

**Special Points of Interest:**

- Media Tips
- Ask for a Raise
- Email Encryption
- Public Health Award

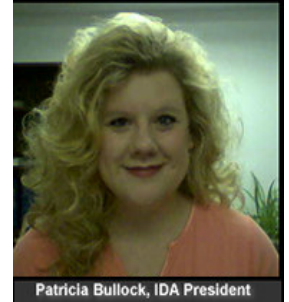
“IDA has already accomplished so much for its members though out the years, but the work continues, and therefore its members must continue to work for IDA”.

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**A MESSAGE FROM YOUR PRESIDENT**

**S**pring. What image comes to mind? The daffodils and tulips beginning to emerge from the thawing soil? The warm weather and sunshine beckoning you to outdoor activities? Perhaps you think of a coil of wire that when pressed down will jump back in place. Whatever image you brought to mind, a common factor in all of the above is ENERGY. The energy of life in flowers growing, the energy created from the sun's heat, and the energy created from activity and movement. I always look forward to Spring and the feelings it evokes. I think of all the activities in which I hope to participate and what I wish to accomplish. I am excited by this renewed energy from within.



Patricia Bullock, IDA President

IDA members who attended the recent strategic planning session in February had a chance to experience this energy. This dynamic group of engaged and committed members shared experiences, ideas, and opinions that created an electric energy within the room. The collective efforts of this group brought a new focus to IDA's priorities and the direction we wish to proceed in order to accomplish our goals.

A small, but energetic group of IDA legislative committee volunteers helped contribute to the success of the recent committee passing of Senate File 209 which would help increase fruit and vegetable consumption in our children, as well as support local family farmers.

A small, but energetic group of IDA volunteers helped Iowa to be a part of the upcoming regional MINK conference in Overland Park, Kansas, March 22-24th. The "Together Again" conference was a great educational opportunity for all. We were glad to see you there!

IDA has already accomplished so much for its members though out the years, but the work continues, and therefore its members must continue to work for IDA. This work ranges from small to large tasks, but all tasks have a large impact on the benefits received by all members. Thank you to all of IDA's volunteers, we look forward to moving forward with renewed energy.

*Tricia Bullock,*

IDA President

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## Get Involved in Public Policy

Jill Lange, IDA Legislative Chair

The Iowa Dietetic Association is taking the initiative to become more involved in public policy as an organization. Strategically, our organization is working to become more involved. Over the last few months a small group has been working to create a greater presence in the 2007-2008 legislature and to coordinate the efforts of Iowa dietitians. In January, Sue Roberts and Heidi Peterson provided testimony for the Health and Human Services Appropriations Subcommittee regarding Comprehensive, Affordable Health Care for all Iowans. On February 1<sup>st</sup>, Sue led a group of dietitians to the State Capitol to talk with legislators regarding important issues affecting dietitians. Now with the legislation in full swing many bills are being discussed affecting the careers of dietitians across Iowa and your help is needed!

Recently, we organized a legislative list serve. This list serve is being used to notify dietitians of upcoming bills and when local legislators need to be

contacted. We are currently looking for more dietitians who would be interested in being a representative of the IDA in their district. First, many of you may not know who your representatives and senators are in the Iowa Legislature. We have compiled a list of all members of the IDA and the districts they belong to. We can help identify your district. Now, you may say that you wouldn't know what to say. Well, we are working to provide those that are interested with talking points. We want everyone to provide the same message to our legislators depending on the bill being discussed. Work has been done but

"In January, Sue Roberts and Heidi Peterson provided testimony for the Health and Human Services Appropriations Subcommittee."

## IOWA HOSPITAL ASSOCIATION RELEASES PRICING INFORMATION on Iowa Hospital Charges

A new website from the Iowa Hospital Association provides free access to detailed information about the charges and services at Iowa Hospitals

The site, **Iowa Hospital Price-Point**, lets users see cost information for all types of inpatient hospitalization at any Iowa hospital. **Nutrition and Metabolic Conditions/Diabetes** is offered as one of the comprehensive service selections for comparing costs. The site also provides information on each hospital for three kinds of healthcare coverage: private insurance, Medicare, and Medicaid. The information allows users to see how hospitals charges compare to the amount of revenue they collect for services provided under the three above mentioned categories.

Users can compare hospital inpatient charges for up to four hospitals at one time. Inpatient charges can be compared based upon the severity of the illness within a specific service area.

Visit this website at: <http://www.iahaonline.org/links/ppintro.shtm>

“Using the Iowa Hospital Price Point website, the average cost for a 5-day eating disorder treatment stay in a central Iowa Hospital is \$9,412.”

### Importance of Encryption for Email Communication — Are You Compliant?

The two greatest security risks for email commonly include unauthorized interception of messages en route to recipient, and messages being delivered to unauthorized recipients. These risks in using the Internet are addressed in the HIPAA Security Rule's technical safeguards section, particularly:

**Person or Entity Authentication** - required procedures must be implemented for identification verification of entity or party requesting access to PHI. This means the identity of the person seeking information must be confirmed within the information system being utilized.

**Transmission Security** - addressable data integrity controls and encryption reasonable and appropriate safeguards.

Each healthcare organization using email services must determine, based on technologies used for electronic transmission of protected health information, how the Security standards are met.

Addressable specifications include automatic logoff, encryption, and decryption. Covered entities must also assess organizational risks to determine if the implementation of transmission security which includes integrity controls to ensure electronically-transmitted PHI is not improperly modified without detection is applicable. Encryption of ePHI is also addressable and not a requirement under HIPAA regulations, however, a heightened emphasis has been placed on encryption due to the risks and vulnerabilities of the Internet.

