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right. and Dietetics	
Consumer Protection: It's Our Priority	
Hawaiʻi Dietetic Association	
Amy Tousman, MPH, RDN, LD, CDE Consumer Protection Coordinator	
Objectives right. Academyof Nutrition right.	]
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<ul> <li>Understand the importance of individual responsibility, with regard to public safety.</li> </ul>	
Describe the process for collecting and	
reporting incidents of unsafe practice.	
<ul> <li>Share the Academy's messages related to Consumer Protection and Licensure</li> </ul>	
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2	<u> </u>
Consumer Protection Coordinator right, Academyof Nutrition	]
Consumer Protection Coordinator (CPC)	
- Part of HDA Public Policy Panel	
Resource on licensure statute and regulations	
Licensure liaison between DOH and HDA	
- Monitors consumer protection issues and their	
relationship to state licensure laws and state regulations, with SPR and SRS	

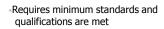
the Academy Supports Public Health		
Vision: Optimizing health through f	ood and nutrition	
Mission: Empowering members to nutrition leaders	be food and	

Why is Dietetics Licensure Important? right, and Dietetics

#### Supports consumer protection

vision and mission for its members

-Consumers need ethical, high quality, evidence-based care provided by professionals who are trained consistently and whose practice has proven outcomes





**Licensure Impacts All of Us** 

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#### -Access to quality health care

- -Enables others to have confidence in the dietetics profession. This includes
  - -Consumers
  - -Employers
  - -Insurers
  - -Other health professionals

Licensure is important for insurance coverage and access to many government programs

# State Regulation Helps Consumers right. and Dietetics

- •Establishes a governing body to:
  - •oversee the practice of the profession
  - work in the best interest of consumers
- •Empowers consumer by providing
  - •a place to report harm
  - •a mechanism to remove unsafe or incompetent practitioners (this includes RDNs!)

# Challenges to Current Environment

- · Opposition to the general concept of licensing professions
- State budgets are tight elimination of regulatory boards seen as option to save money
- · Competing licensed professionals want to do more nutrition
- Competing unlicensed practitioners want to do full scope of nutrition services without oversight

# Vigilance is Key:

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#### Past legislation:

- · Chiropractors-clinical nutrition-2011
- · Physician Task Force

## Recent Threats:

- Michigan-Licensure law repealed in 2014
- · Illinois-CNS's added during sunset
- Texas-unsuccessful attempt to repeal

# Ethics – Everyone's Responsibility \*Academy is committed to public safety \*Upholding ethics and standards of the profession is everyone's responsibility

•RDs agree to abide by the code of ethics during registration process

**Public Safety is Everyone's Kuleana** 

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If You See Something Say Something

"The dietetics practitioner considers the health, safety and welfare of the public at all times.

The dietetics practitioner will report inappropriate behavior or treatment of a client by another dietetics practitioner or other professionals."

ADA/CDR Code of Ethics for the Profession of Dietetics and Process for Consideration of Ethics Issues; Journal of the American Dietetic Association; 2009; pg. 1461

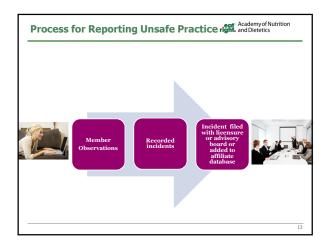
We all need to be ambassadors for public safety!

## **Three New Reporting Tools**

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- 1. Process For Reporting Unsafe Practice
- 2. State Reporting Scenarios
- 3. Collection of Successes and Unique Skills (Messaging)

12



Accurate and Specific Documentation

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-Reports should be specific in nature and must be **observed directly** by the individual filing the report (the RDN or the person who was harmed).

# All reports should include specific documentation:

- Keep name of individual who was impacted by the unsafe practice on file, but <u>don't</u> submit it to HDA Database.
- Name, qualifications and credentials of individual who provided the nutrition services
- Details of health status both before and after services provided

14

Documentation Form for HDA Members

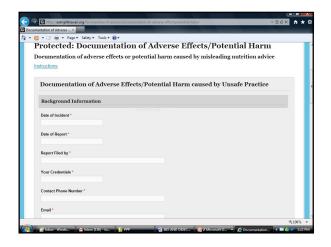


•HDA's PPP developed a form for Hawaii's RDN's to Report Adverse Effects/potential Harm

 $\frac{http://eatrighthawaii.org/documentation-of-adverse-effectspotential-harm/}{}$ 

Harm6Q

15







Hawaii (Title Act only) Reporting Scenarios:	Report to HDA Database	Report To State Regulating Agency (OHCA)
Using the title "Licensed Dietitian" without a license Ex: Holistic practitioner who advertises themselves as being a Licensed Dietitian	Yes Web link, print ads, literature	Yes Weblink, print ads, literature
Members of professions who provide MNT services outside their scope of practice (e.g, nurses, personal trainers, chiropractors, pharmacists, etc)  Ex: Personal trainer provides nutrition counseling to a client after bariatric surgery.	Yes Weblink, print ads, literature	No

# **Everyone's Responsibility**

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We can't own the world of nutrition, but we are obliged to protect it from misuse.

Additional places where RDN's without a Licensure Board can report unsafe practices:

- State Attorney Generals Office
  Hawaii Medical Board
- •DCCA-Office of Consumer Protection

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The Message

#### **Everyone's Responsibility:**

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Advocate for your profession! Building effective relationships is key!



Offer to participate in meetings with legislators
Provide Education about the value of RDNs
Ensure the protection of the public
Support bills of others

## **Leading Out Loud**

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- · Build trust and credibility
- Focus on credibility and expertise
  - People trust the messenger before the message
  - Demonstrate your passion, values, principles

# Next steps:

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## Collection of Successes and Unique skills

- RDN provided a positive medical outcome
- Medication errors or drug-nutrient interactions identified by RDN and corrected.
- RDN saved a consumer, insurance company, or state money or by providing cost-effective care.
- Demonstrate how we are effectively working with other professions, organizations, and community members

# MNT by RDNs is Cost Effective

- For every dollar invested in an RDN-led lifestyle modification program there was a return of \$14.58. <u>u</u>
- 8.6% reduction in hospital utilization and a 16.9% reduction in physician visits associated with RDN-provided MNT for patients with cardiovascular disease.
- 9.5% reduction in hospital utilization and a 23.5% reduction in physician visits when MNT was provided to persons with diabetes mellitus.[2]

# **Delivering Key Messages**

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- · Use real life examples of success stories
- Give stakeholders something to **BE FOR!**
- Package the information in a way that helps the issue come to life and become relevant
- Use statistics



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**Consumer Protection: It's Our Priority** 

Thank you!

If you have questions contact: