

As the Clinical Nutrition Manager over outpatient clinical nutrition department, you are made aware that TJC will be on site for a survey tomorrow.

What do you do?

I, as the Clinical Nutrition Manager, will not panic as I ensured that our outpatient clinical nutrition department always operates in compliance with accreditation standards. I tirelessly assured that my facility and all activities, services, policies and procedures complied with all applicable acceptance standards, therefore I know my department will be ready for *The Joint Commission* (TJC) accreditation agency to come on site to conduct their survey.¹

I will also be relieved that I performed mock surveys on a regular basis and asked my employees sample questions that are similar to questions they may be asked by a surveyor.^{1,2} I will also be glad that myself and my employees practiced our responses to ensure compliance and to identify if further guidance and/or training is needed.^{1,2} Additionally, after conducting mock surveys, I also debriefed employees with a “lessons learned” so we can all improve, learn, and grow together as a department.² Therefore, I am confident that my employees are ready for the questions they may receive from TJC surveyors.

I will ensure I gather two checklists – a checklist for *RDN personnel files* (such as figure 10.2 in our text) and will also have a checklist for *preparing staff for a survey* (such as figure 10.3 in our text) to help me stay organized and on task.²

Therefore, I will not worry as I know we have prepared for this type of inspection by having the appropriate checklists, performing mock surveys on a regular basis, practicing answers we may be asked by surveyors and conducting post-survey follow-up.^{1,2}

What should you have done to prepare prior to always be survey ready?

In addition to mock surveys, practicing answers and conducting post-survey follow up, I would ensure I am always up to date on *Title 42* and its key parts that are most applicable to my outpatient clinical nutrition department.¹ This is important because *Title 42* is updated annually on October 1st and some rules may change from one year to the next.¹

I would also ensure all RDNs and NDTRs that work in my facility have an understanding of the regulatory compliance requirements that are relevant to our outpatient clinic and that they are informed with CMS regulations, state licensure laws and facility policies.¹ I would also ensure that all RDNs and NDTRs are practicing *within* their scope of practice (SOP) to prevent regulatory and legal consequences.¹ I would also ensure that the most recent version of the *Academy of Nutrition and Dietetics Scope of Practice for RDNs* and *Revised Standards of Practice in Nutrition Care and Standard for Professional Performance (SOP/SOPP)* were followed and up to date.² Additionally, I would ensure proper documentation standards are *always* upheld.^{1,2}

I would ensure all departmental policies align with state SOP laws and that RDNs meet credentialing and privileging requirements, ongoing competency assessments, and any other professional licensure regulations.^{1,2}

For nutrition services compliance, I would ensure I have all facility and department checklists that are standard specific and applicable to my outpatient clinical nutrition department and would also save all used checklists on file to be referenced and presented during inspection or accreditation review.¹ Checklists I would have on file include all that are pertinent to the food and nutrition department to include performance improvement (PI) data and projects being conducted, care management plans and their associated annual evaluations, multidisciplinary

team meetings, proof of RDNs on the infection control committee (if applicable), organizational charts, approved/unapproved abbreviations to ensure consistency when writing patient notes, contracts and any complaints/grievances that may have been received.¹

Food and nutrition department employee files I would have saved and ready to present for accreditation purposes include proper personnel documentation such as job descriptions with listed qualifications and a list of required job activities as this documentation will show that competent individuals were hired.¹ Additional files I would present include a copy of up-to-date qualifications and criteria used for hiring, as well as items used to evaluate employee performance.¹

Additionally, I would save all documentation and proof that orientation for new employees occurred upon them entering the department, verification of employee RDN/NDTR status, licensure verification, and evidence of knowledge, skills, and competence.¹ Additionally, I would save all performance evaluations, any required department in-services and any remediation taken if an employee scored below average.¹

I would also maintain documentation on file that shows all staff receives continuing education training (CEUs) that is relevant to our department.¹ I would also maintain employee proof of attendance records that shows employees attended all required education and training sessions to further their professional development and growth, maintain credentials and prevent licensure lapse.¹

I would also save documentation of all patient nutrition education provided by our outpatient clinical nutrition department – to include *how* the patient nutrition education is delivered from RDNs and NDTRs to patients, evidence of all nutrition education materials used

and their applicable DANEH scores (to prove that all education material is written or delivered at a 6th grade level or lower) and patient feedback after nutrition education classes conclude.

References

1. Fisher J. Week 4: Chapter 10 Statutory & Regulatory Issues. Advanced Leadership & Management; King's College; July 2025.
2. Grim J, Roberts SR. *Effective Leadership & Management in Nutrition & Dietetics*. Academy of Nutrition and Dietetics; 2023.