

Working Remotely: Guidelines for the Registered Dietitian Nutritionist- How to Ensure Compliance While Offsite Webinar

Working Remotely: Guidelines for the Registered Dietitian Nutritionist How to Ensure Compliance While Offsite

Presenter:
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Objectives

1. Describe organizational steps to ensure successful remote documentation by the registered dietitian nutritionist
2. Explain methods to identify malnutrition and reduce clinical nutrition outcomes
3. Identify, predict, and prevent food and nutrition compliance concerns while offsite through good team communication



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Sue Stillman-Linja, RDN, LD

- Owner S&S Nutrition Network
- More than 25 years experience working with geriatric nutrition
- Creating/implementing quality nutrition and menu services for her clients
- Provide contract work for more than 50 dietitians in the northwest U.S.
- Popular on the media circuit as a speaker for nutrition and aging seminars

Disclosures: Sue Stillman Linja has no relevant disclosures to report. She has certified that no conflict of interest exists for this program.



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F801 What's In the Regulation?

- Assess the nutritional needs of residents
- Develop and evaluate regular and therapeutic diets
- Develop and implement person centered education for all facility staff
- Oversee budget and purchasing
- Oversee food preparation, service and storage
- Participate in QAPI



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Essential Health Care Worker

The dietitian is "essential", but virus exposure is high if traveling from building to building

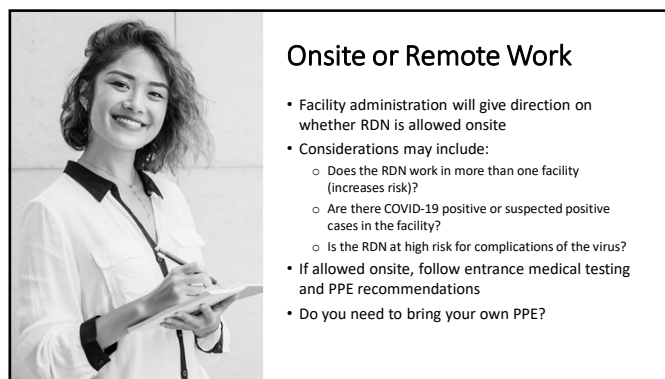


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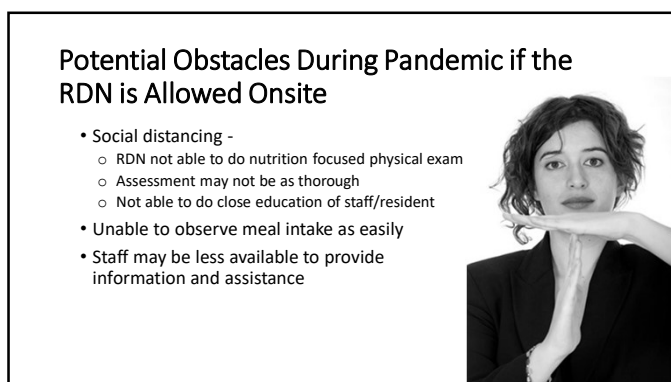
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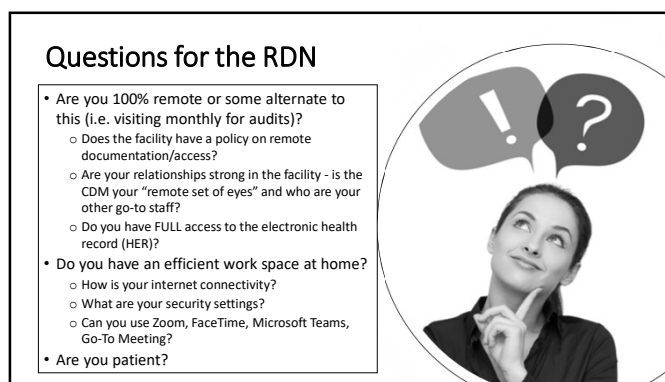
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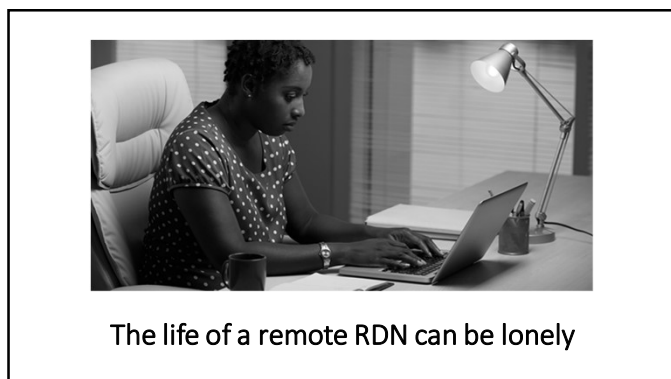
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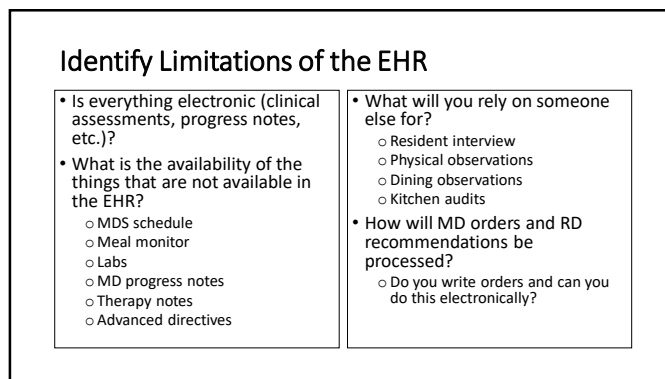
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Gather Data and Set Up Communication

