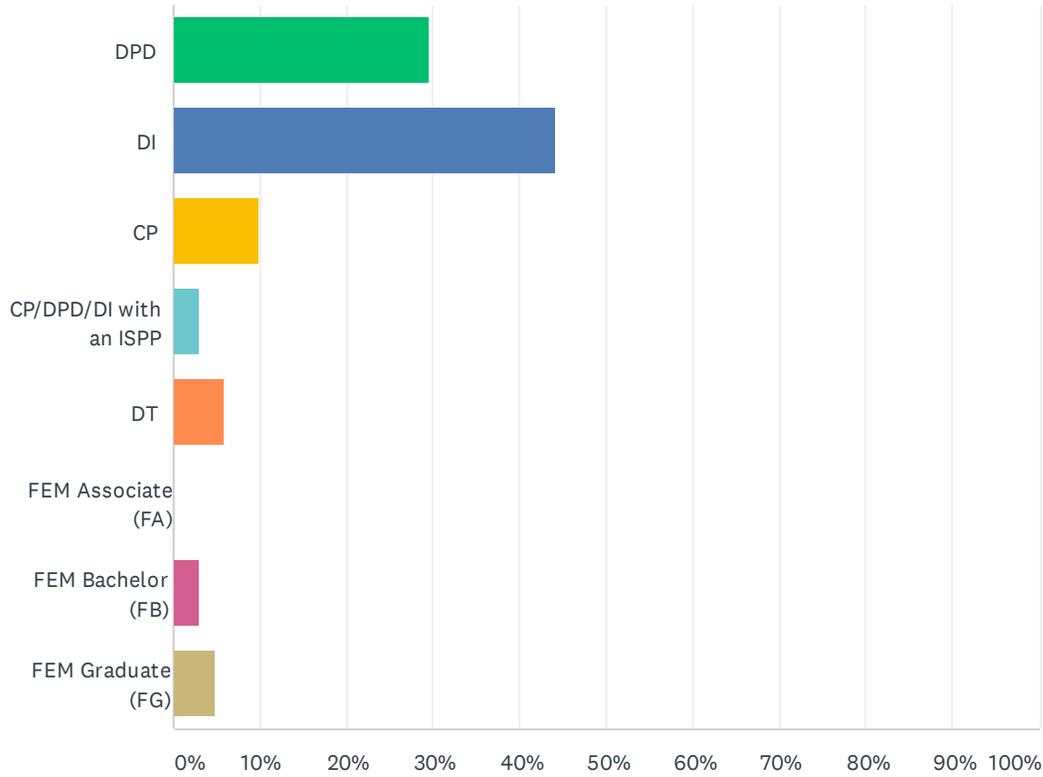


# Q1 What is your program type?

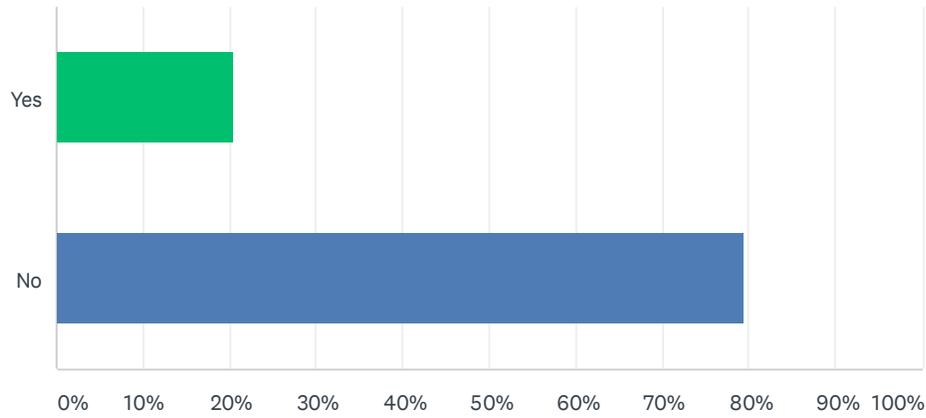
Answered: 102 Skipped: 0



ANSWER CHOICES	RESPONSES	
DPD	29.41%	30
DI	44.12%	45
CP	9.80%	10
CP/DPD/DI with an ISPP	2.94%	3
DT	5.88%	6
FEM Associate (FA)	0.00%	0
FEM Bachelor (FB)	2.94%	3
FEM Graduate (FG)	4.90%	5
<b>TOTAL</b>		<b>102</b>

## Q2 Is your program currently in the process of transitioning to FEM?

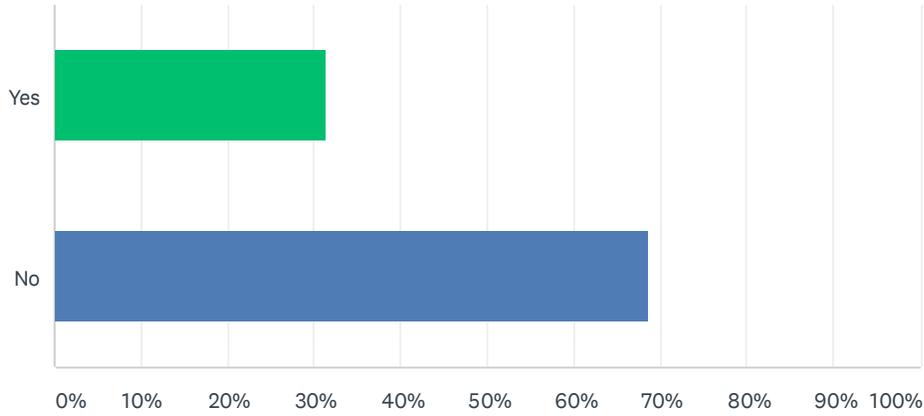
Answered: 102 Skipped: 0



ANSWER CHOICES	RESPONSES
Yes	20.59% 21
No	79.41% 81
TOTAL	102

### Q3 Is your program currently considering transitioning to FEM?

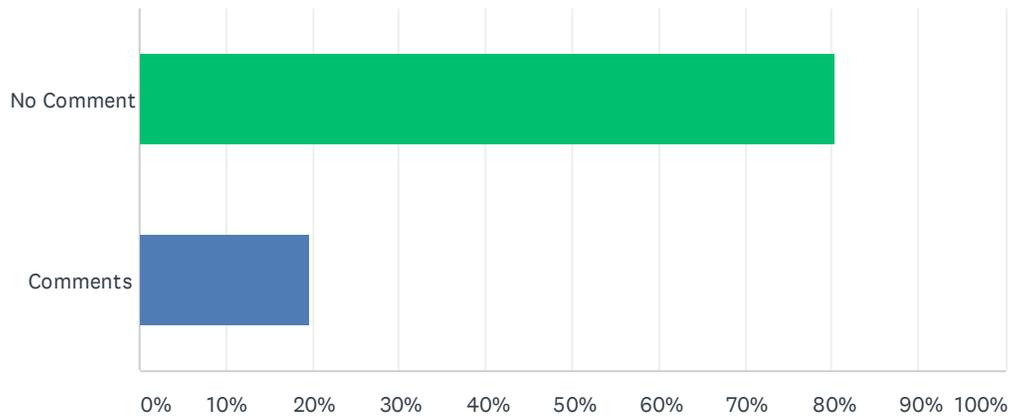
Answered: 102 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	31.37%	32
No	68.63%	70
TOTAL		102

Q4 The Accreditation Council for Education in Nutrition and Dietetics (ACEND) has released the Future Education Model Accreditation Standards for Associate (FA), Bachelor’s (FB) and Graduate (FG) Degree Programs, which are competency-based education (CBE) programs that integrate classroom learning with supervised experiential learning.

Answered: 102 Skipped: 0



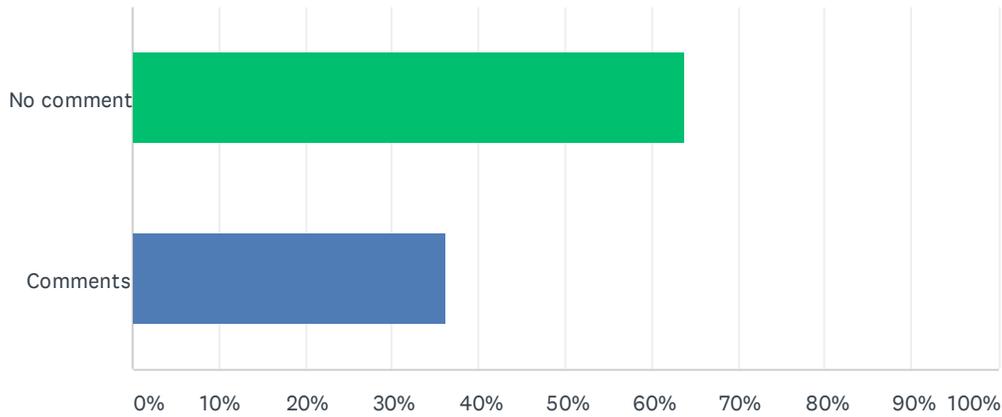
ANSWER CHOICES	RESPONSES	
No Comment	80.39%	82
Comments	19.61%	20
TOTAL		102

