ACEND Accreditation Standards for Nutrition and Dietetics Associate Degree Programs (AP) (Future Education Model)
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STANDARD 1: Program Characteristics and Resources

All programs applying for accreditation by the Accreditation Council for Education in Nutrition and Dietetics (ACEND®) must meet requirements including quality-assurance or oversight by other agencies, organizational structure, financial stability, sufficient resources, the awarding of degrees and/or verification statements, program length and program management.

REQUIRED ELEMENTS:

1.1 The program must be housed in a college or university or offered in a partnership with a college or university. The college or university must be located in the U.S. or its territories and accredipted in good standing by a U.S. institutional accrediting body for higher education recognized by the United States Department of Education (USDE).
   a. A partnership is defined as two or more independent institutions, one of which is a regionally-accredited college or university, working together under a formal written agreement to sponsor a single program. The partnership must consider itself a single education program.

1.2 The program must be integrated within the administrative structure of the sponsoring organization, show this structure, such as in an organizational chart, and indicate where the program will be housed. In a partnership, organizational charts must clearly show the relationship of the graduate degree program to other programs/services offered by the sponsoring organizations and the relationship among the sponsoring organizations.

1.3 The program must demonstrate that it has the administrative, clerical or other staff, technical and financial support and the learning resources, physical facilities and support services needed to accomplish its mission and goals. If any portion of the program is offered through distance education, the program must demonstrate that technology and resources are adequate to support a distance-learning environment.
   a. The program must demonstrate that administrative support and resources are adequate to support continued development and training for program faculty, preceptors and staff.
   b. The program must provide a description of the budgeting process for the program that demonstrates financial resources are sufficient to produce the desired short- and long-term program goals and student outcomes.
      1. Programs offered in partnership must document the responsibilities of and resources provided by each partnership organization to the total program.
   c. The program must report its maximum enrollment to ensure quality, viability and appropriate use of resources.

1.4 The program must award an associate degree and a verification statement upon completing program requirements.
   a. If the program admits individuals with an associate degree or higher, the program must award at least a verification statement to individuals who complete program requirements.

1.5 The program must have one designated program director who has primary responsibility for the program and communication with ACEND. The program director must have the authority, responsibility and sufficient time allocated to manage the program, and provide effective leadership for the program, the program faculty, and the students. The program director may have other responsibilities that do not compromise the ability to manage the program. Responsibilities and time allocation for program management are reflected in a formal position description for the program director and approved by an administrator.
   a. For programs offered in a partnership:
      1. One individual must serve as the partnership program director and have primary responsibility for the program and communications with ACEND.
2. Each member organization in the partnership must designate a coordinator (who may be the program
director) for the program within that organization who is employed by the organization.

b. Institutional policies related to faculty roles and workload are applied to the program in a manner that
recognizes and supports the academic and practice aspects of the nutrition and dietetics program, including
allocating time and/or reducing teaching load for administrative functions provided by the director.

c. The program director must:
   1. Have earned at least a master’s degree or equivalent and have a minimum of three years professional
      experience post credentialing.
   2. Be credentialed as a registered dietitian nutritionist or a nutrition and dietetics technician, registered by
      the Commission on Dietetic Registration.
   3. Be a full-time employee of the sponsoring institution (or one or more of the sponsoring partnership
      institutions) as defined by the institution, or a full-time employee of another organization that has been
      contracted by the sponsoring institution.
   4. Not direct another ACEND-accredited nutrition and dietetics education program.

d. The program director responsibilities must include, but are not limited to:
   1. Provision or delegation of responsibilities to assure year-round coverage of director responsibilities in
      the absence of the director or in cases where the director’s full-time appointment does not cover all 12
      months. In programs where the program director assigns some responsibilities to other individuals, the
      director must ensure that all program director responsibilities are accomplished throughout the year.
   2. Development of policies and procedures for effectively managing all components of the program and to
      ensure fair, equitable and considerate treatment of prospective and enrolled students (such as program
      admission, retention and completion policies).
   3. Student recruitment, advisement, evaluation and counseling.
   4. Maintenance of program accreditation including:
      a. Timely submission of fees, reports and requests for major program changes;
      b. Maintenance of the program’s student records, including student advising plans and supervised
         experiential learning hours and verification statements;
      c. Maintenance of complaints about the program received from students or others, including
         disposition of the complaint;
      d. On-going review of program’s curriculum to meet the accreditation standards;
      e. Communication and coordination with program faculty, preceptors and others involved with the
         program and its students; and
      f. Facilitation of processes for continuous program evaluation.

1.6 The program must establish its length and provide the rationale for the program’s length after taking into
consideration the didactic learning and required supervised experiential learning needed by students to
demonstrate the required competencies and mandates from the program’s administration and state legislation.
Programs must include both the didactic and supervised experiential learning components integrated into a
single program.

a. The program must document the planned hours in professional work settings and in alternate experiences.
The majority of the professional work settings hours spent in the major rotations must be completed onsite.
STANDARD 2: Program Mission, Goals and Objectives and Program Evaluation and Improvement

The program must have a clearly formulated and publicly stated mission with supporting goals and objectives by which it intends to prepare students for practice as a Nutrition Health Associate. The program must have a program evaluation plan to continuously evaluate the achievement of its mission, goals and objectives, use the plan to collect data, improve the program based on findings and update the plan accordingly.

REQUIRED ELEMENTS:

2.1 A program evaluation plan must be documented, reviewed annually, updated as needed with changes noted and must include the following components:

   a. The program mission. The program mission must be specific to the program, distinguishes it from other programs in the sponsoring organization(s), and be compatible with the mission statement or philosophy of the sponsoring organization(s).

   b. The program goals. The program must have at least two goals focused on program outcomes for graduates that are consistent with the program’s mission.

   c. The program objectives. The program objectives must measure the full intent of the mission and goals and are used to evaluate achievement of each program goal.

       1. The program must align the following ACEND-required objectives with their program goals and demonstrate that the program is operating in the interest of students and the public. The program must set reasonable target measures when the targets are not specified. Required objectives must be evaluated annually using an average of data from the previous three years:

           a. Program Completion: “At least 80% of program students complete program requirements within ___ years (150% of the program length)”.

           b. Graduate Employment: “Of graduates who seek employment, at least ____ percent are employed in nutrition and dietetics or related fields within 12 months of graduation”.

           c. Employer Satisfaction: The program must develop an objective for employer satisfaction with graduate preparation for entry-level practice.

           d. Qualitative and/or quantitative data needed to determine whether goals and objectives have been achieved.

           e. Groups from which data will be obtained; both internal and external stakeholders must be represented (such as graduates, administrators, faculty, preceptors, employers, practitioners, nutrition and dietetics education program directors, faculty from other disciplines and advisory committees).

           f. Evaluation methods that will be used to collect the data.

           g. Individuals responsible for ensuring that data are collected.

           h. Timeline for collecting the necessary data.

