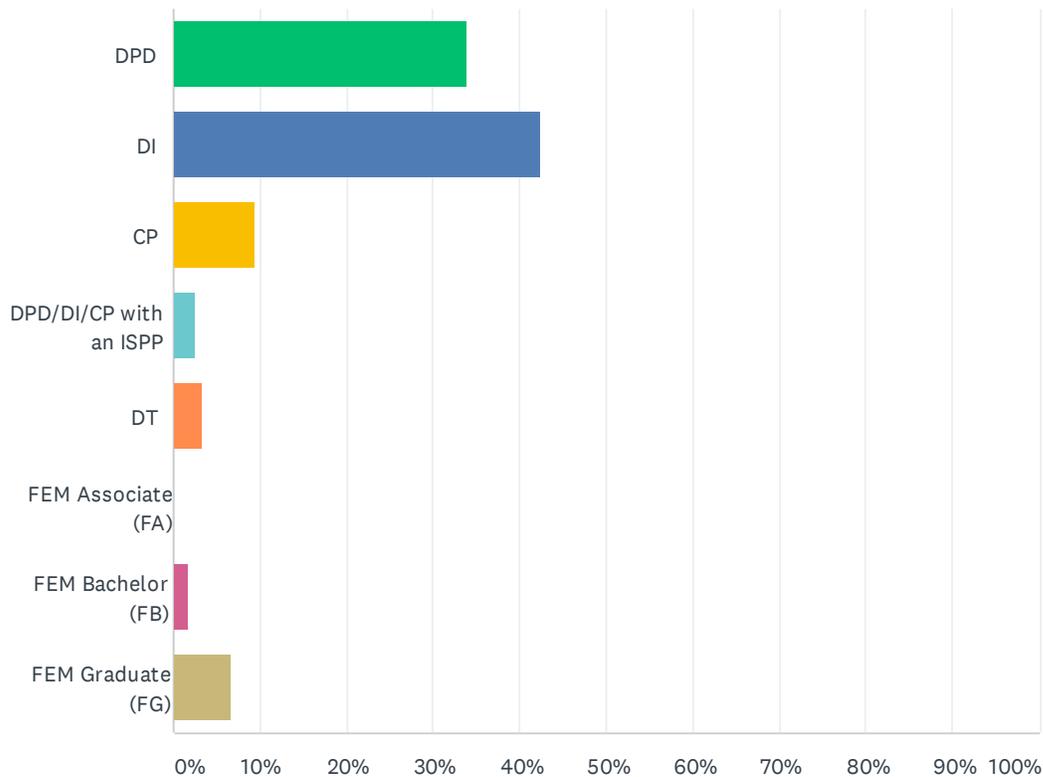


Q1 What is your program type?

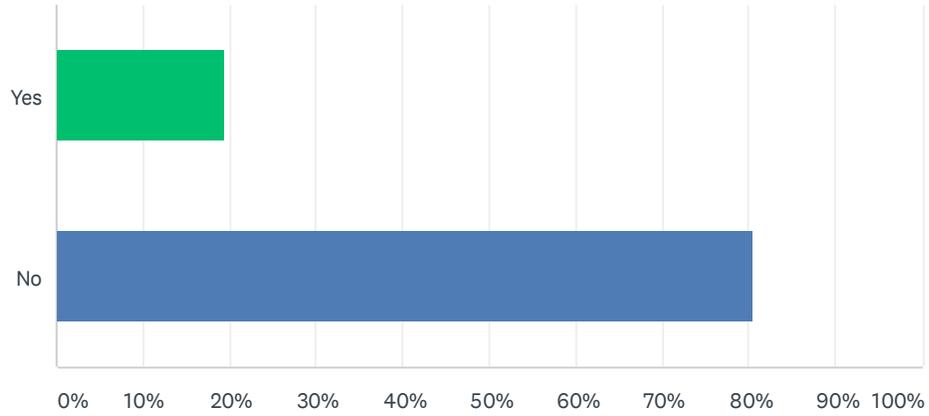
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ANSWER CHOICES	RESPONSES
DPD	33.90% 40
DI	42.37% 50
CP	9.32% 11
DPD/DI/CP with an ISPP	2.54% 3
DT	3.39% 4
FEM Associate (FA)	0.00% 0
FEM Bachelor (FB)	1.69% 2
FEM Graduate (FG)	6.78% 8
TOTAL	118

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

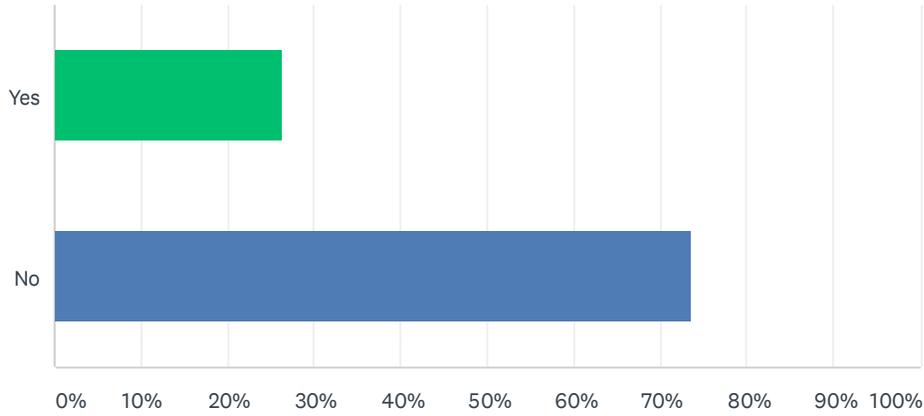
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ANSWER CHOICES	RESPONSES	
Yes	19.49%	23
No	80.51%	95
TOTAL		118

Q3 Is your program currently considering transitioning to FEM?

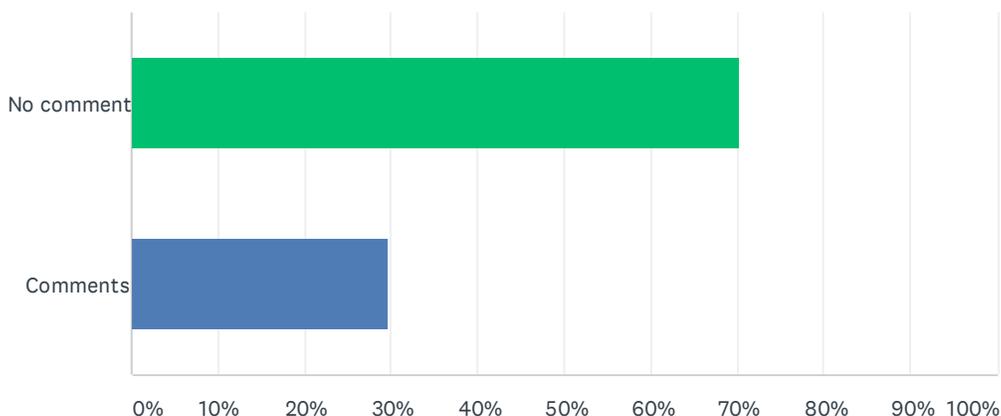
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ANSWER CHOICES	RESPONSES
Yes	26.27% 31
No	73.73% 87
TOTAL	118

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: 118 Skipped: 0



ANSWER CHOICES	RESPONSES	
No comment	70.34%	83
Comments	29.66%	35
TOTAL		118

#	COMMENTS	DATE
1	Maybe "classroom didactic learning"	7/20/2020 4:41 PM
2	These are very different target audiences. Recommend one talking points for FA, one for FB and one for FG so that the messaging makes more sense and is targeted throughout the rest of the document. People interested in FA are years away from a FG program, if they ever make it there.	7/20/2020 4:04 PM
3	The earlier questions do not allow for an answer that indicates that our school has started a FEM while maintaining the DI. I know there are other schools that are doing the same. I think this could better state The Accreditation Council for Education in Nutrition and Dietetics (ACEND) has released the Future Education Model Accreditation Standards that integrate classroom learning with supervised experiential learning for Associate (FA), Bachelor's (FB) and Graduate (FG) Degree Programs. This integration is also referred to as which are competency-based education (CBE).	7/20/2020 2:07 PM
4	Our DI program is competency based and always has been, so this is quite deceiving that the FEM is competency based and so everyone should be heading that direction. I think it would be good that traditional programs adopt FEM competencies and evaluate them as opposed to creating a proposal to our program that we will pursue the FEM.	7/19/2020 11:28 AM
5	Our DI program already integrates previous DPD classroom learning with supervised experiential learning. It sounds like FEM is based on the coordinated program in dietetics model.	7/17/2020 5:48 PM
6	My program has been approved for Demonstration 4, and have begun the process that is involved.	7/16/2020 6:29 PM
7	There should only be FA and FG similar to other allied health programs. FA should have licensure.	7/16/2020 3:27 PM
8	Other programs are competency-based, how are FEM programs different? What are the differences between the 3 levels? Are their career ladders? among the levels?	7/16/2020 1:03 PM
9	CBE is an efficient way to produce competent and work ready entry level dietitians which I think will be even more advantageous in the near future	7/16/2020 12:31 PM
10	Just as we expected, ACEND is marching forward to the FEM Model without even knowing the outcomes. Typical.	7/16/2020 12:16 PM
11	I think this is too "education-speak" for most lay people to understand. I have a doctorate in education, and I had to read it several times to make sense of it.	7/16/2020 12:03 PM
12	Suggest: 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 DIDACTIC CLASSES with supervised experiential learning IN PRACTICE SETTING.	7/16/2020 10:25 AM
13	I have no issues with this, but for the Bachelor's level, I would recommend that the amount not exceed 300 hours and that some of those hours can be simulation. We are limited to where students can go for these hours and I know some programs are more limited than we are.	7/16/2020 8:06 AM
14	It should include that only a small number of demonstration programs are currently available and the FEM standards are not in final form.	7/15/2020 6:08 PM
15	Are university has a DPDNDI program. We are housed in a small community with limited resources for experiential learning. Currently the dietetic internship is using the maximum amount of resources that are available.	7/15/2020 5:06 PM
16	The DPD standards currently are based on knowledge and application with starting at introductory to upper level to advanced. The terms are different but DPD provides more than "knowledge" as termed by KRDN. The CBE/FEM approach limits diversity in programs as students stay with one program vs. learning for new classmates from different regions. The FEM also limits diversity of due to cost of programming going into the MS degree level. Please revisit the original points from several years ago when this was first proposed as the concerns still hold.	7/15/2020 3:44 PM

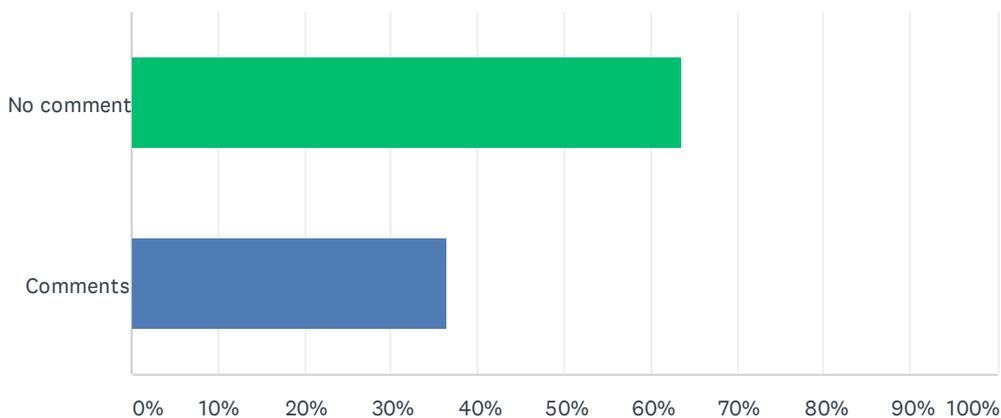
Program Director Survey regarding FEM Talking Points for Parents and Students

SurveyMonkey

17	I have no problem with the FEM model. I believe that a strong program can be developed with both classroom and supervised practice.	7/15/2020 2:54 PM
18	I think there needs to be a definition or explanation of what competency-based education is.	7/15/2020 2:46 PM
19	We are already doing this at DPD and DI levels - I am sure other programs are not, but this should just be the gold standard that we are all working with.	7/15/2020 2:45 PM
20	All existing supervised practice programs incorporate competency-based education(CBE) in their programs that include supervised "experiential" learning. This statement implies that FEM, alone, provide CBE which is NOT correct. CRDN starts with a "c" that stands for competency; this statement needs to be re-worded based on actual existing practice to be factual/ evidence based. Finally, the requirement for a master's degree for entry level RDN practice when there is no data (yet) to support its superiority to existing less expensive supervised practice programs is akin to every form of privilege that Black Lives Matter is fighting.	7/13/2020 5:20 PM
21	Coordinated programs are competency-based education programs that integrate classroom learning with supervised experiential learning.	7/13/2020 11:35 AM
22	ACEND has provided timely communication regarding this process. However, the impact on our DPD is not clear and will not be clear until after 2030 when evaluation data from the demonstration projects and employers are available. We will need to re-accredit our DPD in 2026. An important question relevant to the DPD is "will FEM programs require a DPD verification statement".	7/10/2020 4:08 PM
23	Honestly, I do not see much difference in the FEM and what we have been doing as a CP at both the undergrad and now MS level for nearly 40 years other than the 1200 hour requirement.	7/10/2020 10:29 AM
24	Clear statement	7/9/2020 10:24 AM
25	The FEM is a excellent step in moving the profession forward. However, the graduate degree should be nutrition. For e.g. to be a pharmacist a degree in pharmacy is required.	7/9/2020 10:17 AM
26	One of the biggest challenges we face in transitioning to the FB is finding supervised experiential learning, specifically in the clinical setting. There are limited locations and we have three universities within are area that utilize these supervised practice areas for graduate programs.	7/9/2020 9:44 AM
27	CP are competency based. DI's are as well.	7/9/2020 7:57 AM
28	You will not even tell how many programs have adopted this model. This is a coordinated program and nothing else. Stop lying.	7/8/2020 8:00 PM
29	how many programs have adopted this model>	7/8/2020 6:56 PM
30	This is misleading--all programs are competency based. It is unjustly denigrating the DI, CP, ISPP. It is more accurate to say that ACEND sets competencies (CRDNs) for all accredited undergraduate and graduate programs preparing students for the RDN credential.	7/8/2020 4:36 PM
31	I'm not well-versed in the FEM. What is the rationale of having the FB degree, since we are moving to an MS? Do enough students want to get an MS in another related field (ex: MBA, social work, etc)?	7/8/2020 4:09 PM
32	Has released and is piloting would be more accurate	7/8/2020 4:00 PM
33	Well the idea is great, the logistics is very difficult. The amount of paperwork involved in offer such experience is often time consuming to not only the student, educational institution, but the preceptor affiliate site. As a DI director if we start this at the community college AA or BS level and at the DI/Masters - I will not have any preceptors left. The profession is too small and staff is already overworked at the preceptor affiliate sites to be able to take all levels - this will cause pitting against program levels.	7/8/2020 3:50 PM
34	Is the FEM competencies final yet? I thought ACEND is still recruiting different cohorts for testing? The wordings in the document reads like it is final.	7/8/2020 3:33 PM
35	Perhaps explain what supervised experiential learning is. They are used to hearing the term dietetic internship. SEL is a new concept.	7/8/2020 3:24 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: 118 Skipped: 0



ANSWER CHOICES	RESPONSES
No comment	63.56% 75
Comments	36.44% 43
TOTAL	118

#	COMMENTS	DATE
1	"Transitioned" instead of "switched"	7/20/2020 4:41 PM
2	1) The grammar of this sentence is contradictory: "N and D is joining THE other allied health professions that have switched..." means that the list to follow includes all allied health professions that have switched. However, the phrase, "such as..." means that the list is a sample of professions that have switched. 2) Just a grammar fix: The sentence should read, "...have switched to the CBE model..." Presumably this sentence should read, " N and D is joining other allied health professions that have switched to the CBE model, such as..." 3) A comment on a more substantive level: Okay, but this implies that the FEM approach IS the switch to competency-based education. As noted in the introduction to this survey, N and D already operates on a CBE model. The 2017 Accreditation Standards set forth competencies that all programs must meet at their respective level (NDTR, DPD, etc.).	7/20/2020 3:57 PM
3	I think this statement appears too high on the list. I don't believe it is accurate. My understanding is we haven't switched to the CBE model exclusively as much as offering an alternate pathway to the current options.	7/20/2020 2:07 PM
4	This suggests that programs which are not FEM programs do NOT incorporate competency based education, which is misleading.	7/20/2020 1:51 PM
5	I am not as familiar with the other health professionals, but I am quite knowledgeable about nursing and they have been at the CBE model for quite some time. I believe all these professions liking have, but now it is just that they are calling it CBE.	7/19/2020 11:28 AM
6	This is good for our professional to use a comparable method to that of other allied health professions.	7/18/2020 12:54 PM
7	It'd be helpful to explain what CBE is as you assume parents/students know and they do not. It would also help to explain why this is better than what is currently used.	7/18/2020 9:27 AM
8	The other professionals receive higher entry-level salaries.	7/17/2020 5:48 PM
9	this is good, but it also might be good to state that the CBE model gets all professionals to a higher level of skill, professionalism etc, as the healthcare environment demands. (this is not worded well sorry) I know you did emphasize that is mirrors skills that employers want. but I think it also provides a higher level of practice and critical thinking for the market place. (you might have said this and I didnt remember!)	7/17/2020 5:17 AM
10	This is a good thing.	7/16/2020 8:17 PM
11	This statement confirms that dietetics is hardly alone in addressing a new model for competency-based education. This should be very affirming to parents and students.	7/16/2020 6:29 PM
12	Agree it is time to move to this level.	7/16/2020 3:27 PM
13	remove allied as nursing and pharmacy not allied health. List other CBE models at associate and BS level.	7/16/2020 1:03 PM
14	There are advantages to all of the allied health professionals to be following the same model	7/16/2020 12:31 PM
15	Great. But employers won't understand it or care. The students certainly won't get any additional money for it.	7/16/2020 12:16 PM
16	forgot AT	7/16/2020 11:37 AM
17	Great plan to align with these other training models of interprofessional practice Next step is AND addressing reimbursement for RDN	7/16/2020 10:33 AM
18	Suggest: Nutrition and Dietetics is joining the other health professions that have switched to Competency Based Education model, such as physical therapy, speech language pathology, occupational therapy, audiology, nursing and pharmacy.	7/16/2020 10:25 AM
19	This can perhaps be "added to" for the student handout. Some students may not fully understand "allied health professions" or that by dietetics making this switch to FEM, the value is greater. I do like this statement, I just think it needs more explanation and excitement for the student/parents.	7/16/2020 8:00 AM
20	Yes we are planning to join with nursing program to work with students that desire both	7/15/2020 6:55 PM

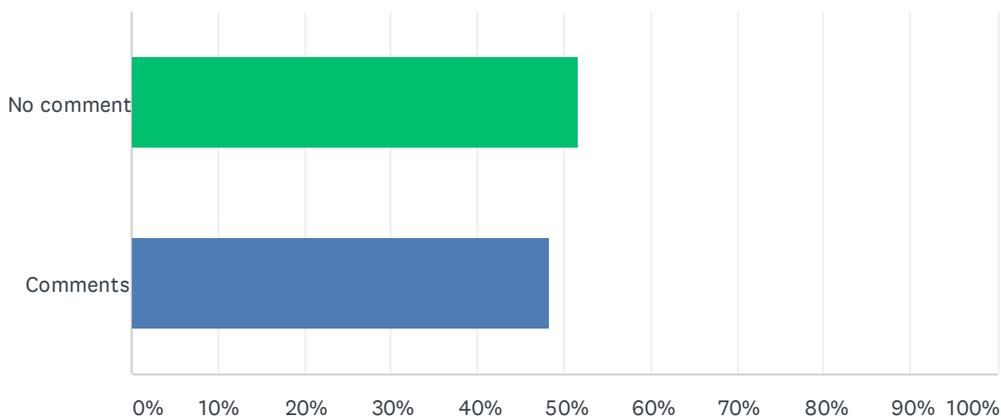
degrees.

21	Once again, current dietetics training is competency based. This point implies we are not. The above listed professions can more readily go to single program as these professions are limited to 2-3 starting career areas, e.g. physical therapy is hospital/clinic or rehab or sports. Speech language pathology and audiology are hospitals/clinics or school. Pharmacy has hospital or drug stores as primary entry points. Dietetic career entry points are more diverse as represented by the number of emphasis areas in internships.	7/15/2020 3:44 PM
22	I would like this to happen. It will enable RDs to be considered equivalent to other support health professionals.	7/15/2020 2:54 PM
23	I still feel very unclear on how to accomplish this as a stand-alone internship program. We are working to partner with a university but would like more guidance from ACEND. As well as more talking points on how to encourage students to continue to pursue a career in dietetics when they feel discouraged by the additional requirements without the promise of adequate compensation.	7/15/2020 2:51 PM
24	I don't like this point - it implies we are the ones left behind. Additionally, are we moving to a practice doctorate like the rest of these as well? I hope not.	7/15/2020 2:45 PM
25	As noted above all existing dietetic supervised practice programs already include CBE. Other health professions are primarily/ solely focused on clinical practice - so to some extent this statement is comparing apples and oranges as we have so many non-clinical options for dietetics graduates..... A real problem is that experience, particularly clinical experience, can not be simulated, i.e. you can memorize the content and equations - but you cannot memorize how to "stand up to a physician" in an ICU nor can one easily simulate a "challenging" "difficult" patient/ client with simulation. It has been amazing to me that my SP students with so much less class room, textbook learning perform as well or better than senior pharmacy, nurse practitioner and MSW students do in the IPE clinic, but I think it reflects they learn from experience to be holistically focused on patient care - rather than medication driven.	7/13/2020 5:20 PM
26	Based upon my understanding of the current education standards, dietetic internships are competency-based, hence CRDNs; therefore, I don't feel this switch is entirely accurate.	7/13/2020 1:21 PM
27	ACEND is updating very late compared to other allied health care professions.	7/10/2020 4:08 PM
28	Currently all supervised practice is competency based, this is not a change	7/10/2020 12:43 PM
29	It does not seem like dietetics has "switched" since we have had the Coordinated Program model for 40 years.	7/10/2020 11:42 AM
30	I think this is a good direction to go. Now if we could just get hospital administrators to understand that RDNs work on the patient floors, not in the kitchen and yes we actually need to train in the hospital not all by distance learning	7/10/2020 10:29 AM
31	grammatically incorrect...should be THE CBE model.	7/9/2020 6:01 PM
32	Suggest changing the word joining to aligning.... Nutrition and Dietetics is aligning with other allied health professions.....	7/9/2020 10:24 AM
33	Misleading since some of these programs have ALWAYS been structured this way.	7/9/2020 10:19 AM
34	Graduate degree must be nutrition	7/9/2020 10:17 AM
35	CBE model is valuable and provides a more meaningful and applicable learning experience.	7/9/2020 9:44 AM
36	makes it sounds as if other programs are inferior	7/9/2020 7:57 AM
37	SOME Nutrition and Dietetics programs are transitioning to a CBE model.	7/9/2020 7:56 AM
38	This is a big crock. NPs are being forced onto the floor because that model proved to be unrealistic. Outcomes have been very bad. Why would you want to follow this?	7/8/2020 8:00 PM
39	Why does nutrition need to follow the pathway of other professions? Ours is a unique and diverse profession that encompasses diverse levels of practice.	7/8/2020 6:56 PM
40	We have always been competency based. This is an inaccurate statement	7/8/2020 4:36 PM
41	make it clear that this is true for all program types, not just FEM	7/8/2020 4:00 PM

42	I support the premise of CBE, however elevating it to the levels from AA, BS and of a masters degree before one can be a practicing practitioner is hurting the profession and certainly going to deter diversity even more. In the last question I made reference to the lack of available preceptor affiliate sites for internships - it will not just simply get better if we had more levels.	7/8/2020 3:50 PM
43	This makes utilization of the FEM seem inevitable - because "everyone else is doing it." I would not include this in any statements to the public. Unless, as so many are fearing, ACEND has ALREADY decided that the FEM is our inevitable path. If so, why call what you are doing "experimental"? This is all very misleading!	7/8/2020 3:36 PM

Q6 One of the advantages of CBE is that it fosters work readiness. In the Future Education Model Accreditation Standards, the curriculum is guided with the competencies and their respective performance indicators, which are clearly defined based on the desired behaviors and job skills targeted.

Answered: 118 Skipped: 0



ANSWER CHOICES	RESPONSES	
No comment	51.69%	61
Comments	48.31%	57
TOTAL		118

#	COMMENTS	DATE
1	Again, this sentence intermixes FEM with CBE. Yes, FEM programs utilize CBE, but so do current accredited programs. The ONLY real difference with FEMs is that they automatically integrate education and supervised practice. Oh, but wait! So do Coordinated Programs. So what is the real difference between FEMs and CPs?	7/20/2020 3:57 PM
2	Again later in the list. We do not yet have any evidence that the FEM fosters better work readiness over existing programs.	7/20/2020 2:07 PM
3	Again, this implies that non-FEM programs are inferior as they are not guided by competencies and performance indicators.	7/20/2020 1:51 PM
4	It must be clarified that current stand-alone dietetic internships are also using CBE, and are held by the same standards.	7/20/2020 8:12 AM
5	This is certainly true if the individuals teaching these programs/courses are currently working in the field. There is a disconnect between academia and hospitals/clinics, etc in what they are teaching, so what is being taught in the classroom may not be what is practiced. Also, through a DI program, this is essentially done (well at least in the places I have been) to ensure the students are prepared for their internship. However, acquiring skills and behaviors takes time. Even student engineers who have internships and have a CBE, employers indicate they do not have the skills and behaviors, yet they have been doing this for the past 4 years.	7/19/2020 11:28 AM
6	In my DI program, curriculum and evaluations are already aligned with competencies and learning outcomes. "Desired behaviors" seem difficult to measure and I don't prefer the term.	7/17/2020 5:48 PM
7	Not everyone understands what "performance indicators" refers to. Defining this term and giving an example could clarify for prospective students and parents.	7/17/2020 10:41 AM
8	Many programs that are not yet FEM are already using CBE, let's not discount this.	7/16/2020 8:17 PM
9	Parents desperately want work readiness. Students need this as a confidence booster. I believe this statement is crucial.	7/16/2020 6:29 PM
10	This is beneficial.	7/16/2020 3:27 PM
11	Don't all your accredited programs foster work readiness? How are these different?	7/16/2020 1:03 PM
12	Prove it.	7/16/2020 12:16 PM
13	It would be helpful to provide an example. I can imagine most lay people would not know what a performance indicator or competency is.	7/16/2020 12:03 PM
14	agree	7/16/2020 10:33 AM
15	What is meant by "desired behaviors"? suggest One of the advantages of CBE is that it fosters work readiness. In the Future Education Model Accreditation Standards, the curriculum is guided with the competencies and their respective performance indicators, which are clearly defined based on the desired behaviors and PROFESSIONAL skills targeted.	7/16/2020 10:25 AM
16	The job market for the FA and FB seems limited and you won't need one of these to pursue a FG.	7/16/2020 7:38 AM
17	This is misleading because the unspoken implication is other non-FEM programs are not competency-based and not based on desired behaviors and targeted job skills	7/15/2020 6:08 PM
18	I feel like this is where it begins to make DPD programs seem "lesser than".	7/15/2020 4:33 PM
19	This is the beginning of a series of statements that imply there is an advantage to the student who completes a FM model program as compared to the traditional DPD/DI/MS program. I am not aware of any data that supports this statement or the ones that follow.	7/15/2020 4:29 PM
20	I'm not sure I agree that PIs are clearly defined. I appreciate that programs are allowed some interpretation, but I am often confused by the wording	7/15/2020 4:13 PM
21	Excellent point. Should entice students to pursue this route vs. traditional path.	7/15/2020 4:06 PM
22	This statement implies the current system does not foster readiness. Is this the intent? ACEND standard have been watered down over the years to account for as many possible	7/15/2020 3:44 PM

options that RDs say were missing vs. focusing on entry level needs. CDR needs to step up and provide training for advanced-level practice.

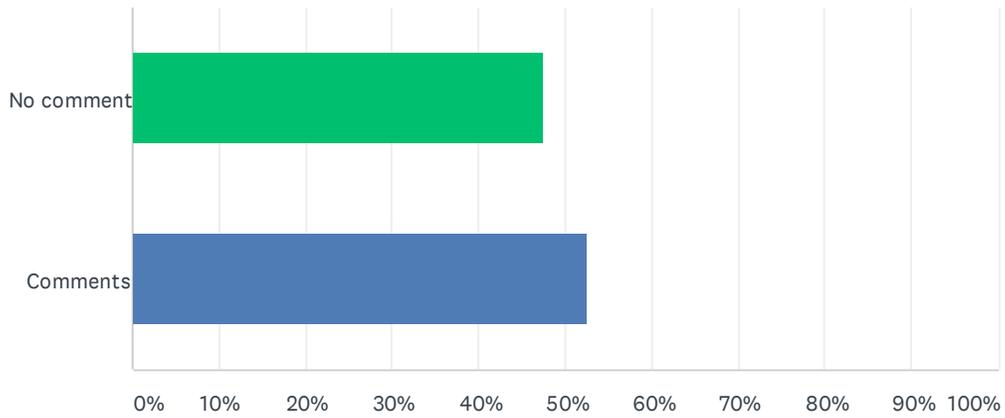
23	While I do not have problems with this specific wording, I do have concerns about student satisfaction and readiness for the RD exam. For example, my foodservice management class has 65 performance indicators that I need to cover in the 15 week course. There are topics that have historically been 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 3:19 PM
24	I agree with the need for work readiness.	7/15/2020 2:54 PM
25	This makes it sound as if the FEM is a design your own program based on the area of dietetics the student wants to enter. Will students get to pick and choose their classes and/or practice experiences.	7/15/2020 2:51 PM
26	If this is for future students and parents, you need to change the language. Again, they will not fully understand what competency-based education is unless they have been in a program that uses this model. This needs to be written at a level that is either at a lower level or provides explanation of this term, as well as performance indicators. If we are going for diversity here, we need to communicate to all individuals, not just college educated individuals.	7/15/2020 2:46 PM
27	What if they don't specifically want a traditional RD job? If we indicate we are only training for a specific trade, why doesn't this become a vocational degree? Students MUST have the ability to critically think and that is FAR MORE than CBE - it is literature and writing, etc.	7/15/2020 2:45 PM
28	CBE is included in all supervised programs; implying that CBE is only in FEM is incorrect. This sentence must be corrected to be accurate and data-based....The next statement - "the curriculum is guided with the competencies and their respective performance indicators, which are clearly defined based on the desired behaviors and job skills targeted" is also incorrect as employers have not been asked via a market survey what behaviors they need from employees - so "desired behaviors" is not based on what employers want.....Finally, a real problem is that experience, particularly clinical experience, can not be simulated, i.e. you can memorize the content and equations - but you cannot memorize how to "stand up to a physician" in an ICU nor can one easily simulate a "challenging" "difficult" patient/ client with simulation. Rubrics are only as good as the person who is filling them out.	7/13/2020 5:20 PM
29	Dietetic Interns upon meeting all of the CRDNs are work ready! In regards to the FEM at the bachelor's level, I think it will be very difficult to make the case for parents/students to spend the money it takes to obtain a four-year degree only to be work ready to be a technician. I think the associate's level work-ready program is a ridiculous use of time/money.	7/13/2020 1:21 PM
30	Dietetic internships and coordinated programs do the same. This undermines existing programs.	7/13/2020 11:35 AM
31	In theory CBE fosters work readiness, however there is no data/evidence to support this hypothesis until sufficient students have completed the process and feedback from their employers is obtained. This will take until 2030.	7/10/2020 4:08 PM
32	these talking points seem to favor a FEM program over other programs. If all programs are still options we should talk about benefits of each one without favoring one over the other.	7/10/2020 1:40 PM
33	DI see supervised practice as an on the job interview	7/10/2020 12:43 PM
34	More evidence is needed that employers prefer CBE trained graduates compared to traditional programs.	7/10/2020 11:42 AM
35	Better curriculum guidance is definitely needed. Current 2017 Standards do not give much direction in this area and I see a wide variety of student preparation from DPD programs when they enter our master CP.	7/10/2020 10:29 AM
36	I feel my traditional DI prepares graduates very well for the work world. On my employer survey (done 18 months post graduation) my grads consistently get ranked "very well prepared" for the first job.	7/10/2020 5:57 AM
37	This makes it sound as though DIs don't do this...just adds to the confusion. First sentence is misleading. It's NOT an advantage. "Fosters work readiness"? - DIs already do this; RECOMMEND: eliminate first sentence...begin with "In the FEM Accreditation."	7/9/2020 6:01 PM

	Program Director Survey regarding FEM Talking Points for Parents and Students	SurveyMonkey
38	This sounds like students in other programs aren't work ready - that's totally unfair to other program and so it's not an advantage - it's a fact of all kinds of programs. The DI standards are also competency based - basically if people aren't competent - they don't earn a Verification.	7/9/2020 1:20 PM
39	Somewhat misleading since current pathway structure also focuses on this ability.	7/9/2020 10:19 AM
40	Strongly agree.	7/9/2020 10:17 AM
41	all supervised practice programs are competency based.	7/9/2020 7:57 AM
42	Both traditional programs and CBE programs have their advantages. Where as traditional programs.... (insert here), FEM Programs offer (insert here). BOTH programs foster work-readiness and are guided with learning out come requirements or competencies as their performance indicators. Both of these options provide students information on desired behaviors and job skills.	7/9/2020 7:56 AM
43	This makes a lot of sense.	7/8/2020 10:52 PM
44	I don't understand how it can be definitely stated that it fosters work readiness when only a few students have graduated from FEM programs (and this is just for the Grad Programs) and the data has not been collected by employers who hire graduates of these programs.	7/8/2020 8:07 PM
45	How does an internship not foster work readiness. You are trying to solve your issues with DOE because you have never done anything about the number of DPDs vs DIs. The numbers will just fall and you know it. You will then be able to blame the MS requirement when it has been an issue for very very many years. You are ripe for a class action lawsuit and you know it.	7/8/2020 8:00 PM
46	this is just nonsense. Does anyone at ACEND have any experience with actual students and learning situations?	7/8/2020 6:56 PM
47	Internships also foster work readiness. FEM programs are not required to have internship hours (though most do), so I would think students might have fewer job skills coming out of a FEM.	7/8/2020 6:09 PM
48	Supervised practice programs which include a MS track also prepare professionals with work readiness. This statement implies that the FEM program is better prepares individuals than existing programs. Existing accredited programs also prepare individuals with excellent work readiness, desired behaviors and job skills. I find this statement a disservice to existing program types.	7/8/2020 6:08 PM
49	Why isn't the DI, CP, ISPP mentioned? They have the same outcome---and on top of that, there is evidence that these programs work. There is no published evidence on the efficacy of FEMs. Please stop diminishing the quality of accredited, proven pathways to the RDN.	7/8/2020 4:36 PM
50	students and parents may not understand 'competencies and their respective performance indicators'	7/8/2020 4:15 PM
51	Has the data testing this been evaluated yet?	7/8/2020 4:00 PM
52	This statement implies that other types of programs do not foster work readiness.	7/8/2020 3:52 PM
53	Yes, if a student has more access to this earlier, it may help them see that they love or dislike the profession, but the logistics of making it happen are burdensome. As a DI director of small 11 intern program - I do NOT have an assistant or coordinator and I work with 21 preceptor affiliate sites to provide the supervised practice - I can not coordinate anything more, nor can my colleagues who have 100 nutrition undergraduate advisee's. These CBE's have to be set up with contracting and with 21 sites, it does not happen easily and certainly not all will want to take all levels (AA, BS, MS).	7/8/2020 3:50 PM
54	By stating one of the advantages of CBE is that it fosters work readiness. I'd say all program types foster work readiness in different ways - Please remove this first sentence	7/8/2020 3:40 PM
55	HOW is it that the FEM "fosters work readiness" any MORE than the current system? This statement is overwhelmingly propaganda for the FEM! There are competencies for the current programs too! This makes it seem as though INTRODUCING competencies is a NEW thing! Like all of a sudden we care about producing graduates that are employable! NOT TRUE! This is shameless propaganda!	7/8/2020 3:36 PM
56	Without employer and RD exam data, it is premature to say this. This could be over promising.	7/8/2020 3:33 PM