#	COMMENTS	DATE
1	classroom didactic learning	7/20/2020 4:43 PM
2	the previous questions do not allow for a response related to programs that are continuing while a FEM is also started at the same university.	7/20/2020 2:14 PM
3	All current programs are CBE programs, as that is how we currently evaluate interns' readiness to enter the workplace. Integrating classroom learning with supervised experiential learning does not equate to CBE.	7/20/2020 8:19 AM
4	If this could be clarified or at least indicated that even though the FEM is focusing on this, traditional programs may also emphasize this would be important.	7/19/2020 11:58 AM
5	DI programs already integrates previous university, DPD classroom learning with supervised experiential learning.	7/17/2020 6:22 PM
6	Since I am in the 4th Demonstration program I greatly appreciate these standards. I feel that I do need to communicate to my administration that this program involves CBE and all that that will entail. This is a LOT of work to do and I need to express that to my Dean and others.	7/16/2020 6:48 PM
7	Need to add FEM abbreviation. I think many programs have integrated classroom and experiential learning for many years. Administrators will want to how different. I would prefer master's degree as opposed to graduate or at least both. Reading the one page, as an administrator, I have no framework on how the levels are different and where the RDN -DI fits in.	7/16/2020 12:37 PM
8	You might change "Classroom learning" to "didactic classes"	7/16/2020 10:18 AM
9	Yes, but I am uncertain of how the FA, FB and FG all complement each other and what careers would correspond with each degree.	7/16/2020 7:19 AM
10	The transition to FEM is confusing.	7/15/2020 3:12 PM
11	1. State universities, with already falling enrollments in dietetics (but not nursing and pre-PA), will have a difficult time convincing parents that earning at DTR after 4 years of college makes sense and is cost effective (has ROI). 2. Are there any associate programs participating in FEM - if so what jobs are their graduates expected to take? Would it not make more sense for the community colleges to convert to 90-hour CDM programs? 3. With dropping numbers of applicants (table displayed in June ACEND mailing to directors) - how will state dietetics programs be able to convince administration to convert to FEM when the change will cost a lot of money and there will not be enough students to fill these programs based on ACEND June 2020 mailing to directors?	7/14/2020 9:18 AM
12	As a DI director who developed a new DI program five years ago, I am very familiar with the workload and efforts needed to develop a DI Program. Our DI Program underwent a successful accreditation process and we are trying to transition into the Future Model. I totally understand why we need to change our focus to a competency based curriculum but I worry about the workload for preceptors. I have been a dietetics educator for over 25 years and I was a clinical manager and clinical dietitian for 15 years prior to my academic career. I enjoyed the good ole days when there were more clinical dietitians on staff and longer patient stays with far less technical expertise required than today ...In those good ole days, I had time to work directly with students and interns. I worked as an RD in the health center where I was trained so I have worked directly with interns in a health care setting. If we are expecting our overworked preceptors to provide direct evaluation of interns' competency in the areas described in the FEM, we really need Clinical Instructors on site...which means more faculty members and greater expense for academic programs. This expectation should be built into the Future Model. Our preceptors are not familiar with this level of competency based education. Most of this training is happening with educators and, for the most part, we are NOT in the trenches. We should be surveying preceptors to find out what level of competency evaluation they are able to provide using preceptor evaluations. I have received feedback from clinical dietitians that they are not able to evaluate many of the assignments we provide that are supposed to demonstrate competency. They are able to evaluate how well interns work with patients but many of these FEM competencies require specific assignments aligned with learning outcomes and syllabi to demonstrate competency. Our preceptors are not being paid, they are working with interns because they feel a commitment to our profession. I worry this new level of oversight will be impossible for them to fulfill.	7/13/2020 2:00 PM

13	Associate Degree in Dietetic Technology required supervised practice which is CBE. Associate FA CBE limits hiring opportunities.	7/13/2020 10:45 AM
14	ACEND has provided ample communication regarding this change.	7/10/2020 4:12 PM
15	In other words, a coordinated program already in existence.	7/9/2020 2:29 PM
16	I am concerned about the credential that may be associated with FB.	7/9/2020 9:49 AM
17	this is the same as Coordinated programs so they should be included in the statement.	7/9/2020 7:50 AM
18	This needs to say the Accreditation Council for Education in Nutrition and Dietetics (ACEND) accredits competency-based programs that integrate classroom learning with supervised experiential learning. These programs include DPD, DI...etc.	7/8/2020 4:46 PM
19	CBE needs to be explained in a way that administrators understand there are minimum # of hours required for supervised practice according to state licensure rules.	7/8/2020 4:23 PM
20	My leadership is not fully onboard with continuing a nutrition program at our university. The additional accreditation fees are often discussed, and the rate of return on tuition is not there.	7/8/2020 4:06 PM

Q5 Nutrition and Dietetics is joining the other allied health professions that have switched to CBE model, such as physical therapy, speech language pathology, occupational therapy, audiology, nursing and pharmacy.

Answered: 102 Skipped: 0



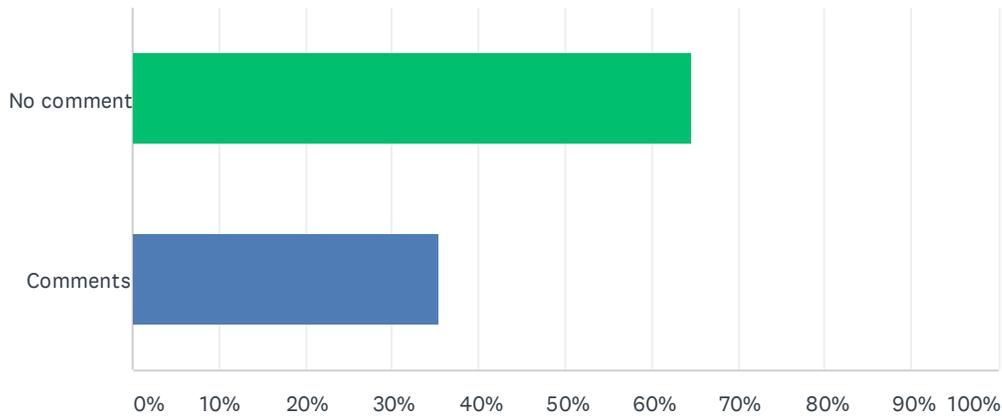
ANSWER CHOICES	RESPONSES	
No comment	63.73%	65
Comments	36.27%	37
TOTAL		102

#	COMMENTS	DATE
1	should be "...switched to the CBE model..."	7/20/2020 5:02 PM
2	"Transitioned" instead of "switched"	7/20/2020 4:43 PM
3	1) The sentence grammatically should read, "N and D is joining other allied health professions that have switched to the CBE model, such as..." unless that list includes all allied health professions. 2) True enough, but somewhat misleading, since N and D has already switched to the CBE model, as noted in the introduction to the survey.	7/20/2020 4:16 PM
4	We have not switched to this model. We are offering a new pathway.	7/20/2020 2:14 PM
5	I think many of these professions have likely done this long before our profession has decided to do this, but I think more importantly it is why we even want to go this direction.	7/19/2020 11:58 AM
6	Good to emphasize this.	7/18/2020 1:01 PM
7	It will be good for them to describe what that is and provide evidence of its success.	7/18/2020 9:34 AM
8	Those professions receive higher entry level salary.	7/17/2020 6:22 PM
9	We are already doing CBE (at least let's hope so!) so not new. The slant is that this is new with FEM but that is inaccurate according to most directors. This makes it sound like we are lagging behind these other professions and puts us in a bad light.	7/17/2020 7:31 AM
10	I have already shared my thoughts on this question for parents as well. could go here too.	7/17/2020 5:19 AM
11	Good.	7/16/2020 8:19 PM
12	This statement makes it easier to "sell" this concept to administration. I just need to communicate what the CBE model means.	7/16/2020 6:48 PM
13	I have not studied other allied health profession education models, so cannot comment.	7/16/2020 5:53 PM
14	I would remove allied and nursing and pharmacy are not allied health professions. I would add some undergraduate disciplines that have the CBE model. Only nursing have undergraduates on this list. This document seems geared to FG; it should aim more at FA and FB.	7/16/2020 12:37 PM
15	they forgot to add athletic training	7/16/2020 11:36 AM
16	I'd remove "allied" so its "other health professions" for the same reason many schools of allied/health related have dropped the term "allied" or "related" as they are health professions in their own right. You could even add medicine and dentistry.	7/16/2020 10:18 AM
17	I think this statement is very important. It is establishing dietetics as an allied health profession which even some administrators still do not understand.	7/16/2020 7:52 AM
18	I think that is great to join with Nursing program in our school, some students eventually switch to Nutrition from nursing. Collaborating early in the academic setting will enhance both degrees for students.	7/15/2020 7:06 PM
19	Do we really not have competency based modes of education in the existing education models? This statement seems like we do not provide CBE in supervised practice, for example.	7/15/2020 4:06 PM
20	Will this mean a practice doctorate for entry level?	7/15/2020 2:51 PM
21	What does CBE stand for?	7/15/2020 2:29 PM
22	I believe the point of this statement is to reflect that if all dietetics education programs were in the FEM model, they would all be CBE. Currently, only DI and CP are CBE.	7/14/2020 2:17 PM
23	All supervised programs already use competency-based education, e.g. DI/ISPP/CP - all use CRDN. So this statement is factually incorrect - as Nutrition and Dietetics have been using CBE since the CRDN were put in place several years ago.	7/14/2020 9:18 AM
24	My guess is that these professions also have clinical instructors on site...See above.	7/13/2020 2:00 PM
25	This is not new its currently in place.	7/10/2020 12:49 PM
26	much more narrowly focused fields--not applicable to dietetics	7/9/2020 2:29 PM

27	I'm not so sure nursing has "switched" - isn't it always the way nursing operated? Maybe not, but seems like it.	7/9/2020 1:26 PM
28	Suggest word change... Nutrition and Dietetics is aligning with other allied health professions.....	7/9/2020 10:26 AM
29	Somewhat misleading since many of these programs have ALWAYS been structured in this manner, so technically haven't 'switched'.	7/9/2020 9:13 AM
30	Answered in the previous survey.	7/9/2020 8:00 AM
31	It makes programs that follow the 2017 competencies as inferior.	7/9/2020 7:50 AM
32	Have all of these other allied health professions eliminated all post-graduate residencies/internships. To my knowledge, all of them continue to have some form of post-graduate clinical residencies. I support graduate-level training in dietetics, but I am concerned that in its attempt to elevate the level of training, ACEND will lose the strongest parts of clinical dietetics education due to the direction they have taken with the FEM standards. I have considerable experience in MNT internships and undergraduate and graduate-level CPs. I don't think a competency-based FEM will be able to train clinical RDs as well as post-graduate MNT dietetic internships, which are, by design, also competency-based training programs.	7/8/2020 6:03 PM
33	We have always done this...note the C in CRDN.	7/8/2020 4:46 PM
34	CBE again, in these professions, is tied to a minimum # of hours in the clinical setting.	7/8/2020 4:23 PM
35	Yes, all of those programs on my campus are much larger than our program of 100 undergraduate and 11 post bac dietetic internship and 10 masters. This will be a tough sell to my administration/leadership	7/8/2020 4:06 PM
36	CBE is not defined as competency based education. Our administrators would not know what CBE stands for. Always define an acronym prior to use.	7/8/2020 4:03 PM
37	So you are saying this is a DONE DEAL and FPM will be forced onto ALL schools and programs because "everybody else does it."	7/8/2020 3:57 PM

