Out-going President’s Report

by Kimra Warren Hawk, RD, LD

Dear ODA members,

This marks the end of the 2006-2007 calendar year for ODA. This also marks the end of my term as President. I first started with ODA working on the creation of the ODA cookbook, next I was the 1997 annual meeting program chair, and then as treasurer. In 2003, I took over early as President when the president Kathy Ellis became ill. There was something happening that year as I was diagnosed with metastatic breast cancer seven years after my initial diagnosis. I received much support from ODA members during my treatment and recovery.

In 2005, the ODA nominating committee had trouble finding someone to run for president-elect and I had trouble saying “no” so I said, “Yes”. Soon after I started my term as president-elect, current President, Stacy Lofton, made the difficult decision to resign and I started my term of president 10 months early.

Over the last 4 ½ years I have had many special people that have given me support in my leadership role that I would like to thank including Mary Baron, Sonja Connor, Ann Goetze, Terese Scollard, Mary Cluskey, and Melva Atkins. I also want to thank my co-workers at St Vincent who have been my sounding board and support. Others who I could also count on include Edie Leonard and Connie Evers. There are so many more of you as well who have leant your support to me and ODA.

I look forward to supporting our new leaders Victoria Warren Mears and Andi Markell. I will con-

In-coming President’s Report

by Victoria Warren-Mears, PhD, RD

What Is Your Vision for ODA?

Gratitude

The hardest arithmetic to master is that which enables us to count our blessings. - Eric Hoffer, Reflections on the Human Condition

I am grateful for those who are entering elected and volunteer positions in June. I am looking forward to continuing to work with Andi Markell, President-Elect, Monica Hunsberger, Secretary, John Gobble, Treasurer, Mary Cluskey, Delegate and our team leaders; Jenny Vannoy, Sarah McCormick, and Nancy Becker. Another crucial member of our team is Julie Hood, our Member-at-Large. We look forward to an energizing year of service to you, our members.

Vision

Your vision will become clear only when you look into your heart. Who looks outside, dreams. Who looks inside, awakens. - Carl Jung

I envision an exciting year this year. Just a few of the projects that we have coming up are:

- Five ODA sponsored ADA teleconferences for various areas in Oregon. As a member service, ODA will pay for teleconferences for our members to attend at no cost. We hope that this will be of particular assistance to those of you who live in Southern and Eastern Oregon to obtain continuing education opportunities.

- Putting the ADA nutrition care manual on the ODA web site for members to use. Oregon will
continue to be very involved as Past President as I need to update all the policy and procedures!

It has been a fun, frustrating, powerful, tiring, energizing, supportive and rewarding journey. I encourage you to also experience some of the benefits I have by also saying yes in whatever way you can. Our Policy, Member and Public teams are looking for committee members so contact Nancy Becker, Sarah McCormack or Jenny Vannoy. Join the Portland or Willamette Dietetic Associations if you live in these areas. If you live outside these districts then contact Member at Large, Julie Hood, and help arrange an ADA teleseminar or other activity for your community. Andi Markell would welcome help planning for next year’s annual meeting. These are just a few of the many ways that you can say “yes” and get involved with ODA.

I thank you Oregon Dietetic Association members.

Kimra Warren Hawk, RD, LD
Out-going President

I would especially like to thank Kimra Hawk, out-going president of ODA for all of her work over the past years. Kimra has served as president of the ODA through several terms. I am thankful for her dedication to ODA and willingness to serve. I also wish her time for relaxation and personal pursuits as she moves into the Past - President role.

If you would like to be involved in ODA projects, please feel free to contact me (vwarrenmears@npaihb.org or 503-416-3283)
We are only a vital organization when all of us contribute.

Victoria Warren-Mears, PhD, RD
In-Coming President

Delegate’s Report
by Mary Cluskey, PhD, RD
ODA Delegate

Dear ODA Members:

We all look forward to summer; vacationing with family, long days and the fabulous sunshine that we get each year. I am sorry to have missed those of you that were not able to attend the ODA conference, when I presented at the Annual Business Meeting at the luncheon on Friday.

I spoke about the directions that the association is striving to move in as we look toward the future of dietetics. What lies beyond the next 10 years for the profession is an important consideration as we think about our careers and the inevitability of change. The nature, location and methods for our work will be very different than it is now, even in that very short time frame.

