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Happy Spring Everyone!

Our theme for the Spring Issue is Health Care Reform. I felt that this was such an important topic for our members to have more knowledge about and increased awareness in terms of how to get involved in our communities and make a difference.

I must say that this was the most difficult newsletter I’ve had to put together to date. The topic of Health Care Reform is a very complex one. It’s one that I had to learn much about in order to pull this off and be “politically correct”. The purpose of this edition of the newsletter is to increase awareness for our members about Health Care Reform relating to our profession as Registered Dietitians and as Health Care Professionals. We must be present at the table at each discussion that involves our profession in order to move forward and make these changes a positive one. In this issue, we will show you how to get involved in your local community, on a state level, and also on a national level. We’ll tell you about different programs going on nationally that need our help and support. It’s so important to get to know your state legislatures and make contact with them through phone, email, letters, or dare I say it...meeting them face to face. They need to know who you are so they can make a connection next time a nutrition related issue comes to the table. Our voices need to be heard loud and clear amongst the politicians and in Washington. We have a great team of Registered Dietitians across the country who work very hard to make positive changes for our profession, however, we need to back them up by making small changes in our local communities and on a state level.

I hope this issue helps you to realize the importance of getting involved and making a difference when it comes to the changes that are taking place with Health Care Reform.

Thank you,

Elisabeth D’Alto, RD
Newsletter Editor
elisabethrd@gmail.com

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Elisabeth is a New Jersey based Registered Dietitian. She enjoys working in mass media communications. She has just recently started up her own nutrition communications and consulting company called D’Alto Nutrition, LLC. www.daltonutrition.com. At this time, she continues to work as a Clinical Dietitian in a continuing care retirement community.
Message from the Chair

By: Marcia Greenblum, MS, RD

If there were any way to upload a video of DBC’s most recent executive committee meeting on YouTube I think ADA membership numbers would skyrocket. I feel such great pride when I think about how capable and dynamic our executive committee members showed themselves to be and how dedicated they are to helping fellow members successfully climb the ropes to success.

DBC leadership has had a hard time defining the qualities that join us together but, at the same time, qualities that make us unique amongst other dietetic practice groups. Finally, late into the meeting last November it became clear that although we practice in a wide variety of areas and use very different strategies to achieve our goals we share a business skill set that is often lacking in current dietetic career preparation. Business skills were a part of my dietetic education but I’m not sure that they were able to survive the cut when dietetics departments went from home economics, which viewed meal preparation and delivery as a business, to being seen as more of a scientific program.

In the future, DBC will be working to return to our roots by offering our members more value to membership than just networking opportunities. DBC has started on the path to developing strategies that will use the business skills and knowledge that the more savvy and successful dietitians amongst us have learned. In turn, this will help fellow members reach their career potential. I applaud the hard work that our DBC executive committee has put into this new strategic plan and I am looking forward to a more impactful DBC membership. Keep an eye on the DBC website, newsletter, and e-blasts to follow developments as the new DBC strategic plan is rolled out.

Marcia Greenblum, M.S., R.D. is the Senior Director, Nutrition Education with the Egg Nutrition Center. Marcia is an active participant in several nutrition professional organizations having held leadership positions in the American Dietetic Association, American Society for Nutrition and the Institute of Food Technologists. Marcia can be reached at mgreenblum@enc-online.org.
Public Policy – An Important Part of Business
By: Charlotte Vincent, PhD, RD, CD

There has been The Patient Protection and Affordable Care Act (ACA), Farm Bill, Medical Nutrition Therapy (in Medicare Bill), Child Nutrition Reauthorization Act, and many more laws with regulations that affect you as a professional and business. Small businesses comprise the vast majority of the business market in each state. The cost of health insurance coverage for employees/owners could be an expense that’s too high of an operating cost for the business to be able to continue to exist. This was a major driver in passage of the ACA.

One Year Later

Federal health reform (ACA) became the law of the land one year ago, on March 23, 2010. The Affordable Care Act makes many changes to health care. The ACA is long (and complex),

But it really boils down to five simple things: ¹

Society is to share “risk”.
Low-wage workers will be offered ways to help pay for health insurance, and the very poor will be covered through Medicaid.
Health care providers will be paid for promoting good health outcomes in a more efficient health care system.
There needs to be a focus on promoting healthy behaviors and preventing chronic disease.
We need to have and maintain a strong health care workforce.