**Q6 CBE fosters work readiness. In the FEM Accreditation Standards, the curriculum is guided with the competencies and their respective performance indicators, which are defined based on the desired behaviors and job skills targeted.**

Answered: 102 Skipped: 0



ANSWER CHOICES	RESPONSES	
No comment	64.71%	66
Comments	35.29%	36
<b>TOTAL</b>		<b>102</b>

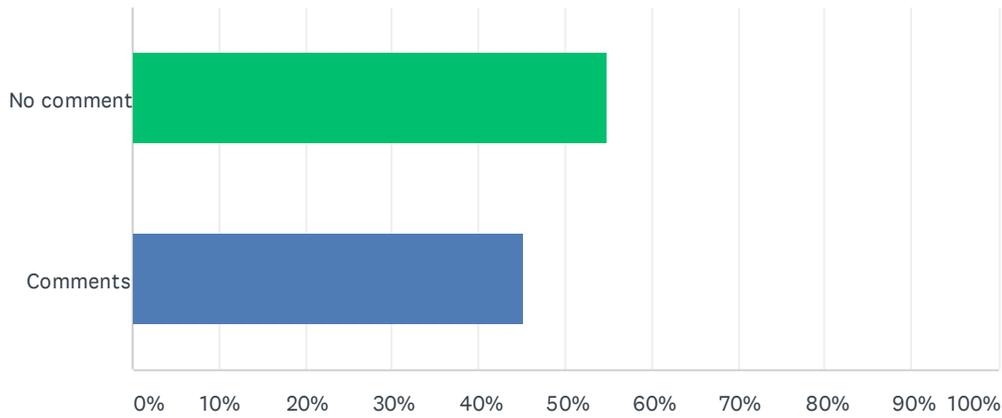
#	COMMENTS	DATE
1	As with the Talking Points for students and parents, this is misleading. These statements equate CBE with FEM Standards when CBE is already included in 2017 Accreditation Standards.	7/20/2020 4:16 PM
2	Those of us using competency based evaluation systems are already doing this. This is not unique to FEM programs.	7/20/2020 8:19 AM
3	This is a very desirable curriculum	7/20/2020 3:05 AM
4	I believe most every traditional programs also focuses on work readiness. If not, maybe that should also be the emphasis as not every program/University will be accepting to writing a programmatic change for the FEM.	7/19/2020 11:58 AM
5	DI's and other programs also foster work readiness as curriculum is guided by competencies and learning outcomes.	7/17/2020 6:22 PM
6	These have been well designed and competencies will guide a better-prepared professional in our field.	7/17/2020 5:26 PM
7	the curriculum is more clearly focused on...	7/17/2020 7:31 AM
8	This is a great statement and again, it "sells" the concept.	7/16/2020 6:48 PM
9	And why can't this be accomplished in the previous models?	7/16/2020 5:53 PM
10	Again, how is this different than the traditional programs? All programs are based on practice audits.	7/16/2020 12:37 PM
11	Thus producing better qualified job ready candidates	7/16/2020 12:36 PM
12	love the clarification!	7/16/2020 11:36 AM
13	great	7/16/2020 10:36 AM
14	Suggest: .CBE fosters work readiness. In the FEM Accreditation Standards, the curriculum is guided with the competencies and their respective performance indicators, which are defined based on the desired behaviors (??) and PROFESSIONAL skills targeted. we need to remember we are training students for a "profession" not a "job". There are "jobs" within the "profession". It is unclear what is meant by "desired behaviors" - we can't teach behaviors.	7/16/2020 10:18 AM
15	I think that this is implying that current programs are not preparing "work ready" candidates. I think a better description would be that this approach allows for program directors to train/devise plans for students based on their individualized skills- or something like that. So those who are "more advanced" can get to the next level.	7/16/2020 8:28 AM
16	I think CBE is going to be hard to distinguish between DPD and DI. What makes them different? How is the need for DPD still justified?	7/16/2020 7:52 AM
17	I feel this is not unique to FEM's. It also applies to more traditional internships.	7/15/2020 4:42 PM
18	Supervised program graduates are also work ready upon program completion.	7/15/2020 4:39 PM
19	Again, it feels like existing educational structures in dietetics does not prepare a student/intern for work readiness. Isn't supervised practice the hands-on application of didactic knowledge to reach competency and work place readiness?	7/15/2020 4:06 PM
20	Our graduate CP already does this, however, the FEM demonstration program process has provided access to a large amount of CBE resources which will help our professors and preceptors.	7/15/2020 3:17 PM
21	While I do not have problems with this specific wording, I do have concerns about student satisfaction and readiness for the RD exam. For example, my foodservice management class has 65 performance indicators that I need to cover in the 15 week course. There are topics that have historically been on the RD exam that do not seem to be reflected in the competency and performance indicator statements. This means that I either do not teach these topics and leave it up to students to learn it on their own while studying for the exam, or I cram additional information into the already jam packed course.	7/15/2020 3:02 PM
22	1. So how does FEM "workplace readiness" for FEM graduates differ from existing	7/14/2020 9:18 AM

DI/CP/ISPP existing program graduates who get the same jobs, the same salary and the same RD/RDN credential. 2. Since there has been no market survey or series of market survey - it is unclear to this writer how AND ACEND has even determined what desired behaviors and job skills the work place and what clinical employers really want. 3. The 2019 AND Salary survey page 15, 2nd column, last paragraph indicates that there is a \$1.44/hour advantage in the first five years of practice for an MS RD over a BS RD;  $\$1.44 \times 2080 \text{ hours/year} = \text{about } \$3,000/\text{year PRE-TAX}$ ; at 25% taxes this leaves  $\$2250/\text{year}$  or  $\$187/\text{mo}$  to pay off school loans - which is not enough to offset the anticipated debt level. Bottom line: Participation in FEM MS RD programs will require privilege; persons from low income families (1st generation college, immigrants, children of single parents, etc.) which disproportionately impacts communities of color - will not be able to afford or participate in.

23	This is exactly why we need to have clinical instructors on site...preceptors are taking care of very ill patients requiring a huge level of expertise...they are simply not able to evaluate all the competencies defined in the Future Model.	7/13/2020 2:00 PM
24	No evidence from employers of students completing FEM to support this statement.	7/10/2020 4:12 PM
25	Also seen in now FEM programs	7/10/2020 12:49 PM
26	in other words, ready for entry level practice--the goal of internships	7/9/2020 2:29 PM
27	If I tell my administrators the FEM promotes work readiness, they are going to ask how it is different from my current program. They get the same degree, same credential, same jobs, so this is not a powerful argument.	7/9/2020 1:26 PM
28	Somewhat misleading since current program requirements, as structured, have the same performance indicators.	7/9/2020 9:13 AM
29	As previously outlined.	7/9/2020 8:00 AM
30	CP do the same	7/9/2020 7:50 AM
31	Internships foster work readiness also.	7/8/2020 6:11 PM
32	I don't think a competency-based FEM will be able to train clinical RDs as well as post-graduate MNT dietetic internships, which are, by design, also competency-based training programs.	7/8/2020 6:03 PM
33	Rephrase CBE fosters work readiness. In the ACEND Accreditation Standards, the curriculum for all accredited programs are guided with the competencies and their respective performance indicators, which are defined based on the desired behaviors and job skills targeted.	7/8/2020 4:46 PM
34	CBE requires more effort from preceptors for accurate evaluation of the student. Will they be willing to do this?	7/8/2020 4:23 PM
35	yes in theory this certainly does, but with a small operating budget and limited faculty will not allow us to do this, there are so many behind the scene activities to make this happen, I can not do that with my current teaching load and my administration will not give me more release time to do this - I have asked, even when it is recommended from site visits.	7/8/2020 4:06 PM
36	Propaganda based on nothing more than more than the wishful thinking of people who have been shoving this down our throats for years now. We already have standards and already do a great jobs of preparing students/interns for the workforce. This makes is sound like this is oh so new and NOW we are listening to what employers want.	7/8/2020 3:57 PM

### Q7 Employers see potential value in job applicants who will study using CBE since it aligns academics with the skills they seek in their employees.

Answered: 102 Skipped: 0



ANSWER CHOICES	RESPONSES	
No comment	54.90%	56
Comments	45.10%	46
TOTAL		102

#	COMMENTS	DATE
1	Okay, but this is not discussing an advantage of FEMs, it is discussing an advantage of CBE.	7/20/2020 4:16 PM
2	Great	7/20/2020 3:05 AM
3	Not sure if employers will know about CBE and prefer these students over those students who graduate from a traditional program and are better or at least has the same skills.	7/19/2020 11:58 AM
4	What evidence is provided by this. If there is evidence, you could include the reference vs just this statement.	7/18/2020 9:34 AM
5	My experience is employers are seeking entry-level dietitians they can train.	7/17/2020 6:22 PM
6	Definitely agree	7/17/2020 5:26 PM
7	This makes it sound like we are recommending the employers do not hire anyone who is not "CBE" trained and currently employees are not well trained or competent	7/17/2020 7:31 AM
8	Do they really look for the terminology "competency-based education" or are they looking for the application of these skills? I ask this since I have asked my preceptors if they will hire someone who does not have actual applied experience in the area they are seeking for employment, compared to alternate supervised practice. This question was asked because of COVID-19 limiting rotations sites. Most said they sought our actual applied experience. Both are CBE, but one may be highly valued over the other.	7/16/2020 10:08 PM
9	This, again, is a great statement that will affirm that we have a very solid program.	7/16/2020 6:48 PM
10	Were employers complaining when the previous model was used? By the time the 'student' became eligible for employment that had had plenty of CBE training in the internship.	7/16/2020 5:53 PM
11	How is the transition to CBE being communicated by ACEND to employers? Are there statistics yet regarding differences in employment rate or salary of FEM vs. non-FEM program graduates?	7/16/2020 12:50 PM
12	We have programs so present tense should be used. What data do we have that employers prefer CBE?	7/16/2020 12:37 PM
13	our graduates are first-choice!	7/16/2020 11:36 AM
14	agree	7/16/2020 10:36 AM
15	Most employers do not know what CBE is. In training preceptors and talking to administrators, we, as the academic institution have had to explain what it is. Additionally the statement says "applicants who will study using.." - Employers have applicants who have graduated programs which used CBE. Most employers care about an RD coming from a strong program. What message do you want this statement to reflect? Once that question is answered then the statement can be edited.	7/16/2020 10:18 AM
16	How do we know this? Have we surveyed dietetics employers to see if they had been outcomes with those that graduated from FEMs compared to traditional programs?	7/16/2020 8:28 AM
17	I agree	7/16/2020 8:08 AM
18	But are students who come out of CBE programs now (such as those in FEM) getting more internships or passing the exam at a higher rate than those who are not currently in CBE programs?	7/16/2020 7:52 AM
19	I agree, we are trying to have work experience built into some of our courses so that the student knowledge skills are enhanced with practical experience.	7/15/2020 7:06 PM
20	Again, this is not unique to FEM's. I dare say an employer would not know the difference of an applicant coming from an FEM vs a DPD/DI.	7/15/2020 4:42 PM
21	This implies that employers do not see entry level dietetic professionals as emerging from their programs will work ready skills.	7/15/2020 4:06 PM
22	It appears that employers have also recognized the "potential value in job applicants" all along by how our DPD students have been prepared to enter supervised practice. All along students who successfully completed a DI program and passed the CDR exam had job potential. The	7/15/2020 4:05 PM

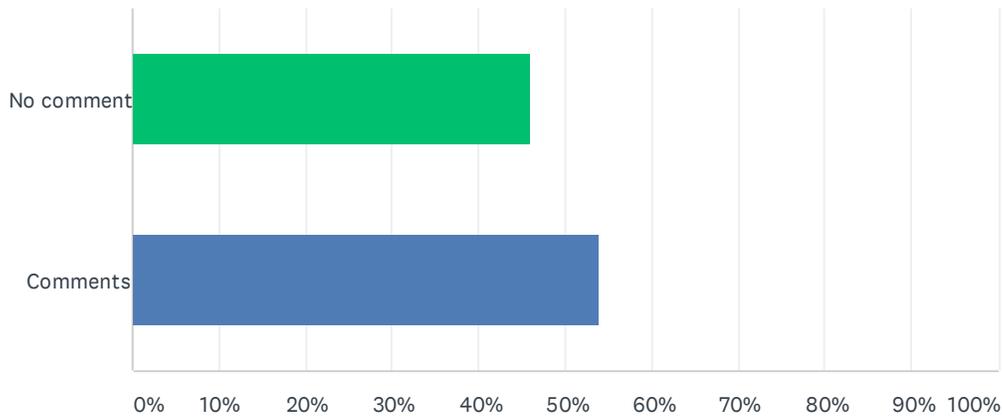
	type of experiential learning does not guarantee skills sought, competence, and potential value.	
23	Do we have data to support that yet?	7/15/2020 3:21 PM
24	We already do this through our practicum experience.	7/15/2020 3:17 PM
25	The sheer amount of performance indicators in the two-year graduate program is overwhelming to both students and faculty. There is no way to teach with both the depth and breadth desired while continuing to keep this within a two-year program (as opposed to the six-year pharmacy model). I appreciate that the FG makes it easier to become an RD for career/ degree changers; however, I question if we are reaching the depth that we would like. Additionally, some of the performance indicators do not seem to align with entry level work. I understand that we are trying to raise the bar, but I fear that we will graduate students who know a little about several things and a lot about nothing.	7/15/2020 3:02 PM
26	We need to be teaching more than vocational job skills that an associate's degree confers. What about critical thinking and writing, communication?	7/15/2020 2:51 PM
27	1. How do employers even know what FEM programs are - since there has been no employer market survey or series of employer market surveys NOR has there been an active marketing? 2. Actually it is this writers guess that most non-educator academy members (including Clinical Nutrition Managers) still refer to FEM as "those pilot programs" as there has been no general marketing to the general membership. So CNMs will tell employers they don't know what CBE really means. 3. Since CBE is being done in existing DI/CP/ISPP programs there is no difference between these graduates and FEM graduates - until AND ACEND publishes data to demonstrate superiority of the FEM with evidence-based, factual data.	7/14/2020 9:18 AM
28	I agree...but the training of RDs on site means on site instructors or paid affiliation agreements that enable Food Service Depts to hire more RD staff members to train interns.	7/13/2020 2:00 PM
29	I would like to view the employer surveys that this statement refers to and how CBE from a FEM program is different from a CP.	7/13/2020 11:40 AM
30	2017 Dietetic Technician standards prepare students to be job ready. FA adds to the DI and DPD programs.	7/13/2020 10:45 AM
31	Employers also see value in DI students who have supervised practice - its an on the job interview	7/10/2020 12:49 PM
32	Where is the evidence to support this "claim"? Administrators require sound evidence.	7/9/2020 5:10 PM
33	already in existence	7/9/2020 2:29 PM
34	Where's the data? How is it different from current preparation?	7/9/2020 1:26 PM
35	I agree employers see potential value; however, I am concerned where the FB fits in the job market, specifically in the clinical setting.	7/9/2020 9:49 AM
36	Somewhat misleading since employers have no knowledge of the type of programs students can participate in; they are looking at credentialing and experience-NOT graduate program type	7/9/2020 9:13 AM
37	Again, please see prior survey.	7/9/2020 8:00 AM
38	all programs use competencies. f the supervised practice. I have not seen this data.	7/9/2020 7:50 AM
39	Do you have a reference for this?	7/8/2020 6:11 PM
40	What evidence does ACEND have to support this statement? Dietetics education already aligns its training to the needs of employers. That is the business of dietetic internships. The statement seems to be discounting that. With the proliferation of online FEMs, I am sure there will be many employers who will disagree that the FEM graduates will be adequately prepared.	7/8/2020 6:03 PM
41	Rephrase Employers see potential value in job applicants who achieve the competencies in ACEND accredited programs because these programs aligns academics with the skills they seek in their employees.	7/8/2020 4:46 PM
42	Question this comment - how do we know employers see this value and is it not true they would see it in the current model as well?	7/8/2020 4:19 PM
43	yes I believe they would say yes, however when you turn around and ask them if they would	7/8/2020 4:06 PM

like to host students at these levels to provide that experience - they say - well we do NOT really have the staff to help with that unless you pay us to take your students.

44	Are there data to back this up? I doubt potential employers have heard of CBE, either.	7/8/2020 4:03 PM
45	Where's the data to support this? How do you even know what employers want? How is that different from the standards we already have --- that are ALSO supposedly based on what an entry level RDN needs to know?	7/8/2020 3:57 PM
46	Will ACEND give recommendations for how to list the level of competency completion for applicant resumes?	7/8/2020 3:42 PM

Q8 Students will benefit from programs that offer both the required experiential and didactic in a single degree program versus the most common dietetics education traditional process of completing a bachelor’s degree program and then requiring a separate application to a supervised practice program; reducing both anxiety and expense for the student.

Answered: 102 Skipped: 0



ANSWER CHOICES	RESPONSES
No comment	46.08% 47
Comments	53.92% 55
TOTAL	102

#	COMMENTS	DATE
1	The first line should have "learning" after "...the required experiential and didactic...." Question though, how does this differ from a CP? This is already what we do in a CP (supervised practice and didactic learning combined) and we are using the competencies from the 2017 accreditation standards, so it is already competency-based learning.	7/20/2020 5:02 PM
2	financial burden instead of expense	7/20/2020 4:43 PM
3	1) Grammar: The end of this sentence should use a comma, not a semi-colon since "reducing both anxiety and expense for the student" is not an independent clause. 2) I agree that anxiety should be reduced for the student in a FEM, since only one application is required. 3) The reduction of expense is not at all clear. Reduction of expense compared to what? If you are comparing the expense of a bachelor's degree and a separate dietetic internship (DI) to a graduate FEM that includes supervised practice, you have to consider the following: a) how expensive is the bachelor's degree? Some are expensive, some are not. b) how expensive is the DI? Some are expensive, some are not. c) a graduate FEM will require prerequisites, most likely including a bachelor's degree. Therefore the student has to pay first for a bachelor's degree before starting the graduate FEM. d) a FEM is not necessarily inexpensive. The FEM must still pay for staff and time and equipment and materials, etc. to support supervised practice. CPs have been relatively rare in dietetics education because of the expense of supporting supervised practice. There is no guarantee that FEMs will be cheaper than CPs. e) Are FEMs less expensive than CPs? Is there data on that question?	7/20/2020 4:16 PM
4	Students will benefit from the availability of programs.....	7/20/2020 2:14 PM
5	How do we know that this will decrease costs for the students?	7/20/2020 8:19 AM
6	This is important to communicate	7/20/2020 3:05 AM
7	Please provide the data this method reduces anxiety from students or even the expense on the students (e.g. save \$5000/year).	7/19/2020 11:58 AM
8	Excellent to emphasize this.	7/18/2020 1:01 PM
9	Reducing anxiety and expense is not true. You are basing anxiety in getting into an internship? That's a small piece of things. There is a lot of other anxiety with graduate school. The FEM is a stressful model in all of the requirements and timeline- lots of anxiety to do the school and internship together so wouldn't say it reduces it or clarify what this mean. The expense is not less and in many cases more.	7/18/2020 9:34 AM
10	I graduated from a CP and it served me well; however, it may not suit everyone. I'm not sure how you can gauge or speak to someone's anxiety or expense for the program at this point. Do you have data ?	7/17/2020 6:22 PM
11	I have been a preceptor for many years and this will certainly help students by eliminating two separate application processes.	7/17/2020 5:26 PM
12	PLEASE NO!!! So many directors have a problem with this sentence. Students benefit from good training. The ability of the program to train is the key not the format of the program. There will be outstanding programs and lackluster programs in all sectors - DI, ISSP, FEM, Bachelor's...We have very skilled students coming out of our non-FEM program with higher than entry level skills and 100% pass rate on the RD exam - does this sound like an inferior program? You are, for all practical purposes, devaluing all programs other than FEMs. Administrators are going to seriously consider supporting the perceived inferior non-FEM programs. This would be a blow to dietetic education and to the profession. Also, how can you comment on specific etiology of student anxiety and expense. Our program is very low cost and anxiety is relieved due to our training reputation, pass rate, employment rate...	7/17/2020 7:31 AM
13	My colleagues and administrators are keenly aware of the anticipated dread and true "anxiety" that applying for internships has been over the years. Saying it is stressful does not do it justice. The anxiety among students alone is legendary! So what if we say you can get your bachelor's, masters, and supervised practice at the same place in 5 years, and then be ready to sit for the RDN exam? (Okay, but you DO have to get decent grades and meet the qualifications). To me, this IS the way to go. It rewards the students I have and takes down the "internship" barrier. My students would prefer to stay where they are to complete their entire education. (I did the "old way", with an internship, over 30 years ago, and I have completely changed my mind.)	7/16/2020 6:48 PM

