GUIDANCE INFORMATION FOR

ACEND DEMONSTRATION PROGRAMS IN NUTRITION AND DIETETICS USING THE FUTURE EDUCATION MODEL ACCREDITATION STANDARDS

Revised November 2025

Accreditation Council for Education in Nutrition and Dietetics

Guidance Information for Future Education Model Programs

This document provides guidance to program directors on implementing and documenting compliance with the ACEND Future Education Model Accreditation Standards for Graduate Programs in Nutrition and Dietetics. The document includes the types of information to be included in the self-study report narrative, types of exhibits to include in the self-study report appendix and additional materials that should be available on site for the review team.

ACEND staff members are available to provide consultation, guidance and support on meeting ACEND's accreditation standards, policies and procedures. Please email <u>ACEND@eatright.org</u> or call (312) 899-0040 extension 5400.

Acronyms used in document:

ACEND: Accreditation Council for Education in Nutrition and Dietetics

CDR: Commission on Dietetic Registration

CRDN: Competency for Registered Dietitian Nutritionists

FTE: Full Time Equivalent

GP: Graduate Program in Nutrition and Dietetics

KRDN: Knowledge requirement for Registered Dietitian Nutritionists

SEL: Supervised Experiential Learning

Additional Appendix Evidence for Candidacy Programs: The United States Department of Education's revised criteria state that accreditors must require candidacy programs to submit a teach-out plan to ensure that enrolled students would be able to complete program requirements if the program did not achieve full accreditation or voluntarily withdrew from accreditation. A teach-out plan must be submitted with the self-study report as an appendix. ACEND has developed a Teach-Out Plan Template that can be found on the ACEND website for you to document the proposed program's teach-out plan.

Changes and clarifications to the Guidance Information Document (April 2023)

Removed Associate Degree Programs (AP) from guidance document.

- RE 1.1 Clarified expectations for candidacy programs to describe status of degree approval process.
- RE 1.3 Clarified purpose of resources for continued development and training for program faculty, preceptors and staff.
- RE 1.4 Clarified expectations for candidacy programs to describe status of degree approval process.
- RE 1.6 Clarified supervised experiential learning hour requirement when programs use accelerated degree options
- RE 2.1 Clarified narrative for Program Evaluation Plan.
- RE 4.1 Moved on site examples of evidence of the process that is done to track student achievement of the competencies from RE 4.2 to RE 4.1.
- RE 5.1 Clarified expectations for programs applying for candidacy regarding adequate preceptors, preceptor roster and onsite evidence.
- RE 6.1 Clarified expectations for programs applying for candidacy regarding onsite evidence.
- RE 8.1 Clarified expectations for policy on equitable treatment.
- Glossary updated the definition for accelerated degree program, distance education, onsite and program.
- Appendix C: ACEND Document Retention Procedures updated the Verification Statements for Program graduates' policy.

Changes to the Guidance Information Document (June 2023)

Glossary – updated the definition for regular and substantive interaction and removed remote site.

Changes to the Guidance Information Document (February 2024)

- RE 1.4 Clarified expectations for the degree completion requirements and for when programs accept students with a graduate degree previously earned.
- RE 1.6 Clarified expectations to include clinical as a major rotation.
- RE 2.1 Moved examples of tools used to collect evaluation data from appendix evidence for RE 2.2 to RE 2.1. Clarified expectations for program completion objectives for programs with different program lengths.

- RE 3.3 Clarified requirement to include learning activities that prepare students for practice to implement the Nutrition Care Process with high acuity conditions.
- RE 5.1 Clarified expectations for programs applying for candidacy regarding adequate preceptors and the onsite evidence.
- RE 6.1 Clarified expectations for programs applying for candidacy regarding onsite evidence.
- RE 7.3 Clarified expectations for policies of prior assessed learning and the website.

Changes to the Guidance Information Document (February 2025)

- RE 1.1– Clarified requirements for approvals prior to candidacy accreditation. Provided updated language from USDE regarding institutional accreditation.
- RE 1.3 Clarified narrative evidence of the budgeting process.
- RE 1.4 Clarified requirements for approvals prior to candidacy accreditation.
- RE 2.3 Clarified expectations for the Continuous Program Improvement Plan for programs with data and for those applying for candidacy.
- RE 3.3 Clarified syllabi/rotation description expectations.
- RE 4.1 Clarified interpretation of the required element.
- RE 4.2 Clarified interpretation of the required element.
- RE 5.3 Clarified expectations and moved appendix evidence to onsite evidence for training to preceptors.
- RE 7.1 and 8.1 Clarified expectations involving state and federal laws.
- RE 7.3 Clarified expectations regarding distance education.
- RE 8.2 Clarified requirements for policy and procedures and the use of institutional policies.
- RE 8.2m Clarified expectations for maximum time for completion of the program.
- Glossary updated the definition for distance education for clarity.

Appendix C: ACEND Document Retention Procedures – updated the Nutrition and Dietetics Internship Admission Documents policy to clarify expectations around the verification statement and added Graduate Program in Nutrition and Dietetics Admission Documents to the policy.

Changes to the Guidance Information Document (November 2025)

- RE 1.3: Removed 'diversity, equity, and inclusion' from narrative to support achievement of the standard.
- RE 1.5: Removed term 'equitable' from 1.5.d.2.
- RE 3.2: Removed the term 'diverse' from 3.2.b and removed entire 3.2.c. RE 3.2.d. is now 3.2.c.
- RE 5.2: Removed entire 5.2.d and narrative and appendix evidence related to 5.2.d.
- RE 5.3: Removed entire 5.3.c and narrative and onsite evidence related to 5.3.c.
- RE 7.1: Removed "Programs shall demonstrate by tangible action their commitment to enrolling a diverse student body" and narrative to support achievement of the standard related to this sentence.
- RE 8.1: Removed entire 8.1.d and narrative to support achievement of the standard related to 8.1.d.

Glossary: Removed definition of cultural competence.

Appendix d: Graduate Program (GP) in Nutrition and Dietetics: competencies, performance indicators, learning activities, practice illustrations and assessment strategies:

- Competency 1.7: Removed PI 1.7.6 and three learning activities and practice illustrations. In Demonstration/Assessment changed 'culturally diverse' to 'different cultures and'
- Competency 5.1: Removed 'and cultural orientation' from PI 5.1.1.
- Competency 5.2: Changed 'diverse' to 'varied' in PI 5.2.21.
- Competency 7.1: Changed 'respects diversity and avoids prejudicial treatment' to 'respectful' in PI 7.1.6.
- Competency 7.2: Changed 'diverse' to 'various' in learning activities and practice illustrations.

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Standard 1: Program Characteristics and Resources

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

Required Element 1.1	Narrative to Support Achievement Note: Programs must submit the self-study report narrative in one searchable PDF file formatted using the Adobe bookmark feature. The self-study report narrative provided for the Required Element should reference the location of any corresponding evidence in the appendices PDF.	Appendix Evidence Note: Programs must submit all appendix evidence in two searchable PDF files formatted using the Adobe bookmark feature. One set of appendices will include all supporting evidence with the exception of syllabi and/or rotation descriptions. Syllabi and/or rotation descriptions are to be included in a separate bookmarked PDF.	Onsite Evidence
All Programs: The program must be housed in a college or university or offered in a partnership with a college or university. The college or university must be located in the U.S. or its territories and accredited in good standing by a U.S. institutional accrediting body for higher education recognized by the United States Department of Education (USDE). a. A partnership is defined as two or more independent institutions, one of which is an accredited college or university, working together under a formal written agreement to sponsor a single program. The partnership must consider itself a single education program.	 All Programs: Explain how the organization is in compliance with this required element. Describe the impact, if any, of the current status of the program, if the organization/institution is out of compliance with their oversight agency. (Note: Applications for Candidacy will not be accepted if an accrediting or licensing body has taken action to place on probation, deny, suspend, revoke, withdraw or terminate the institution's accreditation.) [Candidacy programs only] If the program is not yet approved within the state and/or institution, the program must describe where the program is in the process of gaining approvals, including timeline and the status of the approval process within the institution and the state. Note: all state and institutional approvals are required for the ACEND Board to grant candidacy accreditation. State the name of the U.S. institutional accrediting body and the institution's current accreditation status. [Partnership only] Describe the formal agreement between organizations in the program partnership including financial and other resource contributions of each member. Note: CDR has updated their language around the 	All Programs: Copy of most recent letter or a website screenshot and active website link from the oversight agency website documenting the organization's status with the oversight agency Partnership: Copy of the formal written partnership agreement between the organizations involved.	• Copies of any reports from the accrediting agency related to accreditation status, if institution is not fully accredited by its accrediting agency

requirements to become a registered dietitian to more closely align with USDE's recent change with no longer recognizing regional accreditors. Please ensure updated language is being used in program materials.	
Old language: US regionally accredited college or university	
New Language: College or university recognized by the US Department of Education (USDE)	

Required Element 1.2	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
All Programs: The program must be integrated within the administrative structure of the sponsoring organization, show this structure, such as in an organizational chart, and indicate where the program will be housed. In a partnership, organizational charts must clearly show the relationship of the graduate degree program to other programs/services offered by the sponsoring organizations and the relationship among the sponsoring organizations.	All Programs: Describe the administrative structure of the institution/organization and where the program is housed. [Partnership only] Describe the program partnership and the relationship of each member to the program partnership (refer to organization chart).	All Programs: A copy of the organization chart that shows the location of the program within the institution (entire structure to the "top" of the organization, e.g., up to the university president or hospital CEO) and its relationship to other programs within the department It is not necessary that the chart be an "official" chart from the organization as long as the location of the program and other programs within the department are evident. More than one chart may be needed that shows where the program fits within college/school/department and the institution, as applicable. All programs within the department, including that of the accredited program, must be identified by name in the chart. Partnership: An organization chart showing the relationship of each member of the partnership to the program	

Required Element 1.3	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
All Programs:	All Programs:		All Programs:
The program must demonstrate that it has the administrative, clerical or other staff, technical and financial support and the learning resources, physical facilities and support services needed to accomplish its mission and goals. If any portion of the program is offered through distance education, the program must demonstrate that technology and resources are adequate to support a distance-	 Explain the adequacy of program resources (e.g., administrative, clerical, technical and IT support, financial, physical facilities, learning resources, support services) to meet the needs of all program options (including distance education, if applicable) and produce the desired outcomes. 		 Tours of facilities Meeting minutes in which budget and resources are discussed, if applicable.
learning environment. a. The program must demonstrate that administrative support and resources are adequate to support continued	 Describe the process used to determine budgetary needs that are tied to the short- and long-term strategies to achieve program mission and goals. 		 Examples of learning resources available to students.
development and training for program faculty, preceptors and staff. b. The program must provide a description of the budgeting process for the program that demonstrates financial resources are sufficient to produce the desired short- and long-term program goals and student outcomes. 1. Programs offered in partnerships must document the	Note: The process described should be the procedures used for how the program asks for budgetary needs that are tied to short- and long-term strategies would include the resources needed to perform day-to-day activities or fixed expenses (i.e., supplies, software, and trainings) as well as variable expenses or needs such as repair of equipment, and or renovations. • Describe how the budget and resources are adequate to		to students.
responsibilities of and resources provided by each partnership organization to the total program. c. The program must report its maximum enrollment to ensure quality, viability and appropriate use of resources.	support program faculty, preceptors and staff for training on distance education and other professional development topics to produce desired outcomes for the program. State the maximum enrollment for which the program is seeking accreditation and discuss the adequacy of resources to support the enrollment. Explain how these enrollment numbers ensure quality, viability and		
	 appropriate use of resources of the program. [Partnership Only] Describe the formal agreement between organizations in the program partnership including financial and other resource contributions of each member. 		