2.2 The program must evaluate the achievement of its goals and objectives based on its program evaluation plan and provide evidence that:

   a. Program outcomes data are collected according to the program evaluation plan, summarized and analyzed by comparing actual achievements with objectives.

   b. Data analysis is used to evaluate the extent to which goals and objectives are being achieved.

   c. The targets set for ACEND-required objectives are met.

   d. Program changes have been made to improve outcomes for unmet objective(s).

   e. Programmatic planning and outcomes evaluation are integrated with institutional planning and assessment, as appropriate.
2.3 Results of the program evaluation process must be used to identify strengths and areas for improvement relative to components of the program (such as policies, procedures, curriculum, teaching methods, faculty, preceptors, resources). Short- and long-term strategies must be developed, and actions must be taken to maintain program strengths and address areas for improvement identified through the evaluation process.
STANDARD 3: Curriculum and Learning Activities

The competencies must be the basis on which the program curriculum and learning activities are built within the context of the mission and goals of the program. Demonstration of competence must be integrated in the coursework and supervised experiential learning activities throughout the program.

REQUIRED ELEMENTS:

3.1 The Curriculum Map template must be used to document:
   a. Each competency (see Appendix A).
   b. Performance indicators (see Appendix A) for each competency on which summative assessment occurs in the curriculum.
   c. Course(s) (including supervised experiential learning) in which summative assessment of performance indicators will occur.
   d. How the curriculum:
      1. is sequentially and logically organized,
      2. progresses from introductory to more advanced learning experiences and
      3. builds on previous knowledge, skills and experience to achieve the expected depth and breadth of competence by completion of the program.

3.2 The program’s curriculum must provide learning experiences to attain the breadth and depth of the required curriculum competencies. Syllabi for courses (including those with supervised experiential learning) taught within the academic unit must include the relevant competencies.
   a. Learning experiences must prepare students for professional practice with individuals with various health conditions in home and community settings.
   b. Learning experiences must prepare students to work with various populations of diverse cultures, genders and across the life cycle.
   c. Learning experiences must address and build competency in diversity, equity and inclusion. The program must ensure that students have the skills to recognize biases in self and others and adapt to, understand and embrace the diversity of the human experience.
   d. Learning experiences must incorporate a variety of educational approaches necessary for delivery of curriculum content to meet learner needs and competencies.
      1. If any portion of the program is offered through distance education, the program assures regular and substantive interaction between students and faculty.
STANDARD 4: Competency Assessment and Curriculum Improvement
The program must continuously assess student achievement of required competencies. The program must collect and analyze aggregate data on student competency attainment. The results of the assessment plan must be used to evaluate and improve the curriculum to enhance the quality of education provided.

REQUIRED ELEMENTS:

4.1 The program must have a plan for assessment of competencies (Appendix A). The plan must identify summative assessment methods used, as well as courses and/or supervised experiential learning activities in which assessment will occur, the process for tracking individual student’s demonstration of performance indicators/competencies.

4.2 The program must document that data on student competency achievement are collected, summarized and analyzed for use in curricular review and improvement.

4.3 Formal curriculum review must routinely occur and:
   a. Use results of program evaluation and competency assessment to determine strengths and areas for improvement.
   b. Include input from students and other stakeholders as appropriate.
   c. Include assessment of comparability of educational experiences and consistency of competency achievement when different courses, delivery methods (such as distance education) or supervised experiential learning sites are used to accomplish the same educational objectives.
   d. Result in actions to maintain or improve student learning.
STANDARD 5: Faculty and Preceptors
The program must have qualified faculty and preceptors in sufficient numbers to provide the depth and breadth of learning activities required in the curriculum and exposure to the diversity of practice. Program faculty, including the program director, must show evidence of continuing competence appropriate to teaching responsibilities, through professional work experience, graduate education, continuing education, and research or other activities leading to professional growth in the advancement of their profession.

REQUIRED ELEMENTS:

5.1 The program must provide evidence that qualified and appropriately credentialed faculty and preceptors are sufficient to ensure implementation of the program’s curriculum and the achievement of program goals and objectives.

5.2 The requirements for program faculty (faculty within the academic unit) must include:
   a. Program faculty, including the program director, must meet the sponsoring organization’s criteria for appointment and have sufficient education in a field related to the subject in which they teach or must meet the institution’s policy for education and/or equivalent experience.
   b. Program faculty, including the program director, must show evidence of continuing competence and ongoing professional development appropriate to their teaching responsibilities.
   c. Program faculty and instructors must be provided orientation to the mission, goals and objectives of the nutrition and dietetics program, the ACEND Standards and required competencies. Program faculty must be trained in the use of distance education pedagogy and recommended practices.
   d. Program faculty must be trained on strategies to recognize and monitor biases in self and others and reduce instances of microaggressions and discrimination.

5.3 The requirements for program preceptors must include:
   a. The education and experience needed to provide appropriate guidance for the supervised experiential learning. Preceptors must be licensed, as appropriate to meet state and federal regulations, or credentialed, as needed, in the area in which they are supervising students and must be qualified to serve as educators and professional role models.
   b. Orientation to the mission, goals, objectives of the nutrition and dietetics program, the ACEND Standards and required competencies.
   c. Program preceptors must be trained on strategies to recognize and monitor biases in self and others and reduce instances of microaggressions and discrimination.

5.4 Formal evaluation of program faculty and preceptors must routinely occur:
   a. The program must have a process for the periodic review, including input from students, of the effectiveness of faculty and preceptors.
   b. Program faculty, instructors, and preceptors must receive feedback, and training as needed, based on program evaluation and input from students.
STANDARD 6: Supervised Experiential Learning Sites
The program must have policies and procedures to maintain written agreements with institutions, organizations and/or agencies providing supervised experiential learning to meet the competencies. The policies and procedures must address the selection and periodic evaluation of the adequacy and appropriateness of facilities to ensure that sites are able to provide supervised experiential learning compatible with the competencies that students are expected to achieve.

REQUIRED ELEMENTS:

6.1 Supervised experiential learning site requirements:
   a. The institution/organization must establish policies that outline the issuance and maintenance of written affiliation agreements and the selection criteria, evaluation process and timeline for evaluation of adequacy and appropriateness of supervised experiential learning facilities.
   b. Agreements must delineate the rights and responsibilities of both the sponsoring organization and affiliating institutions, organizations and/or agencies.
   c. Agreements must be signed by individuals with appropriate institutionally-assigned authority in advance of placing students.
STANDARD 7: Information to Prospective Students and the Public

The program must provide clear, consistent and accurate information about all program requirements to prospective students and the public at large.

REQUIRED ELEMENTS:

7.1 Program policies, procedures, practices, and materials related to student recruitment and admission must comply with state and federal laws and regulations. Recruitment and admission practices must be applied fairly and consistently. Program shall demonstrate by tangible action their commitment to enrolling a diverse student body.

7.2 All information to prospective students and the public must be current and consistent. Each information source must provide reference to where complete program information can be found.