14	"reducing both anxiety and expense for the student"- maybe But moving to a different part of the country and working with a new set of educators is a plus for most interns. Only have one set of educators for both programs can be a disadvantage.	7/16/2020 5:53 PM
15	Would like to see statistics regarding difference in average cost of traditional BS + supervised practice versus FEM program.	7/16/2020 12:50 PM
16	This is only pertinent to FG. CP has had for years, how is the FB and FG different than BS nd MS-CPs? How is FA and FB impacted?	7/16/2020 12:37 PM
17	agree, it's confusing. All day I get requests on the process, even though its written everywhere. It will be much easier to be congruent across each academic level.	7/16/2020 11:36 AM
18	agree	7/16/2020 10:36 AM
19	What is the message you want to get across here? At a minimum, would suggest: Students will benefit from programs that INCLUDE both the SUPERVISED PRACTICE and didactic COURSES in a single degree program IN CONTRAST TO THE TRADITIONA: dietetics education of completing a bachelor's degree program and then requiring a separate application to a supervised practice program; reducing both anxiety and expense for the student.	7/16/2020 10:18 AM
20	Again, how do we know this? There will still be anxiety about acceptance as these programs will not have an unlimited number of spots, they will not take students will GPAs below 3.0 as they are graduate programs, and they will be added expense as they are graduate programs.	7/16/2020 8:28 AM
21	absolutely - an all in one educational experience is a good idea. The current two-fold system is daunting and expensive	7/16/2020 8:08 AM
22	This statement seems to be related to those pursuing a RDN and the career paths for the FA and FB are unclear. I don't see how we are reducing expense when a masters degree is now required for pursuing an RDN. Are there any data to support the reduction in anxiety and expense? It does not seem appropriate to make these points without data. Is the statement for students in all types of programs - FA, FB, etc. ?	7/16/2020 7:19 AM
23	Do they not still have to meet a certain criteria and apply for entrance to an FEM? I do not see this as much of a benefit as it means the students will feel the stress and anxiety sooner when figuring out which program to apply to at a less mature stage.	7/15/2020 4:42 PM
24	It may reduce student anxiety but will it really reduce cost?	7/15/2020 4:39 PM
25	The program specifics are not clear yet - is this a four year model? A five year BS/MS model with supervised practice built in? How do we know if it saves money?	7/15/2020 4:06 PM
26	I am unsure if this is an accurate statement. Students have benefited all along from supervised practice.	7/15/2020 4:05 PM
27	If a student is in an FG program, do they have to get the Master's degree or can the get a PhD if offered at a school that has been accredited for an FG program? That seems unclear to me.	7/15/2020 3:21 PM
28	I honestly do NOT think the FEM will decrease expenses for the students since most graduate degrees cost more per year than DIs and some of the programs are 2 years in length. The only advantage is that students will remain eligible for financial aid through the entirety of their training as opposed to only the undergraduate portion. I do believe it will reduce stress.	7/15/2020 3:17 PM
29	Agreed. Fully support this model.	7/15/2020 2:55 PM
30	I have a CP now and this isn't true for it.	7/15/2020 2:51 PM
31	I fully support this statement.	7/14/2020 2:17 PM
32	1. Since the FEMs for RD/RDN programs are graduate based - they will eliminate the online matching process as incoming students must first be accepted into the graduate school. Elimination of the online matching process will significantly increase the costs to FEM programs to market their programs (in a significantly declining applicant pool for the past 4 years), to process applications, and if they don't fill their classes with enough students - explain to administration why their programs should be allowed to continue to exist in the current, very tough economic environment. 2. No data exists to demonstrate superiority of FEM approach over existing supervised program approaches (BS RD and MS RD). Thus the FEM approach will increase the cost to all students and provide preference to those students coming from privileged backgrounds over those coming from less privileged backgrounds	7/14/2020 9:18 AM

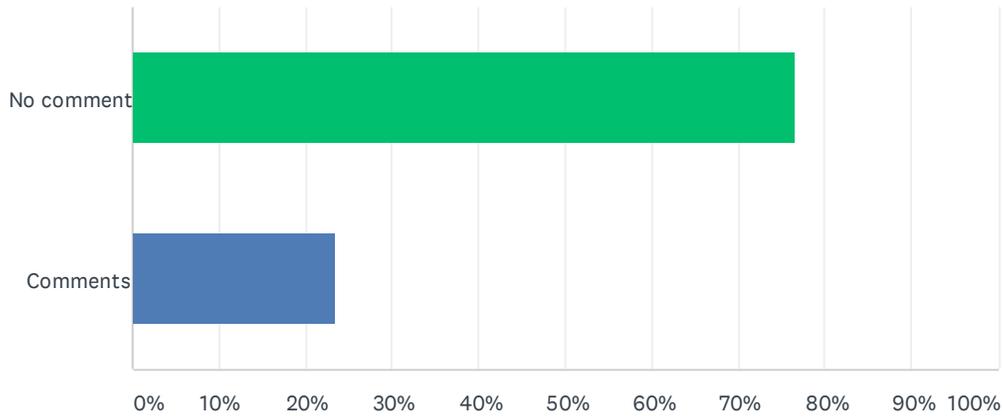
disproportionately affecting communities of color. 3. Finally students of less privileged backgrounds often take off a year or two after completion of the existing 4-year DPD programs to work and save money prior to attending a post-bac internship of 1 year or less duration. Many "maxed out" student loans in undergraduate/ DPD programs and do not have the financial resources to complete a continuous 5-6 year program.

33	Yes I agree but see above....	7/13/2020 2:00 PM
34	This speaks against dietetic internships and DPD programs.	7/13/2020 11:40 AM
35	Application to DI is less competitive at this time. Our experience is any student with at least a 2.9 GPA who desires a DI can obtain a position.	7/10/2020 4:12 PM
36	This model can be used at DI and CP programs too	7/10/2020 12:49 PM
37	This is not true! The graduate programs require a bachelor's degree, so it IS a 2-step process. Still have to apply to graduate program = stress/anxiety Expense can be increased from current model of stand-alone DI vs. now a 2-year program. re-write so that it is truthful.	7/9/2020 6:22 PM
38	While administrators may appear to be, or may actually be, concerned about student expenses, they may also likely see a move to a FEM as a loss of revenue. For example, an institution that currently provides a bachelor's degree and a combined dietetic internship/master's program is getting six years worth of tuition and fees from the student. In transitioning that program to FEM, perhaps the student will only be at the institution for four or five years, meaning the loss of one to two years worth of revenue for the institution. Not sure that all institutions will view this as a benefit.	7/9/2020 5:10 PM
39	Understood. This may be beneficial though the quality of the didactic instruction and preceptor override the benefit of the model.	7/9/2020 3:58 PM
40	graduates of coordinated programs have historically not been as successful on the RD exam as the DI format	7/9/2020 2:29 PM
41	The question is going to be will I get more students this way and without a national framework for application, I think it will be hard.	7/9/2020 1:26 PM
42	It is very difficult for us to find supervised experiential learning at the undergraduate level and not take away opportunities for graduate students.	7/9/2020 9:49 AM
43	Somewhat misleading since there is no mention that the FEM also requires a higher degree level. Suggest removing the word 'bachelor's' from this statement, to make it more accurate: traditional process of completing a bachelor's degree program	7/9/2020 9:13 AM
44	Are we saying there is no anxiety or expense to apply to a FEM program?	7/9/2020 9:00 AM
45	Students come to programs with different learning styles so this statement does not seem true in all cases	7/9/2020 8:24 AM
46	As previously stated.	7/9/2020 8:00 AM
47	coordinated programs do this now. Please note that we have more trouble filling our CP than we do our DI. So I do not know that this is true.	7/9/2020 7:50 AM
48	While it may reduce the anxiety and expense of having to apply for a separate internship (which I understand as the graduate of a CP), the way the statement is written, it implies student will benefit overall. That is only true if the level of training in FEMs is equivalent or better than what currently exists. We have yet to see any data. And with the proliferation of online FEMs, I have very serious doubts.	7/8/2020 6:03 PM
49	Rephrase...students options will be limited by programs that offer both the required experiential and didactic in a single degree program (FEM) versus the most common dietetics education traditional process of completing a bachelor's degree program and then completing supervised practice while choosing the area of study for their MS degree. That is, students may prefer an MS in business, marketing, psychology, or journalism rather than in dietetics. The traditional program encourages diversity in education among students rather than the cookie-cutter approach required by the FEM.	7/8/2020 4:46 PM
50	This is the easiest way for assessment of a program to occur, since it is one program, not 2 (DPD and DI)	7/8/2020 4:23 PM