Ultimately, according to the Department of Health and Human Services, a covered entity can exercise one of the following options in regard to addressable specifications:

Implement the specified standard;

Develop and implement an effective security measure to accomplish the purpose of the stated standard; or

If the specification is deemed not reasonable and appropriate for the covered entity but the standard can still be met, then do not implement anything.

Reasonable and appropriate relate to each organization's technical environment and the security measures already in place.

Questions to Consider When Choosing an Email Service Provider

**When your organization is responsible for critical data such as protected health information**, choosing an email provider is more than a matter of trust. Does the email service provider build on the administrative, physical and technical safeguards while delivering to its customers:

- Solutions that meet or exceed HIPAA's Security Standards
- Protect data integrity
- Flexible, scalable services - no account is too small
- Administrative access to assign or change a user's password
- Controls to validate a user's access

*Continued on page 14*

# Ask for a Raise

and Be Ready with Replies to Objections!

RD Marketing Series Part 3 of 4

By Pat Katepoo, RD, The Salary Coach for Dietitians

An excerpt from the new Ready-for-a-Raise Workbook for Dietitians: <http://CareerCoachRD.com/ready.htm>

In this issue, we consider responses to the third common objection to expect:

**“I can’t give you a raise. You know this organization only gives COLA (Cost-of-Living Adjustment) increases.”**

While this excuse may in fact be organizational practice, it’s also a smoke screen. Think of it as a handy escape hatch for any boss who doesn’t want to challenge the status quo on behalf of an outstanding employee. And no doubt your boss is being pressured by a higher manager to keep costs down as much as possible; this will hamper any initiative to break with organizational norms.

On the other hand, your boss may be eager to advocate for your pay raise to keep you satisfied with your job. Or at least be open to the Plan B options you present in lieu of a pay raise. S/he knows that exceptions are (quietly) made.

If you have become so valuable that your boss would find it difficult to replace you, as outlined in Chapter 4 of the Ready-for-a-Raise Workbook for Dietitians, you can go forward and press your case.

So don’t let this objection stop you. It’s time for *you* to be that employee with negotiating know-how and leverage who works out a behind-the-scene pay raise.

Here are some suggested scripts to adapt if you are aiming for a merit pay raise.

*Yes, I understand that’s the practice here. Other than that obstacle, do you otherwise agree that I have earned a pay raise?... Thank you. I appreciate your recognition of the value I’m bringing to the job.*

As I’ve stressed in earlier issues, this introductory response, or a variation that matches your “voice,” should start virtually every reply before you continue. Here is a sampling of possible replies:

*Is it possible, given the measurable job accomplishments that I’ve just outlined, that we could work towards getting another job title or job classification that would bring me to a pay level which reflects my contributions? [Your boss’s reply to an “Is it possible” question is an indicator of how hard s/he is willing to advocate for you.]*

*Is it possible, given the expanded job duties that have been added since my last performance review, that we could work towards getting another job title or job classification that would allow a different pay scale?*

*Given the restraints of [employer name ]’s practices which don’t allow for merit raises, I wonder if, in light of the measurable job accomplishments that I’ve just outlined, you could arrange a bonus of say, \$\_\_\_\_\_, as a way to recognize my contributions.*

*I really like working here and want to continue contributing to the department’s goals. What would you do if you were in my place?*

*Since [employer name ]’s compensation practices don’t allow for the merit raise I’ve earned, I’d like to suggest a way that my job performance could be rewarded in a different way. [Negotiate for additional weeks of paid vacation leave.]*

*Since [employer name ]’s compensation practices don’t allow for the merit raise I’ve earned, I’d like to suggest another way of rewarding my job performance. Since time is money, here’s an innovative way for me to have more time instead of money. [Present your proposal for 10% fewer hours without a pay cut; that’s a day off every other week a 36-hour workweek. See [http://workoptions.com/pt\\_raise.htm](http://workoptions.com/pt_raise.htm) for more information.]*

*Since [employer name ]’s compensation practices don’t allow for the merit raise I’ve earned, I wonder if we could look at other ways to reward my job performance. For example, I’d like to attend [conference or graduate course] to [specific job skill improvement]. The total cost would be about \$\_\_\_\_\_. Would you be able to advocate for my professional development in that way? ... Then how about \$\_\_\_\_\_ of the cost? That doesn’t quite match the pay increase we agreed I otherwise have earned. I’d like to have the time off to attend [the conference] without taking from my paid time off bank of hours. [Propose this only if it’s normally deducted.] Can we agree on that as a way to partially recognize my contribution to [employer name]? (Use the “Approved & Paid” conference attendance proposal template available for free at <http://CareerCoachRD.com>.)*

Here’s another pay raise objection you might get:

**“I can’t give you a raise. You’re already at the top of the pay scale.”**

Look to the Summer issue of the IDA Bulletin for its replies.

The Ready-for-a-Raise Workbook for Dietitians is pre-approved by CDR as a self-study program worth 7 CPEs.

**Visit the IDA Website to purchase your copy today!**  
<http://www.eatrightiowa.org>

# What is New On the Web?

## WEBSITES TARGETING CHILDHOOD OBESITY

<http://www.nhlbi.nih.gov/health/public/heart/obesity/wecan/>

<http://www.aap.org/obesity/physeducation.htm>

<http://www.clocc.net/>

National Heart Lung and Blood Institute  
Department of Health and Human Services - National Institutes of Health

**Let's We Can!**  
Ways to Enhance Children's Activity & Nutrition

What's We Can? | Learn It | Live It | Get Involved | News

### Welcome to We Can!

**We Can!** or "Ways to Enhance Children's Activity & Nutrition" is a national program designed for families and communities to help children achieve a healthy weight. The program focuses on three important behaviors: improved food choices, increased physical activity and reduced screen time. **Read** more about the program.