57	They will not understand performance indicators	7/8/2020 3:24 PM
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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: 118 Skipped: 0



ANSWER CHOICES	RESPONSES	
No comment	47.46%	56
Comments	52.54%	62
TOTAL		118

#	COMMENTS	DATE
1	Okay, but this sentence does not address FEMs. This sentence addresses advantages of CBE.	7/20/2020 3:57 PM
2	Leave this statement out. I do not believe the employers have provided this evidence. Some did and some did not.	7/20/2020 2:07 PM
3	This implies that graduates of FEM programs may be more marketable to potential employers than graduates of other programs. Not only is that an unfounded claim, it also guides applicants away from other programs as they will now be perceived as "second tier" educations.	7/20/2020 1:51 PM
4	When reviewing students' resumes, I inform them to put in their relevant work experience and their internship experience. I am not necessarily sure if an employer sees that an applicant graduated with a MS from X University and that it was CBE that they would interview that individual over someone who graduated with a MS from X University through a traditional route.	7/19/2020 11:28 AM
5	Employers also see potential value in applicants from DI programs with longevity and a good reputation. Affiliates seek out our candidates for this reason.	7/17/2020 5:48 PM
6	Do we have the data to support this?	7/17/2020 1:37 PM
7	Not sure employers will know what CBE is, but will respond if a graduate can structure his or her resume to reflect the what s/he experienced.	7/16/2020 8:17 PM
8	Again, this will resonant will parents and students. Parents want their students to be "job-ready" even though they may be at entry-level. This is a strong statement.	7/16/2020 6:29 PM
9	What data do you have on employers wanting CBE graduates? Will they more likely gain employment?	7/16/2020 1:03 PM
10	How will this change be communicated to potential employers? If employers are not educated by ACEND regarding the use of CBE, then what real benefit does it provide?	7/16/2020 12:46 PM
11	Because there I a projected increased need for dietitians in the near future this is especially important	7/16/2020 12:31 PM
12	They won't have any idea how the employee was trained as long as they have the credential.	7/16/2020 12:16 PM
13	agree standardization is good	7/16/2020 10:33 AM
14	Employers and parents have no clue what CBE based on our experiences for the past 3 years. Employers likely see potential benefits in job applicants who have graduated a degree program that provides learners with the courses and supervised practice experiences and feedback to prepare them to be professionals.	7/16/2020 10:25 AM
15	Is there evidence of this? Or do we know that those future RDs coming out of FEM is better-prepared than those coming out of our current models? We have supervised practice now, and interns have to meet competencies- how is this different? Are current interns being "passed" without meeting their competencies?	7/16/2020 8:06 AM
16	Examples of "potential value" - what does this mean?	7/16/2020 8:00 AM
17	It is unclear what employers will be looking for students from a FB.	7/16/2020 7:38 AM
18	As above, implies that employers won't or don't seek job applicants who graduated from non-FEM programs.	7/15/2020 6:08 PM
19	I would see this as a definite benefit and appealing to employers.	7/15/2020 5:06 PM
20	I would like for there to be a reference for this. I do not feel employers would even know the difference at this point. A student coming out of an internship would have the same alignment of academics and skills. And, frankly, might have had more "real world" experience and maturity.	7/15/2020 4:33 PM
21	Are there studies that support the statement that employers see more advantage to the FM model graduate than the DPD/DI graduate?	7/15/2020 4:29 PM
22	Excellent point.	7/15/2020 4:06 PM

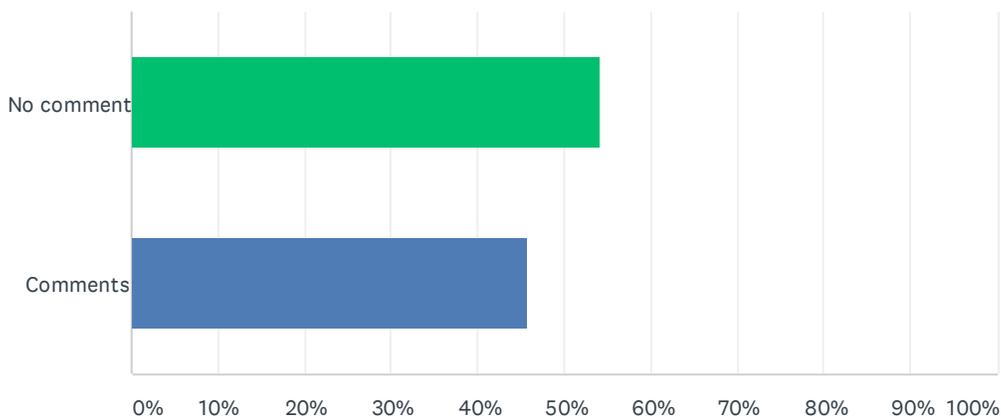
23	RD's are competency based! How are dietetics currently marketed to employers by the Academy, ACEND and CDR? Current dietetic education is getting hammered. Spreading out the number of "knowledge" areas weakens foundations which then sets-up the argument that a master's degree is needed to enter vs. earning a master's degree to advance an RD's career. Also, how strong is the master's degree in this scenario vs. a straight-up master's degree? Has this been measured? What about costs vs salary gained? Straight-up dietetic internships tend to be less expensive and allows the RD to earn a master's degree that will actually be geared towards that RD's goals.	7/15/2020 3:44 PM
24	Do we know this yet for our profession?	7/15/2020 3:30 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.	7/15/2020 3:19 PM
26	I think this is a great idea, but I wish the pay scale for RDNs would increase to align with the additional money it will take students to now get their MS degree.	7/15/2020 3:16 PM
27	Do we have any proof of this?	7/15/2020 3:11 PM
28	How will employers know/understand what CBE is? If an undergraduate student is awarded a degree from a FEM program in a University, will the employer know it was CBE? While I see how CBE aligns academics with skills, I'm unclear how we know that employers value it, or if they would even know if a student has gone through one of these programs.	7/15/2020 3:09 PM
29	I am not sure how to take this statement. This seems to be comparing RD from different programs. I don't know of any employers who would choose an RD based on whether they graduated from a FEM, CP or DPD+DI.	7/15/2020 2:51 PM
30	just say that it appears to better prepare them for working in the real world (or some other term)	7/15/2020 2:46 PM
31	I can't speak to this - I already have a 100% hire rate in 1-2 months of completion. However, I still think it is a short-sighted move to say that competency is all that matters.	7/15/2020 2:45 PM
32	This statement is incorrect; there has been no employer market survey nor a series of employer market surveys to substantiate these claims. Without data - these statements raise ethical issues. Unfortunately, most employers have little idea what CBE is; as a former chief dietitian in an internationally recognized hospital - RDs/RDNs were hired (and still are hired) based upon skill sets and experience - not performance on rubric assessments; they are not paid any additional money for an MS as an entry level clinician.	7/13/2020 5:20 PM
33	We already do this at both the DPD and DI level. I think this and other CBE-related statements insult our current programs.	7/13/2020 1:21 PM
34	I would like to see the employer survey that this statement speaks to.	7/13/2020 11:35 AM
35	Where is the evidence to support this statement? It may align on paper, but this is not the same thing as evidence that the skills are job ready.	7/10/2020 4:08 PM
36	The current model teaches worksite skills, this is NOT unique to FEM	7/10/2020 12:43 PM
37	Employers want students with skills but I am not sure they prefer one model of training over another. The outcome is what matters.	7/10/2020 11:42 AM
38	I think this statement is not backed by evidence. You could say the same thing for CP programs	7/10/2020 10:29 AM
39	I don't think employers look at this	7/10/2020 5:57 AM
40	Again, misleading as DIs already meet the skills sought by employers. RECOMMEND: eliminate this statement.	7/9/2020 6:01 PM
41	Where is the data to suggest that "employers see potential value in job applicants who will study CBE..."? Does this statement imply that employers do not see potential value in job applicants that do not study using CBE?	7/9/2020 4:51 PM
42	Again - why is there an assumption that employers value the FEM prepared OVER the DI,	7/9/2020 1:20 PM

especially when some programs are masters combined or coordinated. I really think it is unfair to traditional programs to make this kind of statement and it should not be different in a DI. I don't see any difference for an employer.

43	Misleading since employers do not understand the differences in education programs/pathways and are more focused on job requirements such as credentials and work experience.	7/9/2020 10:19 AM
44	Maybe site a reference to validate this claim	7/9/2020 8:57 AM
45	where is this data	7/9/2020 7:57 AM
46	We do not have any data to support this (to my knowledge), therefore remove it. OR, if it is not removed, include traditional programs in this language.	7/9/2020 7:56 AM
47	Yes I agree although I think our current DI also does this very well.....preparing our graduates for the workplace.	7/8/2020 10:52 PM
48	Similar to my comment above. As far as I know, there are only a handful of graduates from these programs and they are graduate programs. This is not a large enough number to justify this statement. Have employers who hire graduates from all types of programs been surveyed to say that they value this training over the other types that ACEND offers? This seems misleading.	7/8/2020 8:07 PM
49	Are you kidding? They do not even know what dietitians do. You have your head in a cloud or somewhere else.	7/8/2020 8:00 PM
50	What research do you have to support this supposition? Coordinated programs have tended to have lower passage rates on the RD exam	7/8/2020 6:56 PM
51	Do they though? I haven't heard this to be true. Students need competencies but also a ton of knowledge- they don't know basic medical terminology or tube feed calculations- if anything they need to be in class more.	7/8/2020 6:36 PM
52	Do you have a reference for this? Dietetics employers or just employers in general? Compared to internship programs?	7/8/2020 6:09 PM
53	Again, this statement implies that existing accredited programs do not prepare professionals in an equal or desirable manner.	7/8/2020 6:08 PM
54	What evidence is there for this statement?	7/8/2020 4:36 PM
55	How do we know this? The current model also produces this sense of value from employers, and possibly more so since the intern is immersed for a very lengthy amount of time in a literal job setting for many programs. As a VA internship director, i feel the 40hrs/week that my interns are with me for 10 months in length makes them the most marketable to employees. The interns not only improve their MNT skills but their general ability to function as a full time employee. Many students haven't been in that situation yet in life.	7/8/2020 4:15 PM
56	Great, but isn't that what they would expect from a recently credentialed RD from a DI?	7/8/2020 4:09 PM
57	Where is this data?	7/8/2020 4:00 PM
58	Yes of course they will - but then when you ask them, if they would be willing to precept at these levels - they say, no - we can not do that, we do not have the workforce to be able to support that unless you will pay me to to do. That is reality!	7/8/2020 3:50 PM
59	Our program aligns academics with the skills they seek in their employees - because we align our MS classes with our rotations. This bullet makes it seem like this is unique to just CBE	7/8/2020 3:40 PM
60	While this may be true, will the employers necessarily know the difference between the types of programs? Will they be able to accurately take into account the applicant's skills due to this?	7/8/2020 3:38 PM
61	Is this based on ACTUAL DATA that show employers prefer the graduates of FPM programs? You have no such data!	7/8/2020 3:36 PM
62	What is the data to substantiate this assertion.	7/8/2020 3:33 PM

Q8 Students completing Future Education Model programs can provide employers with functional resumes that define in-depth skills they will have and indicating they are competent at performing those skills when they enter the workplace.

Answered: 118 Skipped: 0



ANSWER CHOICES	RESPONSES	
No comment	54.24%	64
Comments	45.76%	54
TOTAL		118

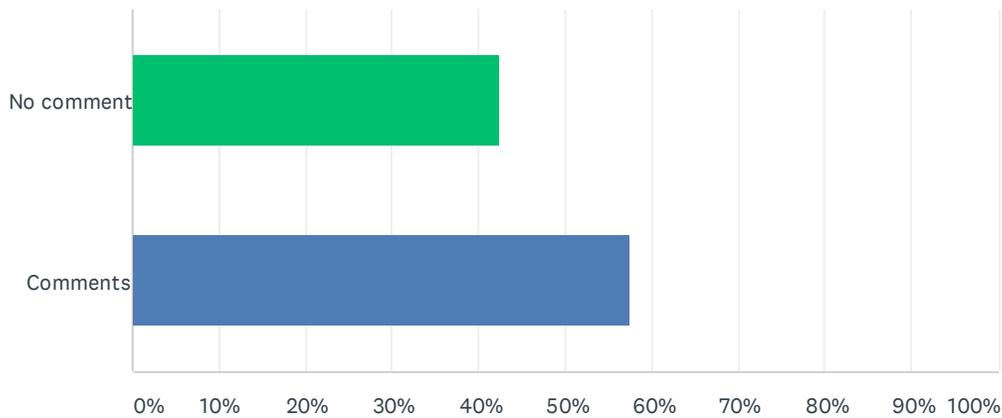
#	COMMENTS	DATE
1	Students can provide a resume? You want students to provide SKILLS and abilities and not a piece of paper. Better language is that "students will be prepared with in-depth skills and competent in those areas so that they are able to enter the workplace..."	7/20/2020 4:04 PM
2	So can all other students.	7/20/2020 3:57 PM
3	Again, the existing programs currently provide employers with functional resumes.	7/20/2020 2:07 PM
4	Again, this is no different than what could be said about a student completing any other type of ACEND accredited program, but it gives the impression that students completing FEM programs will have more compelling resumes than other graduates.	7/20/2020 1:51 PM
5	Graduates from stand-alone dietetic internships can do the same. This statement makes it sound as if only those graduating from FEM programs can do so.	7/20/2020 8:12 AM
6	100% of my students graduating with a MS and completing an internship obtain a job within 6 months of graduation and stay there for a good year or more with no complaints from the employer (honestly have high evaluation marks for all skills 6-months into the job), so unless there is solid proof graduates of FEM are much better than students graduating from a traditional program, I suggest this is removed.	7/19/2020 11:28 AM
7	This is true, but graduates of DPD + DI programs can also organize their resumes in such a way.	7/18/2020 12:54 PM
8	How does the CBE offer new job opportunities and improve the student's skill set. Studying at their own pace and providing a functional resume to the employers does not provide good information on how this is superior to the current model.	7/18/2020 9:27 AM
9	Students completing traditional DIs can do this as well based on curriculum, competencies and evaluations.	7/17/2020 5:48 PM
10	Parents and students want to know that their educational training (and dollars) are paying off in a job-ready career. This statement will be helpful.	7/16/2020 6:29 PM
11	Is this not true of your traditional programs? What are the more in-depth skills? What is eliminated to give time for more in-depth skills?	7/16/2020 1:03 PM
12	Good luck making that an easy process. How stupid.	7/16/2020 12:16 PM
13	This makes sense, but isn't it a little unrealistic to consider students as having "in-depth" skills, even with CBE? The KRDNs are a type of CBE, and even after students complete a supervised practice, I wouldn't consider anyone having in-depth skills. They will still be entry level. Any other language is ridiculous and misleading, in my professional opinion.	7/16/2020 12:03 PM
14	agree job readiness is key	7/16/2020 10:33 AM
15	Again, I don't see how this is different than what they are doing now. Current interns have "functional resumes" too. They have to do 1200 hours of "hands-on" skills, so they should be competent to perform entry-level skills when they enter the workplace. Our university offers an internship and our graduates have not had any issues with this. I find it rather arrogant that this FEM model now so how makes graduates so much better considering that their background can be in anything therefore, their foundational knowledge may not be as strong in science, counseling, and the nutrition care process.	7/16/2020 8:06 AM
16	Implies that graduates of non-FEM programs can't or won't have functional resumes. This is absolutely not true. Graduates from my free-standing MNT DI develop functional resumes, which list very detailed and in-depth skills, as I'm sure is true for many other DIs.	7/15/2020 6:08 PM
17	Again, I feel like this is not unique to FEM's. I feel the talking points should identify areas that might be unique to them and not what would happen as a result of any ACEND program.	7/15/2020 4:33 PM
18	DI graduates also have in-depth skills and are competent at performing those skills upon completion of the supervised practice program. There is an implied advantage here that I do not believe can be supported.	7/15/2020 4:29 PM
19	This is can be done now.	7/15/2020 3:44 PM
20	Do we know that this is the case? Will employers want to see this in our profession?	7/15/2020 3:30 PM