51	yes, agreed. if you're going to comment on money saved in the student version, this would be an accurate statement	7/8/2020 4:19 PM
52	We have a a freshman to graduate rate that is below average (5+ years) as it is on our campus - adding a masters level will certainly make that 8+ plan - the student population in our area can not expose themselves to student loans at that amount - when the average income for an RDN with a masters is only 70K/year - not happening and increasing the disparity of profession even more.	7/8/2020 4:06 PM
53	Where's the DATA?? This is propaganda -- not truth. It will also COST schools A LOT to implement these programs if they are missing any of the pieces for the "seamless route". Tell THAT to administrators and see how much they will like it then. Hire more faculty, PAY for practice sites to work with their under-prepared students, have a chaotic schedule as each student "follows their own pace" through the program... This will be expensive and difficult for many facilities. The choice for administrators will be an easy one -- CUT the nutrition programs and shut them down.	7/8/2020 3:57 PM
54	I think the title of this document should be the FEA compared to a DPD+internship model. I am a 2+3 CP that includes BS, MS and all supervised practice. It is designed to be compact and reduce student expense. This document is biased and certainly is used to promote FEA. I'm frustrated that ACEND is not going to these lengths to promote other program models that have unique, "anxiety reducing and expense" qualities. In showing this to administrators, I fear I will only be diminishing their perception of our program.	7/8/2020 3:43 PM
55	As CP, the FG model will not necessarily reduce anxiety and expenses.	7/8/2020 3:42 PM

## Q9 FEM demonstration programs will have access to CBE support materials from ACEND, along with online and in-person training on CBE and competency assessment.

Answered: 102 Skipped: 0



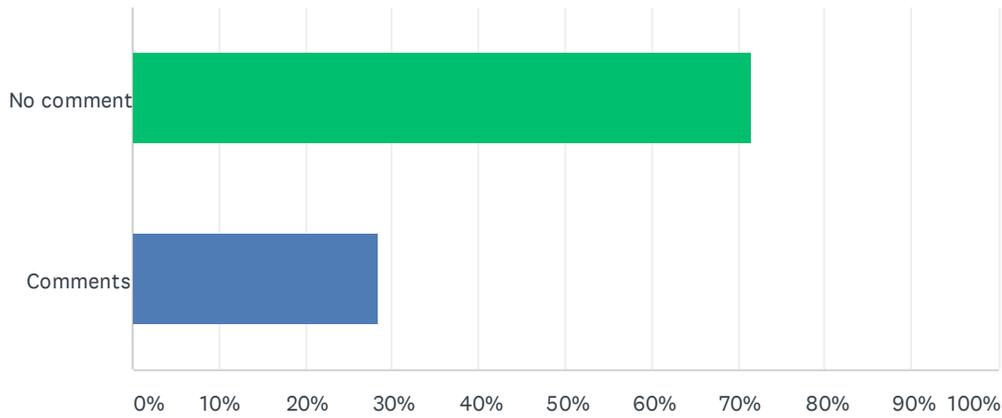
ANSWER CHOICES	RESPONSES	
No comment	76.47%	78
Comments	23.53%	24
<b>TOTAL</b>		<b>102</b>

#	COMMENTS	DATE
1	As do all programs now to some degree. No doubt training on CBE and assessment could be made available to any program.	7/20/2020 4:16 PM
2	All programs should have this support and access to the materials. It is as if they are setting the rest of us up to fail.	7/20/2020 8:19 AM
3	Training can only improve the quality of the programs, so I find this a good talking point.	7/20/2020 3:05 AM
4	This is a great speaking point! ACEND always provides quality training and support.	7/17/2020 6:22 PM
5	This is great; I am anxious to review these materials.	7/17/2020 5:26 PM
6	It's still a lot of work.	7/16/2020 8:19 PM
7	This is a true benefit. I feel like I'm not re-inventing "the wheel" with the ACEND resources.	7/16/2020 6:48 PM
8	And traditional programs that are not going away (yet) cannot get these support materials and training?	7/16/2020 5:53 PM
9	Have access, delete will. Nice to have access, but why can't my existing programs have access?	7/16/2020 12:37 PM
10	How is this a benefit? Is ACEND not supporting current programs? Are the FEM programs being favored in some way so that those students have more support and therefore better outcomes?	7/16/2020 8:28 AM
11	Why would this not apply to non-FEM's? I understand the thought, but it makes it sound as if DPD's and DI's will no longer be supported at the same levels which is concerning for me.	7/15/2020 4:42 PM
12	This is an important advantage.	7/15/2020 3:17 PM
13	What about non-demonstration programs? How do we get support materials/training if we want to just learn about it?	7/15/2020 2:29 PM
14	CBE training, materials and resources should be available to all existing programs. Otherwise preference is being given to FEM programs that is paid for by either AND membership or NDEP membership. Further there is no reason to give preference to FEM (over other existing programs) as no data exists to support that FEM programs produce a superior graduate who gets selected over others for jobs, earns more money and/or who gains promotions faster. Is preference another way of continuing to promote privilege?	7/14/2020 9:18 AM
15	Yes, but are we training preceptors? I work with over 30 different preceptors in 10 different employment settings. How are they going to be trained...? To the level needed for CBE...	7/13/2020 2:00 PM
16	Administrators would ask, why is this done for FEM and not for the current CP offered.	7/13/2020 11:40 AM
17	All programs should have access	7/10/2020 12:49 PM
18	Yippee-skippee. Administrators do not care about support materials. Why doesn't ACEND provide such training to current dietetics education program for free? Every workshop and conference program directors can attend for training costs money.	7/9/2020 5:10 PM
19	This should be available to all programs and would likely impact transition to programs not current going through the process	7/9/2020 8:24 AM
20	would like to know what these are.	7/9/2020 7:50 AM
21	Don't all programs have access to support materials and training from ACEND? How is this difference for the FEM demonstration programs?	7/8/2020 6:03 PM
22	Do you mean that ACEND is not going to provide these to DIs, ISPPs, etc...yet still collect the accreditation fees from these programs?	7/8/2020 4:46 PM
23	I doubt it - we need so much more like software support and server housing, etc more back end infrastructure than just materials. I once asked at a FNCE about the evaluation surveys/rubrics begin created for us - and the review panel actually laughed at me - this is what we need, but our needs are not met.	7/8/2020 4:06 PM
24	Obviously you've made you choice here. Such assistance will not be given to any of the other programs - for anything.	7/8/2020 3:57 PM



## Q10 FEM demonstration programs and their organizations gain national recognition as leaders and early adopters.

Answered: 102 Skipped: 0



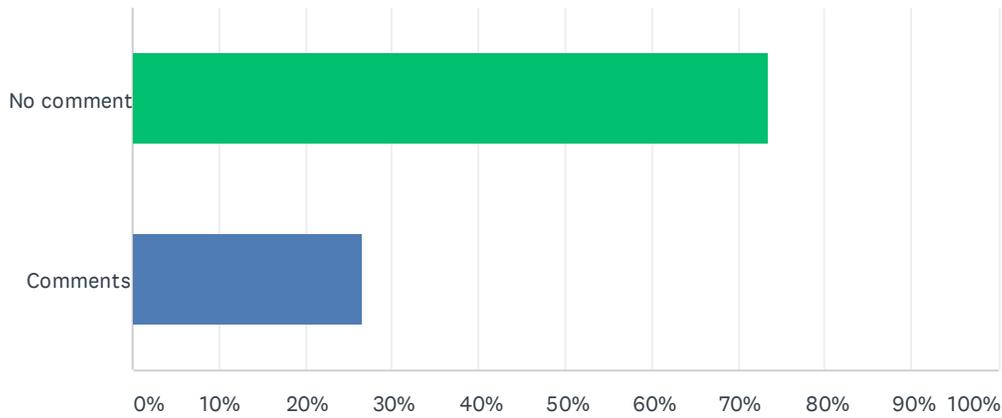
ANSWER CHOICES	RESPONSES	
No comment	71.57%	73
Comments	28.43%	29
TOTAL		102

