Incorporating Integrative and Functional Medicine Competencies into Dietetics Education: A Call to Action!

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Sponsored by DIFM Connecting Educators Committee
Learning Objectives

• Justify the rationale for incorporating integrative and functional medicine content into current dietetics education programs.

• Create curriculum map entry points for learning activities that educate dietetic students in whole foods therapies, targeted supplement recommendations and mind/body modalities.

• Select effective outcome measures to demonstrate integrated and functional medicine competencies in relevant nutrition and dietetics courses.
Disclosures

• I am offering this presentation from the perspective of an educator of nutrition professionals rather than as a practitioner.

• I teach at Bastyr University where I serve as the Chair of the Department of Nutrition and Exercise Science and as the Dietetic Internship Director.

• I do not have any potential conflict of interest information to report.

• Several photos used are from Bastyr University’s stock photos and I have permission to use.

• When referencing knowledge requirements of ACEND accredited programs, I will be using the DRAFT 2017 Standards.
Justification for Incorporating Integrative and Functional Medicine (IFM) Concepts into Dietetics Education: A SWOT Analysis Starting with “S”

“There is **growing interest in practicing** as an integrative and functional nutritionist among nutrition students and applicants, as evidenced by personal statements made in program applications.” Debra Boutin
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Integrative Medicine: Education, Perceived Knowledge, Attitudes, and Practice among Academy of Nutrition and Dietetics Members

Mary Beth Augustine, RDN, FAND; Kathie Swift, MS, RDN, LDN, FAND; Stephanie Harris, PhD, RDN, LD; Ellen Anderson, MS, RD, LDN; Rosa Hand, MS, RDN, LD
“There is growing interest in practicing as an integrative and functional nutritionist among nutrition students and applicants, as evidenced by personal statements made in program applications.” Debra Boutin

• **18.7% of respondents to this Augustine, et al survey were students**

• **33% of those who identified themselves as Integrative Medicine (IM) practitioners in the Augustine, et al survey indicated they have been practicing dietetics for less than 5 years**
A SWOT Analysis Starting with “S”

Accreditation Council for Education in Nutrition and Dietetics should create competencies in IM in **didactic programs in dietetics**

A SWOT Analysis Starting with “S”

Accreditation Council for Education in Nutrition and Dietetics should create competencies in IM in dietetic internships/supervised practice.

A SWOT Analysis Starting with “S”

When asked of those respondents currently teaching in a didactic program in dietetics if it was important to incorporate IM content:

A SWOT Analysis Starting with “S”

Do you personally use IM modalities?

A SWOT Analysis Starting with “S”

Do you recommend IM modalities?

A SWOT Analysis Starting with “S”

SOP/SOPP: RDs in Integrative and Functional Medicine
Published in the Journal of the American Dietetics Association
June 2011
SWOT Analysis – Weaknesses/Conflicts

“I have rarely seen a relationship demonstrated between biochemistry course grades and didactic program in dietetics (DPD) course grades based upon review of hundreds of dietetic internship application transcripts.” Debra Boutin
A SWOT Analysis – Weaknesses/Conflicts

What amount of time is spent on IM topics in the nutrition and dietetics program with which you are affiliated?

When asked of respondents currently teaching in a didactic program in dietetics if adequate time was spent on IM topics.....

A SWOT Analysis – Weaknesses/Conflicts

What are the barriers to incorporating IM content into program curriculum?

“In the most recent dietetic internship interview process, when applicants were asked to name 5 specific foods with nutrient profiles that could support a specific disease state, and to provide rationale for why those foods were chosen, the percentage who could do so was 18%.” Debra Boutin
A SWOT Analysis – Weaknesses/Conflicts

“There is sometimes dissatisfaction in the RDN scope of practice once interns enter supervised practice, as evidenced by intern report to this program director on an annual basis.” Debra Boutin
A SWOT Analysis - Opportunities

Personalized nutrition evolves

• Anticipate a shift to a health care system that focuses on predicting and preventing disease.