	Program Director Survey regarding FEM Talking Points for Parents and Students	SurveyMonkey
21	I do not feel that ability will be any different from what my graduates are able to do now upon program completion. We have always used our indicators to measure competency throughout the program. The main difference for us will be integrating the classroom learning with SEL and expanding the CBE tools we use in the program.	7/15/2020 3:11 PM
22	While I understand the principles behind the FEM, I don't see any real difference between FEM and current programs regarding student preparation for employment.	7/15/2020 3:05 PM
23	Will the RD Exam also become a competency based practice exam? Or will programs need to offer the exam (knowledge based) prior to supervised practice where competency is developed? The current model of supervised practice is more like a residency program, except that we put the exam AFTER the practice rather than before it.	7/15/2020 3:04 PM
24	How is this different from the DI or CP?	7/15/2020 2:51 PM
25	Same as my other feedback - this needs to be reworded so it is understandable for everyone at all levels of education. What is a functional resume?	7/15/2020 2:46 PM
26	They already should be able to do this!!!!	7/15/2020 2:45 PM
27	The development of these resumes would be a good presentation at future NDEP meetings.	7/13/2020 6:14 PM
28	What is meant by a functional resume; how is this term defined? All supervised programs assist graduates in developing a resume that is based on functional performance. Again since there has been no employer market survey nor series of employer market surveys to determine what job skills employers in clinical and non-clinical settings are seeking in employees - it cannot be said that FEM graduates have "in-depth skills they will have and indicating they are competent at performing those skills when they enter the workplace".	7/13/2020 5:20 PM
29	Our students already provide employers with functional resumes. This statement if used again makes it sound like our current programs are not doing their job. We are and these continuing statements make me very angry and disheartened with dietetics education and the future of our profession.	7/13/2020 1:21 PM
30	Dietetic internships and coordinated programs also provide employers with functional resumes.	7/13/2020 11:35 AM
31	As can DI and CP students	7/10/2020 12:43 PM
32	CP programs could argue the same	7/10/2020 10:29 AM
33	DIs already do this! Adds confusing and makes it sound as though DIs don't already do this. As I go through this survey; it's evident that the entire document needs to be thrown out and re-written without COMPETING with DIs. This doesn't make sense! Save it for 2024.	7/9/2020 6:01 PM
34	This statement seems to imply that students completing non-FEM programs can't provide employers with functional resumes, which is not accurate, based on evidence from alumni of non-FEM programs across the country. Likewise, this statement is not supported by evidence. What data do we have to support this claim?	7/9/2020 4:51 PM
35	Again, this is not a fair depiction when the same is try in traditional dietetic internship programs.	7/9/2020 1:20 PM
36	Somewhat misleading as applicants completing internships can create truthful and valid functional resumes as well, with many of these same skills.	7/9/2020 10:19 AM
37	Programs should be CP or all DPD programs must align with a DI and vice versa.	7/9/2020 10:17 AM
38	all of our SP graduates could do this but functional resumes are not usually used for entry level positions	7/9/2020 7:57 AM
39	BOTH traditional programs and FEMs allow students to create "functional resumes". Please clarify this.	7/9/2020 7:56 AM
40	We do this already in our supervised DI program but I do not think all do this so it could be beneficial if it in fact is carried out as planned. Concerned some may continue their same practices of not training the interns to be at entry level.	7/8/2020 10:52 PM
41	Again, I think graduates of other program types offer these skills as well. Without robust data to support this statement, I think this is misleading.	7/8/2020 8:07 PM
42	They are able to do that now when they complete a DI post a BS degree.	7/8/2020 8:00 PM

43	not seeing how this is different from our current model. We for some unknown reason amped up to 1200 hours from 900 with no basis for doing so. We are now trying to go to "competency" with no basis for doing so. This profession follows others like sheep without any consideration for the diversity of practice that is required. We need ICU RD's and we need WIC RD's--- training is not the same. This profession is marching off a cliff.	7/8/2020 6:56 PM
44	I don't think this has been proven	7/8/2020 6:36 PM
45	Internships do the same thing.	7/8/2020 6:09 PM
46	What is a functional resume? Current graduates of accredited programs can list skill sets and experiences gained in supervised practice.	7/8/2020 6:08 PM
47	So can DI, CP, and ISPP graduates. This disinformation is not helpful	7/8/2020 4:36 PM
48	Again, a stand alone DI will allow the student to do the same. This is not unique of the FEM and makes it seem like a stand alone DI would not provide this ability.	7/8/2020 4:15 PM
49	I think that the FEM is a great idea, but will employers be that concerned about this for entry-level employees? Isn't that what they expect-a basic level of competency?	7/8/2020 4:09 PM
50	It is not clear that the FEM model does this any more effectively than the older model	7/8/2020 4:00 PM
51	I don't know about this - I have not see a resume of someone who has completed a specific FEM program and I am not sure that is what employers are ready for. Last I heard a one page resume was the go-to - not sure how to put those CBE skills into one page and have it read nice.	7/8/2020 3:50 PM
52	This can ALSO be done for graduates of current DI programs - and they DO. This is NOT a new thing unique to the FPM.	7/8/2020 3:36 PM
53	Data, please. It is unconvincing at this time.	7/8/2020 3:33 PM
54	I don't think the resume is going to change. As a former CNM, I am looking at what can they do not how they got there.	7/8/2020 3:24 PM

Q9 Similar to a graduate nutrition and dietetics coordinated program (CP), students will benefit from programs following the Future Education Model Standards. The new standards' one-step approach to complete educational requirements versus the most common dietetics two-step process will yield additional benefits to students including: o Guaranteed ability to sit for the registration exam once the Future Education Program is successfully completed. In the most common dietetics education model, students usually need to competitively apply to a supervised practice program after earning their degree; the current low acceptance rate into supervised practice programs means there is no guarantee of being able to sit for the registration exam in the current two-step approach

Answered: 118 Skipped: 0



ANSWER CHOICES	RESPONSES
No comment	42.37% 50
Comments	57.63% 68
TOTAL	118

#	COMMENTS	DATE
1	This section makes no sense for the FA and FB...yes, can take the DTR exam but they can already do that. Again, you need a separate talking points doc for the FG. And, it's still a two-step process for the FG as students need a Bachelor's degree. However, it isn't a two-step accredited program. This entire statement is very misleading to the public and isn't clear. There is no evidence this FG program pathway is LESS EXPENSIVE! That's completely deceptive.	7/20/2020 4:04 PM
2	1) Yes, but so do CPs. 2) Current low acceptance rate into supervised practice programs? This is out of date. For the past two years at least, matching rates have favored the applicants. It is now DIs that are not filling their internship slots. 3) Competitiveness is not necessarily a bad thing. 4) I'm not sure about this, but surely FEMs will still need to have performance guidelines. Not everyone who starts a FEM will be able to do the work involved. So acceptance to a FEM is still not a guarantee of being able to sit for the registration exam.	7/20/2020 3:57 PM
3	I think this point is important but could be explained in a clearer way. I do not believe there is a low acceptance rate that is worth mentioning with current data. Here is a suggestion that simplifies the message: The new standards' one-step approach to complete educational requirements will allow students the guaranteed ability to sit for the registration exam once the Future Education Program is completed. The more common dietetics two-step process requires students to competitively apply to supervised practice programs after earning their degree.	7/20/2020 2:07 PM
4	Students apply for internships while completing their degree, not after. If the intention is to funnel students into FEM programs, than this fear-mongering claim is likely to be successful. If the intention is to provide students with un-biased information about educational options, then this is poorly written and should be revised.	7/20/2020 1:51 PM
5	So, the traditional method is bad and the FEM method is good is what I am interpreting from this, which is a shame the Academy is shunning traditional programs. It would be nice if this is the route, we eliminate the process all together of being accepted into DIs through the match process and just rely on Universities/programs to vet candidates that way as is normally done regardless of FEM or traditional as my sites cannot take more students than what is feasible.	7/19/2020 11:28 AM
6	This is a major strength of the model.	7/18/2020 12:54 PM
7	there is not a low acceptance rate to internships currently. It has increased a lot in the past few years so that is not correct as it stands now.	7/18/2020 9:27 AM
8	I graduated from a CP and it was a good program for my circumstances. I'm not sure it's best for all. It's true DI's are competitive, but acceptance rate is increasing based on ACEND stats. Our applications were down ~30% from the previous year.	7/17/2020 5:48 PM
9	Instead of highlighting a negative (low acceptance rate into stand alone DIs) just highlight the efficiency of a one stop shop program. Also, the point of low acceptance rate may not be holding up as the match rate for the past two years has been increasing. Again, framing the point as a positive instead of a negative might keep other DI directors happy.	7/17/2020 3:30 PM
10	The comment guaranteed ability to sit for the registration exam may be misinterpreted to state guaranteed ability to pass the registration exam.	7/17/2020 1:37 PM
11	How do you assure students and parents of a higher acceptance rate into FG program? Have you thought about how you are going to measure the student who want to complete the FG program and who are accepted or not accepted into a FG program. There is going to be a percentage of students who do not meet the criteria for entry into a graduate program, exactly like our current process where students do not meet criteria for entry into a dietetic internship.	7/17/2020 12:56 PM
12	Does the FEM program guarantee all students that begin in the freshman year will complete program and sit for the RD exam as opposed to the 2 step? Are students automatically accepted into the FEM program in the freshman year? The paragraph seems to imply that. "Guaranteed ability....." is potentially a confusing paragraph and needs further clarification.	7/17/2020 10:41 AM
13	maybe state what the low acceptance rate is averaging? what does low mean?	7/17/2020 5:17 AM
14	Perhaps this is the greatest benefit to the FE model - a one-college model that allows the student to work through the Bachelor's, supervised practice, and masters in one place. In all honesty, my students WANT to stay in one place. They are not that happy about going elsewhere, across the country sometimes, for an Internship, of which they know little about. They actually would prefer to stay with the professors and people they know! The "guaranteed	7/16/2020 6:29 PM

ability" is, of course, if they are successful in the program. Perhaps that should be placed at the beginning of the sentence rather than the end.

15	How many FG programs have all the course work within the program? It seems like the two steps are still there. How are CP and FG different?	7/16/2020 1:03 PM
16	While the acceptance rate is low, it is improved in recent years. Mentioning this, or at least providing statistics regarding recent match rates, provides a more holistic picture. Also, is there any data on acceptance rates into FEM programs? Is it greater than current, non-FEM programs?	7/16/2020 12:46 PM
17	There are many programs closing and putting admissions on hold because of the amount of work required to change everything to FEM. No load hours are given and administration doesn't care.	7/16/2020 12:16 PM
18	I'm sure parents and students have no idea what a CP is. They only know DPD, or undergraduate, and DI.	7/16/2020 12:03 PM
19	making it turn key for RDs to Be is important	7/16/2020 10:33 AM
20	Acceptance rates for supervised practice have steadily been going up the past few years, so that is not as much as an issue. There will still be limits as to how many students can be accepted in these FEM programs, so that really does not solve the problem. Most students who do not get accepted are related to low grades (below 3.0 GPA) and they wouldn't be accepted into a grad program either. The only person this really benefits is someone who already has a bachelor's degree and wants to change careers.	7/16/2020 8:06 AM
21	Not sure the part about coordinated programs fit here. An undergraduate student interested in dietetics will care about a "one-step approach to completed educational requirements vs...." - they won't even know (or fully understand) what a CP is.	7/16/2020 8:00 AM
22	The accredited program may be "one-step" but this minimizes the new requirement of a masters degree. It also is not clear that the statement is for the FG and does not apply to the FA or FB. This statement also makes the two-step process sound bleak when students in general are successful with securing supervised practice programs, especially with "second match" and programs that don't use match.	7/16/2020 7:38 AM
23	It is misleading to cite the current low acceptance rate when the acceptance rate has been climbing in recent years and internships seem to be struggling to fill their positions. This needs to be reworded to be accurate.	7/16/2020 5:09 AM
24	Very negative slam on all of the other accredited programs. As a current MNT DI director and former DPD and CP director, my DI graduates can run clinical rings around my former CP grads. I feel I can say with almost absolute certainty that the same will be true of FEM grads. While CPs and FEMS are great in being able to graduate students prepared to take the RD exam, I do not believe are or will be clinically trained as well as graduates of hospital-based free-standing MNT DIs.	7/15/2020 6:08 PM
25	I am not sure how this address is the limited availability of preceptors that will still be needed for both models.	7/15/2020 5:06 PM
26	I feel like we are seeing a much higher acceptance rate into supervised practice programs. Will the FEM's not be as rigorous? That is what this sounds like to me.	7/15/2020 4:33 PM
27	We no longer have a low acceptance rate into supervised practice programs. It is implied here that a student completing the DPD will not have a very good chance of being accepted into a DI program. I have not found this to be true.	7/15/2020 4:29 PM
28	Excellent point. This should entice students to follow this path. Well worded.	7/15/2020 4:06 PM
29	In the past CP students had a lower pass rate than the DPD/DI route? What are the current data on this? Please provide. Providing cover via Standards of Education for DPD programs in the standards can help monitor over enrollment (e.g., for every 25-50 students, there needs to be so many FTE for the program). The issue will still be present with the FEM as students will need to apply sophomore or junior year except the low acceptance will be within the university. What about programs in locations that can provide academic but not supervised practice? Where will these students go? Have you checked with research 1 or research 2 institutions who are built to train graduate level professionals?	7/15/2020 3:44 PM

Program Director Survey regarding FEM Talking Points for Parents and Students

SurveyMonkey

30	This is the biggest selling point, in my opinion.	7/15/2020 3:30 PM
31	I think this helps streamline the process more and makes students more marketable and ready for the field. Additional education and a MS degree can help students come to the field and work with a variety of patients and go into research.	7/15/2020 3:16 PM
32	It may very well still be a two-step process as they will have to apply for the FG after completing a BS degree unless the program is a 5 year, 3+2 combined Bachelors/Masters program.	7/15/2020 3:11 PM
33	What is the impact on the traditional degree? How are freshman students who enter University impacted? Curious about the cost difference.	7/15/2020 3:09 PM
34	Not all students admitted to a CP or DI successfully complete it. There are already MS/DIs and MS/CPs that are comparable to FEM programs. The acceptance rates into DIs and other programs has increased considerably. There are more and more programs with open positions after the computer match, and it is likely that over time those programs will fold.	7/15/2020 3:05 PM
35	This is a problem for all hospital-based programs that cannot offer a graduate degree. They are forced to send their students through a local university or an online master's degree in order to guarantee the eligibility to take the exam.	7/15/2020 3:04 PM
36	I fully support this. We need to move from the traditional model.	7/15/2020 2:54 PM
37	Am I supposed to comment on both bullets? For the first bullet, I would remove the first introductory statement and start the sentence with "Students will benefit from..." then explain that "an example of a one-step program is a CP, where the knowledge requirements and DI are coordinated, what is known as a CP."	7/15/2020 2:46 PM
38	This is VERY frustrating - the match rate isn't low anymore because so many distance and other programs are popping up. This is also quite misleading to students.	7/15/2020 2:45 PM
39	It isn't any one statement in this document that I take issue with, but as a whole I feel like it is saying the traditional DI Program is inferior. I feel like some fairly strong statements are being made, yet we do not have data from the demonstration programs yet to support some of these statement. I would also suggest changing the wording on ..."the current low acceptance rate into supervised practice programs means..."... This makes it sound like there is limited chance of being accepted, when in fact, the match rates have been steadily increasing over the years?	7/15/2020 2:43 PM
40	Nothing is really guaranteed.....	7/14/2020 2:20 PM
41	First the current match rate from the April 2020 match was 71% first round with 95% estimated placement if all slots were filled - so the statement of "the current low acceptance rate into supervised practice programs" is both factually incorrect and misleading..... The cost associated with the mandatory MS RD will reduce/ eliminate the ability/ chance of students from low income families from becoming registered dietitians. Without any data to support this change - it is an example of privilege by Academy leadership or more correctly I guess "White privilege" by AND leadership as most of the leadership is white. FEM programs will further reduce diversity in the dietetics profession relegating students from low income families to DTR.	7/13/2020 5:20 PM
42	This statement is not completely true. Students will not be able to automatically enroll in a graduate FEM without an undergraduate degree and depending upon the nature of that degree, I believe they will need to complete some prerequisite courses to be ready for graduate-level dietetics courses. I wouldn't call this one-step. Won't these potential graduate-level FEM candidates need to apply? Is there going to be a 100% acceptance rate?	7/13/2020 1:21 PM
43	Most of the land grant Dietetics programs (MN, WI, MI) ended their CP due to high costs. I would not expect these institutions to a graduate nutrition and dietetics CP. However, the option is open for a degree granting institution to align with a clinical facility sponsoring a DI to offer an online MS in Clinical Nutrition as we have done at the University of Wisconsin-Madison.	7/10/2020 4:08 PM
44	again this makes it sound like your education will be poor if you follow a DPD then internship. Low acceptance rate is no longer true, after second round, placements are around 80%.	7/10/2020 1:40 PM
45	With declining enrollment in the profession this is not a selling point	7/10/2020 12:43 PM
46	We still want high quality students in our programs and those students do get accepted into	7/10/2020 11:42 AM

