

CASE STUDY – NDTRs Delivering Telehealth Nutrition-Related Services

Case: A nutrition and dietetics technician, registered (NDTR) is determining if performing nutrition activities such as nutrition education via telehealth is within their individual scope of practice.

Statement: The Revised 2017 Scope of Practice for the Nutrition and Dietetics Technician, Registered (NDTR) does not guarantee that a NDTR will be able to perform expanded practice skills, but it can guide the NDTR to the resources and options that can be used to evaluate whether the NDTR can safely and effectively provide an expanded practice skill and advance individual practice.

Definitions:

Term	Definition
Telehealth	Telehealth is the use of electronic information and telecommunications technologies to support clinical health care, patient and professional health-related education, public health and health administration.
Definitions located in the Definition of Terms List: www.cdrnet.org/definitions	

Explanation of Case: A nutrition and dietetics technician, registered (NDTR) is working in a hospital providing outpatient nutrition education services under the direction and supervision of the registered dietitian nutritionist (RDN). The RDN/NDTR team is receiving an increasing number of referrals for nutrition services for individuals who may travel some distance for the appointment. The RDN/NDTR team is interested in determining if providing nutrition education via telehealth is within the NDTR’s individual scope of practice as the hospital has begun to offer telehealth services to the hospital’s clinics in other communities within the state.

In this example, the NDTR uses the Revised 2017 Scope of Practice for the NDTR¹, and the Revised 2017 Standards of Practice in Nutrition Care and Standards of Professional Performance for NDTRs² to determine whether providing nutrition education under the supervision of the RDN via telehealth is within their individual scope of practice. Although the NDTR may seek advice and direction from colleagues and their supervisor, the initial review is the NDTR’s responsibility.

Case Study Resources:

The resources listed below and throughout the case study are intended to provide additional knowledge, guidance, and tools related to telehealth. NOTE: Some of the resources require non-members to pay a fee to access.

- Available from the Academy of Nutrition and Dietetics (Academy)/Commission on Dietetic Registration (CDR)
 - Telehealth Webpage (member only): <https://www.eatrightpro.org/career/career-resources/telehealth-quick-guide>
 - Practice Tips: Delivery of Nutrition-Related Services Using Telehealth: <https://www.cdrnet.org/tips>

- Practice Tips: What is Meant by “Under the Supervision of the RDN?”: <https://www.cdrnet.org/tips>
 - Practice Tips: The RDN/NDTR Team: Steps to Preserve: <https://www.cdrnet.org/tips>
 - Code of Ethics for the Nutrition and Dietetics Profession: <https://www.cdrnet.org/codeofethics>
 - Revised 2017 Scope of Practice for the NDTR: <https://jandonline.org/content/core>
 - Revised 2017 Standards of Practice and Standards of Professional Performance for NDTRs: <https://jandonline.org/content/core>
 - Nutrition Care Process Terminology (eNCPT online): <https://www.ncpro.org/>
 - Essential Practice Competencies for Commission on Dietetic Registration’s (CDR) Credentialed Nutrition and Dietetics Practitioners: https://admin.cdrnet.org/vault/2459/web/New_CDR_Competencies_2021.pdf
- Institutional, regulatory, and other resources include:
- CDR Licensure webpage: <https://www.cdrnet.org/licensureMap>
 - CDR Position Descriptions: <https://www.cdrnet.org/opportunities>
 - Telehealth Resources Centers: <https://telehealthresourcecenter.org/>
 - Organization policies and procedures
 - Facility/program accreditation standards, if applicable

Using the Scope of Practice Decision Algorithm:

<https://www.cdrnet.org/scope>

The Scope of Practice Decision Algorithm is a resource that permits a NDTR to answer a series of questions to determine whether a particular activity is within their individual scope of practice. The tool is designed to allow a NDTR to critically evaluate their knowledge, skills, experience, judgment and demonstrated competence using criteria resources. The tool is used by the NDTR to evaluate each separate activity.

PRACTITIONER QUESTIONS:

Question 1: Is this activity consistent with the Academy of Nutrition and Dietetics/Commission on Dietetic Registration (CDR) Code of Ethics, standards of practice and standards of professional performance, evidence-based nutrition practice guidelines, other national organization standards of practice and/or practice guidelines, accreditation standards, federal and state laws and regulations, and good business practices?