7.3 Information about the program must be readily available to prospective students and the public via a website and must include at least the following:
   a. Accreditation status, including the full name, address, phone number and website of ACEND on the program’s website homepage.
   b. Description of the program, including program’s mission, goals and objectives.
   c. A statement that program outcomes data are available upon request.
   d. Information about the requirements and process to become a Nutrition Health Associate and how the program fits into the process.
   e. Estimated cost to student, including tuition and fees, necessary books and supplies, transportation, typical charges for room and board or housing, and any other program-specific costs.
   f. Application and admission requirements.
   g. Academic and program calendar or schedule.
   h. Graduation and program completion requirements.
      i. Availability of financial aid and loan deferments (federal or private), scholarships, stipends and other monetary support, if applicable.
   j. Guidance about distance education components, such as technology requirements, if applicable.
   k. If students are required to locate their own supervised experiential learning sites and/or preceptors, requirements for this must be described, including the program’s role and responsibility to assist students to ensure timely completion of the program.
   l. A description of the criteria and policies and procedures used to evaluate and award credit for prior learning experiences, such as coursework, supervised experiential learning hours or direct assessment, and the types and sources from which credit will not be accepted.
STANDARD 8: Policies and Procedures for Enrolled Students

The program must have written policies and procedures that protect the rights of students and are consistent with current institutional practice.

REQUIRED ELEMENTS:

8.1 Programs are required to have policies and procedures for program operations including:
   a. Student Performance Monitoring: The program’s system of monitoring student performance must provide for the early detection of academic difficulty and must take into consideration professional and ethical behavior and academic integrity of the student.
   b. Student Remediation and Retention: Concerns about a student’s performance in meeting program requirements are addressed promptly and adequately to facilitate student’s progression in the program.
   c. Supervised Experiential Learning Documentation: The program must establish procedures for tracking individual student’s supervised experiential learning hours in professional work settings and in alternate supervised experiential learning, such as simulation, case studies and role playing. Hours granted for prior learning, if given, also must be documented.
   d. Equitable Treatment: The program must establish policies to support the diverse needs of students, ensure an inclusive environment, and to ensure equitable treatment by program faculty and preceptors of students from all backgrounds, including with respect to race, ethnicity, national origin, gender/gender identity, sexual orientation, religion, disability, size, socioeconomic status or age.

8.2 The following policies and procedures specific to nutrition and dietetics programs must be provided to students, such as in a single comprehensive document, such as in a program handbook or on a program website.
   a. Insurance requirements, including those for professional liability.
   b. Liability for safety in travel to or from assigned areas.
   c. Injury or illness while in a facility for supervised experiential learning.
   d. Drug testing and criminal background checks, if required by the supervised experiential learning-facilities.
   e. Requirement that students doing supervised experiential learning must not be used to replace employees.
   f. When students are paid compensation as part of the program, policies must be in place to define the compensation practices.
   g. The process for filing and handling complaints about the program from students and preceptors that includes recourse to an administrator other than the program director and prevents retaliation. The program must maintain a record of student complaints for a period of seven years, including the resolution of complaints.
   h. Process for submission of written complaints to ACEND related to program noncompliance with ACEND accreditation standards after all other options with the program and institution have been exhausted.
   i. If the program grants credit, supervised experiential learning hours or direct assessment for student’s prior learning, it must define procedures for evaluating equivalence of prior education or experience. Otherwise, the program must indicate that it has no policy for assessing prior learning or competence.
   j. Process for assessment of student competence and regular reports of performance and progress.
   k. Program retention and remediation procedures; students must have access to remedial instruction such as through tutorial support.
   l. Disciplinary/termination procedures.
   m. Graduation and/or program completion requirements including maximum amount of time allowed for completing program requirements applicable at the time student enrolls.
   n. Verification statement requirements and procedures ensuring that all students completing requirements as established by the program receive verification statements.
   o. Programs using distance instruction and/or online testing must employ strategies to verify the identity of a student.
p. Withdrawal and refund of tuition and fees.
q. Program schedule, vacations, holidays and leaves of absence.
r. Protection of privacy of student information, including information used for identifying students in distance learning.
s. Student access to their own student files.
t. Access to student support services, including health services, counseling, tutoring and testing and financial aid resources.
### APPENDIX A: Competencies, Performance Indicators, Learning Activities, Practice Illustrations and Assessment Strategies

#### AP Unit 1 Foundational Knowledge
Applies foundational food and nutrition knowledge to ensure safe, competent and effective services.

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<thead>
<tr>
<th>Competencies</th>
<th>Example Performance Indicators</th>
<th>Learning Activities and Practice Illustrations</th>
<th>Demonstration/Assessment</th>
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<tr>
<td><strong>1.1</strong></td>
<td>Demonstrates an understanding of the principles of food and nutrition. (K)</td>
<td>1.1.1 Considers the impact of food and nutrition on wellness, health promotion and disease across the life cycle. (K)</td>
<td>Case studies, role playing, multiple choice test, presentation, project work, field work:</td>
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<td>1.1.2 Incorporates basic knowledge of food and nutrition requirements to provide appropriate services across the life cycle and across disease states. (K)</td>
<td>• Identify food shortage issues and needs at a community food bank.</td>
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<td>1.1.3 Identifies, assesses and manages potential food safety risks that may impact food and individual's health. (S)</td>
<td>• Conduct a food safety and culturally sensitive food demonstration.</td>
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<td>1.1.4 Identifies common risks and suggests improvements to basic nutritional risk management plans. (K)</td>
<td>• Present healthy eating education material at a community education fair.</td>
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<td>1.1.5 Modifies recipes for acceptability and affordability to accommodate cultural diversity and health status in less complex situations and health conditions. (S)</td>
<td>• Visit a food bank and identify the food supply needs based on the determinants of health relevant to the community.</td>
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<td>1.1.6 Applies knowledge of food insecurity in the provision of community health services. (S)</td>
<td>• Create a meal plan including: costing of food items; meal preparation necessary directions (e.g. cooking temperatures, directions on how to properly cool, and store any leftovers).</td>
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<td>• Identify food safety issues (storage, cooking techniques, eating uncooked foods) when conducting a home visit.</td>
<td>• Pass exam on principles of food and nutrition.</td>
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<td>• Teach basic food safety principles when preparing and storing foods (e.g. preparing chicken, foods with mayonnaise).</td>
<td>• Demonstrate the ability to respond appropriately to questions.</td>
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<td>• Modify a meal plan incorporating cultural, and economic factors.</td>
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<td>• Suggest food substitutes (e.g. beans for meat) to clients whose nutritional needs are well established.</td>
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<td>• Conduct a nutrition risk assessment using a standardized checklist.</td>
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<td>• Read and understand nutrition labels.</td>
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<td>• Review meals plans and identify unhealthy, non-nutritious foods and beverages (e.g. soda/pop, chips, candy, breads).</td>
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<td><strong>1.2</strong></td>
<td>Integrates knowledge of determinants of health into all aspects of nutrition care and services. (S)</td>
<td>1.2.1 Explains to stakeholders how demographic, social and economic factors and ecological issues affect the individual, group and community well-being. (S)</td>
<td>Presentation, role playing, grocery shop tour, revise presentation, group discussion, project work:</td>
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<td>1.2.2 Takes into consideration demographics, lifestyle risk factors and socioeconomic factors to manage food and nutrition needs. (K)</td>
<td>• Add pictures and change terminology to modify existing education material for readability and literacy level.</td>
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<td>• Communicate the community’s and/or client’s cultural, economic, social, environmental or ecological difference during team meetings.</td>
<td>• Modify education material for different language application.</td>
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<td>• Consider the client’s economic status when recommending food choices.</td>
<td>• Identify a recent situation that affected or could affect food supply and access (e.g. drought, fire, employee strike, foodbank closure, lack of funding for meals-on-wheels).</td>
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<td>• Recommend alternative foods choices during grocery shop tours.</td>
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<td>• Consider the environmental factors (e.g. recent drought, fires, growing conditions, grocery store location) when discussing community needs.</td>
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Applies foundational food and nutrition knowledge to ensure safe, competent and effective services.

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| 1.2.3        | Identifies key environmental factors that affect services and access to food. (K) | • Recommend community services (foodbank, meals-on-wheels, farmers market, discount grocery store) when access to food is an identified issue.  
• Describe major nutrition concerns for a group or community.  
• Modify existing education material incorporating the identified determinants of health relevant to the community or client.  
• Demonstrate understanding of the community risk factors (e.g. personal safety, access to food, lack of community resources) that may impact wellness and food and nutrition. | identify key community issues; and possible alternative solutions.  
• Review a case study, list relevant resources, risks factors and affordable foods and appropriate wellness programs.  
• Present a WIC case study and plan a menu using WIC foods, planning menus and SNAP budgets. |
| 1.3          | Demonstrates knowledge of wellness strategies that contribute to long term health. (K) | | Presentation, role playing, project work, field work.  
• Create an implementation plan for a community or an employee wellness event (e.g. well mom and baby classes, diabetes education session, health fair, grocery store tour, cafeteria tour, food preparation class).  
• Make modifications to non-nutritious meal plan.  
• Identify a current food and nutrition or health trend and present how media, culture, and peer pressure has impacted the issue.  
• Create a poster presentation for a community fair, wellness center, human resources department. |
| 1.4          | Applies principles of food safety and sanitation standards specific to culinary | • Conduct a search and identify evidence-based literature that supports wellness strategies.  
• Provide insight into the community needs when an organization, RD or others are developing a community exercise or food and nutrition program (e.g. average age, accessibility, economic status, impact of the community’s cultural, values and beliefs).  
• Identify a location for community nutrition and wellness events (e.g. farmers market)  
• Create marketing materials (e.g. pamphlets, flyers) for a community wellness event.  
• Participate in nutrition health fairs and deliver education material to schools and community centers.  
• Administer community feedback surveys and make recommendations based on results.  
• Promote healthy eating and preventative health measures.  
• Inform clients on the basic principles of a lifestyle changes and refer to community services (e.g. smoking cessation and exercise programs).  
• Identify knowledge that when food is prepared well it may impact wellness (e.g. raw or steamed vegetables versus overcooking, under cooked chicken). | Multiple choice test, cases study, demonstration, presentation, food lab, field work.  
• Conduct a cooking demonstration that provides food safety basics. |
### AP Unit 1 Foundational Knowledge

**Applies foundational food and nutrition knowledge to ensure safe, competent and effective services.**

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| skills, food supply and food storage. (S) |  | • Apply food safety principles while preparing, serving and storing foods.  
• Keep abreast of food recalls and identify the importance of taking action. | • Present food safety and sanitation presentation at a community event.  
• Meet qualifications for the Food Handlers Certificate or the State License for Sanitation.  
• Prepare a food safety poster for a community center, hospital or long-term care staff.  
• Present information to a group on importance of handwashing. |
| 1.5 | Identifies appropriate services and refers individuals to public health and health care systems. (K)  
Promotes nutrition programs and resources within the community. (K) | • Identify community resources that support access to food and nutrition and wellness activities (e.g. WIC, meals-on-wheels, online ordering and delivering, foodbank, farmers markets, public health units, social service programs, refugee programs).  
• Advocate for community resources (foodbank, meals-on-wheels, farmers market, community wellness events, education material).  
• Create a simple marketing plan and advertising materials for a nutrition program or services.  
• Advocate for a client who requires access to community services. (e.g. elderly client with limited mobility requires meals-on-wheels, home delivery services etc.). | Case study, presentation, literature search, paper, mock nutrition program or service.  
• Review case studies and identify appropriate community resources (e.g. Make appropriate referral for a low income pregnant mom).  
• Attend a community team meeting and present a case requiring access to services. |
### AP Unit 2: Professionalism
Assumes professional responsibilities to provide safe, ethical and effective nutrition services.