Required Element 1.4	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
All Programs:	All Programs:	All Programs:	
The program must award at least a master's degree and a verification statement upon completing program requirements to individuals who enter the program with a baccalaureate degree or less.	Describe completion requirements for receipt of verification statement. Information should be provided separately for each option offered.	A copy from catalog or website listing the degree obtained and course requirements and prerequisites [draft information for candidacy]	
 a. If the program admits individuals with a master's degree or higher, the program must award at least a verification 	[Candidacy programs only] If the program is offering a degree that is not yet approved within the state and/or	programs]	

Required Element 1.4	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
statement to individuals who complete program requirements.	institution, the program must describe where the program is in the process of gaining approvals for granting a degree, including timeline and the status of the approval process within the institution and the state, as applicable. Note: all state and institutional approvals are required for the ACEND Board to grant candidacy accreditation.		
	 State the degree received upon completion of the program and describe completion requirements for receipt of degree. Information should be provided separately for each option offered. 		
	 Note: The master's degree must be in a major course of study in human nutrition, foods and nutrition, dietetics, public health, food systems management, or an equivalent course of study (including MBA, MEd and other relevant degrees). 		

Required Element 1.5	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
All Programs: The program must have one designated program director who has primary responsibility for the program and communication with ACEND. The program director must have the authority, responsibility and sufficient time allocated to manage the program, and provide effective leadership for the program, the program faculty, and the students. The program director may have other responsibilities that do not compromise the ability to manage the program. Responsibilities and time allocation for program management are reflected in a formal position description for the program director and approved by an administrator. a. For programs offered in a partnership: 1. One individual must serve as the partnership program director and have primary responsibility for the program and communications with ACEND. 2. Each member organization in the partnership must designate a coordinator (who may be the program	 All Programs: Describe how institutional policies related to faculty roles and workload are applied to the program in a manner that recognizes and supports the academic and practice aspects of the nutrition and dietetics program, including allocating time and/or reducing teaching load for administrative functions provided by the director. State time allocation for program management. Describe the program director's credentials and how the director meets the ACEND requirements for the program director position. Describe the authority and responsibility the director has to manage the program and how the program director's listed responsibilities are achieved. If the program director position is not a 12-month appointment discuss year-round coverage of the program 	 All Programs: Program director's current curriculum vitae or resume. Formal position description for the program director that includes ACEND responsibilities and clearly specifies the amount of time allocated for program. management (e.g., number of hours, percentage of time, amount of course release time). Optional: Use Program Director Position Description Template. Evidence of CDR registration status, such as photocopy of the program director's CDR registration card or printout from CDR website verifying registration status. Partnership: A copy of curriculum vita/resume for each 	Student and graduate files showing adherence to outlined procedures for record keeping. Examples of written communications with program faculty, preceptors and others involved with the program. Meeting minutes discussing accreditation.

Required Element 1.5	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
director) for the program within that organization who is employed by the organization. b. Institutional policies related to faculty roles and workload are applied to the program in a manner that recognizes and supports the academic and practice aspects of the nutrition and dietetics program, including allocating time and/or reducing teaching load for administrative functions provided by the director. c. The program director must: 1. Have earned a doctoral degree or equivalent and have a minimum of three years professional experience post credentialing OR have earned a master's degree or equivalent and have a minimum of five years professional	 when the program director is not available. This does not refer to short-term vacations or absences. Partnership: Identify the individual who serves as the partnership program director. Identify the individual(s) other than the program. director who serve as partnership coordinator(s) Describe the employment status of each coordinator with the member institutions. Describe the relationship of the coordinator(s) to the partnership program director. 	coordinator other than the program director.	
experience post credentialing.Be credentialed as a registered dietitian nutritionist by the Commission on Dietetic Registration.			
 Be a full-time employee of the sponsoring institution (or one or more of the sponsoring partnership institutions), or a full-time employee of another organization that has been contracted by the sponsoring institution. 			
 Not direct another ACEND-accredited nutrition and dietetics education program. 			
d. The program director responsibilities must include, but are not limited to:			
 Provision or delegation of responsibilities to assure year-round coverage of director responsibilities in the absence of the director or in cases where the director's full-time appointment does not cover all 12 months. In programs where the program director assigns some responsibilities to other individuals, the director must ensure that all program director responsibilities are accomplished throughout the year. 			
 Development of policies and procedures for effectively managing all components of the program and to ensure fair and considerate treatment of prospective and enrolled students (such as program admission, retention and completion policies). 			

Requir	ed Element 1.5	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
3.	Student recruitment, advisement, evaluation and counseling.			
4.	Maintenance of program accreditation including:			
	 Timely submission of fees, reports and requests for major program changes; 			
	 Maintenance of the program's student records, including student advising plans, supervised experiential learning hours and verification statements; 			
	 Maintenance of complaints about the program received from students or others, including disposition of the complaint; 			
	 On-going review of program's curriculum to meet the accreditation standards; 			
	e. Communication and coordination with program faculty, preceptors and others involved with the program and its students;			
	f. Facilitation of processes for continuous program evaluation; and			
	g. Timely submission of required documentation supporting the graduate's eligibility for a Commission on Dietetic Registration (CDR) credentialing exam.			

Required Element 1.6	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
Required Element 1.6 All Programs: The program must establish its length and provide the rationale for the program's length after taking into consideration didactic learning and required supervised experiential learning needed by students to demonstrate the required competencies and mandates from the program's administration and state legislation. Programs must include both the didactic and supervised experiential learning components integrated into a single program. a. The program must be planned so that students complete at	 All Programs: State the program length and number of supervised experiential learning hours. Describe how the didactic and supervised experiential learning will be integrated throughout the program. Briefly describe the rationale for the program length (considering learning activities that students must accomplish, required hours of supervised experiential 	Appendix Evidence All Programs: Planned SEL hours (use template titled "Planned Supervised Experiential Learning Hours") (Note the major rotations with an asterisk on the template). Note: Accelerated degree programs must have at least 1000 supervised experiential learning hours in the graduate level. For the definition of accelerated degree program see the glossary.	Onsite Evidence
least 1000 supervised experiential learning hours. The program must document the planned hours in professional work settings and in alternate experiences. The majority of the	learning and mandates from the program's administration or state legislation).State the major rotations and describe how the program	assertited degree program see the glossary.	

Required Element 1.6	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
professional work settings hours spent in the major rotations must be completed onsite.	ensures the majority of the rotation hours (>50%) are completed onsite (in-person). Clinical rotations must be indicated as a major rotation with >50% of hours completed onsite (in-person) in in-patient, acute-care settings such as hospitals, long-term care facilities, and renal dialysis centers.		
	Describe planned international experiences available for students, total supervised experiential learning hours provided internationally, and country in which experiences will occur, if applicable.		
	[Partnership Only] Describe the coursework and supervised experiential learning activities provided by each partner organization.		

Standard 2: Program Mission, Goals and Objectives

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

Required Element 2.1	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
All Programs:	All Programs: Mission Provide the mission statements for: the institution the college and/or department in which the program resides, and the program, itself Explain how the mission supports the program's intent to prepare students for nutrition and dietetics practice and careers. Discuss the compatibility of the program's	Most recently reviewed Program Evaluation Plan listing entries for the history of annual review, program mission, goals and objectives, the data to be collected for all program goals and objectives, groups from which data will	All Programs: • Minutes from planning meetings or other documentation discussing development of mission, goals objectives and review of program evaluation plan.

program must set reasonable target measures when the targets are not specified. Required objectives must be evaluated annually using an average of data from the previous three years:

- a. Program Completion: "At least 80% of students complete program requirements within _____ (150% of planned program length)".
- b. Graduate Employment: "Of graduates who seek employment, at least ____ percent are employed in nutrition and dietetics or related fields within 12 months of graduation".
- c. Graduate Performance on Registration Exam:
 - 1. "At least ____ percent of program graduates take the CDR credentialing exam for dietitian nutritionists within 12 months of program completion".
 - 2. "The program's one-year pass rate (graduates who pass the registration exam within one year of first attempt) on the CDR credentialing exam for dietitian nutritionists is at least 80%".
- d. Employer Satisfaction: The program must develop an objective for employer satisfaction with graduate's preparation for entry-level practice.

organization.

Goals

- State your program goals.
- Discuss how the goals support the program's mission.

Note: Provide program goals that are well constructed and generally stated in terms of the impact of the program on graduates and their contributions to the nutrition and dietetics profession. The goals must use the term "graduates" and must not use the terms "students". Avoid having student learning objectives or management plans (i.e., action plans for running the program on a day-to-day basis) as program goals. A program can have more than two goals.

methods used to collect data, individuals responsible for data collection and the timeline for data collection (use template titled "Program Evaluation Plan").

Examples of tools used to collect evaluation data such as surveys, evaluations, etc.

Historical data used to determine target measures.

Required Element 2.1	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
 All Programs: a. Qualitative and/or quantitative data needed to determine whether goals and objectives have been achieved. b. Groups from which data will be obtained; both internal and external stakeholders must be represented (such as graduates, administrators, faculty, preceptors, employers, practitioners, nutrition and dietetics education program directors, faculty from other disciplines and advisory committees). c. Evaluation methods that will be used to collect the data. d. Individuals responsible for ensuring that data are collected. e. Timeline for collecting the necessary data. 	 Objectives Provide ACEND-required program objectives, aligning them to the appropriate program goal. Provide additional objectives that measure the full intent of the program's mission and goals if applicable. Describe how objectives with target measures set by the program demonstrate that the program is operating in the interest of students and the public. Note: ACEND-required program objectives must be written verbatim when listed in quotation marks in the standard. They may be aligned to any of the program's goals as appropriate; they do not need to all be included under the same goal. Note: Programs with clearly different length options must have two separate program completion objectives in the program completion row; however, in the last column of the PEP, the program should provide one set of data. Note: Programs should avoid affixing a number of 		

Required Element 2.1	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
	years to the ACEND-required objectives (e.g., Over a five-year period,) because they are then not written verbatim.		
	Plan		
	 Describe the process for the annual review of the program evaluation plan and the stakeholders involved in the review. [Programs applying for candidacy describe how process will occur]. Discuss changes, if any, which have been made in the plan since the last accreditation review. [Not applicable to programs applying for candidacy]. 		