Under ACA, the goals for health care are:

- affordable
- easily available
- convenient
- private
- provide a choice
- safe

On to the next step... “Regulations”

Now that ACA has been passed and signed into law, it is sent to the appropriate government agency to write supplemental rules so the law can be implemented. These rules are called “regulations.” Rules and regulations provide the means by which the government can administer a law. For this reason, they are sometimes also referred to as administrative law. Once a regulation is written and finalized, it is codified just like statutes and law. At the federal level, regulations are published in the Code of Federal Regulations. At the state level, they are published in the Administrative Code of the state. Health Care Reform Law has been sent to the states and each state now is in the process of developing state regulations for its implementation.

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Public Policy – An Important Part of Business
By: Charlotte Vincent, PhD, RD, CD

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It is our responsibility to make sure that dietitians and our services are included in each state implementation plan of health care reform. If we do not communicate and educate this information during this process of implementation, whom do we have to blame but ourselves when RD’s are not included? Each state has a member of the Public Policy Panel that has been given the responsibility to keep members informed and engaged. The State Regulations Specialists (SRS) can help you track the regulations in your state. Sign into www.eatright.org, then go to Public Policy, click on State Affairs, and locate your state SRS.

ADA provides excellent tools for you to be savvy in the Public Policy arena. ADA launched Congressional Quarterly State Track System (CQ) new member service to provide a valuable tool for state legislative and regulatory tracking. This service allows you to monitor legislation and rule making in your state or do a comparative nationwide analysis. You can get daily-customized state information on the most current legislative and regulatory data available. Go to http://eatright.org/advocacy/ and click on Congressional Quarterly State Track System to get started.

Other Policy Areas

The priority areas of public policy focus for ADA members are:
Aging
Child Nutrition
Food and Food Safety
Health Literacy and Nutrition Advancement
Medical Nutrition Therapy and Medicare/Medicaid
Nutrition Monitoring and Research
Obesity/Overweight/Healthy Weight Management.

Our “job” is to improve the nutrition services and programs provided our citizens in a way that is most cost effective We know that budget cuts will happen at all levels. Now is the time for us to monitor the situation in our own legislatures and advocate for preserving food, nutrition and health programs that are cost effective and save money. Working with your affiliate Public Policy Panel is an easy way to stay connected.

ADA and its members continue to be engaged in health policy work, both in Washington, D.C., and in state capitals where lawmakers are considering major reforms and new roadmaps for better health. Advocate for the people who need the help and that budget reductions are done fairly.

Resources to include in your professional policy toolkit:
ADA “Eat Right Weekly” published each Wednesday, especially the “On the Pulse of Public Policy”. Respond to Action Alerts. Become familiar with the Member Section of eatright.org under Public Policy.
Grassroots Manager
Public Policy – An Important Part of Business
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Advocacy Tutorials
Recorded Webinars
Congressional Materials
State Affairs

Public Policy Workshops and Webinars

You Can!
Make a Difference
Be Heard
Advance the Profession
Protect Your Professional Interests
Have Fun!

Being one, we are Small – Together we are Great!!

Now it is even easier to support ADAPAC, the ONLY political action committee that focuses on food and nutrition. Contributions can be made by check and/or credit card; you designate the day of the month to allow the charge. Click here for more info. (Link: www.eatright.org/adapac)

Mark Utah Health Policy Project Website. Available at Healthpolicyproject.org. Federal Health Reform and You: A Basic Summary for the 1st anniversary.


Charlotte has been a Registered Dietitian for over 25 years, where she has taught college Dietetics at four different universities. She’s held many positions in food service management, clinical management, and as a Consultant in Private Practice. Currently, Charlotte works at the Utah State Division of Aging and Adult Protective Service as the Program Manager of Nutrition and Disease Prevention/Health Promotion where she has been for the last 4 years. Charlotte can be reached at cvincentrd@yahoo.com.
Let’s Move with Kids Eat Right
By: Katie Brown, Ed.D., RD, LD

Ten years ago the Surgeon General warned that if overweight and obesity was not controlled the number of deaths from obesity would surpass the number of deaths from tobacco. That caught the nation’s attention and initiated many public and private efforts to address two of the root causes of obesity—poor nutrition and inactivity. To boost momentum further, last year First Lady Michelle Obama kicked off the Let’s Move Campaign, and the White House Childhood Obesity Prevention Taskforce released 70 recommendations in this area and a new goal to reduce childhood obesity rates from the current 17 percent down to 5% by 2030.

