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PRACTICE TIPS: When to Cosign

Step 1: Understand What It Means to Cosign

Medical Legal Aspects of Medical Records[1], states that cosigning implies that the registered dietitian nutritionist (RDN) instructor/staff has approved the care given and assumes responsibility for it. The staff RDN is responsible for the nutrition care provided by the student/intern/employee (unlicensed and/or unregistered dietitian), if the unlicensed and or unregistered dietitian is an employee in the organization.

The individual works under the supervision of an RDN and this assigned RDN is ultimately responsible and accountable to the patient/client, physician, employer/organization, and regulator for nutrition activities assigned to this individual.

Step 2: Interpret Individual's Competence to Provide Nutrition Education, Nutrition Counseling and/or Medical Nutrition Therapy, the Evidence-Based Application of the Nutrition Care Process.

Review and Interpret: Academy's/CDR's resources, CMS' guidelines for 'qualified dietitian' pertaining to the practice setting.

- o   Note the Definitions of Terms.
  - ➤   https://www.cdrnet.org/definitions
- o   Review terms that define *'competence'* and *'competency'*:
  - •   Competence: Competence is a principle of professional practice, identifying the ability of the provider to administer safe and reliable services on a consistent basis.
  - •   Competency(ies): A competency is a combination of observable and measurable knowledge, attitude, skills, abilities, behaviors, and other characteristics that an individual needs to perform work roles or occupational functions successfully. Competencies specify the "how" of performing job tasks, or what the person needs to do the job successfully.
- o   Decide if the individual has successfully met the minimum requirements for RDN as set by Accreditation Council for Education in Nutrition and Dietetics (ACEND) and Commission on Dietetic Registration (CDR). Review RDN education, eligibility, and verification of credential(s).
  - ➤   https://www.eatrightpro.org/acend
- o   www.cdrnet.org and https://www.cdrnet.org/essential-practice-competencies-information The individual not yet registered and/or licensed, as applicable should always work under the supervision of the RDN. The supervising RDN must have established competence in the practice area under which the individual will practice.
  - ➤   https://www.cdrnet.org/tips
- o   Follow the organization's policy to document orientation, training and evaluation of competence to perform assigned duties. Resources are located at: State Operations Manual Appendix A - Survey Protocol, Regulations and Interpretive Guidelines for Hospitals.
  - ➤   https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/som107ap_a_hospitals.pdf

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§482.28(a)(2) - There must be a 'qualified dietitian', full-time, part-time or on a consultant basis.
Interpretive Guidelines §482.28(a)(2) - A 'qualified dietitian' must supervise the nutritional aspects of patient care. Responsibilities of a hospital dietitian may include, but are not limited to:

- Approving patient menus and nutritional supplements;
- Patient, family, and caretaker dietary counseling;
- Performing and documenting nutritional assessments and evaluating patient tolerance to therapeutic diets when appropriate;
- Collaborating with other hospital services (e.g., medical staff, nursing services, pharmacy service, social work service, etc.) to plan and implement patient care as necessary in meeting the nutritional needs of the patients;
- Maintaining pertinent patient data necessary to recommend, prescribe, or modify therapeutic diets as needed to meet the nutritional needs of the patients.

Qualification is determined on the basis of education, experience, specialized training, State licensure or registration when applicable, and maintaining professional standards of practice.

If the qualified dietitian does not work full-time, and when the dietitian is not available, the hospital must make adequate provisions for dietary consultation that meets the needs of the patients. The frequency of consultation depends on the total number of patients, their nutritional needs and the number of patients requiring therapeutic diets or, other nutritional supplementation.

Survey Procedures §482.28(a)(2)
Review the dietitian's personnel file to determine that he or she is qualified based on education, experience, specialized training, and, if required by State law, is licensed, certified, or registered by the State.

If the dietitian is not full-time, determine that the number of hours spent working is appropriate to serve the nutritional needs of the patients, and that the hospital makes adequate provisions for a qualified consultant coverage when the dietitian is not available.