**We Can!** provides families and communities just like yours with helpful resources including practical tips that you can start using today. **Learn** how your family can start **living** more healthfully today.

A variety of organizations have joined the **We Can!** community and are making a difference in the lives of families across the country. So far, more than 145 communities have joined **We Can!** **Discover** more about **We Can!** sites.

**Become a We Can! Site**

More than 145 community sites have joined **We Can!** including schools, YMCAs, and hospitals. **Sign up today** and begin making a difference in your area.

**Get We Can! Materials**

**We Can!** offers communities and families resources including new materials for healthcare providers and families. View **physician** and **parent** tip sheets.

**We Can! Spotlight**

**We Can!** has produced an 8-minute video, **We Can! and You Can! Tool**, about the program and preventing overweight and obesity for families (video requires Real Player).

**LEARN IT**  
Explore resources to help you understand how good nutrition and physical activity can improve your child's health.

**LIVE IT**  
Make smart food choices and stay physically active. Discover simple ways you can help your family adopt healthy habits.

**GET INVOLVED**  
**We Can!** involves families, schools, communities, organizations, and many other partners. Learn how you can join the **We Can!** movement!

American Academy of Pediatrics  
DEDICATED TO THE HEALTH OF ALL CHILDREN

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## Overweight and Obesity

News | Physician Education | Family Resources | Advocacy | Home

### AAP Resources

- A Parent's Guide to Childhood Obesity: A Road Map to Health**  
Help parents win the battle against childhood obesity! A Parent's Guide to Childhood Obesity examines both the physical and emotional toll of obesity on children and offers balanced, science-based weight management solutions for every age, from the prenatal period through the teenage years. It includes dozens of worksheets to help assess hereditary factors, environmental influences, behavioral issues, and more. Save up to 50% when you buy in bulk! To order, or for more information, visit [http://www.aap.org/bst/showdet.cfm?&DID=15&Product\\_ID=175](http://www.aap.org/bst/showdet.cfm?&DID=15&Product_ID=175)
- Obesity Presentations** (Please note: The following presentations are provided as a courtesy and do not represent official Academy policy. You may use the content in the presentation slides. However, please remember to reference the author and presentation.)

  - Type 2 Diabetes in Children and Youth** (Faculty: Francine Ratner Kaufman, MD, Paula Jameson, ARNP, MSN, CDE)
  - Comorbidities of Pediatric Obesity** (Faculty: William J. Cochran, MD, FAAP)
  - Obesity Basics 101: Role of the Pediatrician** (Faculty: Nancy F. Krebs, MD, MS, FAAP, Sandra G. Hassink, MD, FAAP)
  - Pharmacologic & Surgical Approaches** (Faculty: Nancy F. Krebs, MD, MS, FAAP)
  - An Ounce of Prevention is Worth a Pound: Shaping Habits that Shape Obesity** (Ohio Chapter, American Academy of Pediatrics, Ohio Department of Health, Ohio Dietetics Association)
  - Ounce of Prevention References**
  - Pediatric Obesity: A Huge Problem in the USA** (Faculty: William J. Cochran, MD)
  - Task Force on Obesity - Progress Report** (Faculty: Nancy F. Krebs, MD, MS, FAAP)
- Conference Reports and Archives** (click on the following links and scroll down to locate report)

  - Site Specific Approaches on the Prevention or Management of Pediatric Obesity** July 14-15, 2004, Hyatt Regency, Bethesda, MD
  - Modifiable Environmental and Behavioral Determinants of Overweight among Children and Adolescents** June 22-23, 2004, Holiday Inn Select, Bethesda, MD
- Obesity Coding Fact Sheet** **Includes 2006 ICD-9-CM codes effective 10/1/05** - The Task Force on Obesity, the Committee on Coding and Nomenclature, and the Private Sector Advocacy Advisory Committee developed an Obesity Coding Fact Sheet to help pediatricians and other health care professionals with coding for obesity-related health care services. The Academy presents strategies and a template letter for pediatric practices to handle carrier denials and contractual issues in a separate document accessible from the AAP Private Sector Advocacy web page on the Academy's **Member Center web site** ([www.aap.org/mcc](http://www.aap.org/mcc)). For questions regarding coding, please contact the AAP Coding Hotline at [aapcodinghotline@aap.org](mailto:aapcodinghotline@aap.org). For questions regarding reimbursement and coverage, please contact Lou Teranova at [teranova@aap.org](mailto:teranova@aap.org)
- AAP/CDC Growth Charts**
- AAP News Article Reference List**
- CME Opportunities**
- Clinical Reference Manuals**
- Policy Statements, Clinical Reports, & Technical Reports** (includes clinical recommendations)
- Public Service Announcement**
- Research**

  - Health Lifestyles Pilot Study**
  - AAP Center for Child Health Research**

### Conferences and Meetings

- AAP Events**
- 2004 Peds21 "Fact, Fiction, or the Future of Pediatric Obesity" (Summary reports available in PDF file)**

Consortium to Lower Obesity in Chicago Children

# clocc

Taking on childhood obesity in Chicago

childhood overweight overview

childhood overweight in chicago

resources for partners

news & events

find programs

upcoming events:  
Dia del Niño 2007  
Chicago Moves Day  
SAY Chicago Town Meet

Click here to see these events and more

what's hot:  
Print 5-4-3-2-1 Go! Fly  
View our Annual Report  
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about CLOCC contact us

**Not sure where to begin?** Choose what fits you best:

- Community organization
- Project partner
- Working group member
- Corporation

# HIGH FRUCTOSE CORN SYRUP

## WHAT YOU REALLY NEED TO KNOW PART 1 OF 3

**A**mericans have an insatiable sweet tooth. Our consumption of sugar – in all its various forms – increased almost 4-fold during the twentieth century. By 2005, we were eating and drinking 149 pounds of sugar per person per year, roughly 1 cup per day, much of it unconsciously. We drink it in soda-pop, munch on it in crackers, and even medicate ourselves with it in cough and cold remedies. We consume more than 41% in the form of high fructose corn syrup (HFCS).

High Fructose Corn Syrup is a corn syrup-based sweetener developed almost 40 years ago and used widely in the food and beverage industries as an alternative for cane sugar since the early 1980s.

A controversy has been brewing over HFCS in recent years, due in large part to the growing obesity rate and interest in natural food ingredients and processing methods in the U.S. There are three distinct perspectives involved in the HFCS debate. The sweetener is viewed differently by those in the food industry, medical community, and natural food consumers. This three-part series will examine the controversy from each perspective. In this first installment, we consider the sweetener from the perspective of a food scientist.

<b>Monosaccharide:</b> the simplest form of sugar	
Glucose	also referred to as blood sugar; provides energy to the body's cells
Galactose	important for healthy bacteria in the intestinal tract
Fructose	the sweetest of the monosaccharides
<b>Disaccharides:</b> two monosaccharides bonded together	
Sucrose (fructose + glucose)	cane or table sugar
Maltose (glucose + glucose)	brewing sugar
Lactose (glucose + galactose)	milk sugar

A general explanation of carbohydrates helps in the understanding of HFCS. The table below lists the basic forms of carbohydrate.

HFCS may be found in these items:
Soda
Fruit drinks
Bread and bread-containing products
Cereals
Crackers and cookies
Condiments and sauces
Yogurt
Ice cream and frozen desserts
Over-the-counter cough and cold remedies

Historically, cane sugar, or sucrose, was the sweetener of choice; it was readily available and the sweetest form of sugar. Corn syrup consists primarily of glucose, so has a less intense sweetness than cane sugar. HFCS gained in popularity because it proved a practical substitute to cane sugar:

HFCS has a similar sweetness to honey and sucrose (cane or table sugar);

HFCS is liquid, so easier to blend and transport than cane sugar;

HFCS improves moisture retention in food products;

HFCS has a longer shelf life than cane sugar;

HFCS has better stability than cane sugar in acidic foods, such as fruit and soda.

HFCS is the product of an enzymatic process to increase the fructose content of corn syrup, thereby imparting these taste and function benefits. Ultimately, HFCS breaks down into glucose and fructose in nearly equal amounts when digested; corn syrup, on the other hand, breaks down into glucose only.

### Conclusion

HFCS is a functional food ingredient. Presently, it accounts for about 10% of the world's sweetener consumption in a wide variety of processed food products. Trace amounts are used in commercially-baked bread, while greater amounts sweeten beverages like soda and fruit-flavored drinks.

Food manufacturers using HFCS in their formulations will face a new challenge in 2007 and beyond. As interest in the bio fuel industry grows, corn use is expected to shift from toward ethanol-based fuels. This is expected to drive up corn commodity prices. Consumers may expect to see an increase in the prices of their favorite HFCS-sweetened foods and beverages.

## with Farmers & Children, Fruits and Vegetables Proposal to Senator Harkin for 2007 Farm Bill

**P**roposal: Increase fresh, regionally-grown foods in the Fruit and Vegetable Program through pilot projects that focus on local strategies that build stronger connections between local farmers (new, transitioning, immigrant, small and mid-sized) and schools.

**Background:** Only about 20% of children eat the recommended five servings of fruit and vegetables per day. While at the same time, children's intake of foods with minimal nutritional value, such as soft drinks, are skyrocketing. Recent data indicates that 13 to 18 year-old boys who consume soda, consume an average of 30 ounces of soft drinks per day, while girls consume an average 23 ounces per day. High fructose corn syrup is the preferred sweetener in not only soft drinks, but in other beverages and processed foods. This subsidized commodity is a likely contributing factor to the obesity epidemic.

In operation for the last four years in several states, the Fruit and Vegetable Program (FVP) has shown success in increasing children's intake of fruits and vegetables resulting in healthier eating habits for a lifetime. In 2002-2003, schools provided fresh and dried fruits and fresh vegetables to all students at no cost at 25 pilot schools in Indiana, Iowa, Ohio, and Michigan and the Zuni Indian Tribal Reservation in New Mexico with an appropriation of \$6,000,000. Administered by the USDA Food and Nutrition Service, the program's flexibility allows schools to determine how and when to incorporate these foods into the day as snacks.

The success and political enthusiasm for the program led to Congress converting the FVP from a pilot program to a permanent program in The Child Nutrition and WIC Reauthorization Act with an expansion in 2004 to 8 states and 3 Indian Tribal Organizations. In 2005-2006, Congress again appropriated funds to expand the FVP to include a total of 14 states. The states currently participating include Connecticut, Idaho, Mississippi, New Mexico, North Carolina, Pennsylvania, Texas, Utah, Washington, Wisconsin, and the original four- Indiana, Iowa, Ohio, and Michigan.

The FVP regulations currently allow purchasing regionally-produced food. However, most schools continue to order fruits and vegetables from a distributor and are not connecting with farmers within their communities or region to provide fresh fruits and vegetables for the FVP. What is needed is technical assistance to schools in buying regionally-produced food and strengthening incentives, technical assistance to farmers to specifically produce fruits and vegetables for the FVP, and development of the infrastructure needed for FVP to use regional foods. Provision of these services would result in:

1. healthier students as a result of consuming more great tasting, fresh, regionally-produced fruits and vegetables;

2. stronger local economies with increased jobs at both farms and schools;
3. more stable agricultural infrastructure development such as formation of farmer cooperatives;
4. renewed rural vitality;
5. increased community food security, especially for low income families;
6. more diverse agriculture;
7. increased regionally-produced fruit and vegetables.

### Proposed Farm Bill Policy:

Expand the current Fruit and Vegetable Program to include:

Requirement of a Farm-to-School coordinator in each state that has FVP projects to work directly with schools, state department of education, state department of agriculture, local farm groups, cooperatives, and food policy councils.

- Provision of technical assistance and incentives (e.g., on-farm entrepreneurship, micro-credit, or development of infrastructure such as farmer cooperatives) to farmers (new, transitioning, immigrant, small and mid-sized) to support the increased demand for fresh fruits and vegetables for the FVP. Also important:
- Regionally-produced food must be sustainably-raised with little or no pesticides, herbicides or fungicides in an effort to decrease pesticide exposure to children, with a preference for organically-grown fruits and vegetables.
- Assistance for farmers and/or schools for increased labor costs with processing regionally-produced food (small scale processing).
- Provision of technical assistance to schools to increase percentage of regionally-grown products purchased as part of the FVP.
- Schools that provide regionally-produced food would integrate nutrition education in the curriculum including learning more about the farms in which the food is grown.
- Research for a strong evaluation component of FVP to look at health status of students, local economic factors, community indicators, etc.



**T**he members of MVDA take a winter break with no business meetings during December or January. We did have a social gathering at TGI Friday's in Moline along the Mississippi River which was a great way to get acquainted with some new members plus getting up to date with old ones. The cookie exchange and sharing of personal activities was a nice change of pace.

Our members have been fortunate to have some extra CPE opportunities this year with teleseminars hosted by MVDA as well as Genesis Medical Center and Diabetes Center.

The daytime teleseminars combined with lunch

allows some of our members who can't attend the night meetings to take advantage of keeping up to date with trends and advances in our field of work.

Our officer and nominating committee ballot was recently announced and we are delighted to have volunteers willing to carry on the MVDA activities. We thank Stacy Mitchell, Jenny Garcia Vicki Bean for agreeing to be on the ballot. Other activities include a pending sponsorship of a nutrition exhibit at the Bettendorf Family Museum. We are also pleased to have the active involvement of member Jody Kealey on the IDA legislative team. We look forward to a pharmacist presentation in March and to IDA member Nadine Fisher presenting in April on the resources of the ADA website

## Family Diabetes Education Weekend

**Registered Dietitians and senior nutrition students are encouraged to volunteer** to be on the Camp Hertko Hollow staff for the summer camp weeks of June 24-30 or July 1-7. Contact Camp Director Vivian Murray at 888-437-6852 or [CampHertkoHollow@aol.com](mailto:CampHertkoHollow@aol.com) for more information. Vivian is a dietitian and graduated from ISU forty years ago. She is trying to contact all former campers and staff members, so please provide updated information if you attended diabetes camp! You can sign-in on our website on the Alumni section for a free drawing of Camp Hertko Hollow logo items.

### 2007 is the 40th year for Camp Hertko Hollow and there are numerous activities scheduled:

- |              |   |
|--------------|---|
| Sat, June 2  | Kids Family Fishing Day at Gray's Lake in Des Moines with KCCI's Dan Young  |
| Sat, June 16 | Family Festival with Justin Roberts concert at SportsPlex West in Waukee  |
| Thu, June 28 | Alumni campers & staff of Camp Hertko Hollow – 40 <sup>th</sup> Year Celebration event at Y-camp<br>Lloyd Knight providing complimentary concert to campers |
| Fri, June 29 | Country singer Lloyd Knight concert at Stony Creek Inn in West Des Moines   |
| June 24-30   | Session A for Camp Hertko Hollow for Grades K-5   |
| July 1-7     | Session B for Camp Hertko Hollow for Grades 6-12  |
| Sat, Aug 25  | Car Wash in Des Moines  |
| Fri, Sept 7  | Marvin & Rose Lee Pomerantz Legacy Ball at Marriott Hotel in Des Moines   |
| Sun, Sept 9  | One-man play by Jim Turner, nationally recognized comedian & Iowa native  |
| Mon, Sept 10 | 40th Year Celebrity Golf Fundraiser at Waveland Public Golf Course in Des Moines  |

Registered Dietitians and senior nutrition students are encouraged to volunteer to be on the Camp Hertko Hollow staff for the summer camp weeks of June 24-30 or July 1-7. Contact Camp Director Vivian Murray at 888-437-6852 or [CampHertkoHollow@aol.com](mailto:CampHertkoHollow@aol.com) for more information. Vivian is a dietitian and graduated from ISU forty years ago. She is trying to contact all former campers and staff members, so please provide updated information if you attended diabetes camp! You can sign-in on our website on the Alumni section for a free drawing of Camp Hertko Hollow logo items.