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<td>2.1</td>
<td>Demonstrates ethical behaviors becoming of a professional. (D)</td>
<td>2.1.1 Refers individuals for consultation when issues are beyond scope of practice. (D)</td>
<td>Demonstrate understanding of the legislative scope of practice for RDs, NDTRs and other members of the healthcare team.</td>
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<td></td>
<td>2.1.2 Takes accountability for actions and decisions. (D)</td>
<td>2.1.3 Demonstrates honesty and integrity through trustworthy, transparent, respectful and non-judgmental behaviors. (D)</td>
<td>Review and describe health and nutrition related ethical dilemmas.</td>
</tr>
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<td></td>
<td>2.1.4 Practices in a manner that respects diversity and avoids prejudicial treatment of an individual, group or the community. (D)</td>
<td>2.1.5 Applies person-centered principles to all activities and services. (D)</td>
<td>Identify and manage professional boundary issues (e.g. community friendships, receiving and giving gifts from/to clients, social media interactions, sharing personal information).</td>
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<tr>
<td></td>
<td>2.1.6 Understands the dynamics of the provider-individual relationship. (K)</td>
<td>2.1.7 Recognizes, maintains and balances professional boundaries with individuals. (D)</td>
<td>Refer a client to more advance services or healthcare professional.</td>
</tr>
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<td></td>
<td>2.1.8 Recognizes and manages ethical dilemmas. (D)</td>
<td>2.1.9 Analyzes the impact of one’s own professional behaviors, values, beliefs and actions on others. (D)</td>
<td>Identify the impact of the client’s environment (home setting, work setting, community services), the client’s occupation (what they do for living and activities of daily living) and client’s own personal beliefs, values and needs on the level of care or nutrition care needs.</td>
</tr>
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<td></td>
<td>2.1.10 Applies principles of the informed consent process prior to engaging an individual in services. (D)</td>
<td>2.1.10 Applies principles of the informed consent process prior to engaging an individual in services. (D)</td>
<td>Reflect on own personal beliefs and values and identify the impact to the services or care.</td>
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<td>Engage the client in the informed consent process by ensuring client fully understands the proposed service and allow the client to ask questions.</td>
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<td>Case study, literature review, paper, reflective practice, role play.</td>
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<td>Review case studies that presents an ethical dilemma; weigh the options and best approach and indicate the rationale for the actions taken.</td>
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<td>Complete reflective practice exercise to identify personal beliefs and values as it relates to food and nutrition, accessing community services, cultural needs; and how these beliefs and values impact professional relationship and practice.</td>
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<td>Review several professional boundaries case studies; identify the boundary issues; how breaching the boundary will impact the client-professional relationship; and describe how to manage the situation.</td>
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<td>Obtain client/patient consent for the collection, use, and disclosure of personal information.</td>
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<tr>
<td>Competencies</td>
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<td>Learning Activities and Practice Illustrations</td>
<td>Demonstration/Assessment</td>
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</table>
| 2.2          | Engages in reflective practice activities to maintain ongoing competence and self-awareness. (D)                                                                                                                                                                                                                                                                                                                      | • Demonstrate understanding of Continuing Competence.  
• Set SMART goals based on feedback from preceptors, peers and/or clients/patients.  
• Attend ongoing trainings, seminars and webinars to keep abreast in the field of nutrition and be competent.  
• Complete a self-assessment of own knowledge, skill and judgment.  
• Consider and incorporate personal experiences.  
• Accept responsibilities and accountability for own actions and decisions.                                                                                                                                                                                                                                                                                       | Reflective practice exercise, complete the CDR Professional Development Portfolio, multiple source feedback (360 surveys), case study  
• Attend in-services or complete online continuing education credits.  
• Complete a self-assessment tool.  
• Develop a learning plan using SMART goals to support continuous learning.  
• Review a case and consider the outcome and how the actions of the nutrition or healthcare team impacted the client.                                                                                                                                                                                                                                                                                               |
### AP Unit 2: Professionalism
Assumes professional responsibilities to provide safe, ethical and effective nutrition services.

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</table>
| 2.3          | Adheres to legislation, regulations, standards of practice and organizational policies. (D) | 2.3.1 Understands legislative scope of practice and the professional ethics for nutrition and dietetics practitioners. (K)  
2.3.2 Understands structural and policy changes in public and community health and social services programs. (K)  
2.3.3 Adheres to confidentiality and privacy legislation by maintaining confidentiality of client information and acts within the Health Insurance Portability and Accountability Act (HIPAA) requirements. (D)  
2.3.4 Adheres to practice standards and organization's policies. (D)  
2.3.5 Demonstrates awareness of all mandatory reporting obligations. (K)  
2.3.6 Protects the confidentiality and security of information throughout collection, storage, use, dissemination, and destruction process. (D)  
2.3.7 Works within the defined role and responsibilities outlined by the employer. (D) |  • Demonstrate understanding of the legislative scope of practice for RDs and NDTRs.  
• Identify knowledge and skills that are beyond profession's practice expectations.  
• Identify client care needs that are beyond personal knowledge, skill and judgment  
• Demonstrate understanding of the Health Insurance Portability and Accountability Act (HIPAA).  
• Implement day-to-day practices to reduce the risk of unauthorized access to patient confidential information (e.g. password protect computer, ensure secure storage of personal information when traveling or transporting patient files).  
• Demonstrate understanding of mandatory report obligations (e.g. reports suspect, elderly or child abuse.)  
• Understand client’s right to privacy and confidentiality (e.g. does not share client information or situation with others, limits access of information, reports a potential breach).  
• Maintain client records according to agency policy. | Case studies, literature review, quiz, field work.  
• Complete a learning module on the topic (confidentiality, privacy, HIPAA).  
• Review case studies related to the potential breach of confidentiality and privacy; identify key issues; and steps to take to a manager the situation.  
• Attend a lobby day.  
• Review a case study that presented a client's who care needs are beyond the associate degree scope of practice and competence; identify the skills required for the client and make appropriate referral. |
## AP Unit 3: Individual and Community Services
Applies and integrates person-centered principles supporting access to services, and promotes health and wellness of an individual and community.

### Competencies

<table>
<thead>
<tr>
<th>3.1</th>
<th>Screens basic nutrition status and availability of resources to determine the individual's and community's needs. (D)</th>
</tr>
</thead>
</table>

#### Example Performance Indicators

- **3.1.1** Uses standardized nutrition screening tools to identify the individual’s and community’s nutritional risks and needs. (D)
- **3.1.2** Adheres to guidelines, protocols and policies when performing nutrition screening. (D)
- **3.1.3** Collects data using interviewing skills, observation and available evidence to inform nutrition screening process. (D)
- **3.1.4** Collects relevant information about the individual’s prior function, abilities, nutritional health and environment. (D)
- **3.1.5** Identifies internal and external environmental factors that may impact the individual’s or community’s nutrition health outcomes. (D)
- **3.1.6** Identifies and accesses resources that may enhance the nutritional health and wellness of the individual and community. (D)
- **3.1.7** Reports findings to support the development of the nutrition plan and to inform individual or community nutrition needs. (D)
- **3.1.8** Recognizes individual’s nutritional health status, symptoms and abilities and refers to others when appropriate. (D)
- **3.1.9** Determines factors that may influence nutrition intake and nutritional status. (D)
- **3.1.10** Recognizes nutritional health behaviors and determinants of health attributes that influence food habits and preferences in individuals, groups and communities. (D)

#### Learning Activities and Practice Illustrations

- Conduct surveys to support a needs assessment for a community program or service.
- Explore the client’s personal beliefs, values, food preference through interview and observation.
- Collect client weight, height, BP, pulse, heart rate, BMI, health and nutrition health history, food intake.
- Note the client physical and environmental limitations when conducting a home assessment.
- Identify client and environmental factors that may impact nutrition and food intake (e.g. oral and dental condition, age, illness or health condition, cooking facilities, accessibility to food).
- Arrange for a home visit or community service (e.g. social service, meals-on-wheels).
- Communicate findings during team meeting using appropriate medical terminology.
- Consider and communicate the environmental factors that may impact the success of a community program or service (e.g. location, accessibility, cost, heating and cooling, kitchen facilities).
- Recognize signs of malnutrition and chronic health conditions (e.g. diabetes, hypertension, heart failure) that may impact nutrition health or be impacted by food intake.
- Understand the lifecycle as it relates to individual health and nutrition needs (e.g. breastfeeding mother, elder population, child/infant)
- Identify situations when referral or immediate action is required (e.g. emergency, child malnutrition, suspect health condition, abuse or neglect, scope of practice needs).