CMS develops Conditions of Participation (CoPs) and Conditions for Coverage (CfCs) that health care organizations must meet in order to begin and continue participating in the Medicare and Medicaid programs. These health and safety standards are the foundation for improving quality and protecting the health and safety of beneficiaries. CMS also ensures that the standards of accrediting organizations recognized by CMS (through a process called "deeming") meet or exceed the Medicare standards set forth in the CoPs / CfCs.

> https://www.cms.gov/Regulations-and-Guidance/Legislation/CFCsAndCoPs

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CoPs and CfCs apply to the following health care organizations:

- Ambulatory Surgical Centers (ASCs)
- Community Mental Health Centers (CMHCs)
- Comprehensive Outpatient Rehabilitation Facilities (CORFs)
- Critical Access Hospitals (CAHs)
- End-Stage Renal Disease Facilities
- Federally Qualified Health Centers
- Home Health Agencies
- Hospices
- Hospitals
- Hospital Swing Beds
- Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID)
- Organ Procurement Organizations (OPOs)
- Portable X-Ray Suppliers
- Programs for All-Inclusive Care for the Elderly Organizations (PACE)
- Clinics, Rehabilitation Agencies, and Public Health Agencies as Providers of Outpatient Physical Therapy and Speech-Language Pathology Services
- Psychiatric Hospitals
- Religious Nonmedical Health Care Institutions
- Rural Health Clinics
- Long Term Care Facilities
- Transplant Centers

Step 3: Read Academy/CDR Quality Resources

Recognize: Valuable resources such as scope of practice articles, Academy/CDR Definition of Terms list, Consultations on scope and career activities, and Scope of Practice Decision Algorithm.
Resources include:

- Revised 2017 Scope of Practice for the RDN
- Revised 2017 Standards of Practice in Nutrition Care and Standards of Professional Performance for RDNs
- Revised Scope of Practice for the NDTR
- Revised 2017 Standards of Practice in Nutrition Care and Standards of Professional Performance for NDTRs
- Scope of Practice Decision Algorithm
- Definition of Terms
    - Resources are located at:
        - www.cdrnet.org/scope
        - www.cdrnet.org/definitions

Step 4: Investigate Organization Policies and Standard Operating Procedures, and Accreditation Organization, if applicable, Standards and Elements of Performance

Check: Organization's policies and standards related to new hires awaiting full credentials, students and interns.

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- Understand and determine the level of access the individual may have to medical records, documentation and cosignatory and requirements.
- Review policies of other disciplines e.g., nursing, pharmacy, and physical, occupational and speech therapy.
- Meet with appropriate individuals within the organization to ensure organization policies are being followed appropriately. Consider working with Human Resources, Medical Records, Risk Management, Quality and Regulatory Compliance.
  - o Review and analyze the accrediting organization's guidelines and requirements if your organization is accredited by outside organization. Examples of accreditation organizations include, but not limited to, The Joint Commission, the Accreditation Commission for Health Care (ACHC), formerly Healthcare Facilities Accreditation Program of American Osteopathic Association (HFAP), DNV-National Integrated Accreditation for Healthcare Organizations, Public Health Accreditation Program and Commission on Cancer.

Step 5: Determine Applicable State Licensing and Local Regulations

Note: Applicable state and local rules and regulations including state licensure, registration, or certification laws.
- o State Licensure Agency List
  - ➢ https://www.cdrnet.org/state-licensure-agency-list
  - ➢ https://www.cdrnet.org/licensure

Step 6: Understand Use of Credentials and Titles

Check: How should the notes be cosigned?
- The Commission on Dietetic Registration (CDR) recognizes and certifies the terms RDN or RD and NDTR or DTR. According to the CDR, individuals should refrain using terms RDNE, RDE or RDN Eligible, RD Eligible and NDTRE, DTRE or NDTR Eligible, DTR Eligible and are never to be used as a credential or in the signature.
  - ➢ http://www.cdrnet.org/certifications/registration-eligibility-general-information-dtre
  - ➢ http://www.cdrnet.org/certifications/registration-eligibility-general-information-rde
- If an instructor is supervising the student or intern, the instructor should cosign the student or intern note with their name, credential, and university name, or as specified by the organization.
- If staff RDN is supervising the student or intern, the staff RDN should cosign the student or intern note with their name and credentials.
- Cosigner may add to the notes entered by the student or intern, but should not edit the notes.
- It is best practice to use the student status which best represents the individual, e.g., student dietitian or dietetic intern.
- Cosign the notes with the first initial, last name, Student Dietitian or Dietitian Intern, and university name (name can be abbreviated). After reviewing and verifying the notes, the staff RDN will sign the note with first initial, last name and credentials[1], e.g., J. Smith, Student Dietitian, DU / R. Doe, RDN.

