

Board Certified Specialist Certification & Advanced Practitioner Certification Petition

Updated: 2024

Questions to Consider for Supporting and Sustaining a Certification before Completing the Petition

When might a focus area of dietetics practice be able to support and sustain a certification?

- Does the focus area of dietetics practice have a universally recognized reference/text that is updated on a regular basis?
- Is there a devoted body of evidence-based literature (i.e., journals, publications)?
- Does the focus area of dietetics practice have an active and robust dietetics practice group (DPG) (including sub-groups) within the Academy?
- Is there a way to identify and communicate with CDR practitioners within the focus area of dietetics practice that are not members of the Academy or related DPG?
- Would a certification be recognized within the focus area of dietetics practice as important to stakeholders?
- Are other healthcare professionals in the focus area of dietetics practice also able to achieve certification in their area of practice?
- Are there perceived or observed professional incentives for certification within the focus area of dietetics practice?
- Does the area of practice have a Scope and Standard of Practice?
- Does the area of practice have professional development programs?

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Introduction

The Commission on Dietetic Registration (CDR) reviews petitions for the completion of a job analysis for possible development of board certified specialist or advanced practitioner* certifications submitted by Academy groups, members and/or credentialed practitioners. Prior to submission, petitioners should be able to document the following focus area of dietetics practice achievement thresholds which are consistent with CDR's criteria for the approval and development of new certifications:

- Active and robust Academy Dietetic Practice Groups (DPGs) in the proposed focus area;
- Availability of ongoing professional development programs in the proposed focus area of practice;
- A universally recognized of collection of evidence-based literature (publications, references scientific journals and textbooks) devoted to the focus area of practice;
- A documented need for the proposed certification among the public and dietetics practitioners;
- Availability of similar proposed focus area certification for other allied health care professions;
- Existence of duplicate or competing certification available to RDs;
- A published Standards of Practice/Standards of Professional Performance (SOP/SOPP) for the desired focus area of practice, optional;
- An existing professional certificate program in the desired focus area of practice that has been completed by at least 1,000 registered dietitians (RDs), optional.

*Refer to Appendix E for definition of specialist and advanced practice.

Acceptance of a petition does not guarantee that the area will be developed into a certification. The results of a job task analysis conducted under the auspices of CDR in the specialist or advanced practice focus area must show a valid, distinct role for the certification. Petitions will become the property of CDR.

The Commission Panels review applications **over a period of 120 days** to determine if they meet the above criteria and demonstrate alignment with the CDR's mission, vision, and strategic plan. Applications that convey high levels of uniqueness of knowledge and skills will clearly communicate how their focus area of practice is different from that of a generalist RD. It is important to note that a focus area of practice is not necessarily indicative of specialist or advanced practice.

Petition Instructions and Reporting Form

1. CONGRUENCE WITH VISION, MISSION, AND STRATEGIC PLAN OF CDR

Use a survey to collect data and information for this petition. Groups of CDR credentialed practitioners are encouraged to collaborate in developing a certification petition. Surveys should include multiple Dietetic Practice Groups (DPGs), Member Interest Groups (MIGs), and/or other non-member RDs. Use the following table to report the survey results.

How is the proposed certification	
congruent with the mission and vision of	
CDR? Limit to 200 words.	
How is the proposed certification	
congruent with the strategic plan of	
CDR?	
Limit to 200 words.	
2. NEED FOR RECOGNITION OF A SPECIA	ALIST OR ADVANCED PRACITIONER CERTIFICATION
Evolain the importance of and document	

3.	JUSTIFICATION OF DEMAND	
A	List the name and current membership of each group surveyed, identify the number of respondents completing the survey, response rate, and estimate the # and % of respondents currently practicing in the proposed focus area of practice.	
В	List each type of practice setting (e.g., business and industry, clinical nutrition, communications, community and public health nutrition, consultant, education, management, research, etc.) where respondents currently practice in the proposed focus area of practice and the # and % of respondents working in each setting.	
С	 Identify the # and % of respondents currently working in the proposed focus area of practice: less than 20 hrs./wk. between 21-39 hrs./wk. 40 or more hrs./wk. 	
D	Describe the survey methodology used to determine these results and estimates.	

