a nutrition assessment.

☑ 10.2 Conducts a nutrition assessment to establish nutrition diagnoses, prescriptions, and care plans.

☐ 10.3 Establishes and implements evidence-based nutrition interventions to address PES statements and client/patient goals.

5. Before submitting the Plan, 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 10.2.5 describes anticipated outcomes of CPE activities.

10.2.3 Collects information related to client/patient use of medications, dietary supplements and integrative and functional medicines to identify potential adverse drug and nutrient interaction.

10.2.4 Assesses client/patient physical activity levels to determine nutrition requirements.

10.2.5 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 2017 Standards for NDTRs, the NDTR observes several gaps in their competencies specific to the 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 (SOPP Indicators 3.3 A, B, and C).

Indicators for Standard 3: Provision of Services		
3.3	Contributes to or designs customer-centered services	
	3.3A	Sets priorities based on needs, beliefs/values, goals, resources of the customer, and social determinants of health
	3.3B	Uses knowledge of the customer's/target population's health conditions, culture, beliefs, and business objectives/services to guide design and delivery of customer-centered services
	3.3C	Communicates principles of disease prevention and behavioral change appropriate to the customer or target population

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

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4. Within these Spheres, the NDTR chooses Competencies 1.7 and 2.1, 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.

Communications | Sphere 2

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

Select your competencies

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

☐ 2.2 Demonstrates effective communication 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.

Competency 1.7 Performance Indicators

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

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.

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Competency 2.1 Performance Indicators

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

2.1.1 Assesses the communication needs of individuals, groups and populations to provide effective communication.

2.1.2 Identifies and addresses barriers to effective communication.

2.1.3 Tailors messages and communication methods to meet the needs of target audiences.

6. Using the CPE Database and other CPEU resources (listed above), the NDTR locates CPE activities that reflect their learning needs.

Search CPE Database

If you enter an activity number, you do not need to enter any additional fields.

Activity Number	
Title or Description	

To refine search, please enter additional criteria below

Online/Self Study ☐ Search only online/self study activities

Activity Type
- ☐ 120 Certificate Programs
- ☐ Annual Meeting
- ☐ Live Activity: 130 Exhibits
- ☑ Live Activity: 150 Interactive Workshops
- ☐ Live Activity: 170 Lectures / Seminars
- ☐ Live Activity: 210 Residency and Fellowship Programs
- ☐ Recorded pre-approved CPE Activity: 175 Lectures/Webinars
- ☑ Self Study Activity: 710 Computer-Based (Offline)
- ☑ Self Study Activity: 730 Video-Based
- ☐ 171: Live Webinars and Teleseminars
- ☐ Live Activity: 110 Case Presentation
- ☑ Live Activity: 140 Experiential Skill Development
- ☐ Live Activity: 160 Journal Club
- ☐ Live Activity: 180 Posters
- ☐ Live Activity: 230 Study Groups
- ☐ Self Study Activity: 700 Audio-Based
- ☐ Self Study Activity: 720 Printed
- ☐ Self Study Activity: 740 Web-Based

Performance Indicators
View/Add

1.7.6 Applies knowledge of health determinants when planning, developing and implementing services, programs, interventions, meal plans and menus. ✕

1.7.5 Applies knowledge of cultural foods, religious traditions, eating patterns and food and nutrition trends. ✕

2.1.1 Assesses the communication needs of individuals, groups and populations to provide effective communication. ✕

2.1.3 Tailors messages and communication methods to meet the needs of target audiences. ✕

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.

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2. After completing a professional self-evaluation using both the 2017 Standards and the [Focus Area Standards in Management of Food and Nutrition Systems](#) (MFNS), the RDN observes several gaps in their competencies specific to their 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 the laws and regulations for preparing and serving food safely to a preschool-age population (2017 Standards and MFNS SOPP Indicator 1.1 and MFNS SOPP Indicator 1.2 A).

3. The RDN also notices that the Focus Area Standards are significantly different from the 2017 Standards for RDNs. First, since Foodservice Managers do not routinely provide direct care to patients, only indicators for the SOPP are provided and because the Standards are specifically written for RDNs practicing in foodservice management with indicators that reflect three levels of practice (competent, proficient and expert) for the unique competence expectations for new to very experienced RDNs practicing in the focus area.

Indicators for Standard 1: Quality in Practice	
Each RDN:	
1.1	Complies with applicable laws and regulations as related to his/her area(s) of practice

Indicators for Standard 1: Quality in Practice			The "X" signifies the indicators for the level of practice		
Bold Font Indicators are Academy Core RDN Standards of Professional Performance Indicators					
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

4. Since the RDN has already created a PDP, there is only the need to add additional Spheres and Competencies that reflect new learning needs. On the MyCDR website, 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.

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5. Within this Sphere, the RDN chooses Competency 7.2, 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 7.2.7 describes anticipated outcomes of CPE activities.

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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.

9. 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

1. 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.

2. 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 (SOPP Indicator 1.2B).

3. The RDN also notices that the Focus Area Standards are significantly different from the 2017 Standards they had been using in the past. First, since clinical nutrition managers do not routinely provide direct care to patients, only indicators for the SOPP are provided and because these Standards are specifically written for RDNs in leadership roles, the indicators

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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.

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 in CNM possesses the following traits and embodies these through the actions identified based on their level of practice:			Competent	Proficient	Expert
	1.1F	Displays an optimistic approach in new and diverse situations	X	X	X
	1.1G	Champions an environment of high expectations and supports initiatives beyond the scope of one's job			X
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 CNM views these actions as a continuous cycle, identifying opportunities for improvement as additional techniques, technology, and information become available.				
	1.2A	Uses national quality and safety data (eg, National Academies of Sciences, Engineering, and Medicine: Health and Medicine Division, National Quality Forum, Agency for Healthcare Research and Quality, Institute for Healthcare Improvement) to improve the quality of services provided and to enhance customer-centered services	X	X	X
	1.2B	Compares actual performance to performance goals (ie, Gap Analysis, SWOT [Strengths, Weaknesses, Opportunities, and Threats] Analysis, PDCA [Plan-Do-Check-Act] Cycle, DMAIC [Define, Measure, Analyze, Improve, Control])	X	X	X

4. Since the RDN has already created a PDP, there is only the need to add additional Spheres and Competencies that reflect new learning needs. On the MyCDR website, 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 14.1, 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".

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Organization Management | Sphere 14

Applies principles of food and nutrition management to support the organization's mission, vision, and strategies to improve customer service.

Select your competencies

☑ **14.1**   Employs principles of productivity to optimize safe, ethical, and efficient resource utilization.

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.

Competency 14.1 Performance Indicators

Employs principles of productivity to optimize safe, ethical, and efficient resource utilization.

14.1.1	Establishes, monitors and communicates clear targets for departments and organizations aligned with common objectives and goals.
14.1.2	Develops and applies criteria to measure and monitor productivity in order to support safe, ethical, and efficient services delivery.
14.1.3	Develops goals and outcomes to measure and enhance productivity.
14.1.4	Assesses skills and competence of staff to optimize workflow.
14.1.5	Monitors staff compliance with laws, policies, procedures and established systems.
14.1.6	Leads and participates in departmental and organizational goal-setting in order to align departmental goals with organizational strategic plans.
14.1.7	Measures goals and tracks outcomes against established benchmarks to ensure desired goals, standards and regulatory requirements are met.

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).*

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