## Excellence in Public Health

### Pat Hildebrand

Awarded in April 2007

by the Bureau of Nutrition & Health Promotion



**Pa**t Hildebrand is an exemplary Public Health Nutritionist who has been WIC Coordinator for Mid Iowa Community Action, otherwise known as MICA, for 20 years. She oversees WIC services originating at sites in Marshalltown and Ames as well as satellite clinics in an eight county region and directs a staff of nine dietitians, seven nurses and ten support staff. Under Pat's outstanding leadership, MICA's service area grew from 5 to 8 counties and WIC participation in the Mid-Iowa Community Action area has increased by 20% since 2001 WIC. With growth, new programs such as Maternal & Child Health have come under her supervision. Pat Hildebrand is an exemplary Public Health Nutritionist who has been WIC Coordinator for Mid Iowa Community Action, otherwise known as MICA, for 20 years. She oversees WIC services originating at sites in Marshalltown and Ames as well as satellite clinics in an eight county region and directs a staff of nine dietitians, seven nurses and ten support staff. Under Pat's outstanding leadership, MICA's service area grew from 5 to 8 counties and WIC participation in the Mid-Iowa Community Action area has increased by 20% since 2001 WIC. With growth, new programs such as Maternal & Child Health have come under her supervision.

***Pat is not afraid of new challenges.***

**She is always willing to take on additional tasks for a good cause. Besides WIC and Title V Programs, she oversees Head Start Nutrition Services, Child and Adult Care Food Program, a Community Dental Program and BASICS grants. In addition, she represents her agency in community activities in the 8 county area, and promotes the involvement of her staff. She has provided valuable insight when participating on state WIC committees and served as President of the Iowa Dietetic Association.**

***In the pursuit of excellent service, Pat has been known to add staff for a "triple booked" clinic*** or to schedule an extra clinic on an office day to accommodate a larger numbers of people needing appointments. She understands that WIC participants may have immediate needs such as shelter, family safety, or food security that require quick action and communication with community partners.

***Pat creates opportunities for her staff by demonstrating her trust in them and challenging them to take on new responsibilities.***

A former staff recalls how Pat enlisted her to attend a "Hometown Health" meeting, ultimately opening up new doors for that staff person. That meeting mushroomed into involvement with the local board of health, Empowerment, breastfeeding coalitions, child care advisory and CHNA/HIP. Pat empowers her staff to be involved in community activities, thus enhancing their jobs and helping them to see how WIC "fits" into the community.

***Pat welcomes the collaboration of other agencies and their presence at WIC clinics.***

MICA WIC clinics often include representatives from Head Start, the Family Development and Self Sufficiency Program, home visitation programs, substance abuse prevention agencies, and the Maternal and Child Health programs. This "one stop shop" approach has improved service to WIC participants.

***Pat is compassionate, fun, flexible, trusting and demanding.***

She cares deeply for staff and for WIC participants. Because Pat goes above and beyond for WIC and public health nutrition and for her talented leadership and guidance while fostering the professional growth of staff,

**The Bureau of Nutrition and Health Promotion is proud to give this award to Pat Hildebrand.**

# Do you want to **EXPAND** your practice to include a new skill?

Do you want to change your specialty area?

**ADA** has a tool to help you!

**Ha**ve you wanted answers to scope of dietetics practice questions? Questions such as:

- Do you need clarification about whether a new RD is qualified to write TPN orders?
- Do you want to add bedside dysphasia screening to your scope of practice?
- Do you want to change from one dietetics specialty area to another?
- Does a physician question validity of RD documentation in the medical record?

How can an RD request privileges to write orders for nutrition-related laboratory tests? For tube feedings?

ADA's Scope of Dietetics Practice Framework (SODPF) resources and decision analysis tool can help you to expand your **individual** scope of practice with confidence.

## Did you know that everyone has an individual scope of practice, much like a unique fingerprint?

Each RD's and DTR's individual scope of practice varies by his/her: education; training; credentials; level of experience, skill and proficiency; area of expertise; licensure or certification laws; applicable state and federal laws and regulations; job description; facility/ employer policies and procedures; and third party payer requirements. As you can see, no two practitioners will have the same scope of practice. Since one answer does not fit all, ADA has developed SODPF resources and a decision tool. All together, these materials assist members in assessing competency, supporting expansion or advancement of practice, defining individual scope of practice, and answering other questions.

### Utilization of the Framework:

- Promotes safe practice
- Contributes to career development

### What is the SODPF?

ADA's SODPF is an umbrella for the resources needed to determine individual scope of practice. The Frame-

work includes an algorithm (Decision Analysis Tool) and suggested resources. All of these resources are located for members on ADA's website ([www.eatright.org](http://www.eatright.org)) via the Practice Page.

To use the SODPF web page,

- Review the Overview and Framework diagram
- Gather supporting documents (ADA documents are found on this page)
- Complete the Decision Analysis Tool
- Refer to any pertinent definitions in the Definitions of Terms (Section 4B).
- Review the Frequently Asked Questions & Answers, such as, the reasonable and prudent test (Appendix D)
- Use the Decision Tree in conjunction with the Decision Analysis Tool or the Tool by itself

Check the case studies (Appendix E & F) for examples of the process used to find answers to specific questions

### What's next?

Continual changes and developments in healthcare knowledge, medical technology, and federal or state laws necessitate that ADA continue to equip its members with current tools to operate. To this end, ADA regularly reviews and updates the Framework's Definition of Terms and other decision making tools and resources. The SODPF Website contains the most current information.

Watch for future Framework articles in this newsletter—up next: Utilizing standardized terms to describe your practice (ADA Definition of Terms-Section 4B of the SODPF).

*The SODPF was developed by the ADA Practice Definitions Task Force with input from the House of Delegates, the Commission on Dietetic Registration, and the Board of Directors. It was approved and published in 2005.*

# ADA Member Shines at Senate Hearing

**T**eresa Nece, food and nutrition director of the Des Moines Public Schools shared her experiences operating the Fresh Fruit and Vegetable Program this week with an influential audience: the Senate Agriculture, Nutrition and Forestry Committee. She shared the accomplishments of the program, and helped senators understand what resources schools need for the program to be implemented successfully.