Required Element 2.2	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
All Programs:	All Programs:Analyze degree of achievement of program goals and	All Programs:Actual data (including both the number "n"	All Programs: • Minutes from
The program must evaluate the achievement of its goals and objectives based on its program evaluation plan and provide evidence that:	objectives, including trends observed in the data [Not applicable to programs applying for candidacy].	and percentage) collected for each program objective, which must be provided in the	planning meetings or other
Program outcomes data are collected according to the program evaluation plan, summarized and analyzed by	Discuss factors impacting achievement of program goals and objectives [Not applicable to programs applying for candidacy].	final column in the Program Evaluation Plan") [Not applicable to programs applying for candidacy since no data have been	documentation discussing review of program evaluation
comparing actual achievements with objectives. b. Data analysis is used to evaluate the extent to which goals and objectives are being achieved.	 Describe how programmatic planning and outcomes evaluation are documented and as appropriate, integrated with institutional planning and assessment. 	collected].	results [Not applicable to programs applying
c. The targets set for ACEND-required objectives are met.d. Program changes have been made to improve outcomes for	• [Partnership only] If the program is a partnership, describe the role of each institution in the program evaluation process.		for candidacy]. • Completed
unmet objective(s). e. Programmatic planning and outcomes evaluation are integrated with institutional planning and assessment, as appropriate.	 Note: To calculate program completion divide all students who finish the program (nominator) by all students who start the program (denominator); this includes students who drop out at any point after starting the program. 		evaluation surveys and/or other documentation supporting the data in the PEP (e.g.,

Required Element 2.2	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
	Reminder: Data for all ACEND-required objectives must be provided as three-year rolling averages from the last three years and over the seven-year accreditation cycle. To avoid gaps in data, for example, if you had a site visit in 2021, the three-year rolling averages should be indicated as 2019-2021, 2020-2022, 2021-2023, etc. because the data from 2021 forward is included in each of those rolling averages. Note: Pearson VUE exam pass rate results are already provided as three-year rolling averages.		completion records, focus groups, interviews, Pearson VUE reports, etc.). [Not applicable to programs applying for candidacy]. Institutional documents demonstrating integration with institution assessment, if applicable.
Required Element 2.3	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
All Programs: Results of the program evaluation process must be used to identify strengths and areas for improvement relative to components of the program (such as policies, procedures, curriculum, teaching methods, faculty, preceptors, resources). Short- and long-term strategies must be developed and actions must be taken to maintain program strengths and address areas for improvement identified through the evaluation process.	All Programs: Briefly summarize information presented in the Continuous Program Improvement Plan and discuss how it links with the outcomes presented in the Program Evaluation Plan. [Programs applying for candidacy must discuss how the improvement plan will link to the Program Evaluation Plan].	 All Programs: Most recent plan documenting continuous program improvement (use template titled "Continuous Program Improvement Plan"). [Candidacy programs only]: Although the program will not have data from the program evaluation plan, a Continuous Program Improvement Plan must be submitted with anticipated strengths and areas for improvement based on the self-study process. Note: Not all categories (for example, policies and procedures, faculty, curriculum) in the plan need strengths and areas for improvement; however, the program must include both strategies and areas for improvement within the entire plan. Unmet objectives in the Program Evaluation Plan must be included on the form. 	All Programs: • Minutes from planning meetings or other documentation discussing identification of program strengths and areas for improvement and development of short- and long-term strategies.

Standard 3: Curriculum and Learning Activities

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

Required Element 3.1	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
All Programs:	All Programs:	All Programs:	All Programs:
 The Curriculum Map template must be used to document: a. Each competency. b. Performance indicators for each competency on which summative assessment occurs in the curriculum. c. Course(s) (including supervised experiential learning) in which summative assessment of performance indicators will occur. d. How the curriculum: 1. is sequentially and logically organized, 2. progresses from introductory to more advanced learning experiences and 3. builds on previous knowledge, skills and experience to achieve the expected depth and breadth of competence by completion of the program. 	 Describe the program's curriculum. Discuss and provide examples of how the program didactic and supervised experiential learning courses are organized, sequenced and integrated. (It is acceptable to have one or two sole experiential learning courses, without a didactic component; additional experiential learning must be woven into other courses.) Discuss and provide examples of how the curriculum builds on previous knowledge and experience to progress from introductory to more advanced learning activities. Discuss and provide examples of how the curriculum facilitates student achievement of the knowledge requirements and expected depth and breadth of competency. Explain how students demonstrate entry-level competence. Describe the culminating experiences. Note: Competencies, performance indicators, practice illustrations and demonstration or assessment methods can be found in Appendix D of this Guidance Information Document. 	Course descriptions as published in the catalog [Programs applying for candidacy provide draft copy of course descriptions that will be published in the catalog]. • A curriculum map of didactic courses and supervised experiential learning courses aligned with required performance indicators and competencies (use template titled "Curriculum Map" The curriculum map indicates where Pls are covered or addressed in the curriculum. Reminder: It is the competencies that must be assessed, not each performance indicators Note: All performance indicators (PIs) must be covered and identified on the curriculum map at least once. PIs may be covered and competencies met in pre-requisites (including undergraduate curriculum) through evaluation of prior learning; however, the enhanced competencies must be met in the program.	 Textbooks, either digital or hard copy, noted in course syllabi. Minutes from planning meetings or other documentation that show discussions of curricular planning. Examples of completed student projects as evidence of breadth and depth in the curriculum and educational approaches used. [Not applicable to programs applying for candidacy].

Required Element 3.2	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
All Programs:	All Programs:	All Programs:	
The program's curriculum must provide learning experiences to attain the breadth and depth of the required curriculum competencies. Syllabi for courses (including those with supervised experiential learning) taught within	Provide examples of the educational approaches that are used to meet learner needs and facilitate achievement of competencies.	 Summary of where learning activities occur (use template titled "<u>Summary of Learning</u> <u>Activities</u>"). 	
the academic unit must include the relevant competencies.		 The following syllabi must be provided in a 	

Required Element 3.2	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
 a. Learning experiences must prepare students for professional practice with clients/patients with various conditions, including, but not limited to overweight and obesity; disordered eating; developmental, intellectual, behavioral health, neurological, and endocrine disorders; cancer; malnutrition; and cardiovascular, gastrointestinal and renal diseases. b. Learning experiences must prepare students to implement the Nutrition Care Process with various populations of cultures. c. Learning experiences must incorporate a variety of educational approaches necessary for delivery of curriculum content to meet learner needs and competencies. 1. If any portion of the program is offered through distance education, the program assures regular and substantive interaction between students and faculty. d. Learning experiences must prepare students to become competent in the following skills: 1. Perform routine health screening assessments including measuring blood pressure, conducting waived point-of-care laboratory testing (such as blood glucose or cholesterol), recommending and/or initiating nutrition-related pharmacotherapy plans (such as modifications to bowel regimens, carbohydrate to insulin ratio, B₁₂ or iron supplementation). 2. Provide instruction to clients/patients for self-monitoring blood glucose considering diabetes medication and medical nutrition therapy plan. 3. Explain the steps involved and observe the placement of nasogastric or nasoenteric feeding tubes; if available, assist in the process of placing nasogastric or nasoenteric feeding tubes. 4. Conduct a swallow screen and refer to the appropriate health care professional for full swallow evaluation when needed. 	 Discuss how students are informed of where the competencies are met and performance indicators are covered, such as in a list or in the student handbook. Note: The program must include learning activities that prepare students/interns for practice to implement the Nutrition Care Process with patients with high acuity conditions in in-patient, acute-care settings such as hospitals, long-term care facilities, and renal dialysis centers. Note: Students should know where the competencies are assessed in the curriculum. Students need to know when supervised experiential learning must be tracked within a course/rotation. Performance indicators do not need to be on the syllabi but perhaps just listed in the handbook under the competencies. It is not necessary to link them to courses as long as they are linked to the competencies. Describe how the program assures regular and substantive interaction between students and faculty occurs in distance courses, if applicable. 	separate third bookmarked PDF document and not as part of the appendices. Place them in chronological order as they are offered in the curriculum. • All departmental syllabi within the academic unit relevant to the program (plan of study) and • Any non-departmental course syllabi where competencies are assessed as identified on the Competency Assessment Table. (Programs applying for candidacy provide draft syllabi for each course in the curriculum). Expectations for Course Syllabi • The program must ensure the learning experience used for the competency as indicated on the assessment table (RE 4.1) is present on the corresponding syllabi. The program may include competencies that are covered or formatively assessed, if they choose, that are not on the assessment table. • All courses within the academic unit (i.e., within the department) where competencies are met and assessed, or Pls are covered must be included in the curriculum map. Programs are expected to include non-departmental course(s) where competencies are met and assessed on the curriculum map. • Programs are not expected to include the competencies on the syllabi of non-departmental courses (because the syllabus requirement in RE 3.2 only applies to courses taught within the academic unit). • Competencies and learning experiences do not have to be side-by-side on the syllabi/rotation description, but both must	

Required Element 3.2	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
		be present. For example, if the learning activity is noted on the Competency Assessment Table, the expectation is that the competency and learning experience must be present on the course syllabus	
		(with the exception of non-departmental course syllabi).	

Standard 4: Competency Assessment and Curriculum Improvement

The program must continuously assess student achievement of required competencies. The program must collect and analyze aggregate data on student competency attainment. The results of the assessment plan must be used to evaluate and improve the curriculum to enhance the quality of education provided.