4. AVAILABILITY OF SIMILAR CERTIFICATIONS/CERTIFICATE PROGRAMS

Using the following table to describe other certificates or certifications offered to dietitians by other organizations in the proposed focus area of practice. Add additional rows to table as needed.

Title	Sponsoring Organization	Objectives	Eligibility Requirement	Approximate # of RDs and/or Practitioners Completed
EXAMPLE: Certified Diabetes Educator (CDCES)	American Association of Diabetes Educators/ National Certification Board for Diabetes Educators	 Provide a mechanism to demonstrate professional accomplishment and growth; Provide formal recognition of specialty practice and knowledge at a mastery level; Provide validation of demonstrated dedication to diabetes education to consumers and employers; and Promote continuing commitment to best practices, current standards, and knowledge. 	 Health Care Professional; Professional Practice Experience; Minimum of 1,000 Diabetes Self-Management Education (DSME) experience; Minimum of 15 clock hours of continuing education within 2 years 	 7,500 RDs 20,000 Total

5. UNIQUENESS OF KNOWLEDGE AND SKILLS				
Using the following table, list and differentiate among the specific nutrition and dietetics-related knowledge and skills unique to the proposed specialist or advanced certification, knowledge and skills representative of generalist dietetics practitioners, and knowledge and skills descriptive of other certifications sponsored by CDR and other organizations. Add additional rows to table as needed. The example provided below is for the weight management focus area of practice.				
A. Insert the outline of any existing certificate programs in the proposed focus area of practice. B. How would the certification add to a enhance the knowledge and skill lev developed by the certificate program	nd el			
C. Delineate the knowledge and skills table below.	in the			
Specialist or Advanced Practice Know	ledge Generalist Knowledge & Skills	Other Certification Knowledge & Skills		
and Skills*				
 Working directly with adults and chill for the prevention of overweight and obesity; Expert level nutritional counseling; Behavioral therapy; Motivational interviewing; Coaching Pharmacological treatments; Pre and post bariatric surgical treatment of all comorbidities related overweight and obesity; Utilizes evidence-based and consent based strategies to improve nutrition physical activity; 	nutrient dense foods and make healthy food choices; • Teaching clients behavior modification techniques; • Conducting group nutrition education classes for overweight children and adults. nents; ed to	 Obesity medicine physicians employ therapeutic interventions including diet, physical activity, behavioral change, and pharmacology. Often utilize resources of nutritionists, exercise physiologists, psychologists, and bariatric surgeons. 		
 Uses synthesis skills for combining multiple intervention approaches as appropriate. 				

D. Describe how the knowledge and skills of			
the proposed specialist credential might			
potentially duplicate those of other board			
certified specialists credentialed by CDR			
or other organizations? Limit to 150			
words.			
*If petition is for advanced practice certification, then knowledge and skills need to be listed and identified for both specialist and advanced			

6. AVAILABILITY OF PROFESSIONAL DEVELOPMENT PROGRAMS

practice.

A. Using the table below, provide a comprehensive listing of internal and external professional development programs (symposia, webinars, seminars, workshops, etc.) conducted over the past two years to enhance knowledge and skills related to the proposed focus area of practice. Add additional rows to table as needed. The example provided below is for the weight management focus area of practice.

Title/Type of Program	Program Provider	Date	Disciplines and	Learning Objectives	#CPEUs*
		offered	# Attending		
American Board of Obesity Medicine Certification Course Review with exam	American Board of Obesity Medicine	2013	PhysiciansNursesDietitians120 participants	 Core concepts: causes of obesity, physiology/pathophysiology, epidemiology, nutrition, physical activity. Diagnosis and evaluation: history, lifestyle, physical assessment, indications/interpretations, screening questionnaires, medical clearances, research tools. 	10

		•	Treatment: behavior, family support, individual and family therapy, diet, physical activity, pharmacotherapy, emerging therapies, surgical treatments, patient education, strategies Practice Management: Initial, office procedures, interdisciplinary team
B. If there is an Academy certificate program in the desired focus area of practice. List the name of the certificate program and the current number of RDs who have successfully completed it.			

^{*}CPEUs= Continuing Professional Education Units; 1 CPEU is equivalent to 1 contact hour.