Academy of Nutrition and Dietetics Workforce Demand Study
A SWOT Analysis - Opportunities

Interdisciplinary teaming drives innovation

- The profession will have to be assertive and opportunistic to secure positions in a world where competencies and credentials are less important than teaming and problem-solving.

Academy of Nutrition and Dietetics Workforce Demand Study
A SWOT Analysis - Threats

“There are those who choose to change professions once in practice as evidenced by movement from registered dietitian nutritionist to roles such as nurse practitioners, manager/directors, educators.”

Debra Boutin
“I without a doubt believe that I made the right decision becoming a dietitian...for me the process of becoming a nurse practitioner is something that has grown out of my positive experiences in clinical dietetics. I will maintain and always be proud of my RDN credential. I decided to become a nurse practitioner because I found that during my conversations with patients I couldn't possibly contain the conversation to nutrition alone. I had to consider other medical, social, and psychological aspects in order to determine my assessment and intervention. What is their medical condition? What medications are they taking? Where do they get their food? Why do they make the food choices that they make? As I integrated these questions into my clinical assessment, I felt myself drifting out of my scope of practice as an RDN.

In addition to expanding my scope for personal reasons, I also decided to become a nurse practitioner so that I could expand my career options in a clinical environment. I love working in the hospital, and there really isn't anywhere for me to go as a dietitian. The only path is to become a manager, which would result in me losing the experience I value the most- patient contact. As a nurse practitioner there will be many more options for me in a clinical environment where I can maintain contact with patients.”
A SWOT Analysis - Threats

• “I didn’t hear my preceptor contribute one word in medical rounds during my entire rotation.”

• “The nursing home chain I work for requires doctor’s orders for any nutrient supplements, diet order changes, and fortified food items I recommend. It’s a constant battle.”  **(Versus nutrition advocacy.)**

• “We’re expected to document on 30-35 patients per day.”

• “Productivity is key!”  **(Versus gathering the patient’s story through the lens of the IFMNT radial.....)**

• “My preceptor didn’t have any time to physically see all the patients. We often charted from what was in the electronic medical record.”
A SWOT Analysis - Threats
Our leaders at DIFM say....

...that integrative nutrition practice centers around a holistic, “Food as Medicine” approach to wellness, using:

• whole foods therapies
• targeted supplements and
• mind/body modalities....

and is based firmly in the Integrative Medicine model.
Curriculum Mapping Foundation

• Initial point in curriculum map for introducing a concept = Introduction
• Two to three additional points in curriculum map where content is repeated and reinforced = Reinforcement
• Final point in curriculum map where students are assessed for their ability to know the concept or meet, achieve or demonstrate the competency/competence = Final Assessment
Whole Foods Therapies
Whole Foods Therapies

ACEND Core Competencies – Guideline 5.1 for both DPD and DI
b. Communication skills
e. Principles of MNT and the NCP
f. Role of environment, food, nutrition and lifestyle choices in health promotion and disease prevention
g. Education and behavior change theories and techniques
m. Food science, food systems, food preparation, evaluations of recipes
n. Nutrition across the lifespan
o. Cultural competence, diversity, behavior, psychology, sociology, anthropology
A “Whole Foods Focus” is the Philosophy at Bastyr University

• The university maintains a Nutrition Kitchen for teaching and a garden.

• Multiple culinary courses – All nutrition students take Whole Foods Production minimally. DPD students take Therapeutic Cooking as a second culinary course.

• Dietetic Internship is focused on whole foods approaches.

• Partnerships within the Seattle community support these educational efforts.

• Our Dining Commons features whole food items made from quality, mostly organic ingredients.
Whole Foods Therapies

• Incorporate photos of **food** into PowerPoints for ALL courses.
• Create assignments and class activities that are 100% foods-based.
• Incorporate menu development assignments into multiple courses.
• Provide “taste” opportunities wherever possible.
A Whole Foods Therapies Curriculum Map for KRDN 3.2 Develop Interventions to effect change and enhance wellness

• Life Cycle Nutrition – Introduction of competence
  ▪ Students are led through a lab activity where they are introduced to the concept of “whole foods” and prepare whole foods “baby foods,” comparing and contrasting flavor, quality and cost with standard options.