#### Demonstration/Assessment

- Case study, role play, mock situation, project work, field work.
- Use a mock situation and standardized tool to screen clients who are at risk and require nutrition and dietary services; identify the level of risk; required actions; referral source; and community resource.
- Complete a screening tool for a WIC program.
### AP Unit 3: Individual and Community Services

Applies and integrates person-centered principles supporting access to services, and promotes health and wellness of an individual and community.

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<tr>
<td><strong>3.2</strong></td>
<td>Contributes to the development, monitoring and modifications of the individual’s plan of care. (D)</td>
<td>3.2.1 Reports nutrition screening data to inform the development of the nutrition plan of care. (D)</td>
<td>• Create a meal plan that is culturally sensitive.</td>
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<td>3.2.2 Accurately communicates individual’s nutritional health status, symptoms and abilities and facilitates appropriate referrals. (D)</td>
<td>• Report client progress during team meeting and in clinical records and reports.</td>
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<td>3.2.3 Communicates cultural and personal nutrition needs of the individual and community to appropriate team members. (D)</td>
<td>• Substitute food appropriate to the client’s needs (e.g. preference, culture, allergies and intolerance).</td>
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<td>3.2.4 Supports the individual’s understanding of the nutrition plan of care in his or her cultural context. (D)</td>
<td>• Present potential client barriers in meeting the established nutrition care plan (e.g. food accessibility, health conditions, finances, physical function, cooking facilities).</td>
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<td>3.2.5 Implements the established nutrition program and plan of care in collaboration with the individual and other team members. (D)</td>
<td>• Outline to the patient the expectation of the nutrition care plan.</td>
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<td>3.2.6 Monitors and reports an individual’s nutritional health status following established protocols and procedures. (D)</td>
<td>• Meal plan, case study, presentation, field work.</td>
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<td>3.2.7 Reports changes in nutritional health status, situation, environment and or compliance to appropriate team member. (D)</td>
<td>• Create a meal plan for another student, friend or family member.</td>
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<td>• Engage in a real or mock team meeting; present recommendations based on client’s needs and awareness of the client’s situation or environment.</td>
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<td><strong>3.3</strong></td>
<td>Considers the factors that impact food availability in the community within the social determinants of health. (D)</td>
<td>3.3.1 Uses standardized nutrition educational material templates, forms and protocols in menu planning. (D)</td>
<td>• Consider the availability of neighborhood grocery stores and farmer’s markets.</td>
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<td>3.3.2 Demonstrates basic meal preparation skills applying culinary skills and knowledge of healthy food choices and disease management. (D)</td>
<td>• Substitute food in different meal plans for cost efficient choices.</td>
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<td></td>
<td>3.3.3 Reviews an individual’s menus considering the nutrition and health needs based on established criteria and nutrition plan of care. (D)</td>
<td>• Substitute meals on menu plans based on the client’s cultural needs, food allergies/tolerance, chronic health conditions (e.g. heart failure, diabetes), lifecycle and financial status and food availability, (e.g. growing season, distance to store).</td>
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<td>• Case study, observation and demonstration, project work.</td>
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<td>• Conduct a cooking demonstrate specific to a disease or lifestyle.</td>
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<td>• Conduct literature search finding evidence-based education materials from different national and local associations.</td>
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<td>• Review several case studies with different key factors (e.g. age, cultural needs, health condition, living conditions, food accessibility, planting season); and identify the different needs and modify the meal plan or menu accordingly.</td>
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</table>
AP Unit 3: Individual and Community Services  
Applies and integrates person-centered principles supporting access to services, and promotes health and wellness of an individual and community.

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<tr>
<td>3.3.4</td>
<td>Considers the factors that impact food availability in the community. (D)</td>
<td>3.3.4: Conduct a project work, case studies, presentation, receipt modification.</td>
<td>Project work, case studies, presentation, receipt modification.</td>
</tr>
<tr>
<td>3.3.5</td>
<td>Considers individual needs, nutritional requirements, and aesthetic characteristics of foods, following established guidelines. (D)</td>
<td>3.3.5: Conduct a literature review for meal plans that are evidence-informed literature or created by health organizations and agencies (e.g. American Diabetes Association, American Heart Association, Centers for Disease Control and Prevention).</td>
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</tr>
<tr>
<td>3.4</td>
<td>Provides nutrition education using approved materials and protocols for meal planning, recipes, understanding food labels and purchasing. (D)</td>
<td>3.4.1: Conduct a literature review for meal plans that are evidence-informed literature or created by health organizations and agencies (e.g. American Diabetes Association, American Heart Association, Centers for Disease Control and Prevention).</td>
<td></td>
</tr>
<tr>
<td>3.4.1</td>
<td>Provides nutrition education using approved materials and protocols for meal planning, recipes, understanding food labels and purchasing. (D)</td>
<td>3.4.1: Conduct a literature review for meal plans that are evidence-informed literature or created by health organizations and agencies (e.g. American Diabetes Association, American Heart Association, Centers for Disease Control and Prevention).</td>
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<tr>
<td>3.4.2</td>
<td>Applies knowledge of basic food science and food preparation techniques. (D)</td>
<td>3.4.2: Adjust a recipe to reduce or modify ingredients (e.g. reduce saturated fat, salt, sugar) to address disease state (e.g. hypertension, heart failure, diabetes) and client limitations (e.g. chewing abilities).</td>
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<td>3.4.3</td>
<td>Reviews meal plans and recipes and makes recommendations for changes based on established criteria. (D)</td>
<td>3.4.3: Select and modify education material using evidence-informed literature.</td>
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<td>3.4.4</td>
<td>Promotes healthful food choices and healthful eating behavior. (D)</td>
<td>3.4.4: Conduct a cooking class modifying recipe to meet needs of attendees.</td>
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<tr>
<td>3.5</td>
<td>Supports recipe modification and meal planning based on cultural needs and preferences in collaboration with other professionals. (D)</td>
<td>3.5.5: Modify a single meal plan to meet the needs of several different case studies and nutritional plans of care.</td>
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<tr>
<td>3.5.1</td>
<td>Identifies and explains individual, public, private, organizational and government roles and responsibilities. (K)</td>
<td>3.5.1: Conduct a needs assessment using pre-developed tools or criteria.</td>
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<tr>
<td>3.5.2</td>
<td>Maintains current knowledge of community resources available to clients/individuals and the community. (K)</td>
<td>3.5.2: Participate in community forms and focus groups.</td>
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</tr>
<tr>
<td>3.5.3</td>
<td>Contributes to a community needs assessment and supports implementation of services. (D)</td>
<td>3.5.3: Conduct feedback surveys and collate data to support the evaluation of the program.</td>
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</tr>
<tr>
<td>3.5.4</td>
<td>Engages in stakeholder consultation to support the development and implementation of a program, service and resource. (D)</td>
<td>3.5.4: Participate in community forms and focus groups.</td>
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</tr>
<tr>
<td>3.5.5</td>
<td>Takes into consideration sustainability and population disparities when planning for the program, service and resources. (D)</td>
<td>3.5.5: Conduct feedback surveys and collate data to support the evaluation of the program.</td>
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<tr>
<td>3.5.6</td>
<td>Contributes to the design of the nutrition program, service and resources considering the determinants of health. (D)</td>
<td>3.5.6: Conduct feedback surveys and collate data to support the evaluation of the program.</td>
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### AP Unit 3: Individual and Community Services
Applies and integrates person-centered principles supporting access to services, and promotes health and wellness of an individual and community.