7. EVIDENCE BASE FOR THE AREA OF SPECIALIST OR ADVANCED PRACTICE Using the table below, provide a comprehensive listing of internal and external professional development programs (symposia, webinars, seminars, workshops, etc.) conducted over the past two years to enhance knowledge and skills related to the proposed focus area of practice. Add additional rows to table as needed. The example provided below is for the weight management focus area of practice. A. Provide a bibliography of a maximum of 25 research and scientific articles covering the entire scope of practice and dealing with the knowledge,

	techniques and evidence base of
	the proposed focus area of
	practice. Include as part of the
	submitted packet, 2-3 key
	articles which capture the
	essence of the focus area of
	practice. Do not include
	editorials, commentaries, and
	research articles establishing
	workforce demand as part of the
	bibliography. You may attach the
	2-3 articles to your email when
	you submit the final petition
	application.
В.	Provide the reference citation of a
	universally recognized centennial
	reference/text in the proposed
	focus area of practice that is
	updated on a regular basis.
C.	Include as part of the submitted
	packet the published SOP/SOPP for
	the proposed specialist's focus
	area of practice. You can attach
	the published SOP/SOPP to your
	email when you submit the final
	petition application. (If applicable.)
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Process for Reviewing and Evaluating Petitions

- 1. Petitions should be submitted via email to specialists@eatright.org and/or advanced@eatright.org and will be screened to ensure that it is complete. If the petition is not complete, it will be returned to the submitter. If the petition is complete, it will be forwarded for review by the appropriate Panel.
- 2. The total review period is 120 days.
- 3. The Panel's responsibility will be to evaluate the petition, provide opportunity for petitioners to present (as needed), and submit a summary review and recommendation to the CDR Commissioners.
- 4. The Commissioners' responsibility will be to make final determination on development of the proposed certification based on the appropriate Panel's recommendations.
- 5. The Panel will review, evaluate, and prepare a summary of their decision for submission to the full Commission.
 - a. A conference call will be convened with the petitioners to discuss any questions or concerns related to the petition submitted, if needed.
 - b. The petition will be evaluated based on the original submission, plus additional information (verbal and/or written) provided during and after the conference call with the petitioners. Each Panel member will submit a completed evaluation form to the Panel chair and staff within the agreed upon timeline.
 - c. Staff will summarize the evaluation comments from the workgroup to present to the Panel for review.
 - d. The Panel will arrive at a consensus opinion based on the criteria delineated in the petition, develop a summary of the petition (including overview of petition, summarized evaluation comments, and discussion) and its recommendation for the Commission.
- 6. The Panel evaluation will result in one of the following outcomes (including rationales) for Commission consideration:
 - a. Accept the Petition: Motion to recommend CDR consider proceeding with conducting a job analysis for possible development of a certification.
 - b. Revisions Request: Request the petitioner revise areas of the petition within 60 days for additional review by the Panel.
 - c. Decline Petition: Motion to recommend CDR to consider declining the petition for conducting a job analysis for possible development of a certification. The petitioner will have the option to resubmit.
- 7. A letter will be emailed the submitter of the petition with the final decision within 14 business days of the meeting.

Evaluation of the Petition

The petition will be reviewed and evaluated by Panel members based on the criteria below:

1. CONGRUENCE	E WITH CDR's <u>VISION, MISSION, AND STRATEGIC PLAN</u>
Strengths	
(Mission and Vision)	
Weaknesses	
(Mission and Vision)	
Did not include	
(Mission and Vision)	
Strengths	
(Strategic Plan)	
Weaknesses	
(Strategic Plan)	
Did not include	
(Strategic Plan)	OGNITION OF A SPECIALIST OR ADVANCED PRACTIONER CERTIFICATION
Strengths	OGNITION OF A SPECIALIST OR ADVANCED PRACTIONER CERTIFICATION
Stretiguis	
Weaknesses	
Did not include	
3. JUSTIFICATION	OF DEMAND (A, B, C, D)
Strengths	
Weaknesses	
Did not include	
4. AVAILABILITY	OF SIMILAR CERTIFICATIONS/CERTIFICATE PROGRAMS
Strengths	
Weaknesses	
Did not include	

