

CDR Gerontological Nutrition Content Outline

I. NUTRITION SCREENING (19%) – Identify risk factors that affect client/group nutritional status.

Tasks	Associated Knowledge
T1. Obtain information regarding sedentary, moderate, or active physical activity levels that affect calorie levels, balance, mobility, strength, flexibility, and endurance.	K1. Knowledge of barriers to adequate food and nutrient intake for older adults.
T3. Identify food, fluid and nutrient intake patterns.	K3. Knowledge of clinical signs of poor bone health.
T4. Identify effects of drugs, complementary and alternative medicines, and dietary supplements on nutrition status.	K4. Knowledge of clinical signs of poor oral health.
T5. Identify physical and disease-related conditions affecting nutrition status.	K5. Knowledge of common interactions as related to older adults between drugs and herbal medicines, food and drugs, drugs and drugs, food and herbal medicines.
T6. Identify activities of daily living/disabilities (ADL) limitations on food intake, nutrient intake, and activity level.	K6. Knowledge of continuum of care and tiers of nutrition services for older adults.
T7. Identify instrumental activities of daily living (IADL) limitations on food intake, nutrient intake, and activity level.	K7. Knowledge of ethnic, cultural, and religious factors that alter nutritional intake.
T8. Identify older adult's food security, food sufficiency and hunger issues on food intake, nutrient intake and nutrition status.	K9. Knowledge of nutritional factors that contribute toward healthy aging.
T9. Identify food and nutrition issues that impact health and independent living.	K10. Knowledge of markers of adequate hydration in older adults.
T10. Identify environmental conditions affecting food intake, nutrient intake, and physical activity.	K11. Knowledge of nutrition and health concerns of older adults.
T11. Identify cognitive factors affecting food intake, nutrient intake, nutrition status, and physical activity.	K13. Knowledge of physical changes that occur with aging in older adults.
T12. Identify mental health factors affecting food intake, nutrient intake, nutrition status, and physical activity.	K14. Knowledge of metabolic changes that occur with aging in older adults.
T13. Identify social, psychological and caregiver support factors affecting food intake, nutrient intake, nutrition status, and physical activity.	K15. Knowledge of physiological changes that occur with aging in older adults.
T14. Identify cultural, ethnic, and religious issues affecting food intake, nutrient intake, nutrition status, and physical activity.	K16. Knowledge of neurological changes that occur in older adults.
T15. Identify socioeconomic factors affecting food intake, nutrient intake, nutrition status, and physical activity.	K17. Knowledge of sensory changes that occur with aging in older adults.
T17. Identify access and availability issues affecting food intake, nutrient intake, nutrition status, and physical activity.	K18. Knowledge of relationship of nutrition in primary, secondary and tertiary disease prevention.
T18. Identify chewing and swallowing issues affecting food intake, nutrient intake and nutrition status.	K19. Knowledge of risk factors associated with poor nutritional status.
T20. Identify level of nutrition risk in order to determine whether intervention for groups/individuals is necessary.	K20. Knowledge of risk factors associated with socioeconomic, social, and psychological factors.
T22. Select screening tools valid for use with older adults.	K21. Knowledge of standards and guidelines for screening and assessment of older adults.
	K22. Knowledge of tools for assessing physical and functional activity level.
	K23. Knowledge of screening tools appropriate for evaluating nutritional risk in programs and facilities designed for and serving older adults.
	K24. Knowledge of environmental factors affecting accessibility to adequate supply of safe and nutritious food, and safe recreational opportunities.
	K26. Knowledge of prevalence of acute and chronic diseases and conditions of older adults.
	K27. Knowledge of prevalence of nutrition-related conditions.
	K108. Knowledge of effect of physical activity on nutritional status.

II. NUTRITION DATA GATHERING (9%) – Identify nutrition-related problems based on history, current health status and environmental conditions.

