

Increasingly, RDNs and NDTRs are seeking careers in quality and taking roles such as Quality Specialist, Improvement Specialist, Quality Manager, Quality Improvement Coordinator, Quality and Patient Safety Director and some cases even Chief Quality Officer. While many RDN leaders may already be doing quality work in their current roles, it is important to be aware of the education, skills, and training that may be needed to assume responsibilities and be successful in a career that focuses on Quality Assurance and Performance Improvement (QAPI).

What Your Peers are Saying:



"I had been the clinical nutrition manager (CNM) at my hospital for over 13 years and truly enjoyed my job. I built a quality monitoring program and created a quality team lead position for a clinical dietitian. In 2003 the hospital joined the Institute for Healthcare Improvement (IHI) program to transform care and create a strong quality culture. With my interest in quality, I decided to pursue an Improvement Specialist position in 2012. My advice to RDNs interested in a career in quality, "go for it"; with a recommendation to implement strategies in advance to set up position consideration and success. Some recommended strategies include forming relationships with leaders outside the nutrition department, serving on facility-wide committees and pursuing professional development in leadership skills."

Sherri Jones, MS, MBA, RDN, LDN, SSGB, FAND
Senior Improvement Specialist, UPMC Presbyterian Shadyside (Pittsburgh, PA)

"My career change to quality was driven by my foundation and love for patient care, and the need to expand upon skills I had developed as a RDN. Quality allows me to remain closely tied to the frontline, while providing a more global experience in all areas in health care. It is most gratifying to collaborate with a multidisciplinary team and use the tools and methodologies to apply science to problem-solving, risk identification, data analysis, and corrective action planning. My advice to RDNs: if you have interests in learning more about health care from all avenues, then consider a position in quality. Clinical background and EMR-know-how, communication skills, and analytical and inquisitive manner, give RDNs a fantastic start in quality improvement."

Christina Mior, MBA, RD
System Performance Improvement, Rochester Regional Health (Rochester, NY)

Organization's Focus



QAPI activities are essential in the health care setting and include regulatory requirements set by the Centers for Medicare/Medicaid Services and others with deemed authority to accredit health facilities, such as The Joint Commission.

Organizations are highly invested in:

- Improving quality and patient care
- Enhancing patient safety
- Efficiency and effectiveness
- Costs and employee engagement

Organizations establish quality goals based on performance in certain areas (i.e., hospital acquired infections, hospital acquired pressure injuries, mortality).

Quality departments with designated staff monitor and collect data related to the specific hospital goals or reported safety concerns.

The RDN's Role



RDNs hold leadership positions in quality departments often accomplished through visibility as a quality champion within the nutrition department and obtaining quality credentials (i.e., Lean/Six Sigma, Certified Professional in Healthcare Quality).

RDNs in nutrition departments ensure:

- Improved quality metrics
- Increased patient satisfaction
- Optimized clinical outcomes

To achieve quality nutrition, clinical nutrition managers (CNMs) must take the lead with quality initiatives. They should seek QAPI training through their organization or an external agency to enhance their skills and knowledge.

Ultimately, the CNM who is embarking on QAPI activities should align their process and reporting with their organization's QAPI system.

Real-World Examples



Examples of RDN QAPI Measures:

- Timeliness and accuracy of screening, assessment, follow-up
- Effectiveness of intervention
- Compliance with protocols
- Glycemic control in patients
- Incidence of under and overfeeding
- Feeding tube placement success rate
- Order writing support parameters
- Appropriate diet prescriptions – liberalized vs. restricted
- Patient satisfaction scores (internal and external vendor)
- Tray accuracy and delivery times
- Quality of food and nourishments
- Accurate temperature and sanitation
- Foodservice staff education

Additional Information: [Quality Strategies Webpage](#)