They verify consistency with the Scope of Practice for the NDTR, which states NDTRs “work under the supervision of the RDN when engaged in direct patient/client nutrition care activities in any setting.” Additionally, the Scope of Practice for the NDTR has a segment in the Practice Areas, Services, and Activities section of the article dedicated to telehealth which states:

“NDTRs use telehealth in businesses and consulting. NDTRs use interactive electronic communication tools for health promotion and disease prevention. For communication of broad-based nutrition

education (eg, general nutrition guidelines for weight management when in a health coach role), NDTRs use the internet, webinars, videoconferencing, e-mail, and other methods of distance communications. NDTRs:

- Use electronic information and telecommunications technology to support an RDN providing long-distance clinical health care; and to provide client support for food or food service-related businesses providing products, such as foodservice systems management software.
- Monitor telehealth technologies for Health Insurance Portability and Accountability Act compliance.”¹

The NDTR compared this activity to the Academy/CDR Code of Ethics. While telehealth is not mentioned directly in the Code of Ethics, there are some principles and standards that apply to this topic (Note: may not be all inclusive, others may apply on a case-by-case basis):

- “Recognize and exercise professional judgment within the limits of individual qualifications and collaborate with others, seek counsel, and make referrals as appropriate.”³
- “Practice within the limits of their scope and collaborate with the inter-professional team.”³
- “Document, code and bill to most accurately reflect the character and extent of delivered services.”³

The NDTR reviewed the Revised 2017 Standards of Practice (SOP) in Nutrition Care and Standards of Professional Performance (SOPP) for NDTRs. The Revised 2017 SOP in Nutrition Care and SOPP for NDTRs contains a role example for a ‘Telehealth practitioner, wellness organization’² as well as indicators in the SOP and SOPP that would be related to nutrition-related care and services provided using telehealth technology.

Question 2: Do you have the necessary knowledge, skills and demonstrated competence in practice to perform this activity?

In reviewing their education and training, the NDTR determined additional knowledge related to interacting with patients/clients for nutrition education using telehealth would be beneficial. The NDTR discussed with their supervisor and decided to investigate resources available through the Academy.

- The NDTR reviewed the following Academy and CDR Resources:
 - Academy Telehealth Webpage - The Telehealth Quick Guide (member only):
<https://www.eatrightpro.org/career/career-resources/telehealth-quick-guide>
 - Practice Tips: Delivery of Nutrition-Related Services Using Telehealth:
<https://www.cdrnet.org/tips>

Question 3: Did you use the Standards of Practice and Standards of Professional Performance to determine your competence? Did you demonstrate your competence to an individual with the knowledge and skills to appropriately assess your ability to perform the activity? Is your competence documented in your employee personnel record?

The NDTR reflects on the '[core' SOP and SOPP indicators](#)² and identifies meeting the minimum competent level of practice related to the RDN/NDTR team and nutrition-related care and services that can be delivered via telehealth. The following are examples of indicators from the Revised 2017 SOP in Nutrition Care and SOPP for NDTRs².

Competent Level of Practice
<p><u>SOP Indicators:</u></p> <ul style="list-style-type: none"> • 1.1 • 3.1, 3.1A, 3.1B, 3.6 • 4.3, 4.4
<p><u>SOPP Indicators:</u></p> <ul style="list-style-type: none"> • 1.1, 1.3 • 3.1, 3.2, 3.4, 3.4C, 3.4D, 3.4E, 3.7 • 5.2, 5.2B • 6.3

To strengthen knowledge and skill in delivering nutrition screening and education through telehealth, the NDTR evaluates their level of practice related to the Revised 2017 SOP in Nutrition Care SOPP for NDTRs². The indicators related to telehealth where the NDTR determined they do not meet competent level of practice are opportunities to strengthen knowledge and skills for quality practice.

The NDTR plans to request training on how to use the hospital's telehealth technology and on telehealth best practices from their supervisor. The NDTR wants to ensure that they are adequately trained in using the HIPAA-compliant video conferencing telehealth platform prior to using with patients/clients with their consent. Once the NDTR completes training and competence verification, the NDTR's supervisor provides documentation for their employee personnel file following hospital procedure.