Required Element 4.1	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
All Programs: The program must have a plan for assessment of competencies. The plan must identify summative assessment methods used, as well as courses and/or supervised experiential learning activities in	All Programs: Describe the program's plan (process) for assessment of students' achievement of competencies and discuss updates made to the plan, if any.	All Programs: Three examples of assessment tools such as exams, rotation evaluations, rubrics, projects, portfolios, etc. listed on the	All Programs: • All assessment methods documented in 4.1-4.2 Assessment Table. (Assessment methods may
which assessment will occur and the process for tracking individual student's demonstration of performance indicators/competencies.	 Analyze the strengths and limitations of the assessment process since the last accreditation review. [Not applicable to programs applying for candidacy]. Describe the process for tracking individual students' demonstration of competencies. Note: This Required Element is related to individual student's competence. The program must describe how the program ensures that a student has met the competencies, including remediation, to be able to earn the verification statement at the end of the program. 	Competency Assessment Table. Completed Competency Assessment Table (use template titled "Competency Assessment Table") that lists each of the required competency statements, the course or supervised experiential learning course/rotation in which assessment will occur, and the specific, required assessment method(s) used to measure achievement of competency. Note: Each competency must have at least one assessment, even if all the PIs within a competency are covered in prerequisites. In this case, the assessment may be prior learning assessment and program must have a	be detailed in course syllabi or provided separately). Examples of projects completed by students demonstrating achievement of competencies. [Not applicable to programs applying for candidacy]. Example of evidence of the process that is done to track student achievement of the competencies for those assessments noted in column C of the Assessment Table. [Not applicable to

		clear policy for evaluation of assessment of prior learning in RE 8.2i). Note: Enhanced competencies must be covered within the program and not in prerequisite coursework.	programs applying for candidacy].
Required Element 4.2	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
All Programs: The program must document that data on student competency achievement are collected, summarized and analyzed for use in curricular review and improvement.	 All Programs: Describe how data on competency achievement were collected and analyzed for use in curricular review and improvement. [Programs applying for candidacy must describe how the process will occur]. Analyze the extent to which students achieved the competencies since the last accreditation review [Not applicable to programs applying for candidacy]. 		
	Note: This Required Element is related to aggregate data for achievement of the competencies, prior to remediation. With aggregate data, the program must assess how well an assignment or activity led to attainment of the competencies to determine if actions are needed to improve curriculum and the program.		

Required Element 4.3	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
All Programs:	All Programs:		All Programs:
 a. Use results of program evaluation and competency assessment to determine strengths and areas for improvement. b. Include input from students and other stakeholders as appropriate. c. Include assessment of comparability of educational experiences and consistency of competency achievement when different courses, delivery methods (such as distance education), or supervised experiential learning sites are used to accomplish the same educational objectives. 	 Describe the curriculum review process including timeframe and how input from students is incorporated [Programs applying for candidacy must describe how the curriculum review process will occur]. State curriculum strengths and areas for improvement and discuss how results of program evaluation and competency assessment were used to determine strengths and limitations. [Not applicable to programs applying for candidacy]. Discuss how comparability of educational experiences and consistency of learning outcomes are assessed and maintained [Programs applying for candidacy must describe plans to ensure comparability of educational experiences and consistency of learning outcomes]. 		 Minutes from meetings or other documentation of the program's curriculum review process. [Not applicable to programs applying for candidacy]. Examples of input collected from students about the curriculum. [Not applicable to programs applying for candidacy].

Required Element 4.3	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
d. Result in actions to maintain or improve student learning.	 Discuss how the program ensures comparability of educational experiences and consistency of learning for distance education students, if applicable. Provide examples of how the curriculum review process has resulted in actions to maintain or improve student learning. [Not applicable to programs applying for candidacy]. [Candidacy programs only]: Describe how the curriculum review process will occur and plans to ensure comparability of educational experiences and consistency of student learning. 		

Standard 5: Faculty and Preceptors

The program must have qualified faculty and preceptors in sufficient numbers to provide the depth and breadth of learning activities required in the curriculum and exposure to the diversity of practice. Program faculty, including the program director, must show evidence of continuing competence appropriate to teaching responsibilities, through professional work experience, graduate education, continuing education, and research or other activities leading to professional growth in the advancement of their profession.

Required Element 5.1	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
All Programs: The program must provide evidence that qualified and appropriately credentialed faculty and preceptors are sufficient to ensure implementation of the program's curriculum and the achievement of the program goals and objectives.	 All Programs: Discuss the adequacy of qualified and credentialed faculty and preceptors to ensure implementation of the program's curriculum and achievement of the program goals and objectives. Describe the process used to ensure the faculty and preceptors including those used for international experiences, and those selected by students are qualified for their role in the program. [Programs applying for candidacy must describe the plans for adequate preceptors for the planned enrolled students]. 	 All Programs: List of faculty members within the academic unit, with their credentials and courses taught (use the template titled "Faculty Roster"). List of preceptors with credentials aligned with supervised experiential learning facility and course/rotation (use the template titled "Preceptor and Facility Roster"). Include preceptors and facilities where students are placed for the academic year in which the site visit takes place. It is adequate to list only the lead preceptors who manage other preceptors in a facility. Note: This template is also used to demonstrate compliance with Standard 6, RE 6.1. (Programs applying for candidacy must provide a roster of preceptors they have secured at the time of self-study submission). 	(Candidacy programs only) Show evidence of plans for adequate preceptors such as progress of written agreements with facilities including fully or partially executed agreements, communications to potential preceptors detailing expectations, preceptors expressing interest or confirming intent to accept students.

Required Element 5.2	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
All Programs:	All Programs:	All Programs:	All Programs:
The requirements for program faculty (faculty within the academic unit) must include: a. Program faculty, including the program director, must meet the sponsoring organization's criteria for appointment and have sufficient education in a field related to the subject in	Describe the sponsoring organization's criteria for faculty appointment and how the program ensures that faculty meet those criteria. Faculty are not required by ACEND to hold an RDN or NDTR credential, unless required for their position.	 Examples of orientation materials, such as handbook, orientation outline or checklist including orientation to ACEND standards, competencies, and the program's mission, goals, objectives. [Programs applying for candidacy provide draft materials]. 	Evidence that orientation and training has been completed (agenda, outline, and/or materials covered in

Required Element 5.2	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
which they teach or must meet the institution's policy for education and/or equivalent experience. b. Program faculty, including the program director, must show evidence of continuing competence and ongoing professional development appropriate to their teaching responsibilities. c. Program faculty and instructors must be provided orientation to the mission, goals and objectives of the nutrition and dietetics program, the ACEND Standards and required competencies. Program faculty must be trained in the use of distance education pedagogy and recommended practices.	 Describe the process used to ensure faculty's continued competence appropriate to the teaching responsibilities. Describe the orientation, including the process and timeline, for new program faculty members, and instructors to mission, goals, objectives and ACEND's accreditation standards and competencies. Provide a description and timeline for ongoing training of current faculty members and instructors. Provide a description of how faculty and instructors are trained on the use of distance education pedagogy and recommended practices. 	Examples of training provided to program faculty on the use of distance education pedagogy and recommended practices. Note: this training can be provided by the university of institution and not the program itself. [Programs applying for candidacy provide draft materials].	orientation). [Not required of programs applying for candidacy]. • Evidence, such as a curriculum vitae/resume, of the program faculty demonstrating credentials and continued competence appropriate to teaching responsibilities.

Required Element 5.3	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
All Programs: The requirements for program preceptors must include: a. The education and experience needed to provide appropriate guidance for supervised experiential learning. Preceptors must be licensed, as appropriate, to meet state and federal regulations or credentialed, as needed, in the area in which they are supervising students and must be qualified to serve as educators and professional role models. b. Orientation to the mission, goals and objectives of the nutrition and dietetics program, the ACEND Standards and required competencies.	 All Programs: Describe how program ensures preceptors meet state licensure laws and federal requirements. Note: Preceptors are not required by ACEND to hold an RDN or NDTR credential, unless required for their position. Describe the orientation, including the process and timeline, for new preceptors to mission, goals, objectives and ACEND's accreditation standards and competencies. 	Examples of orientation materials, such as handbook, orientation outline or checklist including orientation to mission, goals, objectives of the program, and the ACEND Standards and competencies. [Programs applying for candidacy provide draft materials].	Evidence that orientation has been completed [Not required of programs applying for candidacy]. Evidence of preceptor credentials appropriate to precepting responsibilities (use individual curriculum vitae/resume or optional template titled "Preceptor Qualifications").

Required Element 5.4	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
All programs:	All Programs:		All Programs:
Formal evaluation of program faculty and preceptors must routinely occur: a. The program must have a process for the periodic review, including input from students, of the effectiveness of faculty and preceptors.	 Describe the process used by the institution and/or the program for periodic review of faculty and preceptors, including opportunities for student input. Discuss how faculty members, instructors and preceptors receive feedback from evaluations and input from students. 		Samples of completed faculty and preceptor evaluations completed by students. [Not]
 Program faculty, instructors and preceptors must receive feedback, and training as needed, based on program evaluation and input from students. 	Describe how program, preceptor and student evaluations have influenced ongoing training provided to faculty members, instructors and preceptors.		applicable to programs applying for candidacy].

Standard 6: Supervised Experiential Learning Sites

The program must have policies and procedures to maintain written agreements with institutions, organizations and/or agencies providing supervised experiential learning to meet the competencies. The policies and procedures must address the selection and periodic evaluation of the adequacy and appropriateness of facilities to ensure that sites are able to provide supervised experiential learning compatible with the competencies that students are expected to achieve.

Required Element 6.1	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
All Programs: Supervised experiential learning site requirements: a. The institution/organization must establish policies that outline the issuance and maintenance of written affiliation agreements and the selection criteria, evaluation process and timeline for evaluation of the adequacy and appropriateness of supervised experiential learning facilities. b. Agreements must delineate the rights and responsibilities of both the sponsoring organization and affiliating institutions, organizations and/or agencies. c. Agreements must be signed by individuals with appropriate institutionally-assigned authority in advance of placing students.	 Summarize the selection criteria, evaluation process and timeline for evaluation of adequacy and appropriateness of supervised experiential learning sites including remote sites or sites chosen by students. If affiliation agreements are not available for any supervised experiential learning facility, please explain why (such as a site being part of the program's organization). If international experiences are provided, describe the selection criteria and evaluation process for those sites. If the international experiences are optional, and include competencies that students must attain, describe how those learning activities are comparable to those completed by the students who opt out of the international experiences. 	 All programs: List of all facilities in which current students are placed for supervised experiential learning (use the template titled "Preceptor and Facility Roster"). Note: This template is also used to demonstrate compliance with Standard 5, RE 5.1. It only has to be provided once in the appendices. Sample affiliation agreements/templates delineating rights and responsibilities of all parties and the educational purpose of affiliation. Policies and procedures that outline: The selection criteria, evaluation process and timeline for evaluation of adequacy and appropriateness of supervised experiential learning sites, including remote sites, sites selected by students and international sites. The maintenance of written agreements with institutions, organizations and/or agencies where students are placed for supervised experiential learning. 	Written agreements for all facilities where current students will be placed for supervised experiential learning throughout the academic year, signed by the appropriate individuals from each organization. [Not applicable to programs applying for candidacy]. Examples of completed facility evaluations [Not applicable to programs applying for candidacy].