- Who has the information you need?
 - CDM
 - DON
 - RCM
 - SLP
- Preferred method of communication for each
 - Email
 - Text
 - Fax
 - Via PCC/EMR



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Gather Data and Set Up Communication

- Day(s) and time(s) each week you will call or communicate to
 - Gather data
 - Meet with the residents virtually
 - Discuss concerns and recommendations
 - Participate/run the nutrition risk meeting
 - Monthly group “Exit” conference



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Make Your Meet-Ups Fun

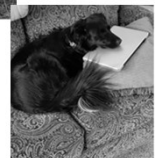
Remote work can have its moments - share them!

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Share Photos

Family
Recipes
Pets



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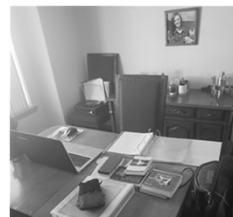
Have a Mask Contest



Photos courtesy of Debbie Widmier, CDM, and staff at Life Care of Treasure Valley

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Or the “Coolest Office” Contest



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Staying Focused



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Checklist for the CDM



Checklist for Clinical Manager Meeting Remotely with RD

Before the Nutrition Risk Meeting, please email to the RD:

- Follow proper HIPAA guidelines
- Meal intake report
- Other resident information RD is not able to access via EMR

Please be prepared to have a scheduled weekly call with your RD and have the following items prepared in advance. Weekly call to use for:

- List of high risk new admissions
 - At risk for possible malnutrition
 - Enteral Feedings
 - Parenteral Feedings
 - Diabetes
 - Pressure ulcers
 - Pain and vitals
- Any new updates on admissions/discharges
- RD Consults, updates or family members requesting to speak with RD (may need to check RD communication box at facility)
- Significant weight changes
- "Remote Set of Eyes" Audit results from previous week
 - Copy of Audit and/or photos sent
 - Facility is not performing an infection control audit, provide information on in-room and communal dining practices, isolation trays, residents needing meal assistance (Discuss with Administrator)
- If needed any menu changes for the week, staffing shortages, food supply shortages and challenges staff is facing in providing necessary supplies
- Other items needed

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Checklists for the DON and SLP



Checklist for DON or Assistant DON Working Remotely with RD

Weekly or as needed, please be prepared to discuss the following via call/text:

- Longstanding process changes
- Tube feeding/PPM and supply challenges
- Residents meeting priority assessments (with new nutritional issues): Gerd +/- or refeed, significant weight loss, poor intake, skin condition, tube feeding, swallowing issues, etc.
- Residents meeting at RD to call them (set up call time through routing)
- Notification of the RD for significant weight changes and RD Recommendations
- Any issues with in-room dining or other foodservice services processes
- Confirm schedule of Nutrition Risk Meeting for the week

Checklist for SLP Working Remotely with RD

Weekly or as needed, please be prepared to discuss the following via call/text:

