## MISSION STATEMENT:
The Council on Renal Nutrition (CRN) functions as a professional council within the framework of the National Kidney Foundation (NKF) and networks with other organizations to support the National Kidney Foundation's goal of making lives better for those with chronic kidney disease through education, outreach and research in the field of nutrition as it pertains to prevention, eradication and treatment of kidney and urologic diseases.

### GOALS

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<thead>
<tr>
<th>1. Promote and encourage quality nutrition care of all patients with CKD</th>
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<tbody>
<tr>
<td>a. Develop, review, and revise standards of practice for nephrology dietitians to promote quality nutrition care.</td>
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<td>b. Promote continuous quality improvement activities by providing nephrology dietitians with guidelines for implementation.</td>
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<td>c. Develop, review and revise continuing education programs and materials for non-nephrology dietitians and dietetic students.</td>
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<td>d. Support nephrology nutrition as a specialty area of nutrition practice.</td>
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<td>e. Encourage the role of nutrition research in defining quality nutrition care.</td>
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### PROGRESS

- Standards of Practice and Standards of Professional Performance (SOP/SOPP) for Registered Dietitians in Nephrology Care completed and published.
- Continue with the collaboration with AND-RPG(formerly ADA-RPG) to promote the Nutrition Care Process (NCP) and nutrition diagnostic terminology
- Participate on ANNA/NKF Taskforce for the development of a comprehensive interdisciplinary patient assessment form (CIPA)
- Strategies I&II Workshops held at SCM
- Collaborative effort with AND-RPG on developing educational tools on the nutritional needs of the CKD patient for corporate and food development/research dietitians.
- Collaborative effort with AND-RPG position paper on phosphorus and phosphorus additives begun in 2012
- Establish new CRN committee to handle new public relations requests and inquiries-2012
- Work with Public Outreach/Communications department at NKF to promote nutrition information to CKD community
- EC member participating on NKF-NSRI committee

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<th>2. Support the profession of the nephrology dietitian and promote professional education</th>
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<td>a. Conduct a needs assessment through membership surveys every five years and through scientific meeting program evaluations.</td>
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<td>b. Develop, review, revise and market educational materials, programs, and seminars for nephrology dietitians in all</td>
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### PROGRESS

- RRD, Kopple, Regional RRD, OSA awards in support of achievements in nephrology nutrition
- New Susan Knapp Excellence in Education aware to recognize achievements in exceptional contributions in nephrology nutrition through education
- Continue to support state legislation for RD licensure and other professional issues, including staffing rations (supported Texas
subspecialty areas of renal nutrition.

c. Liaison with the American Dietetic Association – Renal Dietitians Practice Group (RPG) to enhance and promote the ongoing review of renal specialization.

d. Encourage representation of the nephrology dietitian on NKF national committees; its divisions, affiliate boards, End Stage Renal Disease (ESRD) Network boards, other Federal regulatory agencies and renal editorial boards.

e. Support and promote the Journal of Renal Nutrition (JREN) as the peer-reviewed publication for the specialty of nephrology nutrition.

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<th>Events</th>
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<td>RD staffing ratio in Feb 2009) as approved by NKF. (NY support in 2011)</td>
<td>Participate in CMS Open Forum Meetings, MedPac Meetings, and NKF meeting to discuss the role of the RD and ways to improve nutritional status in CKD patients.</td>
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<td>2008 Membership Survey completed and results released to membership in Chair Message and webinar</td>
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<td>NKF-CRN support of ISRM meeting in Hawaii, 2012</td>
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<td>Two CRN representatives have served on the inter-organizational project approved by ASPEN for the development of Expert Recommendations for IDPN and IPN</td>
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<td>Continued contribution to Renalink, providing an interdisciplinary approach to current concerns when caring for CKD patients</td>
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3. Develop and promote patient and public education

a. Conduct needs assessment by conducting a membership survey every five years, and by utilizing the summary of the NKF Public Education Committee’s “Needs Assessment Survey”.

b. Develop, review, revise and market patient education materials and programs for the general public, the at-risk population, and the patients.

c. Coordinate CRN projects, conceptually and fiscally, with the appropriate NKF committees and approval processes.

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- Worked with KLS at national level to develop modules for MIPPA Pre-Dialysis Education Benefit program entitled “Your Treatment, Your Choice”
- Continued to work with KLS on patient and public nutrition education materials
- Develop and update, as needed, nutrition brochures, fact sheets for patients, and cookbook list
- Work with NKF Patient Communications department on recipe development and review for website and newsletters
- Establish new CRN committee to handle new public relations
d. Provide professional consultation and representation to NKF, its divisions, its committees, its affiliates, and local CRN Councils about patient and public education materials related to nutrition. Network with other organizations and media contacts, with emphasis on coordination with the American Dietetic Association (ADA) and the ADA-RPG, in the promotion of normal nutrition toward the eradication of kidney disease.