Tasks	Associated Knowledge
<p>T16. Identify educational and literacy levels affecting food intake, nutrient intake, nutrition status, and physical activity.</p> <p>T31. Assess health conditions that impact client’s ability to participate in and implement nutrition care plan.</p> <p>T32. Assess anthropometric data against parameters specific for older adults pertaining to body composition.</p> <p>T34. Assess issues in home environment that affect nutritional status.</p> <p>T45. Assess client need for adaptive eating equipment.</p> <p>T46. Assess knowledge and skills of caregivers providing assistance with meals.</p> <p>T56. Perform nutrition-focused physical examination including oral health assessment.</p> <p>T58. Assess changes in nutritional risk factors for older adults.</p> <p>T63. Negotiate nutrition care plan with client, caregiver and family.</p> <p>T64. Implement Federal Resident Assessment Protocols for long-term care facilities.</p> <p>T66. Obtain individual anthropometric data from self report, actual, and/or medical records.</p>	<p>K28. Knowledge of methods and tools to assess socioeconomic support.</p> <p>K29. Knowledge of methods and tools to perform an age-related nutrition assessment.</p> <p>K30. Knowledge of methods and tools to assess social support.</p> <p>K31. Knowledge of methods and tools to perform cognitive assessment.</p> <p>K33. Knowledge of impact of acute and chronic diseases and conditions on health and nutrition status.</p> <p>K36. Knowledge of anthropometric measurements associated with body composition.</p> <p>K49. Knowledge of Federal regulations associated with nutrition care assessment process in programs and facilities designed for and serving older adults.</p> <p>K51. Knowledge of indicators of involuntary weight loss.</p> <p>K52. Knowledge of methods to assess hydration status for older adults.</p> <p>K53. Knowledge of methods to measure bone mineral content and density.</p> <p>K55. Knowledge of methods to perform a nutrition-focused physical examination.</p> <p>K57. Knowledge of standard anthropometric measures for older adults.</p> <p>K59. Knowledge of educational theories impacting behavior change in older adults.</p> <p>K60. Knowledge of care planning process and implications for older adults.</p> <p>K62. Knowledge of social and psychological family and caregiver support for home safety.</p> <p>K63. Knowledge of food availability, selection, preparation, safety, and adequacy and accessibility of kitchen facilities.</p>

III. NUTRITION DATA SYNTHESIS (28%) – Organize and categorize data in a meaningful framework that relates to nutrition problems and diagnosis.

Tasks	Associated Knowledge
<p>T23. Assess age-related impact of food preferences on nutrient intake.</p> <p>T24. Evaluate energy and nutrient intake in community or care setting.</p> <p>T25. Evaluate family history of disease that may affect nutrient intake and nutrition status.</p> <p>T26. Evaluate history and presence of food allergies, hypersensitivities and intolerances.</p> <p>T27. Evaluate use of meal replacements and fortified foods.</p> <p>T28. Assess food preferences that meet nutritional and cultural needs of older adults.</p> <p>T29. Determine impact of activities of daily living (ADL) limitations on ability to consume an adequate amount of food, nutrients and fluid, and ability to participate in physical activity.</p> <p>T30. Determine impact of instrumental activities of daily living (IADL) on ability to access food, nutrients and fluid, and ability to participate in physical activity.