- Any new residents with swallowing issues and/or being transitioned off of tube feeding
- Any concerns with GDS or other technology modification compliance
- Any issues with in-room dining or other foodservice services processes

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Structure an Efficient Day

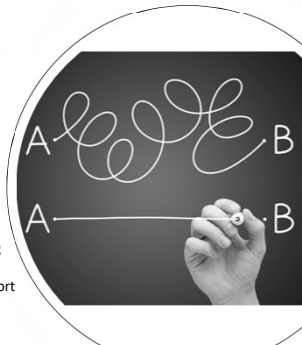
- ✓ Set up call with your CDM, DON, others
- ✓ Determine how far ahead you will be charting (are you documenting once, twice a week or more for this facility?)
- ✓ Review weight changes
- ✓ Do you need weights/re-weights?
- ✓ Review meal monitor - who do you need to add to your list?
- ✓ Review weekly skin/pressure injury report - add new to your list



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Structure an Efficient Day

- Prioritize who to chart on for the week and complete documentation
 - High risk residents, weight changes
 - New admissions
 - Malnutrition dx for PDPM
 - Annuals, Quarterlies
- Review QA Audits - "Remote Set of Eyes"
- Other Considerations:
 - QAPI meeting - How will you participate?
 - Provide an inservice (suggest a webinar, training or RDN do it remotely)
- Is it the end of the month? Will you do your report and exit with the administrator and team?



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Charting Malnutrition Remotely for PDPM

- Weight change at 1 week, 30, 90, and 180 days
- Appetite changes and current appetite
- Hand grip strength
- Fluid Accumulation
- Document in RD summary-
 - "Unable to perform nutrition-focused physical exam at this time"

Clinical Characteristics	Evaluation	Severe Protein Calorie Malnutrition ICD-10-E43	Moderate Malnutrition ICD-10-E44.0	Mild Malnutrition ICD-10-E44.1
Energy intake	Obtain diet history, calculate energy & protein intake. Subsequent intake is calculated as a percentage of estimated needs over time.	Nutritional intake of <10% of recommended intake for 2 weeks or more	Nutritional intake of <20% of recommended intake for 1 week	Food intake <80-75% of normal in the preceding week
Weight loss	Evidence weight loss in light of other clinical findings, including hydration status. Weight change over time is reported as a percentage of weight loss or weight change from baseline.	Weight loss of >7% in 1 week, 15% in 1 month, 25% in 3 months, 10% in 6 months	Weight loss of >1-2% in 1 week, 8% in 1 month, 7-10% in 3 months, 10% in 6 months	Weight loss less than that listed for Moderate Degree
Nutrition-focused physical exam	Muscle mass-wasting of the hands, thin skin, diminished reflexes, muscle wasting, loss of subcutaneous fat	Severe muscle wasting, loss of subcutaneous fat	Some muscle wasting, loss of subcutaneous fat	Mild or no malnutrition such as irregularities in skin, hair, nails, general or localized edema
Fluid Accumulation	Generalized or localized fluid accumulations evident on exam (e.g. edema, including but not limited to feet/ankles, wrists, etc.)	Severe to moderate	Moderate to mild	Mild to moderate
Functional assessment	Grip strength if available, review medical history	Reduced or absent significantly reduced functional capacity	Reduced functional capacity	Medical history suggesting malnutrition, altered full int. prior appetite

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Weekly Remote Audit by Administrator

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Remote Audits



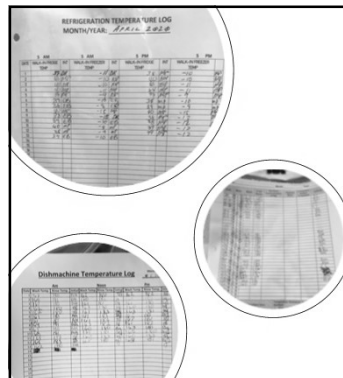
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Supply Check



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Temperature Logs



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Inservices



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Communication

Efficient communication with
the food and nutrition
services department is KEY
during a pandemic