5. UNIQUENESS	OF KNOWLEDGE AND SKILLS (A, B, C, D)
Strengths	
\\/	
Weaknesses	
Did not include	
6. AVAILABILITY	OF PROFESSIONAL DEVELOPMENT PROGRAMS
Strengths	
Weaknesses	
Did not include	
7. EVIDENCE BAS	SE FOR THE AREA OF SPECIALIST OR ADVANCED PRACTICE (A, B, C)
Strengths	
Weaknesses	
Did not include	

Evaluation Outcomes

Panel members will select an evaluation outcome based on the options below:

Outcome	Action
Accept, send motion to CDR for consideration	Move to recommend conducting a job analysis and possible development of this certification for the following reasons
2. Revision request	List areas to be revised for further consideration by the Panel.
3. Decline the petition	Move to recommend not conducting a job analysis and possible development of this certification for the following reasons
Additional comments and/or recommendations	

Appendix

Appendix A: Examination Development Cycle

PLANNING AND DEVELOPMENT

1. Specialist or Advanced Practice Analysis

A practice analysis describes the knowledge and skills necessary to perform competently at an identified level of specialist or advanced practice. It serves as the basis for test specification development. Using a role delineation study is among the most desirable methods for specification development because it assists in ensuring that the certification test is job-related, representative of practice, and geared to the appropriate responsibility level. CDR conducts specialist and advanced practice job analyses approximately every five years.

2. Test Specifications

Test specifications are a detailed blueprint for constructing a test. They include a description of the content to be tested, the proportion of the test to be devoted to the different areas of content within domains, and the characteristics of acceptable test items. Test specifications derived from the practice analysis verified by actual practice provide evidence in support of test content validity and establish its defensibility and credibility.

3. Test Item Development

New items (questions) are prepared by individuals selected from diverse practice areas and population subgroups who are trained in the specifics of good test construction principles.

Criteria applied to writing test items are:

relevance and criticality to minimally competent specialist practice;

accuracy, currency, and clarity;

free from bias and regional and institutional differences;

and conformity with test specifications.

4. New Test Item Review

Test items are reviewed by professional test editors to eliminate technical flaws, ambiguities, and potential bias. All test items are reviewed by experienced item writers to verify appropriate classification and conformance with item writing criteria. Editorially and technically sound items are pretested as unscored items on a test. This ensures that the scoreable portion of the test includes good performing items.

5. Item Review

Annually, experienced subject matter experts review items for content accuracy, currency, relevance to minimally-competent specialist or

advanced practice and one best answer.

6. Test Item Pretesting

Only test items that have survived content, measurement, and editorial review are suitable for inclusion in the computer-based testing item pool.

ADMINISTRATION AND SCORING

7. Test Administration

Registration eligibility requirements are established by the Commission on Dietetic Registration. The Commission contracts with a testing vendor to administer the tests on computer at over 200 test sites. Special testing needs, such as those for religious observance and physical handicaps, are accommodated under standardized secure conditions.

8. Passing Score Determination

A passing score study is periodically conducted by experienced dietetics professionals representing diverse practice areas and population subgroups. The use of systematic judgment of content experts in these studies establishes the minimum level of acceptable professional performance expected on a certification test. CDR uses a criterion-referenced approach for determining the passing score. This criterion-referenced passing score may become the basis for equating future examinations, thus ensuring that all test versions are of equal difficulty level.

REPORTS AND EVALUATION

9. Score Reporting

A score report announces the examinee's performance on the certification test. The report includes a total scaled score as well as subscores in each domain.

10. Program Evaluation

A comprehensive technical report, which includes statistical data, is provided by the testing vendor to the Commission on Dietetic Registration. This report, along with feedback from examinees, is used by the CDR Specialist Certification Panel in evaluating the certification testing program. The Standards for Educational and Psychological Testing and certification benchmarking are used as the basis for the evaluation process.