</p> <p>T33. Assess data regarding client's medical history and health status.</p> <p>T35. Assess level of sedentary, moderate, or active physical activity that affects health conditions and nutrition risk.</p> <p>T36. Determine client ability to perform physical activity.</p> <p>T37. Assess swallowing issues that affect nutrition intake.</p> <p>T38. Evaluate client for signs/symptoms of abuse, neglect or exploitation.</p> <p>T39. Evaluate current use of medications, complementary and alternative medicines, dietary supplements, and history and management practices.</p> <p>T40. Evaluate laboratory data using gerontological parameters pertaining to nutrition status.</p> <p>T41. Determine client hydration status.</p> <p>T42. Determine etiology of hydration status using biochemical, medical, pharmaceutical, physiological, and functional data.</p> <p>T43. Evaluate overall health condition for nutrition-related consequences specific to older adults.</p> <p>T47. Assess need for nutrition education of families, caregivers and older adults regarding disease management, health promotion and wellness.</p> <p>T50. Evaluate client/group's readiness to learn and change nutrition-related behaviors.</p> <p>T51. Evaluate factors related to food access, selection, and preparation.</p> <p>T52. Assess nutritional, physical activity, lifestyle barriers or other limitations that impact ability to change eating behaviors or increase physical activity.</p> <p>T53. Assess positive nutrition, physical activity and lifestyle behaviors.</p> <p>T55. Estimate client nutritional requirements.</p> <p>T57. Assess primary and secondary nutritional problems.</p> <p>T60. Integrate assessment data for diagnosis and plan of care</p> <p>T61. Determine need for medical nutrition therapy.</p> <p>T70. Identify signs/symptoms in the older adult established for nutrition diagnostic categories to provide evidence of a nutrition-related problem.</p>	<p>K34. Knowledge of age-related pharmacodynamic changes.</p> <p>K35. Knowledge of age-related pharmacokinetic changes.</p> <p>K37. Knowledge of biochemical tests and measures that affect nutrition status.</p> <p>K38. Knowledge of methods to synthesize information from screening and assessment tools.</p> <p>K39. Knowledge of effect of aging on ability to regulate fluid balance.</p> <p>K40. Knowledge of relationship between nutritional status and skin integrity.</p> <p>K41. Knowledge of effect of oral health on nutrition status.</p> <p>K42. Knowledge of effect of socioeconomic, social and psychosocial history on nutrition status.</p> <p>K43. Knowledge of effects of age-related physical changes on nutrition status.</p> <p>K44. Knowledge of effects of age-related metabolic changes on nutrition status.</p> <p>K45. Knowledge of effects of age-related physiological changes on nutrition status.</p> <p>K46. Knowledge of effects of age-related neurological changes on nutrition status.</p> <p>K47. Knowledge of effects of age-related sensory changes on nutrition status.</p> <p>K48. Knowledge of impact of age-related sarcopenia on physical and functional capacity, and quality of life.</p> <p>K50. Knowledge of mandatory reporting requirements regarding elder abuse, neglect and exploitation.</p> <p>K54. Knowledge of methods to obtain information regarding home environment.</p> <p>K56. Knowledge of recommendations for maximizing independent eating by older adults.</p> <p>K58. Knowledge of continuum of care and tiers of nutritional services for older adults.</p>