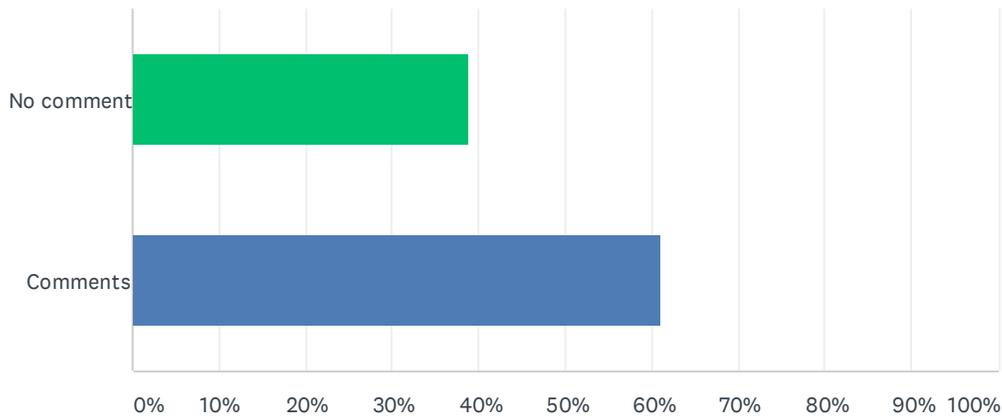
	supervised practice programs.	
47	agree with this statement, more students need to be made aware of master CPs and FEMs as an alternative to DICAS app internships	7/10/2020 10:29 AM
48	Add to the beginning: "After successfully completing the FEP, students are guaranteed the ability to...." This is no longer true! the current low acceptance rate into supervised practice programs means there is no guarantee of being able to sit for the registration exam in the current two-step approach.	7/9/2020 6:01 PM
49	What about students in FEM programs that are unsuccessful in completing the program because they did not possess the knowledge and skills necessary to be successful (which, it can be argued with evidence, is why the acceptance rate to supervised practice programs is low - program directors have evidence that students lacking certain indicators of knowledge and skills will not be successful in completing the supervised practice program and/or on the registration exam, which is why they do not rank those students.) Just because a student can presumably gain access more easily to FEM programs (what evidence of this is there?), does not mean that student will be successful in completing the program. Thus, there is no guarantee of ability to sit for the registration exam. A student has to successfully finish the FEM program before they can sit for the exam. If they are not successful, what do they have? No bachelor's degree, no graduate degree, not eligible to sit for the exam - nothing!	7/9/2020 4:51 PM
50	This is the fault of our process - the FEM directors I know WANT to participate in matching. AND the match rate continues to climb and MANY, MANY, MANY programs are NOT filling, so this is based on OLD information not the current situation.	7/9/2020 1:20 PM
51	Somewhat misleading as it implies there is no competitive nature to applying to programs under the FEM, when in fact graduate requirements and cost are limiting	7/9/2020 10:19 AM
52	Excellent....pls implement quickly	7/9/2020 10:17 AM
53	This sounds like there is no competition to get into FEMs and you are unlikely to get into a DI - I take issue with this statement drawing away from DI applications.	7/9/2020 8:57 AM
54	Yes provided that they have completed the required Masters degree. Supervised practice programs may allow interns who do not get accepted into graduate programs the ability to enhance their skills and knowledge and improve their chances of future admission into graduate programs	7/9/2020 8:18 AM
55	this is the same as CPs. Acceptance rate is much higher now and we have a shortage of students.	7/9/2020 7:57 AM
56	As these programs are new, there is NO DATA to support the claim of "benefit". In the follow up statement, per ACEND, the match data suggest that 95% of students who apply for the match can be matched. Therefore, the process is no longer competitive or prohibitive.	7/9/2020 7:56 AM
57	My first thought is that it isn't as competitive as it used to be. We are now well above the 50% match rate (I believe the numbers were at 70% this past spring). I don't see that this is less cumbersome since students still need a BS degree to apply to the FEMs. Plus, many FEMs have a prerequisite list of half a DPD program. Another reason this is false is that their are some FEMS that require a DPD Verification Statement for entry (e.g., Nebraska and Iowa State), if you are alluding to the fact that the students need a DPD Verification statement as "step 1" and then to get a graduate degree with the supervised practice hours to sit for the exam as "step 2", then those two programs are not following the "one step" approach. If you want to have the FEMs truly be tested for their ability to train future RDNs in a "one-step" approach and to state that it is a "one-step" approach, then they should not be allowed to accept students who graduated from the DPD programs.	7/8/2020 8:07 PM
58	You have continued to accredit DPD programs with the requirement of maintaining a GPA of 2.5 to remain in the DPD. There is no DI out there that would accept an applicant with this GPA and you know it but you accredited the DPDs regardless. The previous CADE director tried to make all programs go to a coordinated model 25 years ago and the profession voted this down. You did a poor job of advertising this.	7/8/2020 8:00 PM
59	Great in theory and dumb in practice. Good applicants are getting accepted. Leadership at AND is stuck on more initials rather than accepting the wide diversity of needs of the profession.	7/8/2020 6:56 PM
60	There is not the competitiveness that there once was. My terrible students are getting into	7/8/2020 6:36 PM

second round match just to fill seats. They'll never pass the RD exam but are accepted so the program can get their money.

61	Define "low acceptance rate." Over 100 internship programs were in the second round match this year. The atmosphere is much less competitive than 5 years ago. My DPD program had 100% match rate last year and 96% this year. There's also no guarantee that internships or FEM program graduates can get a job, but giving them appropriate resources for resume building, job searching is expected. This is no different than a DPD program providing support for getting into an internship.	7/8/2020 6:09 PM
62	This is inaccurate--the acceptance rate is now very high. The 2-step process is also incorrect in that many programs have pre-select. Why is ACEND putting out this misinformation?	7/8/2020 4:36 PM
63	I think this is fantastic. However, as the DPD Director of a very small program at an HBCU, my concern is that we won't be able to attract enough interested and eligible students at the FB level, if this becomes the only model. I would like the option to keep my DPD, or be provided with more support to recruit more Blacks to the profession. I do see how the FEM makes it simpler to become an RD, and how that makes it a more accessible profession for everyone to pursue. However, I also see that there will be fewer students overall in the next few decades. How can we ensure that a larger percentage of those RDs are Blacks and other POCs?	7/8/2020 4:09 PM
64	I am a 2+3 CP that includes the BS, MS and supervised practice. I am really frustrated to see ACEND promoting one type of program with such bias. In question 9, the reference to a CP is limited to 1/2 sentence. This entire document diminishes the value of a CP and other creative models that exist for dietetics training.	7/8/2020 3:52 PM
65	This is quite possible - however how to achieve this is yet to be seen. We wish to elevate our program, but what to offer at the masters level for units vs. the supervised work exp is yet to be solidified and getting students through in two years, could be a challenge as many have a hard time completing a rigors masters degree in two years and adding in CBE - that could be a challenge if the current best practice is thesis based.	7/8/2020 3:50 PM
66	This statement sets the DPD director up for a tough discussion with the parents wondering why a school has the two-step approach, if the new FEM is the way to go. If the FEM is truly a pilot program, as I heard discussed at the NDEP meeting in Birmingham in the Spring, I do not think it should be "sold" as the superior product until it is out of the pilot phase. This statement makes the FEM seem superior, as do some additional statements. Due to staffing and what we know we have to work with at our program, we do not feel prepared to embark on being a pilot. We are concentrating on providing a good DPD program that has had a great deal of faculty transition (I am the 4th DPD director during this cycle), so piloting is not a good fit for us at the moment. But I feel as if we are outdated, selling an "old" product, yet parents do not want to hear why our program has not chosen to be a pilot FEM program. Please consider that many of us are still trying to recruit to our DPD until ACEND completes the pilot, or is transparent in the fact that DPDs will be phased out and ACEND can give guidance on what we can be planning for.	7/8/2020 3:46 PM
67	This is a full on lie! This will be HUGE DISADVANTAGE to students and to most programs -- combining a Graduate DPD and Supervised practice will cause MANY programs to CLOSE. The "advantage" described here will be that there will be MANY FEWER graduates who can become RDNs, and 99.999% of them will be from white upper-middle class families that can support them through such programs. There goes your much vaunted claim to improving "diversity" in the profession! Again, this will NOT improve the situation with the "pipeline" because there will be many fewer programs that can operate this way. This "guarantee" is an entirely FALSE PROMISE that will leave our profession much smaller and worse off.	7/8/2020 3:36 PM
68	Guaranteed ability to sit for the RD exam? Really, what if students can't complete the FEM? This statement blatantly pits the FEM against the current model of DPD and internship. I don't understand why ACEND wants to set up this competitive relationship between FEM and DPD/DI programs. You are setting up the FEM and DPD/DI as competitors of each other and openly favor the FEM and openly treat the DPD/DI as second class programs. I can't believe ACEND would do that when the data for the success of the FEM is not even out yet.	7/8/2020 3:33 PM

Q10 Similar to a graduate nutrition and dietetics coordinated program (CP), students will benefit from programs following the Future Education Model Standards. The new standards' one-step approach to complete educational requirements versus the most common dietetics two-step process will yield additional benefits to students including:
 o Decrease in expenses due to enrollment in a single program versus enrollment in two programs

Answered: 118 Skipped: 0



ANSWER CHOICES		RESPONSES	
No comment		38.98%	46
Comments		61.02%	72
TOTAL			118

#	COMMENTS	DATE
1	Decrease "financial burden" instead of "expenses"	7/20/2020 4:41 PM
2	again, how does this apply to FA and FB programs? Need to target your messaging better.	7/20/2020 4:04 PM
3	Depends on the program(s). If FEMs require prerequisites, then the expense needed to complete those prerequisites must be considered before a claim of less expense can be made. And a bachelor's degree will be a "prerequisite" for a graduate FEM. The need for a master's program automatically requires more expense than bachelor's degrees as entry-level. After all, a student first needs to complete a bachelor's degree. You can't ignore that expense in order to claim that FEMs are less expensive because they are one program instead of two. They represent at least two programs--the bachelor's degree needed first, and then the graduate degree. Yes, they do not require the expense of a separate dietetic internship/supervised practice, but the supervised practice integrated into a FEM will still cost money that will be passed along to the students at some point.	7/20/2020 3:57 PM
4	The new one-step approach to complete educational requirements versus the most common dietetics two-step process may decrease expenses due to enrollment in a single program versus enrollment in two programs.	7/20/2020 2:07 PM
5	I'm not sure what this is based on, but you may consider revising this statement. Were I a student who ended up paying as much or more for an FEM program than an alternative, especially considering the exponential growth of higher education, I would feel ACEND falsely represented my options. I would recommend providing a table with a range of costs of different programs, which would more accurately represent the information and allow the student to make her own informed decision.	7/20/2020 1:51 PM
6	Can we confirm that there is not additional cost? Are FEM programs going to raise costs if/when they become the standard?	7/20/2020 8:12 AM
7	This needs to be clarified as parents may see a decrease in expense, but still a graduate program will cost more than a bachelor's program.	7/19/2020 11:28 AM
8	Definitely important!	7/18/2020 12:54 PM
9	This is not true in lowering expenses. Prior they had a BS degree and an internship. Now it is a MS with SEL and the costs are as high or higher in many situations. If the thought is they only apply to 1 program totally, that may be lower cost - depends on the program. Most are still applying to multiple programs which actually cost more than applying to DIs after their degree. Can't say this considering it is all over the place for how costs and applications are now. Need to have concrete info from programs and those with DIs to say this. We had an example at NDEP meeting (Birmingham) of one DPD showing how the costs vary so greatly for her students and the increase in costs.	7/18/2020 9:27 AM
10	Again, may not be what works for everyone, especially in current environment. I'm not sure the financial incentive applies across the board. How about places like California?	7/17/2020 5:48 PM
11	What if students have completed a DPD Program and then enrolled in a FEM - Is this decrease in expenses...Not sure this statement fits all.	7/17/2020 1:37 PM
12	You might want to rethink this statement if Sodexo, Morrisons and Aramark are going to have FG programs. There will be one program, but possibility two charges. I don't know. Just a thought.	7/17/2020 12:56 PM
13	If the one step program is as long or longer than the 2 step program, is it really less expensive?	7/17/2020 10:41 AM
14	This is a huge benefit, I feel. New students aren't so much worried about the masters requirement but rather, how will they pay for a masters. Again, many of my students would prefer to begin and end in the SAME program, even if it requires a masters degree. My university is going through this with Speech Language Pathology/Audiology. Before we can start a masters program we must prove that students can get in to masters programs elsewhere. But really, the students would prefer their masters at our university.	7/16/2020 6:29 PM
15	Not sure it will decrease costs.	7/16/2020 3:27 PM
16	Do you have data to support this? For FA and FB this does not seem to apply?	7/16/2020 1:03 PM

Program Director Survey regarding FEM Talking Points for Parents and Students

SurveyMonkey

17	Suggest collecting data and providing a figure as to potential, or expected, cost savings.	7/16/2020 12:46 PM
18	We finally get the match rate above 50% and now you want to change everything. What are internships and programs without a master's supposed to do? You folks need to get in the real world..	7/16/2020 12:16 PM
19	yes a plus from the debt load point of view and an ROI on the investment in education	7/16/2020 10:33 AM
20	I would remove CP from this as it is not graduate level and not the same.	7/16/2020 10:25 AM
21	Not really. You will still need a bachelor's degree to get into a master's program..... I am not sure what the logic is here. And some of the graduate programs can be up to 3 years depending on what your bachelor's was in.	7/16/2020 8:06 AM
22	This bullet point is important! Everyone is looking for a decreased cost!	7/16/2020 8:00 AM
23	While it may sound appealing, the one-step versus two-step is misleading and still only applies to the FG which is not indicated. Ultimately, we know education will cost more to pursue an RDN since a masters degree is required.	7/16/2020 7:38 AM
24	This is potentially true, but if a student needs to already have a bachelor's degree to apply to a FG (similar to a graduate CP) then it isn't necessarily less expensive. But it could be. It could also be more expensive because of the addition of a graduate degree, but that is changing anyway with the master's requirement.	7/16/2020 5:09 AM
25	Great for students!	7/15/2020 9:34 PM
26	This negates the fact that some Did provide a stipend.	7/15/2020 6:08 PM
27	This depends on the length of time it takes to complete both models. Theoretically it could take the same amount of time and therefore the same amount of money	7/15/2020 5:06 PM
28	It would be nice to hear relative statistics here. It is also frustrating to see the detriment we are seeing to our program based on the mandatory MS. Students are seeing a much higher expense in general without sufficient ROI once they get out.	7/15/2020 4:33 PM
29	The programs appear to be similar in length. An undergraduate degree is still required for both options so depending on where you go for your undergraduate degree the costs could be the same. When looking at degree length for the graduate portion for either the DI/MS or the FM - the amount of time needed to complete the degree is often the same. Depending on the program - the FM is in some cases a longer program than the DI/MS which would result in the FM being the higher cost model.	7/15/2020 4:29 PM
30	How are the expenses lower (with the exception of moving)? Based on what? Master degrees add more expense without income. I'm for clinical certifications or master degrees but I prefer the master degree to be beneficial to advancing. RD's may not make enough money to go back and get additional training to help their career. Also, what about the benefit of learning from different groups of people and instructors?	7/15/2020 3:44 PM
31	I believe in many cases this statement is false, since even 12 month MS programs cost more than the average DI. However, the FEM will allow all students to be eligible for financial aid during the entirety of their training as compared with only being eligible during their undergraduate program.	7/15/2020 3:11 PM
32	CBE can be confusing, especially if students are allowed to enter with an unaccredited bachelor's degree.	7/15/2020 3:09 PM
33	If students complete a DPD + FG or a BS in a related field + FG, I don't see the difference.	7/15/2020 3:05 PM
34	This is not necessarily true. DI programs tied to an MS degree and CP programs at the coordinated programs would be similar in cost. The cost also varies greatly depending on the school.	7/15/2020 2:51 PM
35	"the new standards' one-step approach to complete education....." - is there an explanation before this that the traditional model consists of 2 steps - the core knowledge requirements, then the internship program - which is competency based? I think that will help them follow this. Remember, many, many people don't understand this process. Even those in my department (with a DPD and DI) don't understand this. I and the DPD program had to explain that to them again today. I don't think the general public will understand it either if you don't explain. You can then build an argument for why a FEM is beneficial.	7/15/2020 2:46 PM

Program Director Survey regarding FEM Talking Points for Parents and Students

SurveyMonkey

36	Also, not really true and very misleading.	7/15/2020 2:45 PM
37	While this may be true in some cases, have data actually be collected to support this statement?	7/15/2020 2:43 PM
38	I agree.	7/14/2020 2:20 PM
39	Theory sounds great - but there does not exist any data to support this statement; the only savings might be in lack of a second application fee. A fifth year in a non-profit, post-bac dietetic internship is less expensive than 5-6 years of a seamless college/ graduate school education - even in a state university. Without data to support this statement - this again is an example of AND leadership being "out of touch" with its student members. It unfortunately displays the privilege by Academy leadership or more correctly "White privilege" by AND leadership as most of the leadership is white.	7/13/2020 5:20 PM
40	Where is the data to show there will be a decrease in cost. First, they have to pay for a bachelor's degree and possibly additional courses per the FEM admission requirements. FEM students will have to pay graduate tuition and other expenses. Have you determined a mean or range of bachelor degree expenses and added them to the mean cost of the currently accredited FEM programs, then compared it to the mean/range cost of our current two-step program. I'd like to see how the numbers compare before this statement can be validated.	7/13/2020 1:21 PM
41	again not always true, if you complete a 4+1 DPD with internship it will cost less than the CPMS.	7/10/2020 1:40 PM
42	Id like to see the numbers for this, its a general statement and im not sure this is true for all or even most of the programs.	7/10/2020 12:43 PM
43	In general, the overall expense is probably slightly less but will be largely dependent on the school and residential tuition. Students may also be eligible for scholarships and financial aid that is not available to interns	7/10/2020 10:29 AM
44	Masters tuition is not cheap.	7/10/2020 5:57 AM
45	This is FALSE. It's still 2-step in that they need a bachelor's degree. RECOMMEND; Possible reduced expenses due to enrollment in a single, combined program versus enrollment in a separate internship and graduate program.	7/9/2020 6:01 PM
46	Some FEM are more expensive (when factoring in tuition, cost of living, supplies, etc.) than some combinations of undergraduate programs and dietetic internships. If the student is not successful at completing the FEM, they are out the money they paid for that program with nothing to show for it. If, however, a student is not successful in matching to a dietetic internship or finishing a dietetic internship, they still have a bachelor's degree in an area of study that qualifies them for employment, more so than a high school diploma and years of participation in a FEM program they were not able to finish.	7/9/2020 4:51 PM
47	I agree that this is true LIKELY true for change of career students. However, I recently did a review of the requirements and credit loads of the FEM and they are mostly much higher in credit hours, so I'm now questioning this.	7/9/2020 1:20 PM
48	Not true since the FEM requires additional cost associated with the masters degree and does not eliminate all internship expenses.	7/9/2020 10:19 AM
49	Excellent	7/9/2020 10:17 AM
50	Not sure this can be a guaranteed statement across all programs?	7/9/2020 10:00 AM
51	Is it really a one-step process? Students have to complete prerequisites and invest money in an undergraduate program?	7/9/2020 9:44 AM
52	This would vary based on the cost of the DI and graduate credits and cannot be a blanket statement	7/9/2020 8:57 AM
53	Does this route which includes graduate education actually cost less?	7/9/2020 8:18 AM
54	same for CPs. It depends on individual program costs. Private is much more expensive than public. I would assume that a private FE is more expensive than a public DPD and DI. A public CP or FEM would be the lowest. What are you not discussing private vs public education costs.	7/9/2020 7:57 AM