Question 4: If the state(s) where you work license RDNs, is there any language that prohibits this activity? Are there provisions within the scope of practice of any other professions that would limit performing this activity?

The NDTR understands that they must work under the supervision of a RDN and that the RDN must be licensed and/or meet the other applicable standards that are required by state or local laws and regulations in both the state where the RDN/NDTR team is located and the state where the patient/client is located. The NDTR studied their state and the state laws and regulations where patients/clients might be located at <https://www.cdrnet.org/licensureMap>. Since regulations and policies are regularly updated, the NDTR routinely monitors the applicable laws and regulations.

Question 5: Are there any additional credentials (i.e., CCM, CHES, CPHQ*) or training (i.e., certificate of training in obesity interventions for adults or in pediatrics) described in published practice guidelines that would be expected of a health professional performing this activity?

The NDTR researched published practice guidelines and discovered there are no telehealth-specific credentials or formal training required of health professionals performing telehealth.

*Credential/Certificate	Credentialing Agency
Board-Certified Case Manager (CCM)	Commission for Case Manager Certification
Certified Health Education Specialist (CHES)	National Commission for Health Education Credentialing, Inc
Certified Professional in Healthcare Quality (CPHQ)	National Association for Healthcare Quality

Question 6: Does your employer/organization, in its policies and procedures or medical staff bylaws, rules and regulations recognize the NDTR as qualified to perform the activity?

The NDTR reviews the organization’s governing body documents, and policies and procedures and concludes that telehealth is allowed if performed under the supervision of the RDN and with appropriate training and documented competence. After the NDTR’s competence is verified and documentation is submitted for their personnel file, the NDTR works to ensure that their job description is amended to support performing activities such as nutrition education via telehealth.

The case example provides information on what things need to be considered before beginning to deliver care and services through telehealth. Before performing the new activity, the NDTR should also consider the following:

- Ensure that the activity is included in your job description.
- Ensure that your personnel file contains primary source verification of education, training, credentials, if applicable, and competence in performing the activity.
- Investigate your organization’s liability coverage and need for personal professional liability insurance.
- For billable services, investigate whether this activity, as performed by a NDTR and under the direction and supervision of the RDN, will be reimbursed by health plan insurers, including Medicare.

Some examples of best practices are, but are not limited to:

- Make sure the web camera is at eye level and test your audio/visual prior to call
- Look directly at the camera
- Ask if the patient/client can clearly see and hear you
- Use a second screen to write notes and complete journal/internet searches, if necessary, and use a silent keyboard if you are taking notes or completing searches during a call⁴

Disclaimer: *The Case Studies are intended solely as models to assist practitioners in using the Scope of Practice, Standards of Practice in Nutrition Care, Standards of Professional Performance, and the Scope of Practice Decision Algorithm and in determining their individual scope of practice. They should not be viewed as determinative of any particular inquiry or outcome. The results of an actual inquiry may differ according to the specific factual circumstances, state laws applicable to the specific situation, and organization policies and procedures.*

In this Case Study, 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).

REFERENCES

1. Academy of Nutrition and Dietetics Quality Management Committee. Academy of Nutrition and Dietetics: Revised 2017 Scope of Practice for the Nutrition and Dietetics Technician, Registered. *J Acad Nutr Diet.* 2018; 118(2): 327-342.
2. Academy of Nutrition and Dietetics Quality Management Committee. Academy of Nutrition and Dietetics: Revised 2017 Standards of Practice in Nutrition Care and Standards of Professional Performance for Nutrition and Dietetic Technicians, Registered. *J Acad Nutr Diet.* 2018; 118(2): 317-326e13.
3. 2018 Code of Ethics for the Nutrition and Dietetics Profession. Academy of Nutrition and Dietetics (Academy)/Commission on Dietetic Registration (CDR). Accessed July 19, 2023. <https://www.cdrnet.org/codeofethics>.
4. Tips You May Not Know to Improve Telehealth for Patients and Providers. Institute for Healthcare Improvement. Accessed August 22, 2023. <https://www.ihl.org/communities/blogs/tips-you-may-not-know-to-improve-telehealth-for-patients-and-providers>