IV. NUTRITION DIAGNOSIS (4%) – Identify occurrence, risk or potential for developing nutritional problems.

Tasks	Associated Knowledge
T68. Develop diagnostic statement describing nutritional problems associated with nutrient/fluid intake, clinical findings, and behavioral-environmental issues. T69. Identify etiologies of nutritional problems that affect food intake, nutrient intake, nutrition status, and physical activity. T71. Develop nutrition diagnosis for client. T73. Synthesize signs/symptoms of nutrition status to target nutritional interventions	K2. Knowledge of clinical signs of undernutrition and overnutrition in older adults. K64. Knowledge of the nutrition care process. K65. Knowledge of components of a nutrition diagnosis specific for older adults. K66. Knowledge of standards for developing nutrition diagnosis statements. K67. Knowledge of data sources and tools for nutrition diagnosis.

V. NUTRITION CARE PLAN (10%) – Develop strategies with expected outcomes to change nutrition-related behaviors, physical activity, risk factors, environmental conditions or aspects of health status for an individual, target group or community.

Tasks	Associated Knowledge
T54. Analyze barriers/solutions to implementation of nutrition care plan.	K12. Knowledge of unique nutritional needs of older adults as related to Dietary Reference Intakes, Dietary Guidelines for Americans and modifications necessary for management of acute and chronic diseases and conditions.
T62. Determine need for referral to nutrition, social services, medical and allied health care professionals.	K61. Knowledge of Federal regulations that pertain to programs and facilities as related to nutrition care of older adults.
T74. Formulate goals and plan of action based on severity of problem, safety, client's needs and priorities, and likelihood of success.	K68. Knowledge of recommendations for maximizing independent eating by older adults. K69. Knowledge of funding sources for food and nutrition programs and services available to older adults.
T75. Prioritize nutritional diagnoses/problems in terms of importance and urgency to determine most important nutritional interventions.	K70. Knowledge of older adults including demographic characteristics, family dynamics, informal and formal caregiver support, and their impact on nutrition interventions.
T76. Prioritize opportunities for health promotion, disease prevention, risk reduction and chronic disease management.	K71. Knowledge of referral sources for psychiatric and psychological services. K72. Knowledge of characteristics of dietary practices, dietary behaviors and food preferences for different cultures/ethnicities/religions and food preferences of older adults.
T81. Develop monitoring plan for outcomes indicators relative to the client/group defined needs, nutrition diagnosis, nutrition goals, physical activity goals, and disease state.	K73. Knowledge of community programs providing food and nutrition services to older adults. K74. Knowledge of complementary and alternative therapies and medicines that may affect nutrition status. K76. Knowledge of dining issues for the eating-disabled older adults.
T82. Provide interventions as defined by nutrition care plan.	K77. Knowledge of interaction between drug and herbal medicines, food and drugs, drugs and drugs, drugs and nutrients that affect food and nutrition intake.
T84. Implement interdisciplinary nutrition care discharge plans.	K78. Knowledge of evidence-based nutrition guides for practice and protocols. K79. Knowledge of Federal regulations associated with discharge planning for clients in skilled nursing and other facilities.
T87. Recommend adaptive eating equipment needed to promote independence.	K80. Knowledge of Federal regulations associated with nutrition care for clients receiving care in the home.
T88. Administer nutrition service programs in home care, community-based programs, and health care settings.	K81. Knowledge of intergenerational/cohort values that affect food and nutrient intake and physical activity for older adults. K82. Knowledge of housing options for older adults.
T89. Collaborate with interdisciplinary team regarding client care in health care and community settings.	K83. Knowledge of Medical Nutrition Therapy (MNT) protocols for chronic diseases and conditions of older adults. K84. Knowledge of protocols for anorexia of aging and failure to thrive. K85. Knowledge of Medical Nutrition Therapy (MNT) protocols for HIV/AIDS. K86. Knowledge of Medical Nutrition Therapy (MNT) protocols for weight management. K87. Knowledge of menu planning tools to meet nutrition needs of older adults. K88. Knowledge of menu writing and food intake planning to liberalize diets for older adults in various settings.
	K89. Knowledge of food texture modifications, and texture-modified products and availability for older adults.
	K90. Knowledge of nutrition guidelines for clients receiving palliative care.
	K91. Knowledge of nutrition program requirements and implementation of Older Americans Act standards.

Tasks	Associated Knowledge
	<p>K92. Knowledge of physical, metabolic, physiological, psychosocial, neurological changes that affect nutrition, health, and physical activity.</p> <p>K93. Knowledge of acute and chronic diseases and conditions that affect nutrition, health status, physical activity and functionality status of older adults.</p> <p>K94. Knowledge of special considerations for older surgical patients.</p> <p>K95. Knowledge of theories of behavior change specific for older adults in adopting healthy lifestyles.</p> <p>K96. Knowledge of home and community-based nutrition service options, e.g. Medicaid Waivers, PACE, adult day service, day health rehabilitation.</p> <p>K97. Knowledge of nutrition services included in Medicaid and Medicare programs and services.</p> <p>K98. Knowledge of evidence-based physical activity programs and strategies for older adults.</p> <p>K99. Knowledge of standards and guidelines for nutrition counseling of older adults.</p> <p>K100. Knowledge of standards and guidelines for nutrition education of older adults.</p> <p>K107. Knowledge of congregate and home delivered meal services.</p>

VI. NUTRITION COUNSELING AND EDUCATION (4%) – Provide information about nutrition of older adults to individuals, target groups or community to shape, guide and motivate behavior change for the purpose of improving health and managing disease.