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Communication

- Avoid calling CDM, DON or Admin every day if possible. Hold non-urgent recommendations to weekly (being mindful of delay in treatment)
- Provide written communication at least weekly to appropriate staff with clear directions for follow up
- Communicate any sanitation risk concerns immediately
 - Staff health and hygiene
 - Isolation needs
 - Dishwashing-logs, problems
 - Sanitization concerns
 - Buckets and logs
 - Hall Carts-contact surfaces



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Communication

- Identify any concerns and help troubleshoot
 - Missing weights or weight changes
 - Identify reason for missing weights
 - Educate importance of completing weights
 - Investigate cause for weight changes (acute illness/dining changes, social distancing)
 - Nutrition at risk meetings are not occurring
- Share the newest information for Food and Nutrition Services from the CDC and CMS



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Communication

- Discuss in-room dining and communicate any dining concerns (Remote auditing)
 - Meal delivery time concerns
 - Palatability/temperature concerns
 - Adequate staff assistance
 - Communal dining situations
- Share ideas for prevention of dehydration and weight loss for your facility
 - Creative snack programs
 - Fortified meals for any at risk residents
 - Replace milk with health shake on meal trays
 - Jello, popcicles, ice cream, smoothies



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Nutrition Recommendations May Change During Pandemics

- Under these circumstances, patients/residents are more likely to lose weight due to social isolation, depression and less staff attention
- May need to monitor weight trends more carefully or may need to find alternate means of monitoring nutrition if weights are suspended (i.e. mid upper arm circumference along with meal intake)
- May be making recommendations facility-wide vs individual care (i.e. may fortify all meals served in-room)



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The RDN Can Also...

- Act as a barometer for the stress level of the food and nutrition department and report up as needed
- Be supportive and have an understanding ear
- Offer services to help
 - Additional charting - relief for the CDM
 - If not already, run the nutrition risk meeting
 - Assist with other tasks that can be done offsite - menu changes/extensions, budget monitoring, etc.



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Your Role is Essential

- It is imperative to be proactive, preventive, and aggressive with food and nutrition interventions
- Even if doing it remotely is not ideal

Remember

- This situation is TEMPORARY
- But the work you do is PERMANENT, and regulated by CMS



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S&S
Nutrition
Network:
Remote
Offices



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Thank you!



To Sue Stillman-Linja, RDN, LD for Supporting this Webinar

• Contact sue@sandsnutrition.com

For more information

- Visit www.beckydorner.com/COVID19
- Sign up for our free e-newsletter to stay up to date on current news
- References and resources provided with handout
- Contact: info@beckydorner.com or <https://www.beckydorner.com/about/contact/>

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Visit www.beckydorner.com/covid19 for up to date information.

Government References and Resources

- Centers for Medicare & Medicaid Services
 - Appendix PP State Operations Manual (Scroll down to Appendix PP and click on it. See F 801 beginning on page 532)
<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/GuidanceforLawsAndRegulations/Nursing-Homes>
 - CMS Critical Element Pathways (scroll down) <https://www.beckydorner.com/tips-resources/regulatory/>
- US Food and Drug Administration (FDA)
 - Food Code
<https://www.fda.gov/food/fda-food-code/food-code-2017>
 - Food Safety During Emergencies <https://www.fda.gov/food/food-safety-during-emergencies/food-safety-and-coronavirus-disease-2019-covid-19>

Resources on Becky Dorner & Associates, Inc. <http://www.beckydorner.com/covid19/>

1. Consulting Dietitian Remote Charting Guidelines (S&S Nutrition Network)
<https://www.beckydorner.com/wp-content/uploads/2020/03/Consulting-Dietitian-Remote-Charting-Guidelines.pdf>
 2. Checklist for Dietary Manager Working Remotely with RDN (S&S Nutrition Network)
<https://www.beckydorner.com/wp-content/uploads/2020/04/Checklist-for-Dietary-Manager-Working-Remotely-with-RD.pdf>
 3. Checklist for DON or Assistant DON Working Remotely with RDN (S&S Nutrition Network)
<https://www.beckydorner.com/wp-content/uploads/2020/04/Checklist-for-DON-and-SLP.pdf>
 4. Remote Set of Eyes (S&S Nutrition Network) <https://www.beckydorner.com/wp-content/uploads/2020/04/Remote-Set-of-Eyes-Consultant-Dietitian-Audit.pdf>
- Kitchen Checklist for COVID-19 Precautions (S&S Nutrition Network)
<https://www.beckydorner.com/wp-content/uploads/2020/04/RDN-Checklist-for-Covid-19-Precautions.pdf>
 - Temporary Sanitation Review During COVID-19 Restrictions (Brummit & Associates, Inc.) <https://www.beckydorner.com/wp-content/uploads/2020/04/COVID-19-Sanitation-checklist.pdf>