With all of this exciting momentum, Registered Dietitians need to be present and actively involved in advising and leading prevention discussions, plans, and policies in schools and communities across the country. Many children’s diets are too high in calories, but nearly all are lacking in one or more key nutrient. The 2010 U.S. Dietary Guidelines identifies potassium, fiber, calcium, and vitamin D as nutrients of concern in children’s diets, and for the past decade nutrient intake data have consistently shown that children’s diets are also low in vitamins A, C, E and magnesium. The nutrients that kids aren’t eating are necessary for optimal growth and development. Sometimes well-intentioned plans go straight to reducing, restricting, and eliminating kids’ access to certain kinds of foods and beverages, which essentially reduces calories but does not change consumption of the nutrients that are lacking. In other words, simply reducing calories does not improve diet quality. And that’s why ADA and ADAF launched Kids Eat Right--to reframe the childhood obesity prevention dialogue to focus on quality nutrition for all children, with RD’s leading the way.

Kids Eat Right has two powerful websites—one for ADA members (www.kidseatright.org/volunteer) and one for the public (www.kidseatright.org). The website for ADA members is designed to mobilize and support members in taking actions in schools and communities, with families, the media and policy makers to promote a total diet approach. How do you get involved and what does involvement mean? Visit the website for more information.

So how does Kids Eat Right support Let’s Move? Kids Eat Right is working closely with the ADA D.C. office to coordinate efforts with the national Let’s Move Cities and Towns component of Let’s Move so that RD’s can really make an impact at the grassroots level in their communities. Let’s Move Cities and Towns charges mayors to develop a plan for their community to promote improved eating and increased physical activity. There will be national, affiliate, and district dietetic association collaboration efforts to help RD’s successfully engage:

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Let’s Move with Kids Eat Right

By: Katie Brown, Ed.D., RD, LD

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National: ADA Juliana Smith, Director, State Government Relations and Jeanne Blankenship, Vice President Policy Initiatives and Advocacy are developing support materials for meeting with mayors that include suggestions for promoting quality nutrition and increased physical activity and ways that RD’s can help support these efforts.

Affiliate: ADA affiliate Let’s Move Representatives will coordinate with local dietetic association RD’s who are interested in participating in the meeting with Let’s Move Cities and Towns mayors and becoming part of the mayors’ planning committee. District association leadership will collaborate with local RD’s on how the RD’s in their community can be of assistance in the community plan.

It is an exciting time to be a Registered Dietitian, and efforts like Kids Eat Right and Let’s Move Cities and Towns are avenues for RD’s to become recognized leaders in communities across the United States leading efforts to promote quality nutrition and improve the health and wellness of our country.

If you would like to contact Katie for more information on how to get involved, she can be reached at kbrown@eatright.org or (800) 877-1600 ext. 1133.
Health Care Reform and RD Business Owners
By: Brenda Richardson, MA, RD, LD, CD

Health Care Reform for those in business is multifaceted and success will require application of business skills like never before. The Health Care Reform law signed by President Obama on March 23, 2010, provides many opportunities for dietitians to be included in programs and demonstration projects scheduled for implementation in the states over the next three years and beyond. Implications to those owning a business will effect insurance costs, taxes, etc… which will impact overall operational expenses. I think the following quote from Dennis Waitley captures the essence of what success will encompass when he states, “The winners in life think constantly in terms of I can, I will, and I am. Losers, on the other hand, concentrate their waking thoughts on what they should have or would have done, or what they can’t do.”

The American Dietetic Association (ADA) has many resources to help you be successful with Health Care Reform in your practice. The ADA website has specific information and resources that can assist you in guiding your business decisions. In addition, the more you get involved with your state affiliate public policy panel, the more opportunities you have to impact utilization of the RD in the various program components.

To find information from the ADA website, go to www.eatright.org and then after logging in click on Public Policy followed by Health Care Reform. This section was created to provide ADA members with information regarding a particular interest or area of practice.

The ADA website Public Policy Health Care Reform section includes:

Rules and Programs: A list of programs by the year of implementation from 2010 through 2014. Pending programs are also included. This website page provides ADA members with information regarding a particular interest or area of practice. The programs are listed by the year of implementation; however, your state will make preparations for the deadline up to one year in advance.