Appendix B: <u>TENTATIVE</u> Specialist or Advanced Practice Certification Development Timeline

Task	Responsible Parties	Target Date Month 1	
Request for proposals (RFP) to vendors for the Job Analysis (JA)	CDR Staff		
Review proposals and select vendor	Panel/CDR Staff	Month 2-3	
Development of JA Committee	CDR Staff	Month 2	
Obtain materials to forward to JA vendor for review, e.g., references	CDR Staff	Month 3	
Develop survey instrument, virtual or onsite meeting with follow-up teleconferences, as needed	JA vendor, Committee, CDR Staff	Month 4	
Pilot test survey instrument	JA vendor, Committee, CDR Staff	Month 5	
Refine survey instrument based on pilot test results	JA vendor, Committee, CDR Staff	Month 6	
Distribute surveys to members of the DPG and other groups (as identified if needed)	JA vendor, CDR staff	Month 7	
Analyze survey data and prepare final report including examination content outline	JA Vendor	Month 8	
Review JA final report and examination content outline for decision to develop the certification.*	Commission	Month 8	
If the Commission decides to proceed with development of the certification	n, the below timeline will continue.		
Recruitment of subject matter experts (SMEs) for examination development.	CDR Staff	Month 8-10	

Recruitment of subject matter experts (SMEs) for examination	CDR Staff	Month 8-10
development.		
Develop reference list	SMEs, CDR Staff	Month 9
Develop and finalize online eligibility application	CDR Staff	Month 9
Update current CDR specialist or advanced practice candidate handbook	CDR Staff, Exam Vendor	Month 9
Item Writing Training Meeting - Virtual	CDR Staff, SMEs , Exam Vendor	Month 10

At-home item writing	SMEs, Exam Vendor	Month 11-13
Item Review Meeting - Virtual Item Review teleconferences (as need)	Exam Vendor, SMEs, CDR Staff	Month 14-15
Exam Form Review Meeting - Chicago onsite meeting	Exam Vendor, SMEs, CDR Staff	Month 16-17
Final Form Review teleconference	Exam Vendor, SMEs, CDR Staff	Month 18
Candidates can begin scheduling examination appointments	CDR Staff, Exam Vendor	TBD
First examination	CDR Staff, Exam Vendor	TBD
Examination Preliminary Item Analysis (PIA) and Cut score Meeting	Exam vendor, CDR Staff, SEW	TBD
Score Reports Mailed	CDR Staff, Exam Vendor	TBD

Appendix C: Examination Development Administration and Costs

The cost to develop **one** specialist or advanced practice certification exam is approximately \$250,000. Based on current expenses, ongoing development and administration of current CDR specialist certifications is approximately \$120,000 per year, per specialist certification. These costs are only partially offset by the \$350 examination application fee which, depending on candidate volume, historically results in a deficit of approximately \$50,000 per program, as illustrated by the table below.*

Certification Exam Expense	Certification Exam Revenue						
Yearly Development & Administration Costs	Per Candidate Exam Fee		#Candidates per Year	Total	Expense	Estimated Yearly Revenue	Estimated Yearly Variance
\$120,000	\$350	@	100	\$35,000	\$120,000	\$35,000	(\$85,000)
\$120,000	\$350	@	175	\$61,250	\$120,000	\$61,250	(\$58,750)
\$120,000	\$350	@	250	\$87,500	\$120,000	\$87,500	(\$32,500)
\$120,000	\$350	@	343 (break-even)	\$120,050	\$120,000	\$120,050	\$50
\$120,000	\$350	@	400	\$140,000	\$120,000	\$140,000	\$20,000

^{*}These figures are based on CDR's most recent specialist certification program averaging its FY2023 and FY2024 annual budgets.

Appendix D: Terminology

<u>Advanced Practice:</u> The practitioner demonstrates a high level of skills, knowledge and behaviors. The individual exhibits a set of characteristics that include leadership and vision and demonstrates effectiveness in planning, evaluating and communicating targeted outcomes.

• **Rationale:** The term *advanced practice* is used after a careful review of the <u>Scope and Standards of Practice for the RDN</u> and in the various focus areas of dietetics practice and the literature for other professions.

<u>Certificate Program:</u> A certificate program is an intensive training program with a component that assesses the participant, not to be confused with CPE activity that awards certificates of completion or attendance. Upon completion of the program, participants receive a certificate attesting to the attainment of a new knowledge/skill set (e.g., CDR's Certificate of Training in Obesity for Pediatrics and Adults). Unlike a **certification**, participants do not receive a professional designation (e.g., CSOWM, CSSD). Individuals who fail the summative postassessment will be awarded CPEUs for completing the program. However, the certificate of training will NOT be awarded to individuals who fail the summative post-assessment.