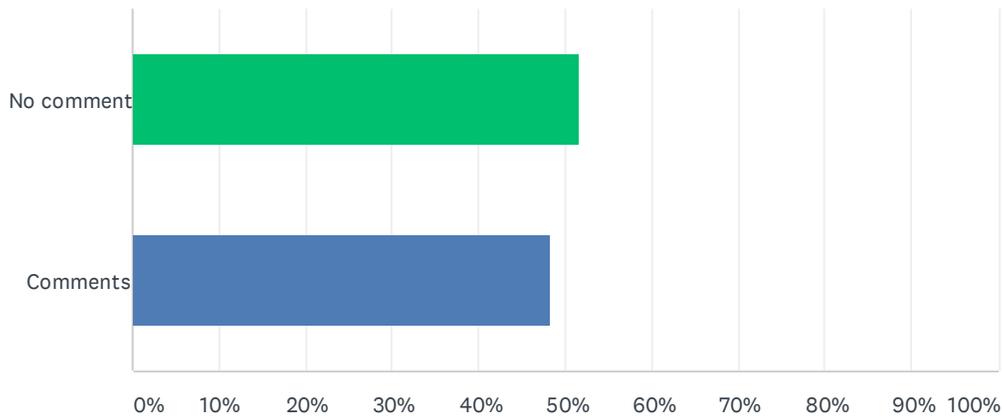
Program Director Survey regarding FEM Talking Points for Parents and Students

SurveyMonkey

55	The only decreased expense is in application fees. Hardly something to "hang one's hat upon".	7/9/2020 7:56 AM
56	Students still need a BS degree and so I don't understand how this is less expensive. If anything, it is more expensive with the requirement for the Masters degree.	7/8/2020 8:07 PM
57	Please do not lie to these people. These talking points only increase your risk for a lawsuit.	7/8/2020 8:00 PM
58	Decrease in the available slots will reduce the number of RD's. DTR's will replace RD's. Dumb move.	7/8/2020 6:56 PM
59	"may" yield a decrease in expenses - this depends on the school. Some programs are VERY expensive and a state school + \$10,000 internship would be cheaper.	7/8/2020 6:09 PM
60	However, the expense is still notable because even in a one-step program the length will have to be comparable to degree + supervised practice.	7/8/2020 6:08 PM
61	There is no evidence for the lower cost. In fact, when I review FEM websites, they take longer and are more expensive than the traditional route. In addition, they are very lock-step and do not take into consideration student prior learning. There is no evidence the FEM offers advantages.	7/8/2020 4:36 PM
62	I question if this is also true. Students in FEM programs will still pay tuition, will they not? If there is data to show that a graduate level FEM program produces a lower overall cost to the student than a graduate program + internship i would support this statement. It seems there are cases (such as the program i run) where the student could complete a 4+1 masters program and be accepted into my stand alone DI where they are paid, and it would be cheaper than a FEM.	7/8/2020 4:15 PM
63	Great!	7/8/2020 4:09 PM
64	This is not what I am seeing when I look at program costs. These programs tend to be more expensive than online master's degrees paired with hospital based internships.	7/8/2020 4:00 PM
65	Again, as a 2+3 CP, this is so frustrating. It makes it sounds as if all other programs are more expensive and require a enrollment in two programs. That is not the case. Such bias.	7/8/2020 3:52 PM
66	I think this may increase expenses as it is prolonging the exposure to education fees until masters prepared is complete	7/8/2020 3:50 PM
67	This seems misleading. It states that the expense is decreased because there is now one program, rather than two programs. However, starting in 2024, students will have to have two degrees before sitting for the RDN exam - a bachelor's degree and a master's degree. Both do not have to be accredited programs, but there are still two different degrees being paid for. Just because the student will only have to have one accredited program in order to sit for the exam, they will still have to invest a great deal of money. The wording is accurate, yet misleading, in my opinion.	7/8/2020 3:46 PM
68	There is no guarantee that FEM programs decrease costs - the students still have to have an undergraduate degree. I think this second bullet is false and would like to see data that supports this is 100% true.	7/8/2020 3:40 PM
69	Are some DIs paid? This will not necessarily result in lower costs. It may also be more difficult for second career applicants that are looking for more online or part time options.	7/8/2020 3:38 PM
70	There will not actually be any cost savings to students - since programs will need to be longer and more resource intensive. These costs will inevitably be passed on to the students. Do you have ACTUAL DATA that shows this is less expensive? Bet you don't.	7/8/2020 3:36 PM
71	This is not necessarily true. Again, this is directly favoring FEM over the DPD/DI programs when FEM data is not even out. I can't believe ACEND is openly playing favorites.	7/8/2020 3:33 PM
72	There is not a decrease in expenses since students have to get a master's degree. It's an increase!	7/8/2020 3:24 PM

Q11 Similar to a graduate nutrition and dietetics coordinated program (CP), students will benefit from programs following the Future Education Model Standards. The new standards' one-step approach to complete educational requirements versus the most common dietetics two-step process will yield additional benefits to students including: o Potential ability to complete program in less time because classroom learning and supervised experiential learning are integrated into a single program.

Answered: 118 Skipped: 0



ANSWER CHOICES	RESPONSES
No comment	51.69% 61
Comments	48.31% 57
TOTAL	118

#	COMMENTS	DATE
1	Add "classroom didactic learning"	7/20/2020 4:41 PM
2	Again, need a BS degree. So, even with a 4+1 FEM, that's the same amount of time as a DPD+9 mo DI. Deceptive.	7/20/2020 4:04 PM
3	Depends on the program(s). If all FEMs really do take less time without requiring prerequisites, how can they possibly do a better job preparing students? If FEMs require prerequisites, then the time needed to complete those prerequisites must be considered before a claim of less time can be made. And a bachelor's degree will be a "prerequisite" for a graduate FEM. The need for a master's program automatically requires more time than bachelor's degrees as entry-level. After all, a student first needs to complete a bachelor's degree. You can't ignore that time in order to claim that FEMs are quicker because they are one program instead of two. They represent at least two programs--the bachelor's degree needed first, and then the graduate degree. Yes, they do not require the time of a separate dietetic internship/supervised practice, but the supervised practice integrated into a FEM will still require time.	7/20/2020 3:57 PM
4	just simplify as above	7/20/2020 2:07 PM
5	I'm not familiar with the schedule of FEM programs. Similar to above, the obvious bias ACEND apparently has would be moderated by providing a table of program types with a range of duration for each	7/20/2020 1:51 PM
6	Will it really be less time, or just more hours compressed into a set length of time?	7/18/2020 12:54 PM
7	This is not true in that is it less time. You still have to have 1000 hours of supervised practice, which is what is required now with COVID. Although it will change back to 1200 hours in 2022, it's only 5-6 more weeks of the internships so it's a wash. The FEM does take more time than most MS programs + DI because of the requirements.	7/18/2020 9:27 AM
8	If you're saying students enrolled in the same program can complete program on their own schedule, it may be an incentive for students but a potential barrier for preceptors.	7/17/2020 5:48 PM
9	May not hold true for those who completed a DPD Program as well.	7/17/2020 1:37 PM
10	For prospective students and parents, a short definition supervised experiential learning could be beneficial to their understanding.	7/17/2020 10:41 AM
11	and emphasize they are employed sooner	7/17/2020 5:17 AM
12	This would be a huge benefit. As previously stated, my students aren't fearful of the masters requirement, they just want to do it as efficiently as possible.	7/16/2020 6:29 PM
13	This document seems to only relate to FG, not FA, and FB. Less time in comparison to what?	7/16/2020 1:03 PM
14	Suggest collecting data and giving statistics regarding average length of time to complete a non-FEM program vs. a FEM program.	7/16/2020 12:46 PM
15	This is a benefit to our profession and society as a whole	7/16/2020 12:31 PM
16	Do you have any idea how many universities are laying off faculty due to budget deficits? This is an automatic demise to both DI, CP and DPD Programs. Universities are not hiring faculty. Where do you expect all these PhD RDs to appear from. Did I mention there are hiring freezes at many universities? Also no one is supporting additional masters programs because there may not be enrollment to warrant the program. If a program wants to match up to a master's program it has to be one on campus already. This limits the students' choices for an area of concentration.	7/16/2020 12:16 PM
17	yes....students like a direct route into practice	7/16/2020 10:33 AM
18	What is written in purple is clearer than what is written near #11	7/16/2020 10:25 AM
19	Again, it all depends on what your previous experience was in- I see this as the exception, not the rule. Most people who apply to us do not have science backgrounds, so they have more classes to take.	7/16/2020 8:06 AM
20	Also important for students - many are interested in getting out as quickly as possible!	7/16/2020 8:00 AM
21	Again, this statement seems to apply to an FG only since it's prefaced with the one-step/two-step statement. It is inaccurate to say the program will be less time since students will commit	7/16/2020 7:38 AM

an average of 6 years of higher education versus the current 4 year degree and average 9 month supervised practice.

22	Students will still need a master's degree to be eligible to take the registration exam.	7/15/2020 9:34 PM
23	This may be possible for some students but not all. Does the design for the FM incorporate a plan for early graduation when all competencies have been completed?	7/15/2020 4:29 PM
24	What will be dropped in content? Some universities that train graduate level degrees may not condense the program as the graduate program is often an afterthought in standards as well as by interns. Interns often just want the internship and will do the masters degree because it's there. Not everyone is ready for a graduate level education. Please respect this for the program along with for the student.	7/15/2020 3:44 PM
25	I think this will help students because many decide to not pursue the degree/career as transfer students because they have to essentially complete an entire BS degree.	7/15/2020 3:16 PM
26	Again, I believe this is unlikely since the typical time is now is a 4 yr DPD program + a 1 yr DI program. The shortest model I have seen for the FG programs so far are 4 yr undergraduate with a 1 year FG program where the majority of the content seems to mimic the current track with the exception of the new standards, like pharmacology and research, although this content is integrated more.	7/15/2020 3:11 PM
27	If students complete a DPD + FG or a BS in a related field + FG, I don't see the difference.	7/15/2020 3:05 PM
28	DI programs integrated into an MS degree also do this.	7/15/2020 2:51 PM
29	Again, POTENTIAL is the key word - I would not stand behind this potential guarantee.	7/15/2020 2:45 PM
30	This will depend on the student and the time it will take for any remediation that has to take place.	7/13/2020 6:14 PM
31	Theory sounds great (less clock hours) - but there does not exist any data to support this statement. Also many state licensure laws require 900 hours of "tracked" supervised practice that are documented to obtain the license; how will this be achieved by FEM? Does AND ACEND plan to change state licensure laws? Further with clinical training - nothing substitutes for experience except experience. Graduating a MS RD with less experience means the employer will need to provide more "on the job" training to get the FEM graduate functioning at the same level as the existing older BS RDN practicing staff.	7/13/2020 5:20 PM
32	This statement seems to omit the necessity for a bachelor's degree. I'm beginning to feel like a broken record.	7/13/2020 1:21 PM
33	Undermines dietetic internships and DPD programs.	7/13/2020 11:35 AM
34	Less time means less education to support career mobility.	7/10/2020 4:08 PM
35	same amount of time if using a 4+1 DPD.	7/10/2020 1:40 PM
36	If the student is not competent it will take longer	7/10/2020 12:43 PM
37	for the most part I agree with this statement However, I run into a lot of students that can only attend school part-time. CPs and FEMs are mostly full time due to the nature of combining course work with SP. This does not leave much room for students to work outside of the program which impacts recruiting into the field.	7/10/2020 10:29 AM
38	There are still state requirements to meet regarding minimum SEL hours And practically speaking it is difficult in the university format to "finish early". Usually the time is the same with more projects added	7/10/2020 5:57 AM
39	"Potential" is a key word here. Not all FEM programs will result in (significantly) less time than the current two-step process, which ACEND clearly recognizes by including the word "potential".	7/9/2020 4:51 PM
40	True to a point, but what is the data on pass rate difference from 1000 minimum hours to 1200 minimum hours AND since state licensure typically requires 1000 hours it's not necessarily that many hours different.	7/9/2020 1:20 PM
41	Not true; misleading. Just about everything in life as a 'potential'. To make this statement leads students to think they will get the credential sooner, which is not true.	7/9/2020 10:19 AM

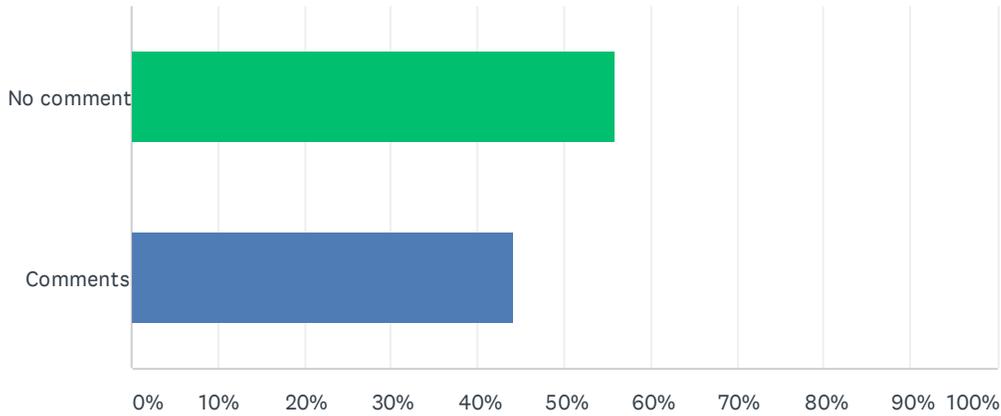
Program Director Survey regarding FEM Talking Points for Parents and Students

SurveyMonkey

42	Strong benefit	7/9/2020 10:17 AM
43	this can be true but not always and may not have programs available	7/9/2020 7:57 AM
44	Again, NO DATA to support this.	7/9/2020 7:56 AM
45	Not sure this will really translate into less time and less expense. Time will tell. I am supportive of the requirement for a graduate degree for RDNs but don't want it to be without more rigorous training, especially in research methods and evidence-based practice.	7/8/2020 10:52 PM
46	I'm not seeing this. Most FEM GPs are 18 to 24 months in length and the MS/DI programs are the same. If we remove the Masters requirement, the students get a credential in less time than the FEM GP.	7/8/2020 8:07 PM
47	See above.	7/8/2020 8:00 PM
48	How?	7/8/2020 6:56 PM
49	I don't feel most graduates are prepared as is- knocking off time isn't going to help that.	7/8/2020 6:36 PM
50	Again, no evidence to support this. DIs have always combine classroom and experiential learning. This statement is misleading.	7/8/2020 4:36 PM
51	Great!	7/8/2020 4:09 PM
52	? The FEM programs being piloted tend to be longer than some current MS + DI models??	7/8/2020 4:00 PM
53	I think with the current situation of COVID-19 and the quick move to virtual learning - there have been varied ideas on what experiential learn is exactly and unless this is better defined, it will be a barrier if what a programs thinks is simulation/experiential learn but is not actually.	7/8/2020 3:50 PM
54	How much less time? General statements that do not reflect how most programs are set up to satisfy the standards cause confusion. Flexibility among programs is great, but are you "selling" a model that is not readily available to the students you are marketing to. The marketing really needs to be transparent.	7/8/2020 3:46 PM
55	Again - I do no think this bullet is true. The FEM program is still a two-step process in most cases - students still need to complete a bachelors degree (step one) and then enroll in the FEM (step 2)	7/8/2020 3:40 PM
56	SHAMELESS PROPAGANDA - not evidence based AT ALL	7/8/2020 3:36 PM
57	Many students with a previous bachelor's degree can finish the DPD in in one year and the DI in another. This statement is over-selling the FEM.	7/8/2020 3:33 PM

Q12 Results of recent qualitative data collected by ACEND from current FEM programs reveal additional tangible benefits to Future Education Model programs, such as:
 o Future Education Model programs are flexible because they allow students to learn at their own pace. When the student demonstrates competence, they have the ability to move on to other more advanced competencies.