Programs Effective in 2010:
- Breastfeeding in the Workplace
- Child Obesity Demonstration Project
- Home Visiting Program
- School-Based Health Clinics
- Community Transformation Grants

Effective January 1, 2011
- Accountable Care Organizations: A New Model in Health Care Reform
- Annual Wellness Visit in Medicare

Program Summary:
The Patient Protection and Affordable Care Act (PL 111-148 Sec. 4103) will provide Medicare beneficiaries with an annual wellness visit and establish a personalized prevention plan for each individual. The annual wellness visit benefit goes into effect September 23, 2011.

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- Community Transformation Grants (Continued from 2010)
- Coordinated Care through Health Homes for Chronic Conditions
- Medicaid Public Awareness Campaign
- Removal of Barriers to Preventive Services in Medicare
- Restaurant Menu Labeling
- Small Business Employee Wellness Grant Programs

Effective January 1, 2012
- Community Transformation Grants (Continued from 2010)
- Home Health Demonstration Program

Effective January 1, 2013
- Community Transformation Grants (Continued from 2010)

Effective January 1, 2014
- Community Transformation Grants (Continued from 2010)
- Private Insurance Coverage/State Insurance Exchanges

Pending Programs
- Healthy Aging, Living Well CDC Grant Program*
- Public Health Wellness Demonstration Project**
- Workforce Development Grants*
  * Anticipated announcement between now and 2014.
  ** Funding has not yet been appropriated.

Step-by-Step Guide for Success:
This guide is to assist the state affiliate in a health care reform plan of action.

Resources:
A comprehensive list of affiliate and ADA leadership as well as organizations involved in health care reform initiatives and research. Your best resources are your affiliate and ADA leadership. Also, utilize the various health care reform resources from other organizations involved in health care reform initiatives and research. Your affiliate public policy panel leaders can be contacted for more information on how to get involved.

The public policy panel leadership includes:
- **State Regulatory Specialist (SRS):** Coordinates affiliate health care reform activities
- **State Policy Representative (SPR):** Responsible for state legislative activities and assists the SRS with affiliate health care reform activities
- State affiliate President and Board of Directors and others as designated by the state affiliate
Health Care Reform and RD Business Owners
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Additional Resources included on the ADA website include:
- National Conference on State Legislators (NCSL)
- Federal Health Care Reform Implementation
- Access to Health Care: State Legislation for 2010
- State Actions to Implement Health Care Reform
- Kaiser Family Foundation

Sample Affiliate Plan of Action:
This is a sample plan to help the state affiliate get started with a health care reform plan of action.

Grant Writing Skills:
Many of the opportunities will involve either writing grants or collaboration with grant writers for inclusion of RD’s in the overall program. Skills and competencies in grant writing will give a competitive edge to those venturing to provide services in health care reform.

On March 16, 2011, there was a Louisiana Public Health Institute Press Release with the headline “W.K. Kellogg Foundation Invests $4 Million to Expand Student and Family Health Services in New Orleans Schools and Neighborhoods.” The W.K. Kellogg Foundation has announced a $4 million grant to School Health Connection, an affiliate of the Louisiana Public Health Institute (LPHI), to help increase access to physical and behavioral health services for New Orleans children and their families through school-based health centers.

Expanding a 2006 Kellogg-funded LPHI program that helped rebuild school-based health centers destroyed by Hurricane Katrina and developed new centers in underserved areas, the grant will enable SHC and its partners to improve existing primary care services and make those services available to students at nearby schools that do not have health centers. The grant also will be used to help implement comprehensive school wellness programs that feature enhanced health curricula, increased physical activity for students, staff health and wellness screenings, and the promotion of better nutrition for staff and students.

“School-based health is not only about providing clinical services to students, it is about creating a culture of health in schools, where our youth spend the majority of their day,”

said School Health Connection director Marsha Broussard. “This grant affords us the opportunity to take school-based health to the next level by implementing comprehensive wellness programs; it is an investment for a healthier generation of underserved and at-risk populations.”

This is only one example of the types of opportunities we will see available at the state levels where there are opportunities for RD involvement and support. These opportunities will be competitive and will require due diligence by those wanting to obtain success.