• Medical Nutrition Therapy courses – Reinforcement
  ▪ Students develop whole food menus to treat case-study patient’s diagnosis.
  ▪ Student groups develop and deliver a grocery shopping tour for a standardized “client” focused on an assigned diagnosis. Pre- and post-tests given to “client” to indicate if students’ education was effective.
  ▪ Students prepare a whole foods recipe that would support prevention or management of an assigned diagnosis, and share in class along with the rationale for why chosen.
  ▪ Students are trained, and then develop and deliver a whole foods cooking demonstration with an assigned theme. - Final assessment
A Whole Foods Therapies Curriculum Map for CRDN 3.5 Develop nutrition education materials designed to meet needs of a specific audience.

- **Orientation – Introduction**
  - Meet and Greet Activity – Interns have a potluck during their orientation where they are to provide a whole food dish. Each creates an educational tool utilizing their recipe that emphasizes its nutritional and health-benefits qualities.

- **WIC Rotation – Reinforcement**
  - Interns develop curriculum and educational handout and deliver a class about kid-friendly recipe ideas that incorporate WIC foods.

- **Private Practice Rotation – Final assessment**
  - Interns create, market and deliver a food-focused class with designed handout focused on management of a specific health issue. Intern assessment incorporates feedback from participants, rotation preceptor and program director.
2013 Lenna Frances Cooper Memorial Lecture: Bringing Cooking Back: Food and Culinary Expertise as a Key to Dietitians’ Future Success

Ellie Krieger, MS, RDN

Editor’s Note: This lecture was first presented on Sunday, October 20, 2013, at the Food & Nutrition Conference & Expo in Houston, TX. This lecture has been edited from its original version to fit within a print format.

I would like to express my deep gratitude to the leadership of the Food and Culinary Professionals dietetics practice group who nominated me for this honor and to the Academy of Nutrition and Dietetics at large. I am continually inspired by the passion and energy of those who dedicate so much to our organization, forwarding our profession, and continually shaping and advancing the field of dietetics. Lenna after all, a nationally renowned cook. Although, apparently, she often wore silk dresses during her cooking demonstrations to show people how neat and clean cooking could be.1

Sarah Rorer established a cooking school in Philadelphia, PA, in 1878 and was a prolific and popular cookbook author who produced 54 books in total. A great culinary influence, she is said to have been the Julia Child of her time. She also taught doctors, nurses, and medical students about proper diet, especially for the sick. It is noteworthy that she reportedly said she had wanted to be a pharmacist like her father, but she abandoned the idea because of prejudice against women in science.1 Sarah Rorer’s wisdom about food and health rings true to this day. She said, “If I could make...
Whole Foods Therapies – Removing Barriers

No Kitchen Lab?
Students can complete projects in their home kitchen, and upload photos to share.
Incorporate reflection papers about eating experiences.
Align whole foods concepts into food science curriculum.
“Standardized recipes” can be tested by peers at home.
Whole Foods Therapies – Removing Barriers

No Expertise?
Invite a local chef.
Find a “Food and Culinary DPG” member in your area.
Use the Academy’s “Food and Nutrition” magazine as the “textbook.”
Use resources from your nearest whole foods market, such as PCC Natural Markets in the Seattle area (pccnaturalmarkets.com).
Whole Foods Therapies – Removing Barriers

Curriculum mapping:  BE THE ADVOCATE FOR FOOD!

Develop a goal with your faculty team to focus more on “food” throughout your curriculum.

Work across disciplines and with individual colleagues to support their efforts.

Create student assessment rubrics focused on enhancing knowledge and creating confidence in their communication of food-specific information.

Choose a nutrient-oriented or a lifestyle-oriented or a “pleasure” oriented perspective. We all eat! Match your goal and your emphasis to your program!
Targeted Supplements
Targeted Supplements Curriculum Mapped for KRDN 3.1 Use the NCP to determine and evaluate nutrition interventions

Macro/micronutrients courses – Introduction of competence
• Build in information about both food sources and supplement formats.