Standard 7: Information to Prospective Students and the Public

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

Required Element 7.1	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
All Programs: Program policies, procedures, practices, and materials related to student recruitment and admission must comply with state and federal laws and regulations. Recruitment and admission practices must be applied fairly and consistently.	All Programs: Discuss how program policies, procedures, practices, and materials related to student recruitment and admission comply with state and federal laws and regulations. Note: The program must show how the policies used for recruitment and admission comply with state and federal laws and regulations. Only information under Required Element 7.3 is required to be on the program's website.		
	Note: ACEND requires that programs comply with ALL state and federal laws. ACEND Standards do not supersede state and federal laws.		

Required Element 7.2	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
All Programs: All information to prospective students and the public must be current, accurate and consistent. Each information source must provide a reference to where complete program information can be found.	 All Programs: Describe where complete program information can be found (i.e., website, brochure, handbook, etc.) and how program materials are updated to ensure accuracy and consistency. If the program's handbook contains the information for prospective students and the public, a statement on the program's website must state what required information can be found in the handbook and direct the viewer to the handbook. 	All Programs: Any printed materials, such as brochures or catalogs, that are used to publicize the program, if applicable [Programs applying for candidacy provide draft materials].	

Required Element 7.3	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
		include technological competence and skills needed to participate; equipment requirements; and any additional costs for distance programming.	
		Note for 7.3l If the program does not award credit for prior learning experiences, such as coursework or supervised practice hours, the program must indicate that it has no policy for assessing prior learning or competence on the website.	
		Note Partnerships:	
		All program information listed under Standard 7 must be housed on a single program website or have it readily available from the program's homepage, which could be on either institution's server.	

Standard 8: Policies and Procedures for Enrolled Students

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

Required Element 8.1	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
All Programs:	All Programs:	All Programs:	All Programs:
Programs are required to have policies and procedures for program operations including: a. Student Performance Monitoring: The program's system of monitoring student performance must provide for the early detection of academic difficulty and must take into consideration professional and ethical behavior and academic integrity of the student. b. Student Remediation and Retention: Concerns about a	 Describe the program's system of monitoring student performance and how it provides for the early detection of academic difficulty and takes into consideration professional and ethical behavior and academic integrity of the student. Discuss how and when students with minimal chances of success in the program are counseled into career paths that are appropriate to their ability. 	Website link to or copy of program policies related to admissions requirements, student performance monitoring, student retention, and supervised experiential learning documentation. [Programs applying for candidacy provide draft information].	 Student files with evidence of how the policies and procedures are being implemented. [Not applicable to programs applying for candidacy]. Examples of how
student's performance in meeting program requirements are	 Describe the program's procedures for tracking individual student's supervised experiential learning hours in 	Program's form used to track supervised experiential learning	retention and remediation.

addressed promptly and adequately to facilitate student's progression in the program.	professional work settings, simulation, case studies and role playing.	hours.	procedures have been applied, if applicable.
c. Supervised Experiential Learning Documentation: The program must establish procedures for tracking individual student's supervised experiential learning hours in professional			[Not applicable to programs applying for candidacy].
work settings and in alternate supervised experiential learning, such as simulation, case studies and role playing. Hours granted for prior learning, if given, also must be documented.			Note: RE 8.1b – The policy is being followed to assist the student as soon as their challenge or the concern is identified; timely support.
			Completed forms tracking supervised experiential learning hours for individual students. [Not applicable to programs applying for candidacy].

Required Element 8.2	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
All Programs: The following policies and procedures specific to nutrition and dietetics programs must be provided to students in a single comprehensive document, such as in a program handbook or on a program website: a. Insurance requirements, including those for professional liability. b. Liability for safety in travel to or from assigned areas. c. Injury or illness while in a facility for supervised experiential learning. d. Drug testing and criminal background checks, if required by the supervised experiential learning facilities. e. Requirement that students doing supervised experiential learning must not be used to replace employees. f. When students are paid compensation as part of the program, policies must be in place to define the compensation practices. g. The process for filing and handling complaints about the program from students and preceptors that includes recourse	 All Programs: Describe how and when written policies and procedures are provided to students enrolled in the program. State whether any complaints have been filed against the program during the past seven years that have gone above the level of the program director for resolution. [Not applicable to programs applying for candidacy]. Explain any additional details about implementation of policies that are not described in the policies. If the program offers an international rotation, information should describe policies and procedures specific to this experience. Note: For 8.2m, maximum time for completion should not be mistaken with ACEND's benchmark for program completion objective under Standard 2. The program must follow institutional policies for time to complete the program and if no institutional policies exist, the program must provide adequate time to 	 All Programs: Completed Policy and Procedure Checklist with location of all policies, including any institutional policies (use template "Policy and Procedure Checklist" template). Copy of or direct active link to program handbook where policies are located. [Programs applying for candidacy provide draft information]. Note: Policies and procedures indicated under Required Element 8.2 for the enrolled students/interns in the program, must be in one comprehensive document which may be a handbook, virtual manual or system or a program website. The program may link to institutional policies and procedures within that document. 	 All Programs: Examples of how prior learning is assessed for course or supervised-experiential learning hours/credit, if applicable. Examples of how retention and remediation procedures have been applied, if applicable. [Not applicable to programs applying for candidacy]. Note: RE 8.2k – The policy is provided to students and the policy

Required Element 8.2	Narrative to Support Achievement	Appendix Evidence	Onsite Evidence
to an administrator other than the program director and prevents retaliation. The program must maintain a record of student complaints for a period of seven years, including the resolution of complaints. h. Process for submission of written complaints to ACEND related to program noncompliance with ACEND accreditation standards after all other options with the program and institution have been exhausted. i. If the program grants credit or supervised experiential learning hours for students' prior learning, it must define procedures for evaluating equivalence of prior education or experience. Otherwise, the program must indicate that it has no policy for assessing prior learning or competence. j. Process for assessment of student learning and regular reports of performance and progress. k. Program retention and remediation procedures; students must have access to remedial instruction such as tutorial support. l. Disciplinary/termination procedures. m. Graduation and/or program completion requirements, including maximum amount of time allowed for completing program requirements applicable at the time student enrolls. n. Verification statement requirements and procedures ensuring that all students completing requirements established by the	Narrative to Support Achievement complete program requirements. ACEND is recommending no less than five (5) years for program completion.	Appendix Evidence	includes remedial instruction and/or tutoring. • Examples of how disciplinary/termination procedures have been applied, if applicable. [Not applicable to programs applying for candidacy]. • Documents showing adherence to outlined procedures if complaints have been received. [Not applicable to programs applying for candidacy]. • Chronological record of students' complaints, including the resolution, for past seven years. [Not applicable to programs
program receive verification statements. o. Programs using distance instruction and/or online testing must			applying for candidacy].
employ strategies to verify the identity of a student. p. Withdrawal and refund of tuition and fees.			
q. Program schedule, vacations, holidays and leaves of absence.			
r. Protection of privacy of student information, including			
information used for identifying students in distance learning.			
s. Student access to their own student file.			
t. Access to student support services, including health services,			
counseling, tutoring and testing and financial aid resources.			

APPENDIX A: GLOSSARY

Accelerated Degree Program Programs that allow students to start the program at the undergraduate level and complete with at least a graduate degree.

Accreditation A voluntary, non-governmental system of evaluation which includes a self-study report and an on-site evaluation by peer reviewers that is used to verify the quality of service

provided by academic programs and institutions and to protect the public interest.

Accreditation Action Any decision made by ACEND affecting the accreditation status of a program. These actions are: 1) grant pre-candidacy, 2) grant candidacy, 3) grant accreditation, 4) continue

accreditation, 5) continue accreditation on a reduced term, 6) place on probation, 7) withdraw accreditation, or 8) deny candidacy or accreditation. See the ACEND Policy and

Procedure Manual for further details about each accreditation action.

Accreditation Rating A rating (meets or does not meet) used for evaluating program compliance with ACEND Standards.

Accreditation Term The maximum amount of time that ACEND allows programs to remain accredited. ACEND has a 7-year accreditation term.

ACEND® The Accreditation Council for Education in Nutrition and Dietetics is recognized by the US Department of Education as the specialized program accrediting agency for education

programs in nutrition and dietetics. ACEND operates administratively autonomously from the Academy of Nutrition and Dietetics.

ACEND Board The governing unit of ACEND that grants final accreditation awards.

Additional Evidence Needed A rating used for evaluating compliance with ACEND Standards that indicates that one or more compliance problems with an ACEND Standard have been identified, and that

the program needs to provide more explanation or documentation to demonstrate compliance.

Affiliation Agreement A legally binding document between an education program and a person or organization, who is providing supervised practice or experiential learning experiences, which

delineates the responsibilities of all parties and the relationships between them.

All Required Evidence Provided

A rating used for evaluating compliance with ACEND Standards that indicates there is sufficient evidence to demonstrate that the program meets the Standards.

Alternate Experience An activity that resembles or imitates real-life work experiences through guided, participative experiences that evoke or replace substantial aspects of the real world in a fully

interactive manner. It is used to demonstrate competence and measure learning.

Appeal The right and process available to a program or institution for a review of an adverse action.

Case Study Written scenario based on realistic experiences and data that can be used to demonstrate competence in a particular area, by requiring solutions to problems that involve

recommending appropriate strategies for resolving the problems, weighing the pros and cons of options or strategies, and formulating a rationale for the final resolution.

Clinical Workflow The sequence of processes that are performed within a healthcare establishment, including both administrative and clinical work. For example, it could be: a) the workflow

between a doctor, dietitian or patient/client or the workflow performed during a patient/client visit, or b) the workflow of healthcare information in electronic or paper formats

among people at a clinical practice.

Code of EthicsA formal statement of the values and ethical principles guiding a profession outlining commitments and obligations of the practitioner to patients, clients, society, self and the

profession.

Commission on Dietetic Registration (CDR)

The credentialing agency, recognized by the National Commission for Certifying Agencies, who serves the public by establishing and enforcing standards for certification/recertification for professionals in nutrition and dietetics and issuing credentials to individuals who meet these standards.

Competence An individual's skills and abilities.

Competency Synthesis of knowledge, skills, abilities, behaviors and other characteristics an individual must demonstrate in order to function successfully in practice; Performance of skills,

abilities and behaviors that are used as a predictor of professional performance.

Competency Assessment The process of evaluating student demonstration of mastery of required competencies.

Competency Based Education (CBE)

Form of education in which the curriculum is based on professional roles and student evaluation includes demonstrated performance in some aspects of that role.

Compliance The extent to which a program or institution conforms and adheres to accreditation standards.