For some grants, it is important that ADA members work collaboratively with their state public policy leadership. This promotes coordination of efforts and will make a greater impact. Your affiliate public policy panel leaders can be contacted for more information on how to get involved.
Health Care Reform and RD Business Owners

By: Brenda Richardson, MA, RD, LD, CD

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Get Involved with Your State Affiliate:

Get to know your SRS and SPR. Remember that many of the health care reform opportunities are state specific and getting involved at the state level is critical for success. Contact your affiliate State Regulatory Specialist or State Policy Representative for updates on the affiliate public policy plan and to support your affiliate’s efforts on the issue. This involvement will help you strategically plan your own business plan and support networking with key organizations while making a difference for dietitians in your state!

Success comes from hard work. There is no such thing as overnight success; behind every “overnight success” lies years of hard work and sweat. People with luck will tell you there’s no easy way to achieve success and that luck comes to those who work hard. Focus on things you can control; stay focused on your efforts and let the results be what they will be.

Enjoy the journey. The road to success is going to be long, so remember to enjoy the journey. Everyone will teach you to focus on goals, but successful people focus on the journey and celebrate the milestones along the way.

Madam C.J. Walker, creator of a popular line of African-American hair care products and America’s first black female millionaire had this suggestion for success...

“I had to make my own living and my own opportunity! But I made it! Don’t sit down and wait for the opportunities to come. Get up and make them!”

Brenda Richardson, MA, RD, LD, CD is owner and president of Brenda Richardson Associates, Inc., and has more than 20 years of proven success in directing multi-million dollar food service and nutrition operations. Brenda has held many different positions including, national lecturer, Past President of the Indiana Dietetic Association, Current National Chair and Past Treasurer of DHCC “Dietetics in Health Care Communities” (another DPG), editor, contributing author, and author of several nutrition publications. The ADA selected Brenda for the “2010 ADA Grassroots Excellence Award” and Brenda was also awarded as the Indiana Dietetic Association 2010 Honored Dietitian. Brenda can be reached at brendar10@juno.com or you can visit her website at www.brendarichardson.com.
On March 23, 2011, Rep. Anthony Weiner (D-NY), took to the social media airwaves to talk about the hot issue of Health Care Reform. On the first anniversary of President Barack Obama’s signing of the Health Care Reform Bill, Weiner was on Facebook, Twitter and Reddit to answer voter questions and concerns.

Weiner’s use of these social media channels and the fact that Health Care Reform is one of the hottest topics on the microblogging platform Twitter, show not only the growing importance of social media in making connections and building communities, but also how quickly and deeply social media can have an impact on public opinion and how swiftly the public can spread a message via social media channels. Health Care Reform along with any topics having to do with health, food, and nutrition are among the top searches on Google and other search engines.

What does this mean for the role of Registered Dietitian’s in Health Care Reform? Health Care Reform provides many opportunities for dietitians to be included in programs and demonstration projects scheduled for implementation in the states over the next three years and beyond, including community transformation grants and restaurant menu labeling. For RD’s to become participating members in Health Care Reform projects and have a marked impact now and in the future, it is necessary to embrace social media as a way to build communities of trust who will then help spread the word on the importance of the RD in Health Care Reform initiatives. RD’s know the importance of including the RD in Health Care Reform initiatives, but how do you convince government agencies, health care agencies, politicians and the public? Social media! How do you build that community, that level of trust? Social media! How do you get the word out to a diverse audience quickly without having to spend thousands of dollars doing so? Social media!

RD’s need to be involved in Health Care Reform initiatives on a state and national level, but they also need to reach out to consumers. As many RD’s know, the Web is filled with erroneous and misleading information on various topics dealing with food and nutrition and consumers are constantly searching for information that will help them lead and maintain a healthy lifestyle.

According to National Research Corp.’s Ticker survey released earlier this year, 1 in 5 Americans use social media websites as a source of health care information. 94% of respondents indicated they’ve used Facebook to gather information on their health care. 32% used YouTube and 18% used Twitter.

Another very interesting result of this survey was that when respondents were asked about social media’s influence, 1 in 4 respondents said it was “very likely” or “likely” that social media will impact their future health care decisions.
There are a variety of social media channels out there RD’s can use to reach these consumers as well as fellow RD’s, legislators, and community leaders. Some channels are very niche oriented, but to make the most impact RD’s should focus on the following:

Facebook
Twitter
YouTube
LinkedIn
myADA

**Nutrition and Chronic Disease**

A survey released in 2009 by the American Dietetic Association showed that 96 percent of the primary care physicians believe the nation’s health care system should place more emphasis on nutrition to treat and manage chronic disease. However, only 12 percent believe physicians currently pay significant attention to nutrition in the context of chronic disease.