Medical Nutrition Therapy courses – Reinforcement & final assessment
• Include baseline information about nutrition supplements labeling and quality.
• For each disease state addressed, include information about relevant supplements.
• Develop a nutrient supplement “scavenger hunt” assignment into a case study, with students required to determine if targeted supplements are recommended, and if so, which product with rationale.
Targeted Supplements – Curriculum Mapping
KRDN 1.2 Use current information technologies; apply evidence-based guidelines and protocols

Use Research Methods course as a route to initiate exploration and critical thinking.

• Academy Position Paper on Nutrient Supplementation – Introduction of competence via a guided list of questions.

• Evidence Analysis Library – Reinforcement of content through exploration via supplement recommendations and summary assignment.

• “Guidelines Regarding the Recommendation and Sale of Dietary Supplements” – Reinforcement by exploring the ethics and practice guidelines assessed in a reflection paper answering pointed questions.

• “Natural Medicines” data base assignment - Final assessment through answers to a series of relevant questions for student conclusions based upon the current evidence.
Targeted Supplements

• Bastyr University Course - TR6100 Nutritional Supplementation – This 4-credit course focuses on the nutritional and physiological value of supplements and herbal products as applied to wellness promotion and chronic disease management. Production, safety and regulation of supplements and herbs are discussed. Students learn basic botanical concepts, terms and pharmacology.
Targeted Supplements - Removing Barriers

Faculty Training Opportunities - NIH Office of Dietary Supplements
• https://ods.od.nih.gov/News/meetings.sec.aspx

DIFM Webinars
• Consider using archived copies as “guest lectures.”

Incorporate SOP/SOPP content as support of professional development needs.
Targeted Supplements – Removing Barriers

DIGITAL RESOURCES FOR FUNCTIONAL NUTRITION PROFESSIONALS
Interdisciplinary Teaming
Interdisciplinary Teaming
Interdisciplinary Teaming
The Value in Interprofessional, Collaborative-Ready Nutrition and Dietetics Practitioners

by Katherine Eliot and Kathryn Kolasa

Journal of the Academy of Nutrition and Dietetics
October 2015 Issue
Interdisciplinary Teaming – Curriculum Mapping
KRDN2.5 and CRDN2.3 Teamwork

Assign group projects with a set of specific roles explained for each member of the group.

• Give each student a “punch card” that must be completed by the end of a course series or term, with each role having been practiced.

• Incorporate a measure of peer evaluation, self-evaluation and reflection on strengths and challenges experienced in each role.

Assign group class activities in which students accept various perspectives in the case or activity.

• In a food service activity, for example, one student views the case from the perspective of a customer, another the food service director, another the CEO of the organization, and a fourth student as the dishwasher.
Interdisciplinary Teaming – Curriculum Mapping
KRDN2.5 and CRDN2.3 Teamwork

• Interns to interview and observe a variety of other care professionals throughout their rotations.
• Interns to actively engage in medical rounds, inter-departmental meetings or case conferencing opportunities.
• Interns accept project management roles in a variety of internship group projects and complete peer evaluations throughout.
Interdisciplinary Teaming – Curriculum Mapping
KRDN2.5 and CRDN2.3 Teamwork

When needed......
Remind your students and interns that “life is a group project” and that group projects help prepare them for their careers.
Mind-Body Modalities
Mind-Body Modalities

RDNs and Self-Care?
Are you a mentor for your students?
Mind-Body Modalities
Mind-Body Modalities
Mind-Body Modalities Curriculum Mapped KRDN 2.8 and CDRN 2.16 Mentorship

• Students develop a self-care plan during orientation so they can be at their best throughout their educational path in order to be effective role models and mentors to their class peers – Introduction

• Students self-reflect and provide revisions to their plan in their first MNT course – Reinforcement

• Students are offered solid mentorship by their faculty members who are vibrant professionals with well-balanced lives – Reinforcement

• Exit Exams include a series of questions based upon how a student or intern will incorporate what they learned about their self-care plan into their professional life – Final assessment
References