- COVID-19 Webinar Series <https://www.beckydorner.com/tips-resources/covid-19-webinar-series/>
- Staff Training Resources <https://www.beckydorner.com/tips-resources/covid-19-staff-training/>
- Front of the House QA Audit (Anna de Jesus) https://www.beckydorner.com/wp-content/uploads/2020/03/NA_Covid-19-foh2-checklist.pdf
- Back of the House QA Audit (Anna de Jesus) https://www.beckydorner.com/wp-content/uploads/2020/03/NA_covid-19-boh-checklist2.pdf

Resources for Purchase

- Policy & Procedure Manual for Nutrition and Food Service in Healthcare Facilities, Chapters on Food Production and Food Safety, Sanitation and Infection Control, and Cleaning Instructions <https://www.beckydorner.com/product/policy-procedure-manual/>
- Emergency/Disaster Plan for Food and Dining Services
 - Book only <https://www.beckydorner.com/product/emergency-disaster-plan-for-food-and-dining-services-2018-edition-book-only/>
 - Book with CPE Course <https://www.beckydorner.com/product/emergency-disaster-plan-for-food-and-dining-services-2018-cpe-self-study-program/>



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- Diet and Nutrition Care Manuals (2019 Comprehensive or Simplified)
- Policy and Procedure Manual (2019)
- Emergency/Disaster Plan for Food and Dining Services (2018)

More titles (see website for all titles – added frequently):

- Nutrition and Integrative Medicine: A Primer for Clinicians (2020)
- The Genomic Kitchen: Your Guide to Understanding and Using the Food-Gene Connection for a Lifetime of Health (2020)
- Salt Fat Acid Heat: Mastering the Elements of Good Cooking (2020)
- Nutrition & Diabetes Pathophysiology and Management (2019)
- Minimum Data Set (MDS) 3.0 RAI Manual v1.17 Course (2019)
- CMS State Operations Manual Appendix PP Course (2019)
- AADE Quick Guide to Medications (2019)
- Sports Nutrition: A Handbook for Professionals, 3rd Edition (2019)
- Nutrition for the Older Adult (2019)
- Food Code 2017 Course (2019)

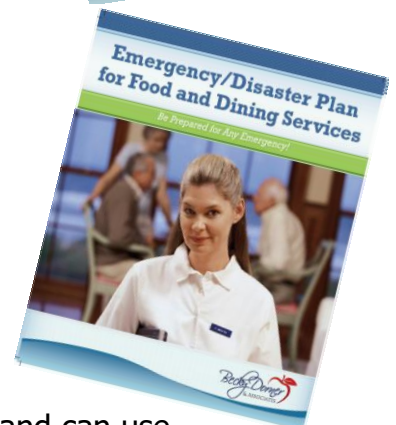
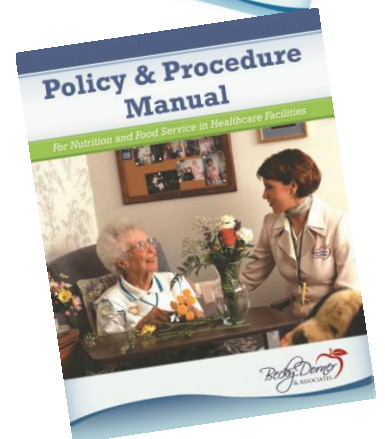
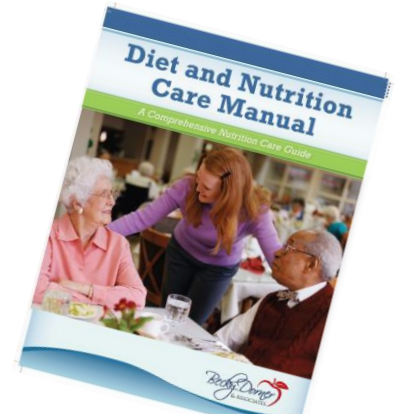
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