**RDs=THE Leaders**

The field is wide open for RD’s to be THE leaders in all areas of health and nutrition, including Health Care Reform. Use social media to build on your passion. Begin the dialogue. Build the trust within your community. If you need more help on how to develop your social media presence, check out previous issues of the DBC Dimensions newsletter.

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**Ivonne Cueva** is the Managing Editor of Online Services and Strategies for the American Dietetic Association, which includes www.eatright.org and www.kidseatright.org. Ivonne is passionate about social media and spearheaded the social media strategy at ADA. Ivonne has previously worked as a Web editor, television producer, assignment editor, news editor, reporter, writer and videographer/video editor. Ivonne can be reached at icueva@eatright.org.
DBC Dimensions: Spring 2011

DBC Movers and Shakers

Lynn Edwards, RD, CD


Has been the Executive Coordinator for the Wisconsin Dietetic Association for nearly 15 years serving as WDA President and other BOD positions prior to that. She was the 2008 WDA Medallion award recipient and given the WDA Recognition of Service award in 2011. Lynn has served on the WDA Licensure Committee since 2006.

Politics was something "someone else did" until I got involved with our "Pursuit of Licensure" and realized that each of us has a voice and can make a difference no matter what the issue. Since that time I have attended and spoken at town hall meetings, hosted and attended legislator fundraisers, got involved with WDA Lobby Days, written letters to the editor, done related radio shows, and have met "one-to-one" with countless state and federal legislators. In addition, I have attended the ADA Public Policy Workshops (totally awesome!). The intimidation I once feared no longer exists. I have found that if you’re looking to make a difference, you need a place at the table. In January 2011, to assist our licensure efforts, I became a WI Registered Lobbyist for the WI Dietetic Association. In October of 2009, I was honored to have been asked, by then ADA President Jessie Pavlinac to serve as a Board of Director on ADA PAC (Political Action Committee) beginning in January 2010 and stay for a 3-year term. What an experience and learning curve it has been for me thus far. Political action committees have the power to get lots of people involved and allow us to think "big" to help accomplish our goals. I wish I could talk to each of you personally and explain how important it is for our profession and more importantly the difference we have made with ADAPAC. It is exciting! No matter what you can give, it all helps to elevate our food and nutrition issues to another level. What a good feeling knowing you are part of it and helping to make a difference. When you pay your upcoming ADA dues, consider a donation or if you have already renewed, it is not too late.

For more information, or to donate, please go to: www.eatright.org/adapac. Also, if you want to learn more, please do not hesitate to contact me at lynnlawrd@centurytel.net. I have become a believer that... “If dietetics is your profession, politics is your business!"
DBC Movers and Shakers

Marty Yadrick, MS, MBA, RD

Marty Yadrick, MS, MBA, RD, FADA is currently Vice-Chair of ADA’s Nutrition Informatics Committee as well as Vice-Chair of ADAPAC, ADA’s Political Action Committee (www.adapac.org). Marty is Director of Nutrition Informatics at Computrition, Inc. where he has been employed for nearly 18 years. Marty was ADA President in 2008-09 and has served in many leadership roles in ADA over the past two decades. In his spare time, Marty is completing a Graduate Certificate in Clinical Informatics from Oregon Health & Science University. In his role on the ADAPAC Board of Directors, he joins the other ADAPAC Board members in determining where the PAC’s dollars will best further ADA’s efforts in Washington, DC with bi-partisan donations to candidates for the U.S. Congress and Senate. Marty’s message to DBC about ADAPAC: “No donation amount is too small. ADAPAC donations allow us to get our foot in the door with influential leaders of Congressional and Senate committees. Let’s make a difference in Washington!”