4. **Stimulate, support, encourage and disseminate nutrition-related research**
   a. Expand marketing of CRN Research Grants.
   b. Conduct nephrology nutrition research needs assessment.
   c. Establish and support a national nutrition research question.
   d. Become involved in editorial boards of other NKF publications.
   e. Encourage publication of all CRN Research Grant manuscripts in the Journal of Renal Nutrition.
   f. Develop and oversee an interactive website to guide CRN members through the research process.

   - CRN provided research grants totally $30,000 annually with emphasis on supporting research by nephrology dietitians in clinical practice
   - Formed special taskforce in 2008: Research Advisory Group to stimulate research by RD and address any barriers.
   - First call for proposals announce in 2008: determination of predictive equation to estimate energy requirements in the HD population
   - Research Bulletin Board
   - Research Grant manuscripts are consistently published in JRN
   - Support NKF-KDOQI Guidelines
   - Continue to work with graduate students on survey based research; if student affiliated with CRN member and research is shown to benefit the field, surveys are circulated to CRN membership.
   - Chair Message JRN 2012, encouraged more CRN members to start or participate in research.

5. **Impact regulatory and legislative issues**
   a. Strengthen liaison with the American Dietetic Association RPG Legislative Chair and develop a committee to improve communication to membership through the CRN Telephone Contact Tree, Renal RD Listserv and through the JREN.
   b. Encourage dietitians’ involvement and networking in ESRD Network Organizations, NKF Patient Empowerment Initiative, and other federal regulatory agencies, in coordination with the NKF National Office.
   c. Encourage representation on the NKF National Impact Committee
   d. Assist in identifying patients to enroll in “People Like Us!”
   e. Provide recommendations to the NKF National Office regarding legislative issues.

   - Input on draft of CMS Conditions for Coverage (CfCs) provided
   - Education provided to membership and RD community at large on the CfCs final regulations through webinar and FAQ document
   - Response filed to FDA to “Advance Notice for Proposed Rulemaking on Food Labeling” under Food Labeling: Revision of Reference Values and Mandatory Nutrients with recommendation to change labeling to add potassium and calcium on the Nutrition Facts Panel (NFP)
   - Supported FMC Advisory Opinion Request No R638 to provide oral nutrition supplements to patient during dialysis (letter sent to Office of the Inspector General on January 12, 2009)
   - Support of Texas Dietitian Staffing Ratio on February 19, 2009. CRN expressed its support of maintaining the current TX
| f. Participate in the development and implementation of NKF public policy initiatives through the National offices. | regulations regarding patient to RD staffing ratios of 1 FTE to 100 patients for all modalities.  
- EC member participating on NKF-NSRI committee  
- CRN Chair and Co-Chair attended NKF Phosphorus Consortium Feb 2012 where FDA and legal members discussed the process by which phosphorus could be added back to the NFP.  
- CRN Chair and Co-Chair attended NKF Phosphorus Consortium Feb 2012 to assist in guideline development for the CKD population. |
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| 6. Maintain and increase Council membership  
  a. Promote formation of new local Councils and maintain communication among existing Councils.  
  b. Explore additional membership services and benefits.  
  c. Identify and support members practicing in nephrology nutrition subspecialties. | Re-affiliation of local councils every 2 years  
- In 2008, 50 councils reaffiliated and 3 new councils formed: Ft. Worth CRN, Inland Northwest CRN, and CRN of Central NY  
- In 2010, 50 councils reaffiliated.  
- “Members Only” benefit on CRN Website (i.e. Electronic Pocket Guide)  
- Up to 12 units of free CPE units are offered through JREN  
- Membership promotions offering cost savings incentive for dues and SCM registration  
- Information sheet and FAQs developed for Councils when local offices and councils were brought in under National umbrella. Information regarding new CPU process for meeting reviewed by Region Representatives on individual calls. Chair and Co-Chair were available for additional questions, concerns, and problems during the transition. |
| 7. Maintain fiscal accountability within the NKF structure in support of CRN goals  
  a. Work cooperatively with the Health and Scientific Affairs Division and the Development Division of NKF.  
  b. Seek outside funding for projects when deemed appropriate | Fiscal accountability maintained. |