



# IMPROVING OBESITY EDUCATION THROUGH POLICY: CONTINUING EDUCATION ON NUTRITION



COUNCIL OF THE DISTRICT OF COLUMBIA

Washington, DC

Councilmembers proposed legislation to require that continuing education (CE) requirements for physicians, nurses, and physician assistants practicing in the District of Columbia include 2 credits of evidence-based instruction on nutrition. The legislation is expected to improve obesity prevention and treatment efforts by providing health professionals with the information and skills needed to incorporate nutrition counseling into clinical practice.

## SCENARIO

Rates of diabetes, heart disease, and obesity-related cancers are projected to increase substantially in the District of Columbia by 2030.<sup>1</sup> Although nutritional intervention is considered a cornerstone of obesity management, few health professionals report receiving adequate training on nutrition during their formative education and most providers do not pursue continuing education on nutrition of their own volition.<sup>2</sup>

Many providers are unaware of how to assess nutritional status or unable to make appropriate referrals to community resources and health professionals as needed to address diet-related diseases like obesity. In communities like the District with high economic inequality, quality of care may be improved by additional training that ensures providers have a working knowledge of the barriers that families struggling with obesity face in their homes and neighborhood environments.

### Educational Objectives

Provide information and skills to enable health professionals to incorporate nutrition counseling into clinical practice, which may include instruction on:

- ▶ obesity treatment and prevention;
- ▶ nutrition assessment;
- ▶ food insecurity and its impact on health;
- ▶ nutrition topics related to medical specialties; and/or
- ▶ the role of nutrition in disease prevention and management.

## About the Legislation



**Continuing Nutrition Education Amendment Act of 2019** [B23-0360]

>> introduced June 4, 2019, amends existing law (D.C. Official Code § 3-1205.10)



### LEADERSHIP

- ▶ Councilmember Mary Cheh
- ▶ Councilmember Anita Bonds
- ▶ Councilmember Elissa Silverman
- ▶ Councilmember Trayon White

### KEY COMPETENCIES

- ▶ Disparities/Inequities in Care
- ▶ Strategies for Obesity Care



# MODEL LANGUAGE

Relevant text of the proposed amendment is reproduced below in an abbreviated format for the consideration of other policymakers that may wish to introduce similar legislation in their jurisdictions.

To view the full text of B23-0360 and track the status of this legislation, please visit the Council of the District of Columbia's website:

<http://lims.dccouncil.us/Legislation/B23-0360>

## B23-0360: Continuing Nutrition Education Amendment Act of 2019

Sec. 2. Section 510 of the District of Columbia Health Occupations Revision Act of 1985 is amended as follows:

[R]equire that any continuing education requirements for the following practices include 2 credits of instruction on nutrition:

- (i) medicine;
- (ii) registered nursing;
- (iii) practical nursing;
- (iv) nursing assistive personnel; or
- (v) physician assistants.

The instruction required shall:

- (i) Be evidence-based;
- (ii) Not be financially supported, directly or indirectly, by any food, beverage, or dietary supplement manufacturer, company, or trade organization; and
- (iii) Provide information and skills to enable health professionals to incorporate nutrition counseling into clinical practice, which may include:
  - a. General nutrition throughout the lifecycle;
  - b. Nutrition assessment;
  - c. The role of nutrition in disease prevention, management, and treatment;
  - d. Nutrition topics related to medical specialties such as obstetrics and gynecology, cardiology, and oncology;

- e. Food insecurity and its impact on health;
- f. Obesity treatment and prevention.

Within one year after passage of the Continuing Nutrition Education Amendment Act of 2019, the Department of Health's DC Center for Rational Prescribing shall develop and offer continuing education courses, free to District healthcare professionals, meeting the requirements of this section.

SEE ALSO: Legislation introduced in New York ([A7695](#) / [S5887](#)) would require 6 hours of training on clinically-proven methods for the prevention and treatment of diet-related illnesses every 2 years - for physicians only.

## IMPLEMENTATION



### The DC Center for Rational Prescribing

In partnership with the Department of Health, the DC Center for Rational Prescribing (DCRx) will develop and offer continuing education courses needed to satisfy the nutrition CE requirements free to District providers. DCRx is led by the

George Washington University School of Medicine and Health Sciences with funding from the DC Department of Health. It provides non-commercial, independent continuing education, along with access to other educational resources.

Visit the online learning center: [gwcehp.learnercommunity.com/dcrx](http://gwcehp.learnercommunity.com/dcrx)



*Heart disease, cancer, and stroke are leading causes of death in D.C. Nutrition should be a first-line prescription that doctors and nurses make to help turn around these epidemics.*

– Susan Levin, MS, RD,  
Physicians Committee for Responsible Medicine

Policymakers should consider addressing the following components when drafting similar legislation:

- ✓ What provider types will be subject to new CE requirements
- ✓ What accredited entity, if any, will develop / provide CE activities
- ✓ How the development / provision of required CE activities will be funded
- ✓ What agency will be responsible for ensuring CE requirements are met



[1] <https://www.stateofobesity.org/states/dc/>

[2] Aggarwal M, et al. The deficit of nutrition education of physicians. *Am J Med* 2018;131(4):339-45.