Christine M. Palumbo, MBA, RD

Christine M. Palumbo, MBA, RD, was named the 2011 Illinois Dietetic Association Dietetics Educator of the Year. She was honored for her 18 years as an adjunct faculty member at Benedictine University and “for demonstrating professional leadership and dedicated service to the education of the next generation of dietetic professionals.” Christine also serves as a public speaker, freelance writer, recipe analyst and is in private practice. In addition, she serves on the FNCE Program Planning Advisory Committee. Follow her on Facebook @ Christine Palumbo Nutrition.
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DBC Movers and Shakers

Jill Jayne, MS, RD – The Rockstar

Jill is on a countrywide tour teaching kids about nutrition through music with her Eat More Watermelon! Jump with Jill tour. After wrapping up National Nutrition Month, Jill had her first billboard, played her first professional sports arena, performed with the New York Jets as part of the Fuel Up to Play 60 campaign, and accepted a proclamation from the mayor of Corpus Christi, TX declaring Jump with Jill day. Jill’s idea to combine her knowledge of nutrition and talents in music have truly taken off as corporations and organizations jump on the Jump with Jill bandwagon. Learn more about Jill and her programs at www.jumpwithjill.com.

Sarah Conca, MPA, RD, LDN

I am currently serving my third and final year on the board of directors of ADA’s political action committee (ADAPAC). This position allows me to see first-hand how ADA’s DC team is working with members of Congress, federal agencies and other like-minded organizations and campaigns in Washington, DC, such as CSPI and Let’s Move!, to advance the discussion of the importance and healthy eating and lifestyle practices for the benefit of the entire nation. I also get to participate in advocating for the recognition of the expertise of RDs providing medical nutrition therapy (MNT) to prevent, treat and manage chronic disease. At the local level, I am pleased to work as the public policy research assistant for the Massachusetts Dietetic Association (MDA). In this part-time capacity, I am helping my state affiliate’s public policy panel advocate for recognition of the RD’s expertise and role in healthcare. This is extremely important work in Massachusetts, which is celebrating the fifth anniversary of healthcare reform, and is now focused on cost-cutting and quality improvement while implementing changes mandated by the Affordable Care Act of 2010, such as the creation of accountable care organizations (ACOs). I am excited to be helping RDs in Massachusetts be ‘at the table’ in the discussion of how nutrition and MNT can and should be part of cutting the cost and improving the quality of healthcare, through meetings with the Secretary of Health and Human Services, the Office of Medicaid (MassHealth) and the staff of Senator Richard T. Moore, the champion of healthcare reform in Massachusetts. It’s a challenge, and the progress is not always as fast as we would like, but MDA is proud to be representing the roughly 2,200 members of MDA and advocate for RDs being part of the positive changes being implemented.
Sysco is the global leader in the food distribution industry. With a workforce of 46,000, employed at 180 locations, we have the talent and reach to go beyond the needs and expectations of our customers. Governed by strict quality assurance standards, and driven by a strong focus on efficiency and innovation, we provide more than 360,000 food and related products to about 400,000 customers. Throughout every step in this process, we strive to maximize our strengths in order to make good things happen. Our efforts are reflected in initiatives to offer a greater selection of products and services, enhance quality and nutrition, contribute to environmental sustainability, and help our customers succeed. Our desire to be our customers’ most valued and trusted business partner is the driving force behind our success.

Sysco also supports the growing healthcare and senior living industries with a wide variety of products and services to meet their unique needs. The corporate and local Sysco representatives who service the healthcare and senior living communities are proud to spearhead initiatives that address, and respond to, challenges and opportunities faced by facilities in the care of a senior population. An essential component of maintaining the health and safety of our elders, in order to ensure their quality of life, is entrusted to the foodservice departments that prepare their meals. Sysco is guided by a commitment to thoroughly understand what all is entailed with this responsibility. To help our healthcare customers achieve their goals, we are channeling our efforts to lead the following new initiatives:

**eNutrition** - In light of the California Trans Fat Ban regulation effective January 1, 2011, Sysco is closely working with suppliers to identify items that contain artificial trans fat, and coding products accordingly to allow for more informed purchasing decisions. As mandated in the regulation, no food containing 0.5g or more of artificial trans fat per serving may be utilized during the operational processes of facilities in the business of storing, distributing, preparing, or serving food.

**KEYS Inservice Solutions** - In response to the ever-evolving regulations governing the foodservice industry, KEYS is a value-added service that Sysco’s healthcare customers take full advantage of in order to enhance the knowledge base and skills of staff members in the foodservice department. It is specifically tailored to accommodate a healthcare facility’s need for a cost-effective, turn-key solution to offering monthly employee inservices. Programs are a complete kit - providing educational PowerPoint presentations and all other materials necessary to train dietary staff in the areas of food and work safety, nutrition education, and customer service. New programs are continually offered to reflect current nutritional guidelines and new food/work safety standards.