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<td>3.5.7</td>
<td>Obtains community and organizational support for the implementation of the program, service and resource. (S)</td>
<td>• Identify evidence-informed literature and already developed education material from local and national organizations and agencies (e.g. ADA, Heart Association, CDC, public health). • Prepare a presentation to a group or individual using evidence-informed and supervisor-approved materials. • Determine the delivery mode (e.g. print, radio, and internet) and method (e.g. pamphlet, poster, in-person session, blog, social media) based on the project scope and target audience attributes (e.g. age, access to technology, culture). • Identify preferred learning style and learning needs or limitations (e.g. language, sight/hearing impaired). • Promote healthy affordable food choices. • Conduct surveys and focus group to evaluate the effectiveness of the information or education. • Confirm client’s understanding of the information (e.g. return demonstration, asking appropriate questions).</td>
<td>Field work, project work, group work, presentation, paper. • Modify education material based on a specific audience, create a distribution plan and present the education material to the class. • Create a list of resources and provide examples of how to utilize these resources in the community.</td>
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<td>3.5.8</td>
<td>Evaluates services and resources using agency-approved evaluation criteria, tools and methods. (D)</td>
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<tr>
<td>3.6</td>
<td>Provides nutrition information and approved evidence-informed nutrition educational materials to meet the needs of the individual and community. (D)</td>
<td>• Identify evidence-informed literature and already developed education material from local and national organizations and agencies (e.g. ADA, Heart Association, CDC, public health). • Prepare a presentation to a group or individual using evidence-informed and supervisor-approved materials. • Determine the delivery mode (e.g. print, radio, and internet) and method (e.g. pamphlet, poster, in-person session, blog, social media) based on the project scope and target audience attributes (e.g. age, access to technology, culture). • Identify preferred learning style and learning needs or limitations (e.g. language, sight/hearing impaired). • Promote healthy affordable food choices. • Conduct surveys and focus group to evaluate the effectiveness of the information or education. • Confirm client’s understanding of the information (e.g. return demonstration, asking appropriate questions).</td>
<td>Field work, project work, group work, presentation, paper. • Modify education material based on a specific audience, create a distribution plan and present the education material to the class. • Create a list of resources and provide examples of how to utilize these resources in the community.</td>
</tr>
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<td>3.6.1</td>
<td>Determines the needs of the individual or group considering the determinants of health culture and the readiness for change. (D)</td>
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<td>3.6.2</td>
<td>Selects appropriate evidence-informed materials to meet the needs of the audience. (D)</td>
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<tr>
<td>3.6.3</td>
<td>Selects the appropriate delivery method to meet the needs of the audience and overall nutrition goals. (D)</td>
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<tr>
<td>3.6.4</td>
<td>Suggests modifications to the materials to ensure cultural acceptance. (D)</td>
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<tr>
<td>3.6.5</td>
<td>Evaluates the effectiveness of the nutrition information and education. (D)</td>
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## AP Unit 4: Cultural Competence

Applies cultural principles to guide services and to positively impact nutrition and health behaviors of individuals and the community.

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<tr>
<td><strong>4.1</strong></td>
<td><strong>Demonstrates an understanding of the principles of cultural competence.</strong> (DS)</td>
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<tr>
<td>4.1.1</td>
<td>Understands basic principles of culture, cultural competency, and cultural humility. (K)</td>
<td>Undertake a process of reflection on [his or her] own cultural identity and recognize the impact of [his or her] own culture on [his or her] practice.</td>
<td>Group work, case study, field work, presentation, reflective practice exercise, literature review, reflective practice.</td>
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<tr>
<td>4.1.2</td>
<td>Develops an awareness of how cultural differences influence interactions. (K)</td>
<td>Use culturally appropriate wording and visuals when presenting or modifying education materials.</td>
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<tr>
<td>4.1.3</td>
<td>Gains a holistic understanding of the individual’s and community’s needs considering the determinants of health. (K)</td>
<td>Advocate for alterations to a nutrition care plan that do not meet the client’s preferences, cultural, values or beliefs.</td>
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<tr>
<td>4.1.4</td>
<td>Develops self-awareness of personal beliefs, values and biases to better serve individuals from different cultures and backgrounds. (S)</td>
<td>Demonstrate knowledge of diverse eating patterns (e.g. Jewish dietary laws, hot and cold theory, holiday traditions).</td>
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<tr>
<td>4.1.5</td>
<td>Respects the human rights of individuals and the community. (D)</td>
<td>Obtain data that provides information on the community’s ethnic background, economic level, annual average household income and education level.</td>
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<tr>
<td>4.1.6</td>
<td>Takes into consideration the culture of the work setting and the different cultures of the team members. (D)</td>
<td>Use Ethnic Food Guide Pyramids when modifying menu plans.</td>
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**Learning Activities and Practice Illustrations:**

- Undertake a process of reflection on [his or her] own cultural identity and recognize the impact of [his or her] own culture on [his or her] practice.
- Use culturally appropriate wording and visuals when presenting or modifying education materials.
- Advocate for alterations to a nutrition care plan that do not meet the client’s preferences, cultural, values or beliefs.
- Demonstrate knowledge of diverse eating patterns (e.g. Jewish dietary laws, hot and cold theory, holiday traditions).
- Obtain data that provides information on the community’s ethnic background, economic level, annual average household income and education level.
- Use Ethnic Food Guide Pyramids when modifying menu plans.
- Review the American’s with Disabilities Act.
- Demonstrate consciousness about and sensitivity toward the way in which social, historical and cultural issues shape clients’ values, understandings and practices and, importantly, how these issues need to be considered in the delivery of services.
- Identify personal bias or personal cultural experiences that heighten stereotyping individuals.
- Identify cultural beliefs or religions that may impact the client’s food choices or health decisions (e.g. refusal for blood transfusion, no pork, consumption of raw fish).

**Demonstration/Assessment:**

- Group work, case study, field work, presentation, reflective practice exercise, literature review, reflective practice.
- Modify meal plans for ethnic individual and groups.
- Modify education material to be culturally sensitive to the population (e.g. community can identify with the pictures—ethically accessible, foods represent cultural preferences).
- Conduct a literature search on a topic related to a historic cultural issue or historic event that has helped shaped our healthcare or nutritional health.
- Complete a self-assessment related to one’s own cultural beliefs, values, and preferences.
### AP Unit 4: Cultural Competence
Applies cultural principles to guide services and to positively impact nutrition and health behaviors of individuals and the community.