ADA continues to work toward maintaining our position of dietitians as the food and nutrition experts. This challenge becomes greater as the field diversifies, and as many professionals with whom we interface will be both competitors and collaborators in the world of work and in the eyes of the public. Looking at the positions in the future was the task of our last
HOD meeting. We projected many new sounding titles for those positions: Corporate Nutritionist, Tele-health Homecare RD, Wellness Nutritionist, Obesity Management, and Community Nutritionist. The changing face of health care will likely mean an important change in hospitals as historically the primary employers for RDs. The projected skills sets of primary importance for the future include: communication, cultural competence, scientific base, behavior and culinary science, food and nutrition, public policy, critical thinking and management systems.

Image and marketing are key to positioning ourselves and how we are viewed by the public. As individuals it is CRITICAL that we all make every effort to promote dietetics professionals in the most positive light and with respect to our expertise. Those that stand in line next to you in the grocery store line, ride an elevator or that you sit next to at your child’s soccer game provide an opportunity to promote what dietitians do and what we have for expertise. State affiliates, DPGs and other professional subgroups should establish plans for promotion of the profession by finding strategies and opportunities to do that. One state delegate at HOD described how their group had purchased several stones along a major tourist pedestrian walkway and the stones were inscribed with food and nutrition messages and their state affiliate name. We are a huge tourist area, we should think about finding an opportunity to establish a permanent promotional display for ODA.

And, above all Public Policy is key. It is important to be recognized as the expert when decisions are made that impact the nutrition of the public and/or about the food supply. We should be there, give testimony, contact and communicate with decision makers and policy makers. There are MANY people out there giving input into policy that share a more limited perspective on food and nutrition. No one should be louder or be taken more seriously by our legislators than dietetics professionals.

But, it takes US and it takes YOU. We cannot expect anything to happen if we are not part of the effort. So, the next chance you get, promote dietetics, and remember also: We are respected now, but we are not always heard. Speak up, it will do you good.

Have a great summer.
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ODA Award Winners

Carolyn Raab, PhD, RD, LD--Award of Merit/Outstanding Dietitian
Carolyn is Extension Foods and Nutrition Specialist/Professor Emeritus, Oregon State University, Corvallis, Oregon. She has been at OSU since 1975. She has a BS from University of California, Berkeley, an MS from University of California, Davis and PhD in Human Nutrition and Foods. She is the author of numerous consumer publications and 26 professional publications. Carolyn has had 10 graduate students, 4 of whom became Registered Dietitians. She has served as past treasure, secretary and chair, Division of Educators/Research for the Oregon Dietetic Association.

Andi Markell, RD, LD--Recognized Young Dietitian of the Year (RYDY)
Congratulations to Andi for being named the Young Recognized Dietitian for the state of Oregon. She is currently a Neonatal Dietitian at Legacy Emanuel Children’s Hospital in Portland, Oregon Inpatient – Neonatal Intensive Care Unit and Out Patient Nutrition & Lactation Follow Up
Service. She has worked there since 2001. She has been very active recently with the Oregon lactation bill HB 237.

Andi completed her internship in 2000 at the Sea Mar Community Health Center in Seattle WA and received her BS from Oregon State University.

Kim Elite, DTR—Recognized Dietetic Technician of the Year (RYDT)

Congratulations to Kim for being named the Young Recognized Dietetic Technician of the year. She is currently a Dietetic Technician at Providence St Vincent Medical Center in Portland and has been there since 2000. Previously she worked at Good Samaritan Hospital in Corvallis. Kim received her BS in Health and Physical Education from the University of Montana and her AAS in Dietetic Technician from Portland Community College.

She serves currently as the ODA Scholarship Chair. She is also a member of Phi Beta Kappa and American Legion Post 0104.

The winner of the Award of Achievement and Outstanding Student award is Joy Petterson an intern at OHSU. She won a $1000 scholarship!

ODA Policy Team
By Nancy Becker MS, RD, LD

Greetings Oregon Dietitians,

I have the pleasure of informing you all that the school junk foods bill passed the Oregon Senate May 25, 2007, with a 22-5 bi-partisan vote. This is a great step forward for public health in Oregon, and reflects the commitment of our policymakers to begin to address the problem of childhood obesity.

ODA members, organizationally and individually, played a big part in advocating for this big policy change. Congratulations to all of you who wrote, called and emailed your legislators. You made a difference, and I truly believe that they now understand that RDs are the "go to" people for nutrition information.

Of course now that the legislation has passed we get to move on to the more interesting and challenging implementation stage, where RDs all over the state can help to provide the technical expertise and support needed to make the changes happen on the ground. I look forward to continued discussions with everyone about implementation.

Meanwhile, I am so glad I can go back to thinking about nutrition and not "counting votes" in Salem!!!