Answered: 118 Skipped: 0



ANSWER CHOICES	RESPONSES
No comment	55.93% 66
Comments	44.07% 52
TOTAL	118

#	COMMENTS	DATE
1	This idea was tried when I was young. Elementary education was going to be accomplished at the individual student's pace thanks to modules each student could complete on their own. The experiment did not last long. This flexibility does sound good, but there is a great deal of supervision and quite a few supervisors who are needed in order to adjust, then adjust again, then adjust again when each student completes a different competency at a different time. Our current ISPP operates like this, and it is a nice thing. But we could not manage this with more than a few interns at a time. We can do it in large part because I volunteer my time as ISPP director on top of the other responsibilities for which I do get paid. (Vicky Getty, Indiana University-Bloomington)	7/20/2020 3:57 PM
2	I would eliminate this benefit. Most programs i am aware of have cohorts of students and don't have any allowance for student working at their own pace. If they don't achieve a certain course completion, there is a significant delay in completion of the program and eligibility to take the exam.	7/20/2020 2:07 PM
3	I'm not sure, again, how this is different than any other program. Even if students complete all of their required competencies, program lengths are what they are, and students cannot graduate early, which is how I would interpret this statement as a student. Furthermore, even traditional programs are flexible in tailoring competency experiences to the interns individual progression and competence	7/20/2020 1:51 PM
4	What are the potential downfalls of the FEM program? Are students guaranteed a higher salary if they receive a Master's degree? In order to make an informed decision, parents and students must also be aware of both the benefit and cost of attending a FEM program.	7/20/2020 8:12 AM
5	If this option was available to traditional programs without us requesting a program change I would like to do something like this.	7/19/2020 11:28 AM
6	With the 1000 hours requirements, there is still a designated amount of time required to finish the program and it's doubtful that regular students will move on faster. Those who are behind, may be held back to complete and show competency but because someone is faster, they still have to put in the time the same.	7/18/2020 9:27 AM
7	See above.	7/17/2020 5:48 PM
8	This is tricky. While some programs might choose to be more student centered and more pure CBE in their approach, most programs I've been hearing from are using a hybrid model (still very much rooted in a time based approach). This taking point could be out of alignment with the program. One option would be to develop a word document with optional talking points (which could also be an open source project that directors can contribute to.....cloud document through basecamp?). Also, the idea a progression of competencies (simple to more advanced) isn't explicitly stated in the curriculum requirements. It may be the case, due to scheduling, that a student is place in a more advanced environment clinically (does level) without having all of the knowledge first. This doesn't diminish the experience, but my understanding is that CBE should more flexible (mimic the real world).	7/17/2020 3:30 PM
9	Is this accurate. So does this mean students can take as long as they want so beyond the traditional 2 years for master's. Can students pick and choose when they complete rotations/competencies. Is it truly at their own pace or self-paced.	7/17/2020 1:37 PM
10	This sentence sounds like a great idea: "allow student to learn at their own pace" but in reality, is there not a time limit if a student is struggling with a competency or does not have access to due to unforeseen circumstances to learning and demonstrating a particular skill? All semesters have an end with a due date for grades. I think that the comment "learn at their own pace" is misleading.	7/17/2020 10:41 AM
11	In practice this is great. Hard to manage a cohort or class when students are all over the place.	7/16/2020 8:17 PM
12	I do think we must be very careful about the wording of "learn at their own pace". I do think this wording tends to imply that students may take ALL the time in the world (i.e. extended time) to do well, and I don't think this is the true case. The reality is that internships and grad programs WILL have set schedules and deadlines. Perhaps the wording should turn it around and say something that "students who are advanced in an area can progress more quickly or be offered advanced activities", implying that if you have experience you can go on to the next thing	7/16/2020 6:29 PM

more quickly. For example, if you have 2 years of WIC experience you can now go on to something else. Please carefully consider this wording.

13	How many programs is this based on? Do some stay longer? Wasn't this true of traditional programs as well?	7/16/2020 1:03 PM
14	This will produce the best work ready graduate	7/16/2020 12:31 PM
15	We have to get the students out as quickly as possible because graduation rates mean money. You really don't understand funding in higher education do you? Why have the RDs not seen this supposed qualitative data?	7/16/2020 12:16 PM
16	Not clear. So students in a program will finish at different times?	7/16/2020 8:10 AM
17	I have no issues with this.	7/16/2020 8:06 AM
18	This seems ideal but would really depend on the program design.	7/16/2020 7:38 AM
19	Where is this evidence? I don't recall it being shared with educators. Misleading, because the same can be said for many DIs.	7/15/2020 6:08 PM
20	I think it would be helpful to include the amount of time difference. Is it 6 months? 2 years? This feels nebulous.	7/15/2020 4:33 PM
21	I have concerns about how preceptors will react to a moving target. Students will likely want to exit a supervised practice rotation once competency is met, which may offend preceptors if it's before they were scheduled. Also, Universities will take on the challenge of figuring out how to deal with course registration if they need time past the typical course end date to meet a competency.	7/15/2020 4:13 PM
22	Check with dietetic internships on this. Many dietetic internships provide options for interns to adjust the schedule (or within rotation activities) if competencies are met.	7/15/2020 3:44 PM
23	While this is the ideal of CBE, this is not the reality - at least in our program. Our university has rigid rules relating to credit hours and contact hours. In addition, when I have 65 performance indicators in a foodservice management class and 85 performance indicators in an MNT course, we move at rocket speed in a 15-week semester. Yes, students can spend more time on homework and reviewing topics outside of class (but they won't because they are taking multiple graduate classes), but everyone is moving on to the next topic the next week or else we will not get through the ~250 performance indicators in a reasonable time frame. With MNT, unlike foodservice management, those performance indicators are repeated with every disease state and case study. However, I cannot slow down and hone in on particular competencies and performance indicators while also teaching the specific MNT for each disease state required (not by the competencies, but by Required Element 4.2).	7/15/2020 3:19 PM
24	This seems a little too early to claim. As a Director who is transitioning a graduate level CP to a FG, it is very challenging to logistically schedule rotations to match an individual's learning speed and I believe it will take some time to truly realize this benefit across programs.	7/15/2020 3:11 PM
25	Would like to know more about how competence is measured objectively.	7/15/2020 3:09 PM
26	If interns and CP students aren't successful, we extend rotations, assign additional work, provide tutoring, etc. to help them master a skill. I don't see the difference between that and a FG program.	7/15/2020 3:05 PM
27	I feel I need more clarification on how the time frame works in supervised practice.	7/15/2020 2:51 PM
28	Nope - not appropriate for general audience. "Results of recent qualitative data..." - would someone without a college degree and research background really understand this. Remember your audience. "Allow students to learn at their own pace" can be misleading. It sounds like there is an indefinite period of time to complete the program, which I'm sure there is not.	7/15/2020 2:46 PM
29	Yes, I value this a great deal but we still are tasked with figuring out what competence means. I guarantee I have a program length with min and max times. It isn't as easy as this makes it sound.	7/15/2020 2:45 PM
30	This is beliefs and opinions; it is not factual data that is compared to a baseline. Traditional programs also allow students to learn at their own pace and this has been documented. However, the additional cost of the FEM MS RD programs can clearly be shown to be discriminatory to persons of low socioeconomic status (immigrants, 1st generation students,	7/13/2020 5:20 PM

students of single parents, etc.) and will affect a larger proportion of the underrepresented communities of color upon full implementation.

31	I'm an advocate of rich qualitative research depending upon the research topic; however, in this instance the qualitative data can help tell the story but we need quantitative data to determine the outcome of the FEM programs.	7/13/2020 1:21 PM
32	CP and DI programs also offer work experience in exchange for credit hours.	7/10/2020 12:43 PM
33	sort of agree but students still need to keep up with the curriculum and could become a burden on preceptors if they take 6 weeks instead of 4 to demonstrate a skill	7/10/2020 10:29 AM
34	See previous comment	7/10/2020 5:57 AM
35	THIS IS PRELIMINARY DATA! How many programs have been studied so far? Is this actually true? From what I've seen, programs seem to be fairly rigid in their schedules. If someone is competent in an area, schedule-wise, how can they suddenly be moved to their next rotation? This doesn't happen in reality. I can understand offering waiver of some areas that an individual is competent in but not during the program. 'Learn at their own pace?' This doesn't happen in grad school. If you don't meet deadlines, you fail. RECOMMEND: "Results of PRELIMINARY qualitative data..."	7/9/2020 6:01 PM
36	We do not yet have evidence of this "flexibility" or the degree to which it is beneficial, if at all.	7/9/2020 4:51 PM
37	This is a theoretical situation, in reality, working with sites and preceptors, there might be an increase or slowing down of the pace of learning for any individual student, but when you have to plan for students to get experiences, you can just increase or decrease every student's experience that quickly or be that flexible.	7/9/2020 1:20 PM
38	Share the data	7/9/2020 10:17 AM
39	this is true of all supervised practice prograams.	7/9/2020 7:57 AM
40	Traditional programs also allow students to learn at their own pace. Curricula are ladderred to provide concepts that are more advanced to be gained after more foundational content is mastered.	7/9/2020 7:56 AM
41	This idea is good in theory but for those of us planning the curriculum and rotations, we cannot change on a dime for a student's new needs for more advanced level training.	7/8/2020 10:52 PM
42	This one baffles me. Since the FEMs are combined with a graduate program, students are still held to the academic term and they can't progress to the next set of classes until the academic semester is over. If students are truly able to "move on" once they demonstrated competence, then they should not be confined to the academic term. In other words, one student could meet all of the competencies to get a graduate degree and the supervised practice hours in 1 year if they hustle while the other student may need 2 years.	7/8/2020 8:07 PM
43	What happened to them needing to be out in 1.5% of the time planned for completion? Transparency here is lacking!	7/8/2020 8:00 PM
44	HOw is the program supposed to deal with all of these students moving at "their own pace"? This was designed by monkeys.	7/8/2020 6:56 PM
45	How is this? Would this not elongate the learning/in school time?	7/8/2020 6:08 PM
46	They are no more flexible the DI, ISPP, and CP--in fact, ISPP (note the INDIVIDUALIZED) are more flexible. The FEM is lock-step and it has created 'made up' degrees (e.g., MSCN) and diminished the importance of the research process associated with a DI+MS. And...where is this evidence? And...why aren't all routes to the RDN highlighted? Stop trying to convince us the FEM is better than the DI, CP, ISPP--it simply is not better. It is just another route.	7/8/2020 4:36 PM
47	So how long is a program? How much support will students get to finish?	7/8/2020 4:09 PM
48	This is not true in many programs as allowing every student to move on at her/his own pace is nearly impossible to adhere to in practice where the schedules of many need to be considered.	7/8/2020 4:00 PM
49	I am not sure I understand this - students will still be pressure to complete the program in up to 150% of the program time, so what does it mean at their own pace, if the student is not able to demonstrate the competence they can move on to advanced, but if they can not get it - the program gets reprimanded for not completing the student in a timely manner.	7/8/2020 3:50 PM

Program Director Survey regarding FEM Talking Points for Parents and Students

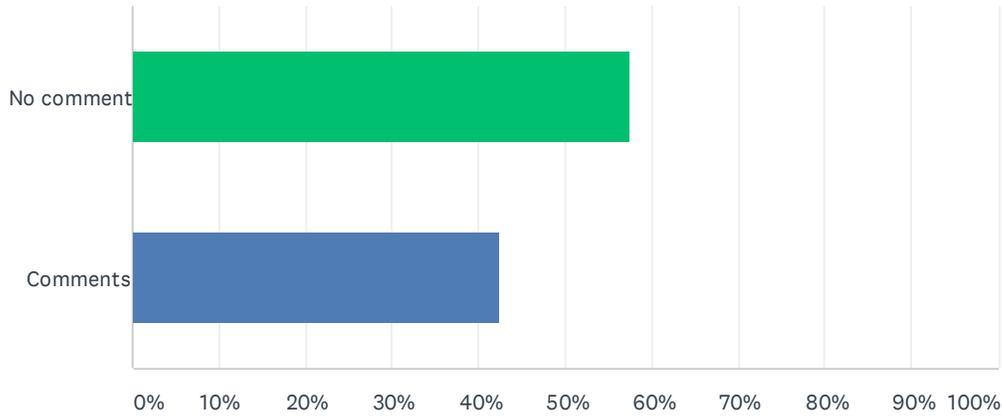
SurveyMonkey

50	None of this is consistent with what you are saying in the previous items. This is just garbage wording.	7/8/2020 3:36 PM
51	Many DPD and DI programs are flexible and allow students to learn at their own pace too. This statement is so one sided and clearly not a feature unique to the FEM. Again, over promising the FEM.	7/8/2020 3:33 PM
52	This is not correct. Students in university settings are still tied to a curriculum, and when in the didactic portion they are still learning together and at the same time. Where it changes is in the SEL portion, that is where they can advance more rapidly, or slowly.	7/8/2020 3:24 PM

Q13 Results of recent qualitative data collected by ACEND from current FEM programs reveal additional tangible benefits to Future Education Model programs, such as:

- o Better preparation of students for the future of dietetics practice by including enhanced competencies (competencies that are set for a higher level of practice compared to those included in current dietetics education programs).

Answered: 118 Skipped: 0



ANSWER CHOICES	RESPONSES
No comment	57.63% 68
Comments	42.37% 50
TOTAL	118

#	COMMENTS	DATE
1	Is this a bit premature to include when there have been such a small number of FEM grads?	7/20/2020 2:07 PM
2	Are employers allowing RDs to have additional professional freedoms to work at these higher levels? I believe that not all hospitals/workplaces are going to be ready for their RDs to start having additional privileges. I agree that it would be great to allow RDs to work at their full potential, but only if the job market is in concurrence.	7/20/2020 8:12 AM
3	Based on who's viewpoint? This needs to be clarified. Also, many parents may not be in tuned to research, so clarifying what is meant by qualitative, the number of people who responded, how long they had their program for, etc would be helpful.	7/19/2020 11:28 AM
4	This is good.	7/18/2020 12:54 PM
5	What results show this. didn't think there was enough data collected yet to show this. How does the CBE offer new job opportunities and improve the student's skill set. Studying at their own pace and providing a functional resume to the employers does not provide good information on how this is superior to the current model.	7/18/2020 9:27 AM
6	I need more information on this. It seems graduates or employers would be responsible for developing enhanced competencies.	7/17/2020 5:48 PM
7	I'm not sure if this is actually necessary. We don't really want to downplay the work of current programs do we? i.e. Are they not producing good-quality graduates? What is wrong with those programs? A higher level of practice should be implied with a masters program. I don't think we need any comparison to current programs, even if it is for the "future".	7/16/2020 6:29 PM
8	Again only talking FG. Is this because of the Master's degree? How were the enhanced competencies determined?	7/16/2020 1:03 PM
9	How is "better preparation" measured? Has data been collected to show the validity of this statement?	7/16/2020 12:46 PM
10	So the student graduates with a master's and then gets an entry level position because the employer sees no cost benefit to pay more for a master's degree RD.	7/16/2020 12:16 PM
11	Who is saying this? The directors feel they are able to train their students at a higher level? The students felt well-trained? They are passing the RD exam at a higher level? Employers are noticing a difference? This question is very ambiguous. Also, good directors can do this with interns- our program director does this with interns who come in with more experience already by scheduling them with certain preceptors/locations.	7/16/2020 8:06 AM
12	Where is this evidence? I don't recall it being shared with educators. Misleading, because the same can be said for many DIs.	7/15/2020 6:08 PM
13	If these are determined benefits then why are they not being incorporated into the current model if that will also benefit students.	7/15/2020 5:06 PM
14	I would like to know what these higher-level competencies are. I would also like to see the questions and how the data was collected. As mentioned in the opening statements of this survey, both FEM and non-FEM models utilize CBE.	7/15/2020 4:33 PM
15	Where is the data that has determined this statement to be true? Are we saying that current students in the DPD/DI and MS are then not competent to practice or that future graduates of FM programs will be more competent? How many graduates of FM programs have taken the credentialing exam? I do not believe we are ready to say that they will be better prepared.	7/15/2020 4:29 PM
16	Please share these results or provide the link. Are the methods and statistical analysis included? Why are current competencies lower? This goes back to the standards being watered down over the years to accommodate needs that are really developed once the person is an RD. Once again, share the data.	7/15/2020 3:44 PM
17	I am not sure that we are better preparing them for practice if we have instructors who are teaching enhanced competencies but have never done them in their career in real life and preceptors do not practice in this way.	7/15/2020 3:19 PM
18	Agree that this is likely, but can we really say that yet with such a small sample size?	7/15/2020 3:11 PM
19	Currently I direct a DI. Once interns meet ACEND competencies, interns are able to select a 4-	7/15/2020 3:05 PM

5 week elective rotation in an area of interest or specialty rotation. This seems comparable to what one can accomplish in an FG. There is only so much a student can do at a higher level of practice without on the job experience.