“The fruit and vegetable program has been remarkably successful, not just in fulfilling its stated purpose of increasing fruit and vegetable consumption, but also in helping to create something much bigger – namely, a culture of wellness and health promotion,” she said.

Nece, a member of ADA’s Legislative and Public Policy Committee, also fit in a request for improving school meals. “I would like to see school meal programs enhanced with additional funding to support infrastructure needs to facilitate increased offerings of fresh fruits and vegetables as a part of the school breakfast and lunch programs,” she said.

## Now In Press!



## Simplified Diet Manual 10th edition

Edited by Andrea Maher

NOW Published / 216 pages / ISBN: 9780813818788 / Hardback / UK£24.99 / US\$44.99 / AUS\$68.95

For more information or to buy this book visit

[www.blackwellpublishing.com/9780813818788](http://www.blackwellpublishing.com/9780813818788)

Hospitals and long-term care facilities in every state and many foreign countries use the *Simplified Diet Manual* to assist them in planning nutritious, appealing, and cost-effective meals that are modified to meet the dietary requirements of individuals with special health needs.

While reflecting the dynamic nature of the field of nutrition, the Tenth Edition of the *Simplified Diet Manual* retains its basic purpose: providing easy-to-understand, fundamental nutrition guidelines for normal and therapeutic diets. The concise, user-friendly format of this useful resource helps dietitians and foodservice managers succeed in their vital role in maintaining nutritional health and well-being of clients in long-term care facilities, hospitals, and outpatient service centers.

### **Changes to the Tenth Edition of the Simplified Diet Manual are many and include:**

- Revision of the Guidelines for Diet Planning based on Dietary Guidelines for Americans 2005 and USDA's MyPyramid
- Update on Meeting Nutritional Needs of Older People, referencing the American Dietetic Association's position: Liberalization of the Diet Prescription for Older Adults
- Inclusion of National Dysphagia Diet tables (© 2002, American Dietetic Association)
- Addition of the Bariatric/Gastric Bypass Diet
- Addition of the Modified Renal Diet
- Addition of Food Allergies and Intolerances
- Revision of Exchange Lists for Meal Planning (© 2003, American Dietetic Association)

Inclusion of study guide questions at the end of each chapter for training foodservice employees in health care facilities that are served by a registered dietitian or dietary consultant.

# Tips on Working with the Media

Nikki Stahr and Lisa Krausman,  
IDA Media Co-Chairs

**A**s various nutrition topics continue to be of interest to the media, it is likely at some as a dietitian you will be asked to do an interview with a member for the media. Listed below are some important skills to remember as you work with media members.



**Prepare** – When asked to do an interview, make sure you ask a couple key questions to help you prepare for the interview. Ask the reporter what type of deadline they are facing to ensure your schedule will accommodate your interview. Ask what the subject of the interview is and for some sample questions. If you are not comfortable with the subject matter, try to recommend them to another dietitian who may be more knowledgeable in that area.

**The Message** - Think of two to three main points you want to make about the subject and clearly start these messages early in the interview to help control the tone and message of the interview. Additionally, support these key messages with material that will make it memorable for the reporter and the listener and repeat these messages throughout the conversation. Try to avoid too much technical jargon and keep the information you are offering on a basic level so more people will understand the message you are conveying. Be confident and articulate with what you are saying. Use inflection and speak enthusiastically regarding the subject.

## Quick Tips for Media Interviews:

**Keep it Simple**

**Make It Relevant**

**Develop Impact Statements**

**Repeat, Repeat, Repeat**

For more tips on working with the media, check out the ADA website at: [www.eatright.org](http://www.eatright.org) and click on the

# Delegate Report

## Spring 2006

Dr. JANICE A. FISHER, RD,LD,PHD,CDE,BC-ADM

**Th**e ADA HOD met in Chicago in March, 2007 to have dialogue on several issues, which are described below. I encourage ADA members to access the ADA website to read reports about each topic in greater detail. The ADA website is [www.eatright.org](http://www.eatright.org).

A presentation was made to delegates regarding Sustainable Food Systems by Angie Tagtow, MS, RD, LD of Iowa and Dianne Lollar of Alabama. The Sustainable Food System Task Force Committee also included Iowa dietitian Susan Roberts, JD, MS, RD, LD. The committee has published a Primer on sustainable Food Systems and Emerging Roles For Food and Nutrition Professionals. I have two copies of this report and am willing to share them with interested dietitians or to report on the content at district meetings. The material is also available on the ADA website.

A mega-issue discussed was regarding the Image of Dietetics. HOD members identified many strategies that dietitians and diet technicians, registered, can employ to draw attention to their education, training, flexibility, and accomplishments in many venues. Increased salaries and respect will presumably follow recognition of the abilities and capabilities of dietetic professionals. We should all consider how we can promote nutrition professionals in the settings in which we work or in which we can influence practices.

Delegates participated in a visioning exercise that will be shared with the Phase 2 Future Practice & Education Task Force regarding the future practice of the profession of dietetics. Please read the latest Task Force report on the ADA website. The Phase 2 Task Force is expected to release a report to the HOD prior to FNCE in Philadelphia. It is expected that the Task Force will outline the changes to the future educational tract for nutrition professionals that ADA will endorse. ADA has stated to the HOD that changes will be made and the work being done by this task force and CADE are very important to the future of our profession.

Delegates discussed the processes that ADA utilizes to monitor Federal and State legislation that may impact dietitians. ADA maintains an active Public Policy Office in Washington, DC which can assist states in planning strategy regarding legislative issues. ADA members are also encouraged to contribute to the ADA PAC. Donations to members of congress assist ADA staffers in getting access to appropriate people to discuss potential legislation. Senator Edward Kennedy is being honored by ADA for his support of issues beneficial to dietitians.