Drugs Are Not Always The Answer
By Leah Gross, RD, LD

I work in a long-term care facility and I had a resident who was recently admitted after his family could no longer take care of him at home. He appeared very depressed. He had diagnosis of diabetes, gastroparesis and dysphagia. Speech therapy was working with him as he was having trouble swallowing and chewing. He was on a puree texture with honey thick liquids...and hated it. He frequently put his head on the dining table next to his uneaten meal and moaned. He claimed stomach pain. When he had enough energy, he would wheel himself back to his room and curl up in his bed with the curtains drawn. Physical and Occupational therapy were having difficulty getting him to participate. He didn’t come out for activities. It appeared he had thrown in the towel. ‘Why bother’ was his attitude.

As a dietitian I was asking the interdisciplinary team questions like: Can we add an antidepressant? Can we add an anti-nausea med? Or antacid? Or something for GI motility? Is he on any pain meds that are making him lethargic? What about an appetite stimulant? Supplement beverages?

Then before any new orders were implemented I had an idea. I had noticed that he would occasionally crack a smile, a kind of smirk, when he over heard a raw joke. The kind of jokes usually reserved between staff people who know each other well. So I asked a co-worker with such sense of humor to pay a visit to this resident. They hit it off. Without asking a second time she began visiting...
Drugs Are Not Always The Answer / Continued from page 5

Little Suzy and HB 2650
By Leah Gross RD

This is a story I wrote in a moment of inspiration to help legislators understand the impact nutrition legislation can have in our society. You don’t have to be this elaborate to get your point across but sometimes dietitians can use creativity to make ourselves heard.

Little Suzy and HB 2650
By Leah Gross RD

Little Suzy goes to school every day. Every day her mom gives her money for lunch. She knows she is supposed to eat in the cafeteria but all the other kids drink coke and eat candy bars and potato chips. Suzy loves Milkyway candy bars so that is what she eats for lunch every day. After lunch she goes to class but she can never stay focused through the whole class. She doesn’t hear the teacher assign homework. She goes home starving and can’t wait for dinner so she uses the extra money from lunch to get some red licorice from the vending machine on her way to the bus. Her mom encourages her to go outside and play but she is tired and the neighbor kids make fun of her because she is fat and slow. Her mom asks why she is doing so poorly in her classes. Suzy shrugs. She must be dumb she thinks. Other kids talk about going to college but Suzy doesn’t think she is smart enough. Maybe she will work at McDonalds or be a stay-at-home mom. The next day when she goes to the vending machine at lunch there is no more soda, no candy bars, no more licorice! But she is hungry and the meatloaf being served in the cafeteria doesn’t sound so good. She peers into the vending machine and selects strawberry milk, some cheese and crackers and a banana. She goes to class and is surprised when the end of the class comes and she is awake when the teacher gives out the homework assignment. Suzy by habit stops at the vending machine although she isn’t so hungry like usual and selects an apple to eat on the bus. She goes home and does her homework which really isn’t that hard because the teacher had gone over examples just like on her assignment. The next quarter her mother is pleased to see Suzy’s grades have shot up. Suzy’s confidence has soared and she is talking about going to college to become a dietitian. Suzy becomes a dietitian and one day a gentleman walks into her office. He has just been diagnosed with diabetes and he is scared he won’t be able to run for the next legislative session as he planned due to his health. Suzy works with him for several months. He feels better than he has for years! He starts campaigning for the next election with more energy and passion for making change in Oregon than he has ever felt. He doesn’t know that ten years ago he voted in HB 2650 that it would change not only Suzy’s life but his own.
The WDA completed their 2006-07 continuing education program May 15th with an excellent presentation on the dietitian’s role in public policy advocacy by Andi Markell, neonatal dietitian with Legacy Emanuel Children’s Hospital.

The WDA welcomes the incoming 2007-08 executive board.

Vicki Deusterhoft, MS RD, incoming President, received her undergraduate degree from Oregon State University and completed her Masters in Science at Florida International University. Predominately her experience has been in the clinical realm until her recent move back to Oregon where she worked with Polk County WIC clients. She worked extensively with the WDA Bylaws committee over the past year.

Amy Floreen RD, incoming President Elect, has served as WDA Secretary over the past two years. She is currently employed with Pinnacle Healthcare as Director of Dietary Services. Efforts of interest include support for local Hunger and Homelessness advocacy groups and local drug and alcohol nutrition support services.

Denise Abbott RD, incoming Secretary, will be a new addition to the WDA Executive Board as incoming Secretary. She currently works for the Eugene 4J School District as a teacher aide with emphasis on special needs.