**NetIMPAC** – In our increasingly technology-driven society, more and more customers are employing newer technologies to increase their efficiency and productivity. NetIMPAC is Sysco’s solution to the healthcare community’s growing demand for an automated, integrated, and comprehensive, online-based foodservice management system. Not only does this program provide the tools for menu development and costing, nutritional analysis, and report generation, but it also allows for the creation of food orders, production guides, and recipes based on facility census. All of these features and benefits explain why many customers are fully embracing the convenience of this new program to streamline their operations.
1. What are some of your responsibilities as a Principal Scientist for PepsiCo?

I work in the R&D Nutrition group at PepsiCo, with my primary role being support for nourishment beverages. The brands I work with the most are Tropicana, Dole, and Naked Juice. On the product side, I work with folks in Product Development to advise on nutrients, juice content, really, anything to do with how to make our products the best they can be from a nutrition perspective. On the brand side, I work closely with our marketing and PR teams to figure out how we can talk about our products, especially reaching out to health professionals with communications.

2. What led you to the role you are currently in?

When I was in graduate school, I read an article about a professor who worked with food companies to help them translate science into consumer-friendly language. That really resonated with me, so when I was ready to graduate, I sought out positions at food companies. Luckily, Tropicana Products was looking for an entry-level Nutrition Scientist at the same time! I loved working at Tropicana, but life changes and you have to go with it, right? I took a job at Campbell’s Soup Company for 3 years, and then moved to Colorado, where I stayed home with my kids, and worked part-time as a clinical dietitian on the weekends for 5 years. Now that my children are in school, I was fortunate to be able to come back to PepsiCo, and pick up where I left off!

3. What challenges do you face as both a professional and parent?

Definitely keeping all the balls in the air is challenging professionally and personally! As a parent, I struggle with taking time to just hang out with my kids, instead of always trying to get the laundry done, or get the house cleaned up. How do you do both??

4. How has DBC membership helped your career professionally and personally?

Honestly, although I have been a member of DBC in the past, I have not been active in the group. I am looking forward to this new position as Secretary so I can get more involved and figure out the answer to that question!
Alissa Wilson, PhD, MPH, RD
New Board Member: 2011-2012 DBC Secretary

Interview conducted by: Terri J. Raymond, MA, RD, CD

5. What changes do you predict in dietetics over the next few years, specifically, in business and communication?
   I have been attending quite a few focus groups recently with consumers, and discovering that nutrition communication is complicated and really confusing for people! As technology advances, we dietitians will have the difficult job of explaining how the new technologies impact nutrition and health.

6. What advice can you offer to new dietitians who chose business and communications as their career path?
   Working in industry is all about adapting to change. My advice is to be flexible and everything will work out!

7. Please share your educational background.
   I have an undergraduate degree in Sociology from the University of California, San Diego. During my last quarter at UCSD, I did an internship with a dietitian who worked part time at a hospital and part time at a sports club. I loved her job! I decided to do a Masters in Public Health, Program in Nutrition at Tulane University to bridge the gap between sociology and health care. Once I had the MPH under my belt, I wanted more science, so continued on to the University of Georgia where I received a PhD in Foods and Nutrition and completed my dietetic internship during the summers.

Alissa works for PepsiCo as the R&D Nutrition Principal Scientist, supporting nourishment beverages, especially Tropicana, Dole and Naked Juice. She works in Valhalla, NY and lives in Pleasantville NY with her husband and 2 daughters. She can be reached at alissa.wilson@pepsico.com.
Networking Events

The DBC has an outstanding group of Regional Networking Coordinators (RNC’s) that are working diligently to bring together the many members of our group across the nation. Be sure to reach out to your local RNC for upcoming events for the Spring and Summer of 2011.

Don’t see an RNC for your area? Interested in becoming an RNC? Then reach out to Sylvia Melendez-Klinger Sylvia@hispanicfoodcommunications.com for more information on these areas or go click here.

http://www.dbconline.org/dbc.cfm?page=regional_contacts

dbconline.org/dbc.cfm?page=regional_contacts

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2010 - 2011 DBC Executive Committee

Thanks to the 2010-2011 DBC Executive Committee! We are grateful for all that you do for DBC. All your work is truly appreciated!

Feel free to reach out to any of the members of the EC with questions, comments, suggestions. We want to hear from you -- our members, so we can continue to improve your membership. For more information, click here. http://www.dbconline.org/dbc.cfm?page=dbc_leadership

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