Combined Program A program that combines an ACEND accredited program, such as a nutrition and dietetics internship, with another non-ACEND accredited programs such as a master's degree

program.

Computer Assisted Learning (CAL)

Any use of computers to aid or support the education or training of people. CAL can test attainment at any point, provide faster or slower routes through the material for

people of different aptitudes, and can maintain a progress record for the instructor.

Credentialing The formal recognition of professional or technical competence through registration, certification or licensure.

Critical Thinking The ability to objectively analyze and evaluate information gathered from, or generated by, observation, experience, reflection, reasoning, or communication to form beliefs and

guide action about an issue or situation.

Determinants of Health Factors that contribute to a person's current state of health such as biology and genetics, individual behavior, social environment, physical environment, economics, health

care, and education.

Didactic InstructionTeaching approaches that rely on information being provided to students in a structured manner through a second-hand source such as a teacher, readings or other media

rather than through demonstration, laboratory or other forms of experiential learning.

Directing Setting outcomes, defining results, providing resources and overseeing managers who will help assure the objectives are achieved.

Distance Education Delivery of didactic instruction in the professional curriculum where students are physically separated from instructors and/or program director learning synchronously or

asynchronously through live or recorded media with regular and substantive interaction between students and instructor and/or program director.

Effective Leadership When an ACEND-accredited program is well managed, including that data are collected, students are taken care of and responded to in a timely manner, and review of

program documentation is completed.

Enhanced Competency Competency that increases the scope of practice compared to what is currently being taught or practiced.

Entry-Level The term used to specify performance expected of the nutrition and dietetics practitioner in the first three years of practice.

Environmental Supports Policies, procedures, protocols, validated tools and credentialed staff such as registered dietitian nutritionists.

Evaluation Team (see *Program Reviewers*)

Evidence-Based Using documented scientific evidence to inform professional practice.

Evidence-Informed Using the best available research and practice knowledge to inform professional practice.

Experiential Learning An approach to learning that relies on students obtaining knowledge and skills through direct experience usually outside of the classroom in real-world settings, includes

reflection and self-analysis, and provides opportunities for students to learn from their success and mistakes.

External Stakeholders Individuals not directly involved in an education program, such as employers of graduates, nutrition and dietetics practitioners, professionals from other disciplines and

communities of interest and other program directors.

Formative Assessment Evaluation of student learning at particular points in time during the instructional period, such as the midpoint of the activity. A primary focus of formative data is to identify

areas that may need improvement prior to completion of the instructional unit or program.

Future Education Model Graduate Program in Nutrition and Dietetics (GP)

A graduate degree level education program that provides the required nutrition and dietetics coursework and supervised experiential learning to meet ACEND's competency requirements to be eligible to become a Registered Dietitian Nutritionist (RDN). A verification statement is issued to individuals who successfully complete the program in order

to be eligible to take the CDR RDN credentialing examination.

Goal A general statement of what a program must achieve to support its mission. Achievement of a goal should be defined by a series of objectives that logically relate to and

support the goal. In nutrition and dietetics education, program goals are generally stated in terms of the impact of the program on graduates and their contributions to the

nutrition and dietetics profession.

Informatics (see "Nutrition Informatics")

Institutional Accreditation The evaluation and accreditation of an institution, usually by a regional or national accreditor.

Integrated Supervised Experiential Learning (in Nutrition and Dietetics)

A curriculum design model whereby didactic coursework is combined with experiential learning in real-world and simulated settings. The curriculum is designed so that the learning that takes place within the classroom is then applied in a setting that is overseen by a preceptor. The key element in experiential learning is that the entire didactic learning does not come first within the program, followed entirely by experiential learning, but that both components are woven together throughout the educational

program.

For example, during an introduction to community nutrition course, students might learn about low literacy in the classroom (didactic) followed by developing a low literacy brochure as a course assignment (experiential learning) and later evaluating the effectiveness of the brochure in a community setting such as the local food pantry (experiential

learning).

Interim Report Narrative and/or statistical report sent by the program between accreditation reviews for the purpose of updating ACEND on progress towards meeting Standards.

Interprofessional Education Occasions when two or more professions learn from and about each other to improve collaboration and the quality of services provided.

Learning Activities Projects, assignments, case studies, group activities, etc. designed by an educator or preceptor to engage students in the learning process or that permit interns to

demonstrate competence.

Learning Objective Specific activities and qualitative or quantitative target measures that will be used to assess overall student achievement of knowledge and/or competencies (the expected or

desired result).

Learning ResourcesTools and materials (textbooks, study guides, workbooks, computers, software, journals, etc.) that are available to help enhance student learning.

Licensure A process by which an agency or government grants permission to an individual to engage in a given occupation upon demonstrating that the applicant has attained the

minimal degree of competency necessary to ensure that the public health, safety and welfare are reasonably well protected.

Logic The ability to reason, analyze and construct valid arguments.

Major Program Change (see "Substantive Program Change")

Managing Determining how, when and by whom tasks are to be completed and supervising employees to assure they are completed.

Management Plans Strategies for running a program on a day-to-day basis that relate to achieving or maintaining program goals. Management plans may change from year to year, whereas a

program's mission and goals will remain constant over time.

Mission Statement A formal statement of an organization's core purpose and focus that typically remains unchanged over time. Achievement of the mission should be provable by the

achievement of goals which are in turn supported by specific program objectives. In nutrition and dietetics education, the mission statement typically distinguishes it from other programs in the sponsoring organization, is compatible with the mission statement or philosophy of the sponsoring organization and states its preparation of nutrition

and dietetics practitioners.

National Advisory Committee on Institutional Quality and Integrity (NACIQI)

The committee that advises the U.S. Secretary of Education on issues related to accreditation including the recognition of accrediting agencies such as ACEND.

Nutraceutical pharmacological agents

Any substance that is a food or part of a food and provides medical, health or therapeutic benefits, including the prevention and treatment of disease. Examples include dietary supplements, vitamins and minerals, and oral nutritional supplements.

[A nutraceutical is defined as any substance that is a food or part of a food and provides medical or health benefits, including the prevention and treatment of disease (DeFelice, 1994). From: Molecular Breeding and Nutritional Aspects of Buckwheat, 2016.]

Nutrition-related pharmacotherapy

Medical treatment using nutrition and/or medication; the recommendation to add, remove and/or modify medications that are nutrition-related such as enteral or parenteral nutrition or medications such as those for appetite or glucose control.

Nutrition and Dietetics Educators and Preceptors (NDEP)

An organizational unit of the Academy of Nutrition and Dietetics that serves the needs of members who are interested in or engaged in educating nutrition and dietetics practitioners.

Nutrition Care Process A systematic problem-solving method consisting of four distinct steps: (a) Nutrition Assessment, (b) Nutrition Diagnosis, (c) Nutrition Intervention, and (d) Nutrition Monitoring

and Evaluation that are used for critically-thinking through decisions to address nutrition-related problems and provide safe and effective quality nutrition care.

Nutrition Informatics Refer to page 53 of the Academy's Definition of Terms List.

Onsite The intern or student and preceptor are in the same physical location. For example, telehealth can be considered on-site if the preceptor and student or intern are in person at

the same location; however, if the student or intern and the preceptor are virtual, this would not be considered onsite.

Partnership Two or more independent organizations, one of which is a regionally-accredited college or university, working together under a formal written agreement to sponsor a single

program. Partnerships only apply to Future Education Model Degree Programs.

People First Language Language used to speak appropriately and respectfully about an individual with a disability. People first language emphasizes the person first not the disability. For example,

when referring to a person with a disability, refer to the person first by using phrases such as: "a person who ...", "a person with ..." or, "person who has..." A CDC-prepared handout indicates People First Language and Language to Avoid and is found here: https://www.cdc.gov/ncbddd/disabilityandhealth/pdf/communicating-with-people.pdf.

An example of people-first language is "A person with diabetes..." rather than "A diabetic..."

People with Disabilities The Americans with Disabilities Act (ADA) defines a person with a disability as a person who has a physical or mental impairment that substantially limits one or more major life

activity. This includes people who have a record of such an impairment, even if they do not currently have a disability. It also includes individuals who do not have a disability

but are regarded as having a disability.

Practice Illustrations Examples to illustrate day-to-day performance of the competency.

Preceptor A practitioner who serves as faculty for students during supervised experiential learning by overseeing practical experiences, providing one-on-one training, and modeling

professional behaviors and values.

Prior Learning Assessment An evaluation that grants credit or hours of experience for content or skills that the student has previously mastered.

Program A formal plan of study leading to a degree and/or verification statement that is accredited by ACEND. The GP (Graduate Program in Nutrition and Dietetics) is a Future

Education Model program type.

Program Director The individual responsible for assuring that accreditation standards, policies and procedures are met at an ACEND-accredited program.

Program Evaluation The analysis and use of data by educators or administrators to make decisions about improvements in a program. This evaluation typically compares the intended results

(program objectives) with the actual results (program outcomes).

Program Length The amount of time in calendar years (months for DI programs) for completion of the program.

Program Objective A statement of the expected or desired program results that includes qualitative or quantitative measures to evaluate program outcomes.

Program Outcome The actual result of program activities as measured by the program objective.

Program Reviewers A group of individuals appointed by ACEND with the task of reviewing program reports and/or visiting programs for the purpose of verifying information in the Self-Study

Report.

Qualitative Measure A subjective measure of quality, i.e., how well students/ graduates perform, such as a rating of performance.

Quantitative Measure An objective measure of quantity, i.e., how many students/graduates achieve an outcome, such as a percentage or number.

Readily Available When information can be accessed by the public without disclosure of identity or contact information and is no more than three 'clicks' away from the program's home

webpage

Regional Accreditor An agency that accredits institutions of higher education (e.g., colleges and universities). In the United States, the regional agencies (Middle States Association of Colleges and

Schools, New England Association of Schools and Colleges, North Central Association of Colleges and Schools, Northwest Commission on Colleges and Universities, Southern

Association of Colleges and Schools, and Western Association of Schools and College) generally accredit institutions that are within specific geographic areas.

Regular and Substantive Interaction

Engaging students on a regular basis in teaching, learning and assessment, consistent with the content under discussion, and includes at least two of the following: providing direct instruction; assessing or providing feedback on a student's coursework; providing information or responding to questions about the content of a course or competency; facilitating a group discussion regarding the content of a course or competency; or other instructional activities approved by ACEND. A regular and substantive interaction between the student and the program director/instructor must be reasonably frequent and consistent (at least once per week; may include advising), primarily initiated by the program director/instructor, related to the dietetic program/course, and provide useful/meaningful information to the student.

Required Element Subcomponent of the Accreditation Standards that programs must meet to show compliance with the Standard.