#	COMMENTS	DATE
1	i would eliminate this point. I do not believe it is valid	7/20/2020 2:14 PM
2	I'm not sure why this matters.	7/20/2020 8:19 AM
3	Maybe. Being the first is not always the best as you put a lot of expense into seeing how the model works or making it work when things aren't very defined.	7/18/2020 9:34 AM
4	Potentially.	7/17/2020 6:22 PM
5	Again, disrespecting all other program formats. If you only want FEM, then that should have been clear and communicated not this back handed way to get rid of all the non-FEMs.	7/17/2020 7:31 AM
6	maybe describe what that recognition is	7/17/2020 5:19 AM
7	Do you have evidence for this? Sounds more like advertising.	7/16/2020 10:08 PM
8	I believe this will resonate with Administrators and even practitioners. It's good to be recognized as an early adopter of new standards.	7/16/2020 6:48 PM
9	Is the national really that interested?	7/16/2020 5:53 PM
10	How do they gain national recognition? How many of FA, FB, FG programs are there? When did this model start?	7/16/2020 12:37 PM
11	Who provides the "National recognition"?	7/16/2020 10:18 AM
12	Are there metrics on this? I am a program director and I am not aware that the programs who have chosen to adopt these models have gained national recognition as leaders and early adopters? I attend local, regional, and national meetings and none of us, even the ones who have chosen the FEMs see it this way. Many have felt forced by their institutions to chose this model, some feel they may as well do it now (have no choice), etc. I find this comment highly offensive as if those of us that are not choosing this option are somehow left behind.....	7/16/2020 8:28 AM
13	I disagree with this	7/16/2020 8:08 AM
14	From whom do they gain this recognition?	7/15/2020 4:42 PM
15	Also was a big consideration for our program.	7/15/2020 3:17 PM
16	Is this really true? What kind of national recognition? I am not sure that anyone outside of the dietetics world cares that we are early adopters. Students may not always see this as a benefit as they have to be the guinea pigs to work out the details and kinks in the program.	7/15/2020 3:02 PM
17	What "national recognition as leaders and early adopters" is being given? Leaders of who and of what?? Will they start their own (privileged/ exclusive) practice group?	7/14/2020 9:18 AM
18	Not sure about this one...	7/13/2020 2:00 PM
19	National recognition from what organization?	7/13/2020 11:40 AM
20	FEM in Associate Degree will not gain national recognition due to job hiring trends.	7/13/2020 10:45 AM
21	Premature until pass rates are published	7/10/2020 12:49 PM
22	It could be argued that those who are early adopters are fools as they will be the ones to endure the challenges that have not been anticipated. Not sure this will be seen as a benefit to administrators, particularly since there is no evidence to back up this so-called recognition. How many more students will such national recognition bring in (notice, I didn't say "attract")? Administrators care about the number that are enrolled, not the number that show interest, inquire, and so forth.	7/9/2020 5:10 PM
23	National recognition from whom-our own association? Unless it's a prestigious 'recognizer', I'm not sure this is an effective argument.	7/9/2020 9:13 AM
24	HOW? This is undefined.	7/9/2020 8:00 AM
25	it put other programs at a disadvantage- it looks like FEM is better.	7/9/2020 7:50 AM
26	What evidence does ACEND have to support this statement? What examples of national recognition are there?	7/8/2020 6:03 PM

27	There is absolutely no evidence for this. And, what about the tried, true, and steady DI, CP, ISPPs who have consistently trained top-notch RDNs who are leading the field?	7/8/2020 4:46 PM
28	maybe so, but we will not be one of those, we can barely keep our heads/workload above water now.	7/8/2020 4:06 PM
29	This is SO VERY BIASED! Schools with the MOST MONEY and lowest faculty work loads get to play at this - while ACEND toots the horn for them. They won't be getting any recognition for diversity any time soon -- not that you care at all about THAT.	7/8/2020 3:57 PM

### Q11 Directors of demonstration programs will participate in a network of educators implementing the FEM Accreditation Standards, as well as in tele-networking and in-person meetings with other demonstration program directors.

Answered: 102 Skipped: 0



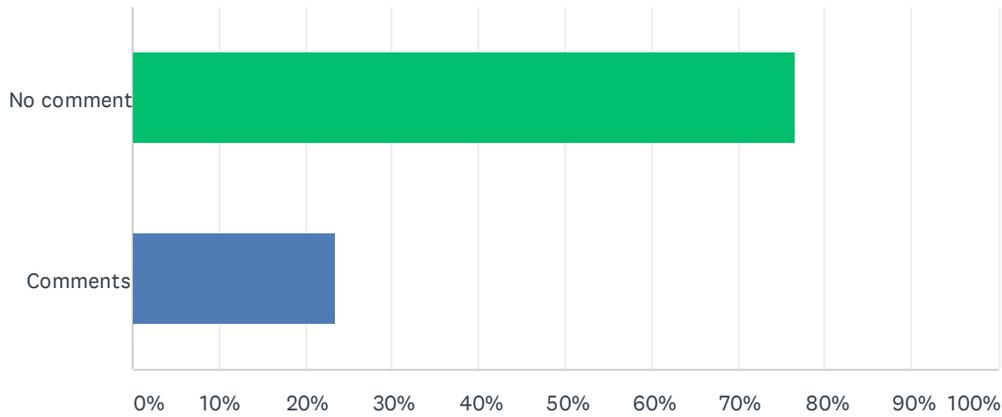
ANSWER CHOICES	RESPONSES	
No comment	73.53%	75
Comments	26.47%	27
TOTAL		102

#	COMMENTS	DATE
1	Again, excellent talking point!	7/17/2020 6:22 PM
2	Great opportunity for collaboration to improve programs.	7/17/2020 5:26 PM
3	This will help with any feeling of isolation as we go through this process.	7/16/2020 6:48 PM
4	We already have this with NDEP and its list serve.	7/16/2020 5:53 PM
5	Does this have a cost? If so, how much?	7/16/2020 12:50 PM
6	How much time does this take? Do you have similar networking for other programs? Who pays for in-person meetings?	7/16/2020 12:37 PM
7	When will this occur?	7/16/2020 10:38 AM
8	a plus	7/16/2020 10:36 AM
9	I think this statement needs a reason for why they participate	7/16/2020 10:18 AM
10	Good idea	7/16/2020 8:08 AM
11	This will take extra time for directors to learn these new strategies. Administrators may see this as time away from their current responsibilities.	7/16/2020 7:52 AM
12	Again, why not foster such collaboration with current programs?	7/15/2020 4:42 PM
13	Great!	7/15/2020 2:28 PM
14	All existing programs (non-FEM and FEM) already network - so how will this be any different? If you make this statement - you need to be able to demonstrate what exactly will be different. Will FEM programs form an exclusive/ privileged network, telework and in-person group(s) that is funded either by AND membership fees or NDEP membership? Also this presumes everyone will have lots of support from their institutions, and lots of free time, e.g. how will faculty who must do research for tenure manage this extra time requirement? And then there is the effect of the COVID pandemic on teaching.	7/14/2020 9:18 AM
15	Don't know yet...	7/13/2020 2:00 PM
16	This should be a focus for all programs	7/10/2020 12:49 PM
17	Program directors in some institutions already do not have enough time. When are they going to have the time to network and attend meetings?	7/9/2020 5:10 PM
18	and they aren't networking now?	7/9/2020 2:29 PM
19	Not sure this matters to my administrators.	7/9/2020 1:26 PM
20	This training g should be available to all programs who are interested in learning, not just those that are transitioning.	7/9/2020 8:24 AM
21	ALL directors (traditional and FEM) participate in a "network of educators...". This is deceptive.	7/9/2020 8:00 AM
22	all educators meet and discuss- send an inaccurate message.	7/9/2020 7:50 AM
23	This implies that "regular" program directors do not have a network of educators with tele-networking and in-person meetings. NDEP??	7/8/2020 6:03 PM
24	Hmm...so do the other program administrators. Why is ACEND giving preferential treatment to FEM?	7/8/2020 4:46 PM
25	sure but finding time to attend them will my issue - I am overworked (4 classes plus coordination of 21 preceptor affiliate sites for my internship) does not leave time for this and release time is not being accepted by the Deans - our university is taking layoffs due COVID.	7/8/2020 4:06 PM
26	Just another example of how ACEND sees this as a DONE DEAL without the evidence being complete. Loads of special attention and support fro the affluent programs that are doing your bidding. Screw the rest of us -- and our students!	7/8/2020 3:57 PM
27	Will this require additional time? Many directors also teach and share duties of being the director with other roles, such as teaching and advising. Making directors busier in areas that do not directly tie to revenue or research is not always a positive.	7/8/2020 3:50 PM



**Q12 Directors of demonstration programs will have access to collated data, collected by ACEND from stakeholders of demonstration programs, which can be used to inform enhancements to their programs.**

Answered: 102 Skipped: 0



ANSWER CHOICES	RESPONSES	
No comment	76.47%	78
Comments	23.53%	24
<b>TOTAL</b>		<b>102</b>

#	COMMENTS	DATE
1	This is interesting. Many DPD and DI (and presumably CP) directors have wanted more data from ACEND with which to inform enhancements to our programs. Instead, we have been burdened with collecting more and more of our own data each self-study cycle.	7/20/2020 4:16 PM
2	It would be good to clarify how often they will have access to this data and also how often they have to submit data.	7/19/2020 11:58 AM
3	ACEND data will be helpful; however, it seems like it will be a while before it's available.	7/17/2020 6:22 PM
4	Definitely a win-win. I'm looking forward to this.	7/16/2020 6:48 PM
5	Again, we already have this for traditional programs. Not saying FEM programs should not have it, just don't make it sound like it is something brand new.	7/16/2020 5:53 PM
6	Do traditional programs have these opportunities? Can you describe some of the enhancements?	7/16/2020 12:37 PM
7	This will be essential and beneficial to coordinators and directors.	7/16/2020 12:36 PM
8	data drives decision making and policy making	7/16/2020 10:36 AM
9	who are the stakeholders who refer to here? One small edit once the above is clarified Directors of demonstration programs will have access to data collected by ACEND from stakeholders of demonstration programs, which can be used to inform enhancements to their programs	7/16/2020 10:18 AM
10	Why can't all educators be privy to this? To be transparent, we all should have access to this so we can see how this is moving forward, if it is to be the wave of the future. I am sure that all programs have access to data on traditional programs. This just further wedges a divide between "us and them." This is not leadership, it is forced governance, and really does not create a culture of teamwork.	7/16/2020 8:28 AM
11	Why would this information not be available to all programs?	7/15/2020 5:07 PM
12	Why would non-FEM's not receive these same benefits?	7/15/2020 4:42 PM
13	Will the data not be available for all programs?	7/15/2020 4:05 PM
14	Great!	7/15/2020 2:28 PM
15	Why will FEM programs have exclusive preferential access to data that all existing programs and the general AND membership should have access to? Data that is not openly collected (via evidence based methods) and transparently shared creates a perception of exclusivity and preference and privilege. The general membership has very little to no idea as to what is going on in education as they probably perceive education as shrouded and exclusive. IF no access is given, how will the AND general membership (who are already angry with AND with more dropping AND membership each year) react when they realize this is one more thing that AND is NOT being transparent about?	7/14/2020 9:18 AM
16	Don't know yet...	7/13/2020 2:00 PM
17	Individual programs currently do this	7/10/2020 12:49 PM
18	these talking points are weak and would never sell a program of this type to a competent administrator.	7/9/2020 2:29 PM
19	why does ACEND not analyze all data then.	7/9/2020 7:50 AM
20	Don't all programs have access to data ACEND collects?	7/8/2020 6:03 PM
21	Yes...but is ACEND giving preferential treatment to FEMs? Why not invest in DIs, CPs, and ISPPs, too--these are proven programs that work.	7/8/2020 4:46 PM
22	This data should be available to ALL DPD programs wishing to transform into FEM, for planning purposes.	7/8/2020 4:23 PM
23	Again, if I had time to do anything with the analytics, I barely understand the CDR reports and have time to interpret that.	7/8/2020 4:06 PM
24	Which will be withheld from everyone else -- or parsed out in tiny - biased - super positive	7/8/2020 3:57 PM

reviews of how you have "proved" the superiority of this model.

