UNIVERSITY of WASHINGTON SCHOOL OF PUBLIC HEALTH Nutrition Training Outreach to RDNs in Under-Resourced WACounties

Kristina Tribley, UW Nutritional Sciences Program, MPH-Nutrition Student & Dietetic Intern Site Supervisor: Mari Mazon, MS, RDN, CD, Pediatric Pulmonary Center Nutrition. Faculty Organization: UW Center on Human Development & Disability

Children & Youth with Special Healthcare Needs Nutrition Network

- > Improves access to evidence-based nutrition care for children with special healthcare needs
- > Provides free specialized training and continuing education to RDNs
- > Began in 1987, as a 3-day UW training
- ➤ Grown into a statewide, 250+ RDNs provider community
- > Holds a yearly state-funded 2-to-3-day training opportunity for ~10 RDNs

Why it Matters

- > Nutrition is vital to support the optimum growth and development for every child
- Children with special healthcare needs are at an increased risk for nutrition-related problems
- > Disparities in healthcare access for rural families
- Medical nutrition therapy (MNT) provides patients with resources and behavioral modifications tailored to their needs and circumstances

Practicum Project Aims

- Identify WA counties with few RDNs trained to support children with special health care needs
- Find qualifying hospitals, make contact, and take call notes
- > Provide list of interested RDNs
- Identify RDNs to take part in the WA-DOHsponsored Nutrition Network training
- > Provide report on perceived barriers to participation in the Nutrition Network training to inform future action

Spoiler: No RDNs identified

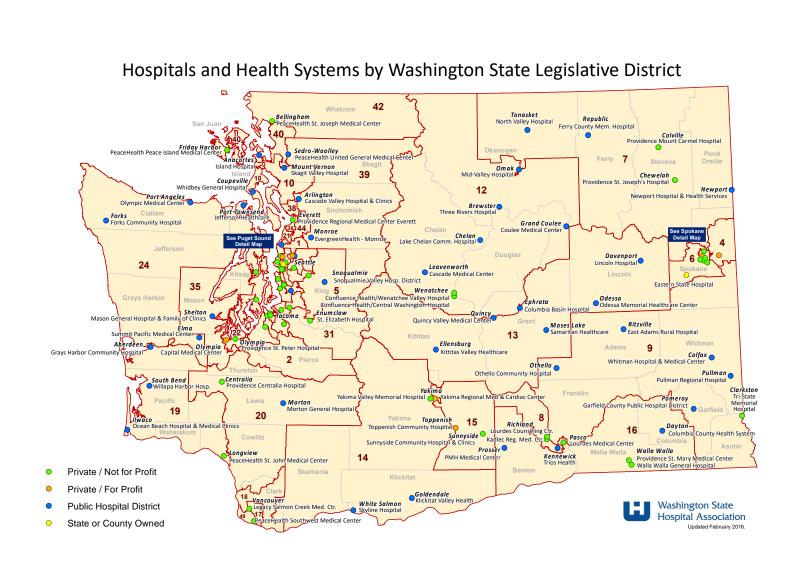
Targeted WA State Counties

Data pulled from "Nutrition Services for Washington State Children & Youth with Special Health Care Needs" report written by Margaret Wilson, MS, CN, LMHC

	Estimated	Nurtition	Children with
	Children with	Network	special
County	special	Dietitians	healthcare needs
·	healthcare needs	(excluding WIC &	per Dietitian
	per County	Home Infusion)	(excluding WIC &
		,	Home Infusion)
Clark	21144	0	No Dietitian
Cowlitz	4867	0	No Dietitian
Grays Harbor	2941	0	No Dietitian
Mason	2513	0	No Dietitian
Clallam	2492	0	No Dietitian
Douglas	2163	0	No Dietitian
Stevens	1871	0	No Dietitian
Kittitas	1554	0	No Dietitian
Jefferson	734	0	No Dietitian
Pacific	664	0	No Dietitian
Pend Oreille	506	0	No Dietitian
Skamania	427	0	No Dietitian
Ferry	241	0	No Dietitian
Wahkiakum	148	0	No Dietitian
Columbia	138	0	No Dietitian
Garfield	90	0	No Dietitian
Pierce	40696	6	6782
Snohomish	35540	6	5923
Grant	5527	1	5527
Benton	10493	2	5246
King	86957	23	3780
Spokane	22198	6	3699
Lewis	3318	1	3318
Island	2974	1	2974
Franklin	5881	2	2940
Yakima	14283	5	2856
Whatcom	8495	3	2831
Kitsap	10584	4	2645
Thurston	11888	5	2377
Skagit	5361	3	1787
Chelan	3457	2	1728
Whitman	1451	1	1451
Adams	1385	1	1384
Asotin	872	1	872
Klickitat	827	1	827
Walla Walla	2427	3	809
Okanogan	1900	3	633
Lincoln	458	1	458
San Juan	431	1	431
		 Special Health Care Nee	

Nutrition Network - Nutrition for Children with Special Health Care Needs. Accessed March 9, 2023. https://nutritionnetworkwa.org/

Hospitals and Health Systems



Hospital Association, W. S. (2016). State Legislative Districts - Washington State Hospital Association. Retrieved March 10, 2023, from https://www.wsha.org/wpcontent/uploads/Map_StateLegislativeDistricts.pdf

Perceived Barriers Report

RDN Identified Perceived Barriers

- \succ RDNs only present in outpatient diabetes care clinics
- \geq Older populations (65y/+) being served by the hospital
- \geq RDN not receiving MD referrals for pediatrics
- > Unaware of any RDNs working with pediatric
- > Neighboring county RDNs supporting the very few children in the targeted county

Hospital Staff Identified Perceived Barriers

- > No RDNs on staff/RDNs in consultant roles
- > Short staffed/RDNs positions waiting to be filled
- \succ Children are automatically sent to nearest large city (Spokane, Portland, Seattle)



What Could This Mean?

The lack of Nutrition Network RDNs in rural counties may also be attributed to:

- An overall lack of RDNs within rural areas
- Rural-based RDNs being siloed into Medicarespecific reimbursable MNT

A lack pediatric-focused RDNs, possibly due to low MNT reimbursement through Medicaid

Proposed Next Steps

In under-resourced Washington state counties...

- Shift target audience upstream by contacting hospital and clinical management
- Contact the RDNs interested in sharing Nutrition Network training opportunities
- Assess the geographic catchment area by contacting RDNs in neighboring counties.
- Expand target audience by contacting private practice RDNs

Develop a guide on how to become in network with health insurance agencies (Medicaid emphasis) for private practice RDNs

Advocacy

Promote access to quality MNT services for children with special healthcare needs by advocating for policies that. . .

- > Increase Medicaid MNT reimbursement
- Ensure insurance coverage for telehealth services

Increase internet connectivity in rural areas

HRSA DISCLAIMER



This project was supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$340,000 with 0 percentage financed with nongovernmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS or the U.S. Government.