In this Practice Tips, the 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).

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Cosign Recommendations to Consider for Nutrition and Dietetics Practitioner Roles

Role	Description	Coursework Status	Supervised Practice Completed?	CDR Exam Passed?	Cosign Required?	Keywords / Notes
Dietetic Extern	Student enrolled in ACEND accredited DPD (Didactic Program in Dietetics) and is in process of completing coursework	In process	No	No, for RDN Exam	Yes	• Student Dietitian
Dietetic Intern	Student enrolled in ACEND accredited DI (Dietetic Internship) and is in process of completing supervised practice	Completed	In process	No, for RDN Exam	Yes	• Dietitian Intern
ISPP Intern Individualized Supervised Practice Pathway	Individual who holds a DPD verification statement enrolled in a supervised practice program through ACEND accredited program	Completed	In process	No, for RDN Exam	Yes	• ISPP Intern
Baccalaureate Graduate, Master's Student	Individual who has completed a minimum of a Bachelor's degree in a ACEND accredited program; may or may not be enrolled in a master's program	Completed	No, with no plans for completing	No, for NDTR Exam	Yes	• Dietetic Technician • Food Service Supervisor • Food Service Manager • Dietary Manager • Masters Student
Registration Eligible, to become an RDN*	Individuals who have met the didactic and supervised practice requirements to write the registration examination for dietitian nutritionist	Completed	Completed	No, for RDN Exam	Yes	• Dietitian • Nutritionist
Registration Eligible, to become an NDTR*	Individuals who have met the didactic and supervised practice requirements to write the registration examination for nutrition and dietetics technician	Completed Review requirements for NDTR	Completed Review requirements for NDTR	No, for NDTR Exam	Yes	• Dietetic Technician • Nutrition Associate • Tray line Supervisor • Food Service Supervisor • Food Service Manager • Dietary Manager
*The individual <u>not yet</u> registered and/or licensed, as applicable should always work under the supervision of the RDN.						

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Role	Description	Coursework Status	Supervised Practice Completed?	CDR Exam Passed?	Cosign Required?	Keywords / Notes
Nutrition and Dietetics Technician, Registered (NDTR) or a Dietetic Technician, Registered (DTR)	Individuals who have met the didactic and supervised practice requirements, and passed the registration exam for nutrition and dietetics technician	Completed	Completed	Yes, for NDTR Exam	No, for NDTR who meets practice competencies Yes, for NDTR when practice competencies assessment has determined need for further education to attain competence in a focus area assigned to the NDTR	• NDTR • DTR • Nutrition and Dietetics Technician • Dietetic Technician • Food Service Supervisor • Food Service Manager • Tray line Supervisor • Dietary Manager • Nutrition Educator
Entry Level RDN RDN new to a focus area	Individuals who have met the didactic and supervised practice requirements, and passed the registration exam for dietitian nutritionist	Completed	Completed	Yes, for RDN Exam	No Yes, for RDN when practice competencies assessment has determined need for further education to attain competence in a focus area assigned to the RDN, or is new to a focus area of practice	• RDN in practice 3-6 months • Check organization's orientation which may specify cosigning for an on-the-job training time period • RDN is eligible to practice in areas where competence has been demonstrated

Cosigning notes: It is recommended that the RDN staff should only cosign activities of the individual if witnessed or verified personally[1].
Cosign implies that the RDN staff is ultimately responsible for the care given and recommended by the individual.

Reference:
1.   Iyer, Patricia W., Levin Barbara J., Shea, Mary Ann. **Medical Legal Aspects of Medical Records**. Lawyers & Judges Publishing Company. January, 2006.

Definitions for RDN, NDTR, Dietitian, and Nutritionist are found in the Definitions of Terms.
  ➤ www.cdrnet.org/definitions

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