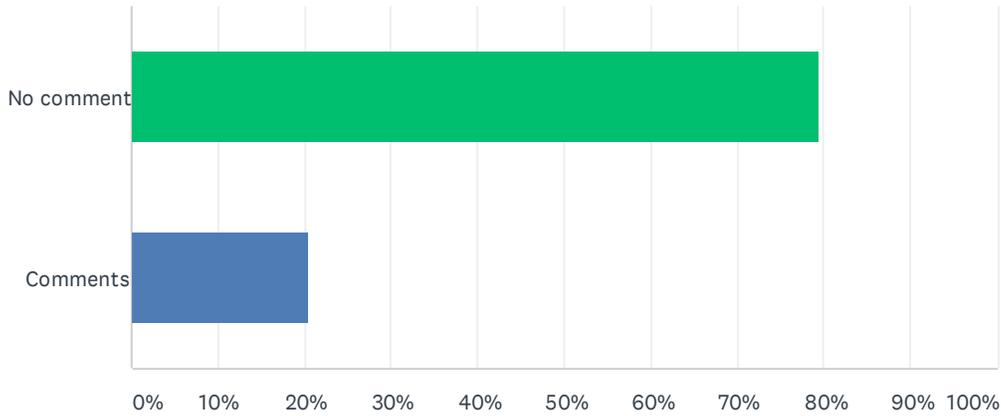
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Q13 Financial benefits include waived fees for a program change or candidacy application, a one-year accreditation fee, training webinars and travel and registration for the in-person training on CBE and assessment.

For a list of current fees visit the website at:

<https://www.eatrightpro.org/acend/accreditation-standards-fees-and-policies/fee-schedule>

Answered: 102 Skipped: 0



ANSWER CHOICES	RESPONSES
No comment	79.41% 81
Comments	20.59% 21
TOTAL	102

#	COMMENTS	DATE
1	This can make it more appealing for small programs	7/20/2020 3:05 AM
2	I understand the the fee for program change or candidacy application is waived, however the remaining part is not clear. It reads like one year of accreditation is free (waived) and that fees for training, travel and registration for in-person training are all waived. Is this the intent?	7/18/2020 1:01 PM
3	Great!	7/17/2020 6:22 PM
4	Generally, administrators have no clue about the costs for accreditation and site visits - until they occur! I will try to get these figures into their hands so they know these are tangible benefits.	7/16/2020 6:48 PM
5	How long will these financial benefits be around? What are fees after first year?	7/16/2020 12:37 PM
6	This is great and very important to administrators in the University setting right now!	7/16/2020 7:52 AM
7	Talking point is confusing, particularly about the one-year accreditation fee. Is that waived like the candidacy application? As for the training webinars, travel ad registration for CBE training, is that being covered by ACEND? How? Reimbursement or waived fees? Talking point needs a little rewording for clarity.	7/16/2020 7:45 AM
8	How is this fee structure fair? It seems to be rewarding programs that adopt the FEM. What about smaller programs that do not have this option?	7/15/2020 4:05 PM
9	Great!	7/15/2020 2:28 PM
10	Why is financial preference being given to one group (FEM) over others (existing supervised practice programs)? Who is paying for this financial preference? Is it AND membership fees, grant from some sponsor and/or NDEP membership fees? If AND membership fees are being to fund these activities - transparency must be shown to the general membership who are already distrustful of AND. If NDEP membership fees are being used to fund these activities then the NDEP membership must be made aware of this cost as a budget item on the NDEP budget that is transparently shared with NDEP members - especially as there is an effort to recruit more preceptors. Bottom line: When will AND make the general membership aware of this preference to avoid perception to the general membership that this is just another example of AND lack of transparency and showing preference to FEM programs?	7/14/2020 9:18 AM
11	This is not sufficient financial benefit to provide for clinical instructors on site...Also, most of the successful FEM programs are housed in large teaching universities affiliated with medical centers. But I'm trying to keep an open mind to this process.	7/13/2020 2:00 PM
12	Equal financial benefits should be provided to existing programs	7/10/2020 12:49 PM
13	Not clear..."a one-year accreditation fee;" do you mean to say that it is waived? Needs to be clarified. RECOMMEND: "waiver of one-year 's accreditation fee"	7/9/2020 6:22 PM
14	Why is ACEND providing incentives to transition to FEM programs when evidence of their success and benefits has not been appropriately gathered and shared? It is biased to financially favor FEM programs - if the FEM programs are successful, is that because FEM/CBE is truly better, or is it because those programs had more resources. Talk about buying outcomes that favor your agenda!!!	7/9/2020 5:10 PM
15	What is the reasoning to letting us know about the potential benefits for participating in a practice run of the model you wish to institute?	7/9/2020 3:58 PM
16	This matters to them.	7/9/2020 1:26 PM
17	Will there be no additional fees built into the programs and credentialing of these nutrition professionals. I think it is a bit concerning to mention financial benefits to a program that still has costs associated with it. This is all relative based on program chosen.	7/9/2020 10:10 AM
18	are you trying to make all programs do this?	7/9/2020 7:50 AM
19	This is unfair, preferential treatment.	7/8/2020 4:46 PM
20	due to COVID no one is traveling, workload has increased, none of these things are incentives unless you are going to give pre-made simulation studies that I can plug and go.	7/8/2020 4:06 PM
21	Barf. You just can't do enough for these programs can you?	7/8/2020 3:57 PM



## Q14 Additional comments/questions

Answered: 23 Skipped: 79

#	RESPONSES	DATE
1	I don't find this document convincing.	7/20/2020 4:16 PM
2	The fact sheet for administrators seems much more direct and easy to understand than the one to students and parents.	7/20/2020 2:14 PM
3	Feeling discouraged and sad.	7/17/2020 7:31 AM
4	Overall, I think it is self-explanatory. I feel that it has a very positive tone.	7/16/2020 10:08 PM
5	My administration is all for our conversion to the FG model. My job, however, is to let them know the workload that myself, my colleagues, and my preceptors have ahead of me in implementing these changes. It is certainly not as simple as "adding a Masters Degree", which is currently what they think it is! Thank you.	7/16/2020 6:48 PM
6	No comments	7/16/2020 12:50 PM
7	For FG, how many programs are using DPD as criteria for admission so still two step? What outcomes do you have on the 3 levels? As written, I do not think an administrator will have enough information to make an informed choice.	7/16/2020 12:37 PM
8	Administrators want to understand the bottom line - cost savings -	7/16/2020 10:18 AM
9	I truly feel that better communication about the data collected needs to occur. Otherwise, you are creating an environment where people do not trust what you are saying and it really pits the FEM over traditional programs. You have already done this with the marketing of FEMs by making them sound superior to traditional programs without adequate data. This is not helping to get people on board with the new model. If you want more people to get excited about it, provide feedback and help it to be the best it can be, you need to make them feel included, not offend them.	7/16/2020 8:28 AM
10	none	7/16/2020 8:08 AM
11	What are the future options for DI programs to participate in a competency based structure versus a by the hour based structure?	7/16/2020 7:45 AM
12	I am a new DI director / CNM, that just started right before COVID. Not sure how to prioritize this topic at this time.	7/15/2020 2:29 PM
13	Without question further education (certifications [CNSC], courses and graduate degrees) are crucial to survival of the profession. Unfortunately, the FEM pilot programs have been set up without much foresight as evidenced by programmatic changes being made at least yearly; the latter make comparing data/ results/ outcomes of FEM programs more complicated. But without data to show superiority of FEM programs over existing programs - these "talking point" documents just perpetuates the perception of preference, privilege and exclusivity within the dietetics profession. This is morally wrong and in the current climate may not be tolerated. I hope the profession survives.	7/14/2020 9:18 AM
14	FEM is not different from current options	7/10/2020 12:49 PM
15	The main issue here is how do we recruit students in a FEM model without DICAS and DnD participation. FEM program directors I know have a hard time filling the class.	7/9/2020 1:26 PM
16	If programs are set up with competencies in place which traditional programs are, there would be no need to develop more CBE programs. I do agree with the FEM however it is not likely going to be the answer to fewer internship placements. We as a profession must be very careful with how we are preparing the future nutrition professionals. It is about the experience and however we can best get them that the better.	7/9/2020 10:10 AM
17	none	7/9/2020 9:49 AM
18	No additional comments other than I have serious concerns about the future of dietetics education.	7/8/2020 6:03 PM
19	Why is ACEND giving preference to FEMs? What do the fee-paying, hard working, effective DIs, ISPPs, and CPs need to do to get the same commitment?	7/8/2020 4:46 PM
20	none	7/8/2020 4:03 PM
21	This is such obviously biased propaganda that I scarcely know what to say! Only your pets will	7/8/2020 3:57 PM

survive -- to the detriment of all other programs, taking diversity and inclusion down with them.  
I am so sad and depressed about this!

22	How does ACEND anticipate the handling of students who do not progress through the competencies. Do they extend their time in the programs or get a different "score" for competencies upon completion? Has there been consideration for second career applicant who are looking for more online/part-time options? The FEM may not be as beneficial for these students.	7/8/2020 3:42 PM
23	I feel that these are great ideas!	7/8/2020 3:30 PM