Tasks	Associated Knowledge
<p>T91. Select existing programs and materials for older adults.</p> <p>T92. Provide nutrition counseling to manage acute and chronic diseases and conditions for older adults.</p> <p>T93. Develop materials that use evidence-based information to target audiences.</p> <p>T94. Provide nutrition education to older adults, families and caregivers regarding basic nutrition needs regarding health promotion, wellness, and disease/disability management.</p> <p>T96. Provide education and training to other professionals, decision makers, and policymakers on role of nutrition and the registered dietitian in the health, independence, quality of life and cost effective services for older adults.</p> <p>T97. Provide training to formal and informal caregivers of older adults.</p>	<p>K101. Knowledge of adult learning theories relevant to educating older adults, families, and caregivers in nutrition care.</p> <p>K102. Knowledge of language and literacy issues that affect the delivery of nutrition counseling and education.</p> <p>K103. Knowledge of techniques for providing culturally and religiously appropriate nutrition education, counseling, physical activity and health promotion.</p> <p>K104. Knowledge of facilitation process in goal setting to assist behavior change for older adults.</p> <p>K105. Knowledge of services and programs across socioeconomic levels.</p> <p>K106. Knowledge of community mental health services relevant to older adults.</p> <p>K109. Knowledge of counseling techniques and evidence-based behavior change principles appropriate for older adults, caregivers and families.</p> <p>K110. Knowledge of Federal programs involving benefits, food assistance and preventive health services for older adults.</p> <p>K111. Knowledge of health promotion programs related to alcohol and substance abuse reduction in older adults.</p> <p>K112. Knowledge of health promotion programs related to prevention and reduction of chronic disabling conditions in older adults.</p> <p>K113. Knowledge of programs and services related to home safety for older adults.</p> <p>K114. Knowledge of programs and services related to smoking cessation.</p> <p>K115. Knowledge of programs and services related to stress management and grief counseling for older adults.</p> <p>K116. Knowledge of programs and services related to weight management for older adults.</p> <p>K117. Knowledge of physical activity programs and services for older adults.</p> <p>K118. Knowledge of programs and services providing caregiver and family support.</p> <p>K119. Knowledge of programs and services that address medication management for older adults.</p> <p>K120. Knowledge of home- and community-based programs and services that address health, social, nutritional, and educational needs of older adults.</p> <p>K138. Knowledge of techniques for communicating with older adults.</p>

VII. NUTRITION MONITORING AND EVALUATION (10%) – Review and measure client/group progress in response to nutritional and physical activity interventions at scheduled intervals.

Tasks	Associated Knowledge
<p>T99. Determine client/community intervention goals and expected outcomes</p> <p>T100. Develop qualitative and quantitative criteria to measure intervention outcomes.</p> <p>T101. Select instruments to measure nutritional outcomes.</p> <p>T103. Collect data relevant to progress in nutrition care plan.</p> <p>T104. Collect data relevant to program implementation and intervention.</p> <p>T105. Evaluate intervention outcomes by comparing to goals and established evidence-based standards.</p> <p>T106. Conduct outcomes assessment relevant to goals, nutrition diagnosis, interventions, outcomes and quality management indicators.</p> <p>T107. Incorporate monitoring data feedback to improve nutrition care process and intervention outcomes.</p> <p>T108. Evaluate ongoing need for nutrition services.</p> <p>T109. Evaluate need for continuation of nutrition/medical/social services at predetermined intervals.</p> <p>T110. Identify reference standards to which nutrition assessment data will be compared.</p> <p>T111. Establish outcome indicators for nutrition interventions in observable, measurable terms.</p> <p>T112. Collect data for documenting outcomes related to nutrition and physical activity status of older adults.</p> <p>T113. Coordinate quality assurance with other health care disciplines.</p> <p>T115. Modify practice based on scientific evidence for older adults.</p>	<p>K121. Knowledge of components of client/program nutrition monitoring and evaluation.</p> <p>K122. Knowledge of tools and methods to measure nutritional outcomes.</p> <p>K123. Knowledge of factors that determine whether to continue care, refer or discharge client/group from nutrition care.</p> <p>K124. Knowledge of methods for evaluating individual and group outcomes related to the nutrition diagnosis and goals established in intervention plan.</p> <p>K125. Knowledge of methods for evaluating program outcomes.</p> <p>K126. Knowledge of standards and guidelines for nutrition and case management.</p> <p>K127. Knowledge of nutrition care model as it relates to ongoing evaluation for older adults.</p>