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<td><strong>4.2</strong></td>
<td><strong>Identifies and addresses cultural needs of the individual and community. (D)</strong></td>
<td><strong>4.2.1 Identifies and addresses barriers to implementing culturally competent practices. (D)</strong></td>
<td><strong>Case study, presentation, project work, observation, field work.</strong>  &lt;br&gt;• Present a project that demonstrates how cultural difference affect a community program or service.  &lt;br&gt;• Attend a team meeting and present cultural norms of the community during a team meeting.  &lt;br&gt;• Prepare a presentation of their own community’s ethnic background, hometown’s poverty level, annual average income and education level; and identify how this data has an impact on their community’s culture.</td>
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<td><strong>4.2.2 Identifies strategies for dealing respectfully with individuals whose cultural background or language is different from one’s own. (S)</strong></td>
<td><strong>4.2.3 Recognizes the importance of social and cultural norms, community wishes and challenges with integration into the community. (K)</strong></td>
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<td><strong>4.2.4 Modifies services to meet the needs of culturally diverse clients/patients and groups. (D)</strong></td>
<td><strong>4.2.5 Promotes delivery of culturally sensitive nutrition care and resources. (D)</strong></td>
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<td><strong>4.3 Demonstrates knowledge of foods, cultural and religious food traditions, eating patterns and trends in the community. (S)</strong></td>
<td><strong>4.3.1 Identifies individual’s and group’s eating patterns. (K)</strong></td>
<td><strong>Presentation, case study, field work.</strong>  &lt;br&gt;• Modify a meal plan for several different case studies, which present different cultural needs, eating trends and religious beliefs.  &lt;br&gt;• Modify a predeveloped education material (e.g. brochure) incorporating culturally sensitive pictures and language.</td>
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<td><strong>4.3.2 Recognizes diversity in eating patterns, food preparation and traditions. (K)</strong></td>
<td><strong>4.3.3 Integrates knowledge of eating patterns when practicing culinary skills and when selecting and providing nutrition educational materials. (S)</strong></td>
<td></td>
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<tr>
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<td><strong>4.3.4 Integrates knowledge of eating patterns when practicing culinary skills and when selecting and providing nutrition educational materials. (S)</strong></td>
<td><strong>Identify cultural beliefs or religions that may impact the client’s food choices or health decisions (e.g. refusal for blood transfusion, no pork, consumption of raw fish).</strong>  &lt;br&gt;• Identify a nutrition or food trend by reviewing literature for different mediums (websites/blogs, journals, TV shows).</td>
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### AP Unit 5: Communication, Collaboration and Advocacy

Applies effective communication techniques to achieve common nutrition health goals.

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<tr>
<th>Competencies</th>
<th>Example Performance Indicators</th>
<th>Learning Activities and Practice Illustrations</th>
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| 5.1          | Applies effective written and oral communication skills and techniques. (D) | • Develop education materials that are free of spelling and grammatical errors.  
• Document in client record or in team notes using appropriate terminology.  
• Request a translator, obtain materials in different languages, provide large print materials, and speak slowly and clearly.  
• Ensure timely, clear and accurate documentation using correct spelling and grammar.  
• Demonstrate proficiency with technology and computer skills, including remote communication vehicles (e.g., webinars, email, online portals).  
• Use electronic medical record to document client services and interactions. | Documentation review, paper grading, presentation skills assessment, computer skills assessment.  
• Conduct a documentation/clinical records review during field placement.  
• Document client services provided in a mock chart based on information presented in a mock interview.  
• Prepare a presentation using computer software (e.g., PowerPoint).  
• Participate in a team meeting using technology (e.g., webinar, video). |
| 5.1.1        | Communicates clearly, confidently and effectively using appropriate language orally and in writing. (D) | | |
| 5.1.2        | Listens actively and gathers information in a respectful and empathetic manner. (D) | | |
| 5.1.3        | Identifies and addresses barriers to communication. (D) | | |
| 5.1.4        | Selects appropriate mode of communication for specific messaging. (D) | | |
| 5.1.5        | Adapts communication style to meet diverse needs of individuals and groups. (D) | | |
| 5.1.6        | Speaks and writes in client’s preferred language and appropriate literacy level, or seeks out appropriate translation services, as needed. (D) | | |
| 5.1.7        | Uses interviewing techniques and provides informal counseling (e.g., motivational interviewing). (D) | | |
| 5.1.8        | Utilizes technology competently, ethically and efficiently to support delivery of services. (D) | | |
| 5.1.9        | Documents all individual encounters following the standards of the profession and organizational policies. (D) | | |
| 5.1.10       | Confirms information is credible and evidence-informed prior to communications. (D) | | |
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<td><strong>5.2</strong></td>
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</table>
| **Works collaboratively with team members, individuals and the community.** (D) | 5.2.1 Communicates role and responsibilities accurately to others. (D)  
5.2.2 Applies networking skills to establish opportunities and to support individuals and community services. (S)  
5.2.3 Respects the opinions and values of others. (D)  
5.2.4 Seeks consultation and refers to other professionals when needed. (D)  
5.2.5 Demonstrates conflict management skills. (S)  
5.2.6 Understands meeting management principles in order to effectively participate in meetings and small group activities. (K)  
5.2.7 Works as a team member. (D)  
5.2.8 Collaborates with community partners and stakeholders in promoting individual, group and community nutritional health. (D)  
5.2.9 Consults with others and provides nutrition information within the community using agency-approved nutrition education materials. (D) | • Inform client, the community and other professionals of the associate degree role and the difference between the associate role and the RD/RDN or DTR/NDTR.  
• Refer the client to an appropriate professional or services following an established criterion, screening tooling or an algorithm.  
• Demonstrate understanding for team members’ role within the client’s circle of care or community.  
• Communicate in a clear, effective and respectful manner.  
• Ensure all materials provided to the client and/or community have been preapproved or are endorsed by a credible government association, agency or organization.  
• Demonstrate networking skills to build liaisons. | Role playing, team project, case study, field work.  
• Observe a team meeting and identify strengths and weakness of the team collaboration or interactions.  
• Working in a team/group environment complete a project, then identify strengths and weakness of the team collaboration.  
• Review a case study; identify key stakeholders and their role; and identify need for additional team involvement.  
• Contact local partner to obtain support for a community project or service. |
| **5.3**      |                                 |                                               |                          |
| **Advocates for nutrition programs and services for individuals and the community.** (S) | 5.3.1 Defines and compares various types of community advocacy opportunities. (K)  
5.3.2 Participates in advocacy-based activities. (S)  
5.3.3 Identifies and suggests strategies for reaching individuals with limited access to resources. (S)  
5.3.4 Advocates for individuals. (S) | • Identify potential program sponsor for the implementation of a community program or services.  
• Identify local association and relevant licensing bodies for the profession. | Mock advocacy case study, paper, presentation.  
• Prepare a presentation to advocate for a community service or program.  
• Create a list of community groups whose mission aligns with a needed community service or program.  
• Write a letter to a legislator. |