And to end on a positive note, ADA is proud to announce that the FNCE meeting in Hawaii was a great success and generated a profit, rather than a projected loss of revenue. ADA membership is also higher than it has been in several years. Active membership has increased slightly, as well as student membership. ADA expenses were also tightly controlled this year, and as a result, the financials are in very good shape.

**“A**DA is proud to announce that the FNCE meeting in Hawaii was a great success and generated a profit, rather than a projected loss of revenue. ADA membership is also higher than it has been in several years. “

# Email Encryption

## Importance of Encryption for Confidential Communication

*Continued from page 3*

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|---|---|
| <ul style="list-style-type: none"> <li>Audit controls to track user access and file access</li> <li>Allow access to users based on role or function</li> <li>Automatic log off after specified time of inactivity</li> <li>Data transmission security</li> <li>Unlimited document or email transfer</li> <li>Ability for encryption</li> <li>Emergency access for data recovery</li> <li>Minimal server downtime</li> </ul> | <ul style="list-style-type: none"> <li>Secure data back up and storage</li> <li>Secure data disposal</li> <li>User friendly, web-based access without the necessity of third party software</li> <li>Privacy in not selling or sharing its client contact information</li> <li>For more information on HIPAA email requirements visit:<br/><a href="http://www.hipaadvisory.com/action/ecommm.htm">http://www.hipaadvisory.com/action/ecommm.htm</a></li> </ul> |
|---|---|

## Continuing Education

Opportunities			
Date	Meeting/Resource	Place	Contact
YOUR	NEXT	EVENT	HERE!
May 16, 2007	Breastfeeding: Critical Thinking Leads to Enhanced Support	Des Moines, IA	<a href="http://www.iowahealth.org/info">www.iowahealth.org/info</a>
June 6th, 2007	Medications, Herbals, and Breastfeeding	Rockford, IL	(815) 226-2100
June 7-10, 2007	ADA Leadership Institute	San Diego, CA	<a href="http://www.eatright.org">www.eatright.org</a>
August 2-3, 2007	2007 Governor's Barn Raising Conference	Des Moines, IA	Meredith Field <a href="mailto:meredith-field@uiowa.edu">meredith-field@uiowa.edu</a>
September 29 October 2, 2007	FNCE 2007 - ADA Food and Nutrition Expo	Philadelphia, PA	<a href="http://www.eatright.org">www.eatright.org</a>
November 6-7, 2007	IDA Fall Conference	Ames, IA	<a href="mailto:DuncanGold-smith.Diane@iccsd.k.12.ia.us">DuncanGold-smith.Diane@iccsd.k.12.ia.us</a>



# From Your Editor:

Welcome to the IDA Spring Bulletin. In this issue you will find a variety of information that you really **need to know!** Topics range from legislative activity and proposed bills to email encryption and high fructose corn syrup. There should be something of interest for everyone. **A special congratulations to**

**Pat Hildebrand** our former IDA President for the **Excellence in Public Health Award**. Pat has been a pioneer in many ways for our profession and it is a pleasure to know and work with her. Finally, don't forget to check out the new websites on childhood obesity featured in this issue too. We have a growing problem here in Iowa and across the nation related to increasing numbers of overweight children that we need to address as **Nutrition Experts across the state**. Those websites might give you some new ideas on how Iowa can improve and resolve this important public health issue. I look forward to hearing from you with articles and ideas for future issues of **The Bulletin**.

## Whole Health

### Consider participating in the:

**Healthways Whole Health Networks**, a leading national network of over 40,000 Complimentary and Alternative Medicine (CAM) practitioners. WHN works with health plans and associations covering 90 million lives nationwide. There is no fee for joining this plan and the only requirement is completing a short application and extending at least a 10% discount to the members.

For more information contact:

**Bill Walton**

(800) 274-7526

Direct: (703) 964-0453

<http://www.wholehealthprog.com>

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#### ADVERTISING POLICY

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Monica Lursen, RD

27924 Butler Center Road

Clarksville, IA 50619-9253

319-885-6557

[lursen@netins.net](mailto:lursen@netins.net)

#### IDA Bulletin Deadlines

Please submit your articles for publication in the next IDA Bulletin to :

Nadine Fisher, IDA Bulletin Editor

#### Electronic submissions are required.

Guidelines for submission can be viewed at :

<http://nutritionnetworks.com/idabulletin.htm>

Please send articles to:

[editorIDA@nutritionnetworks.com](mailto:editorIDA@nutritionnetworks.com)

The four yearly deadlines are:

Feb 15, May 15, Aug 15, and Nov 15

If you are interested in serving on the Internet Committee please email me or call me during the day at:

319-356-6040 X140

For information on advertising in the Bulletin or on the IDA website, please contact Monica Lursen (email below). The following information is relevant to determining advertising fees:

**Non-profit groups relating to IDA/ADA** are provided free advertisement space. The size of the ad may be altered at the discretion of the editor. (Example: ADA Foundation, Practice Groups)

- **Non-profit groups not relating to IDA/ADA** pay 50% of the advertisement rate ( Example: Iowa State Press, educational facilities, IDA/ADA Members)

- **Profit groups or organizations** representing profit groups and groups not related to IDA will pay 100%. (Example: Hawkeye Foods, Martin Brothers) This policy includes ads for products, services, books and educational materials, as well as classified ads.

Meeting announcements are listed free-of-charge as space allows and at the discretion of the editor

Advertisement fees are determined by IDA and its Executive Director. A current schedule of fees may be obtained by email or US mail:

[lursen@netins.net](mailto:lursen@netins.net) or,

Monica Lursen, IDA executive Director  
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