Research An activity that includes all components of the scientific method, i.e., statement of the problem, data collection, analysis and interpretation of results; and decision-making

based on results. Activities may include community needs assessment, food science experiments, product development/improvement, continuous-quality improvement

activities, or other research projects including master theses and doctoral dissertations.

Role-Playing A type of alternate experience activity that involves performing a particular role and assuming the attitudes, behaviors and skills expected of someone in that role that can be

used to demonstrate competence in a particular area.

Service Learning A form of education that occurs through community service followed by assessment and self-reflection; a form of experiential learning. Students providing community service

without the assessment and reflection components would be providing volunteer hours rather than participating in service learning.

Shadowing (job)An activity that provides students with the opportunity to observe an experienced employee in the workplace performing routine job tasks.

Shows Level of assessment of performance indicators or competencies (also see Knows and Does). The student shows application of knowledge; can be assessed in actual work

settings or through simulation, standardized patient, role play or case studies in artificial work settings.

Simulations A type of alternate experience that imitates real situations or processes that can be used to demonstrate competence in a particular area.

Site Visit The part of an accreditation review in which individuals, appointed by ACEND, visit a program for the purpose of verifying information in the Self-Study Report.

Sponsoring Institution The organization or entity that is responsible for a nutrition and dietetics program.

Standards Minimum levels of quality on which ACEND evaluations and accreditation decisions are based.

Student Identified Site When students are required to find their own supervised experiential learning sites for ≥ 10% of supervised experiential learning hours.

Substantive Program Change

Changes in an ACEND accredited program's administration, structure or other aspects as defined in the ACEND Policy and Procedure Manual.

Summative Assessment Evalu

Evaluation of student learning at the end of an instructional unit or program.

Supervised Experiential Learning (SEL)

Planned experiential learning activities in which students perform tasks under supervision to demonstrate mastery of ACEND competencies. Experiential learning activities can include case studies, role playing, simulation, and practice in professional work settings.

Telehealth

Refer to page 59 of the Academy's Definition of Terms List.

Verification Statement

A form completed by the program director, indicating that a student has successfully fulfilled the requirements for completion of an ACEND-accredited program.

Waived Point-of-Care Laboratory Testing (POCT)

A test that is used in a diagnostic setting that is remote from a centralized laboratory facility. Waived testing is laboratory testing that employs specific test methods designated under the Clinical Laboratory Improvement Amendments (CLIA) of the Food and Drug Administration (FDA) as "waived." Waived testing is designated by CLIA as simple tests that carry a low risk for an incorrect result.

APPENDIX B: GUIDELINES FOR USING THE ACEND LOGO

The Accreditation Council for Education in Nutrition and Dietetics (ACEND) is the national agency for accreditation of nutrition and dietetics education programs. The ACEND Logo is the exclusive property of the Academy of Nutrition and Dietetics (Academy) and is protected by law. It may not be reproduced or published outside of the authorized uses listed below without prior written approval from the Accreditation Council for Education in Nutrition and Dietetics of the Academy of Nutrition and Dietetics.

Accreditation Council for Education in Nutrition and Dietetics



"ACEND Logo"

These guidelines are for use by ACEND-accredited programs in nutrition and dietetics wishing to use the ACEND logo to disclose their accreditation status in promotional, advertising, instructional or reference materials, or on their web sites. Any person or entity using the ACEND Logo in whole or in part, acknowledges that Academy of Nutrition and Dietetics is the sole owner of the Logo and agrees that it will not interfere with Academy's rights in the Logo, including challenging Academy or ACEND's use, registration of, or application to register such Logo alone or in combination with other words, anywhere in the world, and that it will not harm, misuse, or bring into disrepute any AND trademark or service mark. The goodwill derived from using any part of an Academy trademark or service mark exclusively inures to the benefit of and belongs to Academy. Except for the limited right to use as expressly permitted under these Guidelines, no other rights of any kind are granted hereunder, by implication or otherwise. If there are any questions regarding these guidelines or any authorized user would like to receive electronic copies of the ACEND Logo please contact an ACEND representative:

Accreditation Council for Education in Nutrition and Dietetics Academy of Nutrition and Dietetics 120 South Riverside Plaza, Suite 2190 Chicago, IL 60606-6995

Tel: (312) 899-0040, ext. 5400

Fax: (312) 899-4817

E-Mail: ACEND@eatright.org URL: www.eatrightPRO.org/ACEND

A. Authorized Use of the ACEND Logo and ACEND® Registration Mark

1. Identification as an ACEND-Accredited Degree Program in Nutrition and Dietetics: An ACEND-accredited degree program in nutrition and dietetics may use the ACEND Logo in printed and electronic formats. Such use must always be in close conjunction with a prescribed statement identifying the name of institution's nutrition and dietetics program and its accreditation status. The prescribed statements, as specified below from Section 2.5 of the Policy and Procedure Manual, should be prominently disclosed by the dietetics program in its promotional and descriptive materials, such as its catalog or bulletin. The use of the term ACEND® shall display the appropriate registration designation, i.e.,®.

a. Accreditation. References to a program that is accredited should state only the following:

Accreditation Council for Education in Nutrition and Dietetics

the accrediting agency for the

[Name of Institution]'s [Accredited Program Name] is accredited by the Accreditation Council for Education in Nutrition and Dietetics of the

Academy of Nutrition and Dietetics 120 South Riverside Plaza, Suite 2190

Chicago, IL 60606-6995, (312) 899-0040 ext. 5400.

Http://www.eatrightPRO.org/ACEND.

eqr Academy of Nutrition right. and Dietetics

b. Pre-accreditation (Candidate Status). References to a program that has been granted candidate status should display the following accreditation statement:

Accreditation Council for Education in Nutrition and Dietetics

[Name of Institution]'s [Accredited Program Name] has been granted candidate status by the Accreditation Council for Education in Nutrition and Dietetics of

the Academy of Nutrition and Dietetics 120 South Riverside Plaza, Suite 2190

Chicago, IL 60606-6995, (312) 899-0040 ext. 5400.

Http://www.eatrightPRO.org/ACEND.

the accrediting agency for the
Academy of Nutrition
right. and Dietetics

A new program that has been determined to be eligible to enroll students or accepting interns as the result of an on-site evaluation visit but has not had a graduating class may be granted candidate status. The granting of candidate status denotes a developmental program, which is expected to mature in accord with stated plans and within a defined time period.

Reasonable assurances are expected to be provided that the program may become accredited as programmatic experiences are gained, generally, by the time the first class has graduated.

Graduates of a class designated as having candidate status have the same rights and privileges as graduates of an accredited program.

c. Probation. Reference to a program that has been placed in a probationary status should state the following:

Accreditation Council for Education in Nutrition and Dietetics



The accreditation of [Name of Institution]'s [Accredited Program Name] has been placed on probationary status by the Accreditation Council for Education in Nutrition and Dietetics of the Academy of Nutrition and Dietetics

120 South Riverside Plaza, Suite 2190

Chicago, IL 60606-6995, (312) 899-0040 ext. 5400.

Http://www.eatrightPRO.org/ACEND.

For an explanation of probationary status, consult the director of the nutrition and dietetics program.

B. Unauthorized Use of the ACEND Logo

1. ACEND Logo: You may not use the ACEND Logo, Academy Logo or any other Academy- or ACEND--owned graphic symbol in connection with web sites, products, packaging, manuals,

promotional/advertising materials, presentations or for any other purpose, except as authorized above without prior written approval from the ACEND.

- 2. Company, Product, or Service Name: You may not use or register, in whole or in part the ACEND Logo, Academy Logo or any other Academy- or ACEND-owned graphic symbol or an alteration thereof, as or as part of a company name, trade name, product name, or service name except as specifically noted in these guidelines.
- 3. Variations, Takeoffs or Abbreviations: You may not alter or use the ACEND Logo, Academy Logo or any other Academy- or ACEND-owned graphic symbol as design elements or incorporate them into any other design, graphic or illustration for any purpose.
- **4. Disparaging Manner:** You may not use an ACEND Logo, Academy Logo or any other Academy- or ACEND-owned graphic symbol in a disparaging manner or in any manner that would impinge upon the integrity of ACEND or the Academy.
- **5. Endorsement or Sponsorship:** You may not use ACEND Logo, Academy Logo or any other Academy- or ACEND--owned graphic symbol in a manner that would indicate or imply ACEND's or the Academy's affiliation with or endorsement, sponsorship or support of a third-party product or service.
- **6. Merchandise Items:** You may not manufacture, sell or give-away merchandise items, such as T-shirts and mugs, bearing the ACEND Logo, Academy Logo or any other Academy- or ACEND-owned graphic symbol except pursuant to express, prior written approval of ACEND and/or the Academy.
- 7. Website Link: You may not use the ACEND Logo to link to a website.

APPENDIX C: ACEND DOCUMENT RETENTION PROCEDURES

A. VERIFICATION STATEMENTS AND TRANSCRIPTS

- 1. **Verification Statements for Program Graduates:** Verification statements must be signed in an ink color other than black, or with a digital signature that can be authenticated and does not expire. If signed electronically, the verification statement must be saved as a locked PDF after signing to prevent future modifications. As soon as possible after program completion, program graduates should be issued six paper copies or provided a copy via email with an authenticated digital signature, which is the most secure method, or a hand-signed copy scanned in color. ACEND requires that accredited programs retain indefinitely all verification statements that they award. Verification statements may be stored in hard copy or electronically. If documents are stored electronically, they should be scanned and transmitted in color or with an authenticated digital signature so that authenticity can be verified.
- 2. **Transcripts for Program Graduates (CP, DT, DI granting graduate degree, DPD, FDE, GP):** All programs must have available for review during accreditation site visits final transcripts, for graduates from the past seven years, that state the degree and date conferred or a letter from the registrar or dean confirming the individual met all academic degree requirements and financial obligations and is cleared to graduate. They can be stored in hard copy, online through the university system or in CDR's Registration Eligibility Processing System (REPS). On site, ACEND program reviewers do not need to see "official" transcripts, only transcripts that are not marked as "unofficial" per CDR requirements. Refer to Question 4 at https://www.cdrnet.org/reps-faq

3. Nutrition and Dietetics Internship Admission Documents:

- a. The following must be provided by each intern before they begin the program.
 - 1. A signed valid DPD verification statement. An original paper copy of the verification statement or color electronic copy is acceptable. A valid verification statement must: have a signature; a completion date that does not predate the degree date; have all required fields filled in; and a signature date that matches the electronic signature date, if applicable.
 - 2. An official transcript stating the degree and date conferred. A transcript submitted through DICAS may be used, if it is an official transcript and includes the date the degree was awarded. Alternatively, the following can be used provided the degree conferral date precedes the date of the start of the internship: a letter on university letterhead from the registrar or dean confirming the individual has met all financial obligations and academic degree requirements, including thesis if applicable, and stating the date the degree was conferred.
- b. The following must be retained for seven years by the DI Program and available for review for current interns and graduates.
 - 1. The DPD verification statement
 - 2. Evidence of degree conferral from a regionally accredited institution
 - a. If these documents have been uploaded into REPS, the program may access them through REPS for accreditation review, if needed. However, documentation for the current class of interns that has not been uploaded into REPS should be retained until they have been uploaded. After CDR and ACEND requirements have been met, transcripts and verification statements of admitted students should be stored or destroyed according to institutional policies.
 - b. For individuals with a degree from an institution outside the US, a Foreign Degree Equivalency statement from an Independent Foreign Degree evaluation agency approved by CDR confirming the graduate's degree is equivalent to at least a bachelor's degree from a US regionally accredited college or university can replace the official transcript.
- 4. **Graduate Program in Nutrition and Dietetics Admission Documents:** If the program accepts a student with a valid DPD verification statement, the program must upload and retain the DPD verification statement into the REPS system.