VIII. FOODSERVICE (10%) – Develop food service programs that provide quality nutrition according to standards of care.

Tasks	Associated Knowledge
T116. Assess food safety, sanitation, and storage relative to unique needs of older adults.	K75. Knowledge of Dietary Reference Intakes, Dietary Guidelines for Americans, macronutrients, micronutrients, and other bioactive food components for older adults.
T117. Assess food handling methods relative to unique needs of older adults.	K128. Knowledge of requirements pertaining to Older Americans Act and other Federal nutrition programs targeting older adults.
T118. Assess nutrient and food quality relative to needs of older adults.	K129. Knowledge of food safety training and education materials designed for and serving older adults.
T119. Assess sensory qualities of food and meals relative to needs of older adults.	K130. Knowledge of Federal/state regulations pertaining to dining environments in programs and facilities serving older adults.
T120. Assess appropriateness of meals for older adult populations of diverse health conditions, religious customs/practices, and cultures.	K131. Knowledge of Federal/state regulations pertaining to dietary service staffing in programs and facilities designed for and serving older adults.
T121. Assess foodservice systems and preparation methods relative to texture modifications, age-related nutrient needs, special diet needs, physical and functional abilities and availability of equipment.	K132. Knowledge of Federal/state regulations pertaining to dining and food service in programs and facilities designed for and serving older adults.
T122. Assess availability of adaptive/assistive devices to promote optimal food intake in older adults.	K133. Knowledge of Federal/state regulations pertaining to food storage and food storage rooms in programs and facilities designed for and serving older adults.
T123. Assess environmental condition of dining areas in home, community-based or care settings.	K134. Knowledge of Federal/state regulations pertaining to kitchen/food service in programs and facilities designed for and serving older adults.
T125. Develop foodservice systems that incorporate client/resident-focused needs and preferences.	K135. Knowledge of Federal/state regulations pertaining to menus and nutritional adequacy.
T126. Propose revisions and changes in foodservice systems to meet the needs of clients/residents.	K136. Knowledge of Federal regulations pertaining to safety and sanitation in programs and facilities designed for and serving older adults.
T129. Assess staff knowledge and skills related to providing food service to older adults.	K137. Knowledge of food safety issues that may affect older adults.
T130. Meet regulation standards within menu planning development.	K139. Knowledge of standards and guidelines for training of personnel who work with food service programs for older adults.
T131. Assess disaster preparedness for older adults by ensuring adequate food and water supplies.	K140. Knowledge of standards and guidelines pertaining to food service equipment/water/physical facilities.
	K141. Knowledge of standards of practice associated with estimating staffing needs in programs and facilities designed for and serving older adults.
	K142. Knowledge of standards of practice associated with menu planning, calories and portion sizes for older adults.
	K143. Knowledge of best practices relating to dining experience/feeding of older adults with chronic diseases.
	K144. Knowledge of effects of time and environmental conditions on food quality and nutrient retention for congregate and home delivered meals.
	K145. Knowledge of standards for disaster preparedness for facility-based and community-based care settings.

IX. PROFESSIONAL PRACTICE (7%) – Integrate relevant continuing professional education with practice; advocate for providing nutrition services; maintain knowledge of current Federal regulations.

Tasks	Associated Knowledge
<p>T127. Use customer satisfaction survey results to drive quality improvements.</p> <p>T132. Recognize considerations and issues unique to initiating nutrition support in older adults.</p> <p>T133. Recognize responsibilities related to provision of palliative nutrition care of older adults.</p> <p>T134. Recognize appropriateness of liberalized nutrition interventions for frail, older adults.</p> <p>T135. Discuss pros and cons of aggressive nutrition support of frail, older adults with family and/or caregivers.</p> <p>T137. Advocate for client/resident in situations involving advanced directives, living will, code status, end of life issues.</p> <p>T138. Document nutrition services provided in home care, community-based programs and care facilities.</p> <p>T139. Document decisions regarding ongoing need for nutrition services.</p>	<p>K8. Knowledge of impact of nutrition on aging process.</p> <p>K25. Knowledge of Federal and national health indicators and disease prevention data.</p> <p>K146. Knowledge of ethical guidelines regarding end of life issues including refusal of treatment.</p> <p>K147. Knowledge of Federal regulations associated with the survey process in programs designed for and serving older adults.</p> <p>K148. Knowledge of Joint Commission of Healthcare Organizations (JCAHO) standards for abbreviations in documentation of nutrition care.</p> <p>K149. Knowledge of legal obligations regarding advanced directives in long term and end-of-life care.</p> <p>K150. Knowledge of standards and guidelines for documenting nutrition care.</p> <p>K151. Knowledge of standards of care pertaining to liberalizing nutrition interventions for older adults.</p> <p>K152. Knowledge of authorizing legislation and implementing regulations (e.g., Medicare, Medicaid, USDA food assistance programs, Older Americans Act, etc.) that address needs of older adults.</p> <p>K153. Knowledge of evidence-based theories of aging.</p> <p>K154. Knowledge of ADA Position Papers related to older adults.</p> <p>K155. Knowledge of Nutrition Care Process and Standard Language.</p>