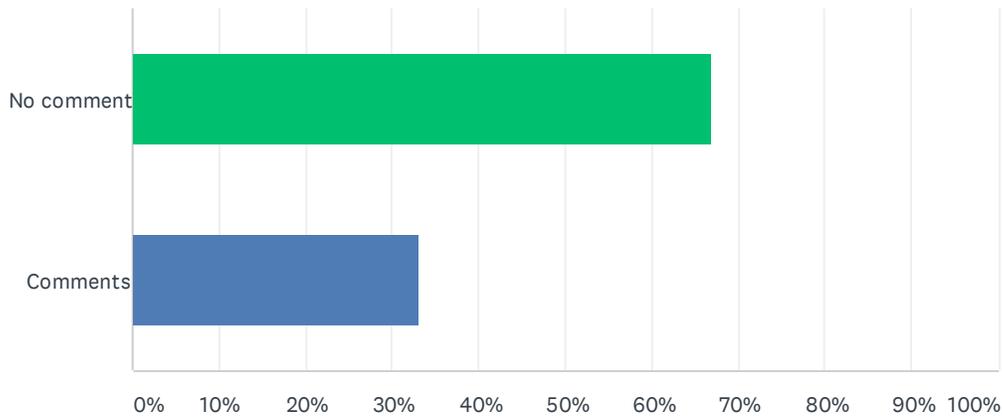
20	Why would competencies in existing supervised practice program not be set at the same level? Are these programs all going to guarantee not only successfully passing the RD exam but also achieving an advanced practice credential?	7/15/2020 3:04 PM
21	Why are we "better preparing" students in one type of program than another if they are all going to sit for the same exam and earn the same credential?	7/15/2020 2:51 PM
22	See my previous comment for first bullet.	7/15/2020 2:46 PM
23	I STRONGLY DISAGREE WITH THIS! Each student and each program is different. Lack of preceptors, global pandemics, and other barriers determine preparation. "Higher level of practice" is offensive to me as a current educator.	7/15/2020 2:45 PM
24	Were these data compared to those from traditional DI Programs to say students were better prepared?	7/15/2020 2:43 PM
25	There is no data published to support this - so this is conjecture stated "as facts". Employers at many major institutions pay the same starting clinical salary for new grads independent of whether they are BS RDN or MS RDN reflecting that they/ the employers do not see better preparation and are not willing to pay higher salaries - nor bring them into higher level entry jobs for FEM graduates. Also what is meant by "a higher level of practice" --- what is the definition of this statement?	7/13/2020 5:20 PM
26	How can there be evidence of better preparation for programs that are in a pilot phase with limited numbers of graduates?	7/13/2020 11:35 AM
27	I question whether competencies are at a higher level. Most programs using the FEM are simply utilizing their current undergraduate courses with minor additions.	7/10/2020 4:08 PM
28	Again there is wide variation and focus in ACEND programs, cant compare all programs.	7/10/2020 12:43 PM
29	agree with the need for higher level competencies and need for programs to be more consistent in what they teach again, I have seen a great degree of variability in how well DPD program prepare their students	7/10/2020 10:29 AM
30	NOT TRUE. There is a dumbing down of the master's degree when programs incorporate them into undergraduate programs (5 year FMP). This leads to NO additional time and NO higher level of practice. Alternatively, dumbing down of the master's degree when it's only one year for the master's and one year of supervised practice.	7/9/2020 6:01 PM
31	The competencies established by ACEND for current dietetics education programs are based on current dietetics practice. How is ACEND able to predict the future of dietetics practice and thus, set competencies that will elevate practice, without evidence?	7/9/2020 4:51 PM
32	What data is there to support this? I don't believe we have any data yet. How are we accrediting two programs with different levels of preparation for the same credential? That does not seem right.	7/9/2020 1:20 PM
33	Suggest change the word better to... Enhanced (or greater) preparation of students.....	7/9/2020 10:24 AM
34	This is based on a very SMALL data group, which is not necessarily representative of future programs. How exactly is preparation measured-is this based on credentialing scores-which are not necessarily a reflection of practice ability, employer surveys-which would have to be a very small study group, instructor perception-not an objective assessment group, other? This is very misleading without additional information to put it in some sort of perspective.	7/9/2020 10:19 AM
35	Great...share the data	7/9/2020 10:17 AM
36	there are so few programs in existence- there cannot be enough data to make this statement	7/9/2020 7:57 AM
37	Come on. THERE ARE NO DATA!	7/9/2020 7:56 AM
38	This is essential for the success of the FEM.	7/8/2020 10:52 PM
39	Are these results available for the members to see? What is the total number of students that these results are based on? My understanding is there are few graduates of these programs at this time. I don't see how we have enough graduates to make a definitely statement like this.	7/8/2020 8:07 PM

40	Why not enhance the competencies that you have now? Once again, what is the current participation in these type programs?	7/8/2020 8:00 PM
41	no evidence for this	7/8/2020 6:56 PM
42	The 2022 ACEND standards should include enhanced competencies. If not, then ACEND is already planning to cut out the DPD/DI model regardless of the FEM outcomes.	7/8/2020 6:09 PM
43	Where is the evidence? Where is the evidence that it is better than DI, CP, or ISPP? This statement is unfounded.	7/8/2020 4:36 PM
44	I have not seen the data published anywhere - where is the data that FEM graduates are functioning at a higher level than those with a DI + MS?	7/8/2020 4:00 PM
45	Where is the quantitative results supporting the statement "better preparation...?"	7/8/2020 3:52 PM
46	We have a pass rate for the exam going down already, I am not sure this will help. Something is clearing changing if pass rates nationwide are going down already and if the exam for dietitians is not mirrored to the competencies - this is what you get. The psychometrics of the test need to be explained to ACEND and to NDEP.	7/8/2020 3:50 PM
47	Qualitative data is used to look for themes - this is not using the data correctly. How are you saying that qualitative data shows the students were better prepared?? Did you compare FEM grads to standard grads? Also "Better preparation of students for the future of dietetics practice" I find this statement to show extreme bias towards the FEM programs. I would like to see what data you are using to state this. . . are you comparing FEM outcomes to standard DI outcomes (again which you can't do with qualitative data)? because to state this, I would think this is the comparison that you need to make.	7/8/2020 3:40 PM
48	That is a compete lie! We are already making them all get Masters' degrees... MY program is set at graduate level, and we do more and better things than ANY of these FEM programs -- this is insulting.	7/8/2020 3:36 PM
49	Better preparation of students? Where is the data.	7/8/2020 3:33 PM
50	They may want to know what is a higher level of practice?	7/8/2020 3:24 PM

Q14 Results of recent qualitative data collected by ACEND from current FEM programs reveal additional tangible benefits to Future Education Model programs, such as:

- o CBE training is engaging because the education includes both classroom learning and supervised experiential learning at the same time, making the content more relevant and helping students more quickly make the connection between theory and practice;
- o the integration of practical skills with didactic knowledge allows for greater retention of those skills.

Answered: 118 Skipped: 0



ANSWER CHOICES	RESPONSES
No comment	66.95% 79
Comments	33.05% 39
TOTAL	118

#	COMMENTS	DATE
1	"Classroom didactic learning"	7/20/2020 4:41 PM
2	Okay, but this happens in non-FEM programs now in two ways: 1) Obviously CPs do this already. 2) Even DPDs include a lot of hands-on experiences. (At least good ones do!)	7/20/2020 3:57 PM
3	Alternatively, providing hands on application of information in a piece-meal fashion can feel disjointed. While the student may have hands-on application, assuming supervised experiential learning is in direct patient care, she may struggle with clinical judgement due to this lack of continuity.	7/20/2020 1:51 PM
4	They should note that some (all?) stand-alone dietetic internships also provide didactic learning to enhance skills.	7/20/2020 8:12 AM
5	So does traditional programs.	7/19/2020 11:28 AM
6	Certainly good to emphasize this.	7/18/2020 12:54 PM
7	See feedback about CP above.	7/17/2020 5:48 PM
8	Because you are trying to make a new process easier to absorb, why not drop the acronyms and write out the words.	7/17/2020 12:56 PM
9	This is good in that it explains the concept. Parents and students will appreciate knowing this.	7/16/2020 6:29 PM
10	How is this different for the DT programs and CP programs?	7/16/2020 1:03 PM
11	This is what CP programs have done all along. Why throw out the baby with the bath water?	7/16/2020 12:16 PM
12	define didactic	7/16/2020 12:03 PM
13	one consideration is the emotional maturity of students - spending more time on blending with high performance teams, emotional intelligence,	7/16/2020 10:33 AM
14	This statement makes assumptions that practical skills are not being currently taught with the current accreditation standards when many programs are already offering extensive hands-on and real-world experiential practice.	7/16/2020 7:38 AM
15	Where is this evidence? I don't recall it being shared with educators.	7/15/2020 6:08 PM
16	I agree this is a major strength of CBE and will hopefully keep students interested and engaged throughout a long program/process to becoming an RD	7/15/2020 4:13 PM
17	This is currently being done. Those in the DPD start with knowledge and then advance to labs and simulation. Dietetic internships have didactic reviews and then go into practice. Has there been research done with actual programs?	7/15/2020 3:44 PM
18	This sounds similar to a combined master's degree and internship program.	7/15/2020 3:09 PM
19	Did you previously define supervised practice? Would someone without college education understand "experiential?"	7/15/2020 2:46 PM
20	I still can't understand why this is new for programs?	7/15/2020 2:45 PM
21	CBE training is occurring in all existing supervised practice programs who adhere to CRDN requirements for accreditation - so this statement is incorrect and not based on evidenced-based data.	7/13/2020 5:20 PM
22	Where is the quantitative data to also indicated this outcome? Do we know the pass rate for these FEM students who have graduated. Do we know their skill retention after they've been practicing. Will that data be compared to interns who have passed the exam and been practicing. These tangible benefits need to be validated.	7/13/2020 1:21 PM
23	The FEM is a coordinated program. This statement undermines dietetic internships and dpd programs.	7/13/2020 11:35 AM
24	Integration of practical skills with didactic knowledge in a shorter time period may emphasize practical skills at the expense of foundation knowledge. There is no evidence to support the above statement for the FEM.	7/10/2020 4:08 PM
25	DPD programs often have experiential learning, it is not limited to CP programs.	7/10/2020 1:40 PM

Program Director Survey regarding FEM Talking Points for Parents and Students

SurveyMonkey

26	This is a common practice in didactic programming too	7/10/2020 12:43 PM
27	CP programs can say the same or DPD programs that use active learning strategies	7/10/2020 10:29 AM
28	There is a downside to this, too. Classroom education may happen after a student has had a clinical rotation, leaving the preceptors to do more remedial education	7/10/2020 5:57 AM
29	Theoretically this is true, but when I have reviewed currently approved FEM programs, several have courses first, up to 15 credits with no hour impeded and that means the full integration is not evident in every single course. This is almost no different from our current MS/DI combined program format.	7/9/2020 1:20 PM
30	Is this a validated statement, as compared to those doing an internship and attending didactic work associated with their program. Again, misleading.	7/9/2020 10:19 AM
31	Excellent...share the data	7/9/2020 10:17 AM
32	same as CP	7/9/2020 7:57 AM
33	Traditional programs are also engaging. Many have experiential components interweaved in the curricula. Where are the DATA regarding "greater retention of skills"?	7/9/2020 7:56 AM
34	What are the numbers of the participants in this type program? Transparency would go a long way in helping someone to buy this. Once again, a Coordinated program!	7/8/2020 8:00 PM
35	We already had data from coordinated	7/8/2020 6:56 PM
36	The exact same phrasing can be used to describe DI, CP, ISPP	7/8/2020 4:36 PM
37	Yes, but at what cost - my program does not have enough money to pay for this type of coordination. Please come tell my Dean that I need more release time to coordinate this. I direct my 11 interns at 23 preceptor affiliate sites, teach two class of 100+ students, and one graduate level course (so 4 course plus the internship coordination) - do you think I have time to do this.	7/8/2020 3:50 PM
38	Not new -- students in current DPD programs do fieldwork and experiential learning already. Plus not having completed all of their coursework means that they are doing supervised practice at a point where they do not have all the knowledge they need apply in practice settings. They are "half baked".	7/8/2020 3:36 PM
39	Some MS-internship programs do the same thing. This is by no means unique to the FEM.	7/8/2020 3:33 PM

Q15 Additional comments/questions

Answered: 36 Skipped: 82

#	RESPONSES	DATE
1	When I explain FEMs, I do emphasize that both education and supervised practice are combined. The other main talking point is that this is what the Academy wants and it is eventually what the Academy will therefore get.	7/20/2020 3:57 PM
2	I think this document is unnecessarily complex and provides information that overreaches what we know at this point about the benefits.	7/20/2020 2:07 PM
3	You talking points are biased and unfair to programs which are not FEM	7/20/2020 1:51 PM
4	I think we need a definitive answer about the plan for the FEM. They are putting a lot of work into this, and it seems as if it is going to be implemented. There are many of us that will need to know so that we can make plans accordingly.	7/20/2020 8:12 AM
5	Much of this information focuses on programs offered by 4-year institutions. How are questions/concerns about DT programs (both current and FEM) to be addressed?	7/20/2020 7:58 AM
6	I understand the push for FEM, it just appears that the Academy is trying to push all programs to this direction without the evidence it actually is beneficial.	7/19/2020 11:28 AM
7	Since I'm in the 4th demonstration program, I know that I will need to "sell" prospective students and their parents on the benefits and advantages to the program. I believe I can do this with guidance from ACEND and the reputation of my own program! Thanks you.	7/16/2020 6:29 PM
8	Probaby need for each level. For FG, the flexibility does not come through.	7/16/2020 1:03 PM
9	No comments	7/16/2020 12:46 PM
10	You lied because you said you wouldn't push FEM down our throats until will had quantitative data to show it was a successful program. But, as usual ACEND and CDR are pushing it down our throats. 262 employees including faculty were fired from our institution this week. Do you think they want to hear anything about a new program when the old one was working. By the way, do you realize there's a pandemic going on and we're lucky we can stay far enough ahead to even teach our students.	7/16/2020 12:16 PM
11	If you want people to understand this, you need to tone down the acronyms and "education speak."	7/16/2020 12:03 PM
12	these are the reasons we are transitioning	7/16/2020 11:37 AM
13	I think it would be beneficial, in the spirit of transparency, to share all data with educators that you may have. This would help everyone to see what the pros and cons are in an objective manner. Otherwise, it seems like we are just being told certain things to paint the FEM as this magical program.	7/16/2020 8:06 AM
14	I read the student talking points second and now feel that the administrator points are lacking in benefits to the administrator/facility when compared to the student talking points. In addition to financial benefits to the program, I'd add some of the benefits to the students and potential benefits in terms of time and other resources to the administrators/program talking points.	7/16/2020 7:50 AM
15	This document does not at all address how a switch to CBE would impact the current educational structure in place at an institution. By eliminating the need for an undergraduate degree on Nutrition and Dietetics, many Universities would need to eliminate departments. Perhaps that is a different discussion and/or a different talking points sheet but will need to be addressed nonetheless.	7/16/2020 7:03 AM
16	Want to see a list of what supervised experiential learning entails.	7/15/2020 9:34 PM
17	I would like to review the FEM as we decide to offer a masters degree with a DI option.	7/15/2020 6:55 PM
18	Until we know what the differences in practice are between the two types of programs I do not think it wise to appear to denigrate one program in order to promote the other.	7/15/2020 4:29 PM
19	I appreciate the opportunity to share my thoughts. However, this survey is depressing and demoralizing for those in dietetics education. We are just continually beaten down vs. lifted up.	7/15/2020 3:44 PM
20	If this is for parents and students, you really need to rewrite this for a general audience. The information is accurate, but the language is all wrong. Remember your audience may not have	7/15/2020 2:46 PM

a college degree. In this world of inclusivity and diversity (at least, what we are striving for), the language can scare off some potential students.

21	As I mentioned, it isn't any one statement in this document that I take issue with, but as a whole I feel like it is saying the traditional DI Program is inferior. I feel like some fairly strong statements are being made, yet we do not have adequate data yet from the demonstration programs yet to support some of these statement (at least not to my knowledge). I fear if this is the type of documentation that is going to be put out to parents and students, the number and quality of students applying to traditional DI programs will continue to decline. We had chosen to wait to transition our program until enough data are available for ACEND to make recommendations. However, now it is looking like we will need to transition before that given that we may no longer be able to recruit quality students as they will view our program as inferior.	7/15/2020 2:43 PM
22	This handout provides an unfair advantage to FEM programs and shows favoritism by ACEND that is not based on evidence based facts. It also perpetuates discrimination against persons from low income families.	7/13/2020 5:20 PM
23	As I have stated in previous surveys about the FEM, I don't have a real problem with the graduate level. However, I want to see the evidence that this route is the better route to go. I do have a problem with the bachelor's and associate's level degrees. They are unnecessary and will only cause more confusion and damage to our profession. Let's develop a strong education program to train future registered dietitians and disregard the other pseudo professional titles.	7/13/2020 1:21 PM
24	This is the future of dietetics education whether you're on board or not. My program decided to hop on the train because it was leaving the station. Free standing hospital based DIs are becoming dinosaurs.	7/10/2020 5:57 AM
25	As I go through this survey; it's evident that the entire document needs to be thrown out and re-written. Overall, it's implying that DIs are inferior, which they're not. Too many untruths and propaganda. I'm ashamed of ACEND for approving this.	7/9/2020 6:01 PM
26	FEM programs were launched with the message that outcomes data would be collected, analyzed, and reviewed before new standards would come out. By marketing FEM programs without having evidence of their "benefits", ACEND is engaging in practices that go against the very competencies required of dietetics professionals and clearly articulated in the Code of Ethics for the Dietetics Profession.	7/9/2020 4:51 PM
27	I am actually in support of the FEM format and the masters level training, but I think the benefits are unfairly disadvantaging those who are running traditional programs and are over-emphasized. The benefit right now when there are two options is for a change of career person. To the traditional student, I see no benefit or difference between FEM and my current combined MS/DI program.	7/9/2020 1:20 PM
28	I find many of these promises to students misleading, with little good research studies, including a control group, available to back it up.	7/9/2020 10:19 AM
29	Implement...implement...make the FEM mandatory	7/9/2020 10:17 AM
30	I am concerned with the Future Education Model Bachelors. As a previous clinical nutrition manager, I would not hire a graduate of a FB if I can hire a graduate of FG. It would create a cross-training/coverage challenge. I am not sure what the job market is for a FB.	7/9/2020 9:44 AM
31	you are making these programs sound superior.	7/9/2020 7:57 AM
32	I am so disappointed that ACEND is promulgating this misleading, unfounded information. FEM is nothing more than another route--it should not be pitted against DI, CP, ISPP especially when there is little to no evidence that FEM result in stronger outcomes or more efficient/cost-effective learning.	7/8/2020 4:36 PM
33	I don't see how an organization which says it values evidence based practice is so far out ahead of evidence it is supposed to be currently collecting? I'm not opposed to this model but these claims are not yet backed up by evicence. This is embarassing for the profession. If ACEND and CDR want to make the change just do it - don't pretend you are collecting evidence to make a decision.	7/8/2020 4:00 PM
34	I think this handout is providing an unfair advantage to FEM programs. Several of these bullets apply to my program also, however this handout makes it seem like these are all reasons to	7/8/2020 3:40 PM

choose an FEM over other programs.

35	I very strongly oppose releasing "talking points" in (obviously biased) support of a program that is supposed to be "experimental". The biase is clear, but your supposed data is largely either the subjective views of program directors who have already "drank the Koolaid" or no data at all! Be honest or don't say anything at all.	7/8/2020 3:36 PM
36	I am extremely disappointed by ACEND with the wordings of this document as it shows open favortism for the FEM and thus create antagonistic relationship between FEM programs and DPD/DI programs. The document is a one-sided advertisement for the FEM with no consideration of the entire picture of dietetics training.	7/8/2020 3:33 PM