Certificate Programs can be offered as an enduring activity, live web-based activity, and/or in-person training or combination thereof with formative and summative assessments.

The purpose of formative assessment is to provide feedback to both participants and facilitators/instructors with the intent of enhancing the learning process. Formative assessment may include self-reflection and diagnostic components (e.g., pretest) and may be remedial (i.e., focusing on correction or improvement). Formative assessment may take place on one or more occasions throughout the learning process.

Summative (end-of-program) assessment is used to evaluate participants' accomplishment of the intended learning outcomes and generally takes place at the completion of the education/training component of the program. Any generally accepted assessment method may be utilized for conducting the summative assessment. Passing, proficiency, or performance outcomes are communicated to the learner.

Certificate programs must:

- 1. Be nutrition and dietetics related.
- 2. Have stated learning objectives upon which the course and assessment content is based.
- 3. Include a statement that explicitly outlines the purpose of the program.
- 4. Include content expert instruction and learner/ provider interaction, engagement, and feedback.
- 5. Have a process of validating the content of the assessment which includes, at a minimum, documentation of the link between the intended learning outcomes and the assessment (e.g., a table listing the knowledge, skills, and/or competencies needed for participants to accomplish the intended learning outcomes and identifying how the specified knowledge, skills, and/or competencies are covered by

- the assessment). The assessment content is periodically revised, as needed, by subject matter experts and qualified individuals to ensure that it continues to reflect the scope and purpose of the program and remains aligned with the education/training and the intended learning outcomes.
- 6. Use a generally accepted method or rubric for setting the performance, proficiency, or passing standard for the summative (end-of-program) assessment. This method, in which trained subject matter experts participate, should:
- 7. link the performance, proficiency, or passing standard to the expected performance of a participant who has accomplished the intended learning outcomes; and
- 8. be consistent with the nature and intended use of the assessment.
- 9. Be evaluated for effectiveness on a regular basis to ensure its ongoing utility for evaluating participants' accomplishment of the intended learning outcomes. The procedures and analyses performed for this purpose are consistent with generally accepted measurement principles.
- 10. Have all course materials reviewed by a minimum of three independent professionals with demonstrated expertise in the content area attesting to the hours needed to complete the program. A minimum of one of the reviewers must be a Commission on Dietetic Registration Registered Dietitian or Dietetic Technician, Registered. Reviewer's academic degrees should be relevant and granted by a university accredited by a USDE recognized accrediting agency. Foreign academic degrees accredited by foreign equivalent institutions are accepted under the condition that they have been verified by one of the agencies listed on the Independent Foreign Degree Evaluation Agencies list. Each reviewer must complete and sign the review form attesting to the number of hours it takes to complete the course and the course content currency. The reviewers should not be associated with the creation of the content of the program in any way.
- 11. Be offered by the Commission on Dietetic Registration (CDR) or is CDR CPEU Prior Approved.

Assessment-based certificate programs award a certificate only to those participants who meet the performance, proficiency or passing standard for the assessment.

<u>Certification:</u> A process, often voluntary, by which individuals who have demonstrated the level of knowledge and skill required in the profession, occupation, role, or skill are identified to the public and other stakeholders.

Special note: Unlike a **certificate** program, certification program participants do receive a professional designation or credential. The CDR <u>board certified specialist credentials</u> of CSG, CSO, CSOWM, CSP, CSPCC, CSR, and CSSD are examples of certification programs.

<u>Focus Area of Dietetics Practice:</u> Defined area of dietetics practice that requires focused knowledge, skills, and experience.

• **Rationale:** The term *focus area* is adopted based on feedback from Academy members to the Academy Council on Future Practice and relates to how a practitioner specializes in a specific area of practice (i.e., diabetes, community health).

<u>Generalist:</u> A general practitioner is an individual whose practice may include responsibilities across several areas of practice including, but not limited to community, clinical, consultation and business, research, education, and food and nutrition management.

Specialist: A practitioner who demonstrates a minimum of the proficient level of knowledge, skills and experience in a focus area of dietetics practice by the attainment of a credential.

• Rationale: The term *specialist* requires a credential and is defined by <u>Scope and Standards of Practice for the RDN</u>, or other criteria established for a focus area of practice. A specialist performs at the proficient level.

More information about these definitions is available on the **Definition of Terms**.