Rose Bryant, incoming Nominating Committee Chair, served as a representative of the OSU Student Dietetic Association and completed her education with OSU this spring. She secured her dietetic internship in state, and looks forward to continuing on the executive board.

The association will kickoff the 2007 year in the fall with their networking and continuing education opportunities in the valley. If you have any topic suggestions, are interested in more information, or in serving on a committee please contact Amy Floreen at amyfloreen@pinnacle-healthcare.com.

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ADA's Scope of Dietetics Practice Framework

by Sally Cohenour, MS, RD, Chair SODPF Sub-Committee of the Quality Management Committee and by Julie Meddles, RD, LD and Jackie Boucher, MS, RD, LD, CDE, members of the SODPF Sub-Committee.

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!

Have 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 Framework includes an algorithm (Decision Analysis Tool) and suggested resources. All of these resources are located for members on ADA’s website (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.

Food Stamp Challenge

By Jennifer Young, MPH, RD

On April 23rd, my family, along with hundreds of other Oregonians, began the week-long Food Stamp Challenge. In recognition of Hunger Awareness Week, Governor Kulongoski issued the challenge to draw attention to the difficulties of eating nutritiously on a food stamp budget. By the end of the week, my family had experienced a glimpse of the variety of issues that comprise food insecurity.

Before the week began, I made calls to several stores where I regularly shop to see if they would accept food stamps. I did not identify myself as taking the Food Stamp Challenge, I just simply asked if the store accepted food stamps. All the answers were curt. From one store I heard, "No, we're not set up for that kind of thing" (hang-up). From another, "Yes we take them" (hang-up). My first taste of life on food stamps.

On the challenge, we were to imagine that our cupboards were bare and buy groceries using the average food stamp benefit of $3.00 per person per day. Sticking to the budget was more difficult than I thought it would be. I had to do a much better job of planning all of our meals and snacks, and I stayed up much later than usual preparing food and baking bread for the next day (we ate a lot of bread!) We ran out of fresh fruit by mid-week and didn't have money to buy more.

At the beginning of the week I deducted $15.00 from my budget to keep as cash for miscellaneous food expenses. I was shocked at how quickly the $15.00 dwindled! The convenience factor of buying lunch when it's forgotten at home, or stopping at the store to pick up a thing or two quickly added up. By day three I only had a few dollars left. On the second to the last day of the challenge I used these last few
Food Stamp Challenge / Continued from page 8

dollars to buy a few items for that night's dinner. I was seventeen cents over what I had left so I explained to the checker that I was on the Food Stamp Challenge and I was over my limit and would need to put something back. He reached into his pocket and said he'd pay the balance. I asked if he'd do this if I really was on food stamps. "No way!" he said.

My kids were steadfast about sticking to the challenge. When I picked them up from school one day, I absent-mindedly asked if they wanted to stop for a snack.

I heard from the backseat, "That would cost us two whole meals each Mom!"

The whole family became very aware of food. My kids would talk about what other kids had brought in their lunch at school and how much it must have cost. I found we all spent a lot of time talking about the kind of foods we'd like to buy and eat.

The challenge made me aware of why parents with limited incomes buy "treat food" for their kids and themselves. If you can't afford much, not new clothes for your kids, or the things that you'd really like to buy them, junk food is relatively inexpensive and helps them feel like the other kids.

Each month, more than 425,000 Oregonians rely on food stamps to help them get through the month. Of these, over a third must also utilize emergency food sources during the month. Nationally 80% of food stamp recipients are families with children. These people are our neighbors, co-workers and friends.

The food stamp challenge gave me a better perspective of food insecurity, especially the emotional difficulty of living on an extremely tight food budget and the often disparaging attitudes that those who rely on government assistance must face.

Shape Up Across Oregon
By Jenny Vannoy, MS, RD, LD
Nutrition Educator, ODA Treasurer

Looking for a simple way to promote healthy lifestyles? Need a fun program to help support your local school wellness policy? How about an invigorating challenge for your workplace? Look no further, Shape Up Across Oregon is for you!

Shape Up is dedicated to improving health and fitness by motivating Oregonians to be physically active 30-60 minutes a day, as recommended by the Surgeon General and 2005 Dietary Guidelines for Americans.

Shape Up Across Oregon is available to all school-age youth in Oregon, free of charge. The program is also offered to adults, seniors, families and worksites, for a modest fee. Shape Up provides the materials and prizes, making the program easy to implement in a wide variety of settings.

Here's how it works: Participants keep track of the number of minutes they engage in any type of physical activity, logging earned "miles" traveled on a map of Oregon. The goal is to be active enough to complete the route across the State in a one-month period. Those who complete the journey receive a signed certificate from the Governor.

The school-based program has grown to be the largest statewide physical fitness program of its kind. This year, 64,500 Oregon youth participated. Teachers report how much they appreciate using Shape Up as a tool to help students establish healthy habits while they are young. They also report that many kids, and their families, continue to be more active even beyond the one month program.

Nutrition Education Services/Oregon Dairy Council (ODC) is actively involved with Shape Up Across Oregon. In addition to providing supplementary nutrition education materials for all school program facilitators and students, ODC has invited their entire office staff and Board of Directors to participate in the workplace program. This year, Team ODC recruited 27 active members to move more and Shape Up.

Inspire your local school or worksite to Shape Up Across Oregon.
It's simple.
It's fun.
It's ACTIVE!
For more information, please visit: http://www.shapeupacrossoregon.org/
I want to encourage all members to submit articles for future newsletters. This newsletter is what we, ODA members make it. It can be informative, amusing, inspiring, complementary and an opportunity for us to network with each other. Did you come across a new resource you think other’s could benefit from? Did you have an experience with a client that other’s might learn from? Do you want to recognize a coworker who is doing something inspiring?

Upcoming newsletter deadlines:
September 5th
February 5th

Send submissions to leahgross2002@hotmail.com
Please include ‘ODA newsletter submission’ in the subject.

The Primer originated from the HEN DPG Sustainable Agriculture & Food Systems committee, which transitioned to a charge from ADA House of Delegates to develop this tool for members. Seven out of the ten task force members are HEN members -- two of them presented at past ODA & PDA conferences. Angie Tagtow, HEN past chair, was greatly instrumental in bringing the taskforce to fruition.

Objective of the Primer is to promote, support, and educate food and nutrition professionals about principles of sustainable food systems. At the spring, 2007 ADA HOD meeting the Task Force facilitated a training session for attendees, who in turn will be able to provide ADA members with information regarding sustainable food systems and encourage members to assume leadership roles in the many areas of sustainable food systems.

ODA members Sonja Connor and Debe Nagy-Nero were two reviewers of the Primer prior to publication. Good Shepherd Health Care System, Hermiston, OR and OHSU are included in the success stories of the Primer. The 71 page primer is available on ADA Governance webpage and a DVD is available for loan.

This Primer demonstrates incongruencies of the ADA position paper and statement, Agriculture and Food Biotechnology, published February, 2006. HEN DPG has maintained that from a food system perspective the position paper is the wrong message for food and nutrition professionals and the public. The Executive Committee of HEN has met with ADA Association Positions Committee, requesting that ADA retire the position paper and not develop another position on the topic now. Discussions are continuing and ADA APC will make a decision at the summer meeting. Interested ODA members can contact ADA APC with input on the issue.

ADA new position paper on Conservation of Natural Resources, authored by HEN members, is published in the June Journal of American Dietetic Assn. You are encouraged to join this vibrant DPG (# 15) now at approximately 800 members.
**Member Team Report**

*By Andi Markell, RD, LD*

*Member Team Leader*

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I know it seems impossible – but the Member Team is about to become even more exciting!!!!!

At the last board meeting, the board approved two new projects for the Member Team.

**Adding the Nutrition Care Manuel to the ODA Website!**

**Sponsoring more teleconferences for ODA members!**

**Nutrition Care Manuel:**

The ODA board approved funding to add the Nutrition Care Manuel to the ODA website. This is a very exciting new benefit for members.

Remember that the ADA Nutrition Care Manuel: “Is the preeminent source of research-based nutrition information and clinical tools available.”

NCM is updated on an annual basis – keeping us up to date with the latest in nutrition.

Includes printer friendly client education forms, 10 online calculators, a cultural food practices section and more.

While not all the details have been worked out, you can expect to be hearing an update about this project very soon.

**ODA Sponsored Teleconferences**

The ODA board also approved funding for one teleconference for five different areas of Oregon.

**Eastern**

**Central**

**Southern**

**Mid Willamette Valley**

**Portland**

The Member at Large, Julie Hood, and new Member Team Leader, Jenny Vannoy, will be working on this project next year. Look for updates!

Don’t forget…the purpose of the member team is to enhance member’s ability to manage their careers, increase their skills, and learn how to apply those skills in unfamiliar environments.

Members are the most exciting part of the ODA!

If you are interested in supporting ODA members, please contact Jenny Vannoy – the in-coming Member Team Leader at jennyv@oregondairycouncil.org to be a part of our next Member Team meeting and get involved in the ODA!
ODA Members Are The Recognized Nutrition Experts in Oregon

Visit the ODA website at:
www.eatrightoregon.org