B. COMPLAINTS

1. The program must maintain a chronological record of complaints from students and others, including the resolution, for a period of seven years.

C. OTHER DOCUMENTS

ACEND does not prescribe the additional documents that the program must retain. However, the program needs to retain sufficient evidence to demonstrate ongoing program evaluation and curriculum assessment, compliance with the standards and adherence to program policies. Each program needs to determine what evidence will best document these practices of the program and support the information provided in the next self-study report.

Programs should consider retaining documents such as completed surveys, meeting minutes, advising documents, applications for admitted students, assessment of prior learning documents and meeting minutes for the seven-year period since the last review to have available onsite during the site visit review. In addition, programs should consider retaining copies of syllabi, student files, examples of projects, tests and evaluations, orientation and training records and affiliation agreements for at least the past several years to have available onsite during the site visit review. Records may be stored electronically. For the documents that are more than seven years old, the programs should follow the institution's record retention policy.

APPENDIX D: GRADUATE PROGRAM (GP) IN NUTRITION AND DIETETICS: COMPETENCIES, PERFORMANCE INDICATORS, LEARNING ACTIVITIES, PRACTICE ILLUSTRATIONS AND ASSESSMENT STRATEGIES

* Denotes an enhanced competency

	GP Unit 1: Foundational Knowledge Applies foundational sciences to food and nutrition knowledge to meet the needs of individuals, groups, and organizations.				
Competencies	Performance Indicators	Learning Activities and Practice Illustrations	Demonstration/Assessment		
1.1 Applies an understanding of environmental, molecular factors (e.g., genes, proteins, metabolites) and food in the development and management of disease. (S)	 1.1.1 Analyzes the usefulness and limitations of epidemiological, clinical and other study designs and identifies trends in diet and disease. (S) 1.1.2 Demonstrates general understanding of nutrition and genetics, as it relates to health conditions. (K) 1.1.3 Communicates epidemiological evidence related to the relationship between diet and the development of disease. (S) 1.1.4 Demonstrates an understanding of research techniques and processes used to study the relationship between molecules (e.g., genes, proteins, metabolites) and microbes with disease states. (K) 1.1.5 Identifies the influence of food consumption on the development of diseases. (K) 	 Review epidemiological data from a data set (e.g., health department) and determine prevalence of disease. Evaluate client/patient and environmental characteristics that may contribute to the development of disease (e.g., obesity, hypertension, diabetes, cancer). Create client/patient education materials incorporating the effects of genetics and diet on the development of chronic diseases. Review and analyze research papers related to molecules and microbes to make an informed data driven opinions of the impact of genetics and diet on disease states. Use research-based evidence to identify a relationship between a specific gene-nutrient interaction to identify patients at a higher risk for developing a chronic disease (e.g., hypertension, obesity, diabetes, hypercholesterolemia). Communicates epidemiological evidence related to the relationship between diet and the development of disease. Utilize evidence-based guidelines to develop, improve or recommend changes to a public health program based on the population and common genetic disposition. Apply knowledge of genetic testing and impact on diet when educating others or when providing counseling services. (e.g., Phenylketonuria (PKU), cystic fibrosis, mitochondrial) Tailor diet plan, diet prescription and nutritional recommendations based on genetic predisposition and disease state. Identify potential genetic risk factors and health condition based on laboratory findings (e.g., PKU, microorganisms, elevated LDH, low levels of vitamin D) and understand the impact of the findings on disease and health. Provide diet counseling based on client's/patient's family history, risk factors and epidemiology factors. Explain how environmental and genetic factors impact disease development and develop nutrition goals/interventions that address these factors. Discuss recent health and nutrition news in the popular press with clients. 	Assessment Types Essay, presentation (poster, written, verbal, etc.), scenarios/case studies, counseling role playing, research studies • Analyze client food record. • Complete a survey for peer reviewed epidemiological research study related to the food environment, diet and the development of disease.		

GP Unit 1: Foundational Knowledge Applies foundational sciences to food and nutrition knowledge to meet the needs of individuals, groups, and organizations.				
Competencies	Performance Indicators	Learning Activities and Practice Illustrations	Demonstration/Assessment	
1.1 (cont.)		Explain how environmental exposure/consumption affects the health of patient.		
Applies an understanding of anatomy, physiology, and biochemistry. (S)	 1.2.1 Analyzes the impact of food and nutrition on physiological processes. (S) 1.2.2 Integrates knowledge of anatomy, physiology, and biochemistry to make decisions related to nutrition care. (S) 	 Apply knowledge related to digestion, absorption and metabolism to disease states. Assess the physiological impact of the elements in nutrition support and manipulate these elements for the desired physiological outcomes. Demonstrate how body mechanics work and how it is related to food. Use appropriate anatomy and physiology terminology in client/patient records and other documentation. Describe pathophysiology of a disease state and how it applies to medical nutrition therapy. Communicate an understanding of the human body and the impact of food and nutrition on body systems. Explain micro and macro neutralization in the body. Describe in detail etymology, signs, symptoms, etc. of disease state and the nutrition concerns for the specific disease. Understand the healing process and nutrients needed to promote growth, repair and healing. 	Case studies, presentations, chart review, create or present patient education material Case study discussion • Identify potential future micronutrient deficiencies in a patient with a surgically altered gut. • Evaluate and discuss possible complications to a patient who has undergone bariatric surgery, who have diabetes, cardiac disease, etc. • Examine the impact of the disease on the pancreas and how food intake impacts the physiological process of that organ and disease management. • Explain why lactase deficiency produces GI disturbances for the patient who consumes lactose. • Understand liver function and how the liver processes drugs and toxins in order to evaluate the effect of various dietary supplements on an individual's nutritional and health status. • Explain why a sodium restriction would be important for a client/patient with hypertension.	

GP Unit 1: Foundational Knowledge

Applies foundational sciences to food and nutrition knowledge to meet the needs of individuals, groups, and organizations.

Competencies	Performance Indicators	Learning Activities and Practice Illustrations	Demonstration/Assessment
Applies knowledge of microbiology and food safety. (S)	 1.3.1 Applies food safety principles of microbiological food spoilage and strategies for controlling microbial growth. (S) 1.3.2 Implements key principles and practices to make foods safe for consumption at all stages during the flow of food. (S) 	 Create a HACCP plan and explain why a step is a hazard that needs to be controlled and the mechanism and reason for effectiveness for the controls. Create a food safety policy. Conduct a food safety inspection in a kitchen and make recommendation for changes or improvements in food preparation and storage protocol. Educate clients/patients and staff members on food contamination, microbial development and proper food handling and storage. Take action to ensure safe food handling practices that follow the flow of food throughout the food service system. Explain why specific populations (e.g., elderly, young, underserviced, developing nation) are at risk of foodborne illness. 	Case studies, multiple choose or short answer questions, develop written / education material, presentation/in-service, laboratory experiment, review real cases of documented foodborne illness.
1.4 Integrates knowledge of chemistry and food science as it pertains to food and nutrition product development and when making modifications to food. (S)	 1.4.1 Analyzes the role of fundamental chemistry and organic chemistry principles on food, human health and metabolism. (S) 1.4.2 Integrates nutritional biochemistry knowledge to make informed food and nutrition decisions for optimal health. (S) 1.4.3 Evaluates the chemical nature and composition of food on food quality, acceptability and compatibility. (S) 	 Analyze metabolic impact of disease, comorbidities and complications, and develop a nutrition prescription that addresses altered metabolism. Discuss the effects of storage on vitamins in food and other aspects of food chemistry including antioxidants. Select appropriate formulas or feeding products for individuals with special needs. Apply technical knowledge in the development of new food products. Make recommendations for substitution of ingredients that modify target nutrients (e.g., low fat, wheat free, allergies) without sacrificing characteristics of the food product. 	Case studies, multiple choose or short answer questions • Develop and manage a Capstone/Theme meal project. • Create a food label. • Write technical papers on food production or product development.

	P Unit 1: Foundational Knowledge pplies foundational sciences to food and nutrition knowledge to meet the needs of individuals, groups, and organizations.				
Competencies	Performance Indicators	Learning Activities and Practice Illustrations	Demonstration/Assessment		
Applies knowledge of patho-physiology and nutritional biochemistry to physiology, health and disease. (S)	 1.5.1 Examines nutritional biochemical indicators specific to the disease process. (K) 1.5.2 Interprets and analyzes the effect of diet, fluids, electrolytes and nutritional status on the development and progress of the disease process. (S) 1.5.3 Interprets and analyzes the effects of disease, clinical condition and treatment on nutritional health status. (S) 1.5.4 Analyzes the correlation between mental health conditions and nutritional health. (S) 	 Calculate fluid and caloric needs for client/patient. Develop and modify medical nutrition therapy for clients/patients based on pathophysiology and biochemistry findings. Explain how nutrition could affect disease progression. Review evidence-based literature and research and identify the impact of nutrition deficiency on mental disorders. Review research findings and evidence-based literature related the physiological process through the lifecycle (e.g., nutrition health, progress of heart disease, the lactation process). 	Case studies, meal / menu planning, nutrition order, presentation, field placement, role play • Present a case study with abnormal laboratory finds. • Make dietary recommendations for a breastfeeding mother. • Explain the lactation physiological process. • Provide counseling to clients/patients with eating disorders.		
Applies knowledge of social, psychological and environmental aspects of eating and food. (S)	 1.6.1 Formulates food and nutrition services considering psychological and social factors to meet the needs of individuals, communities and populations. (S) 1.6.2 Articulates the impact of nutritional health on psychiatric disorders. (S) 1.6.3 Integrates knowledge of maximizing sustainability, food and water waste, reusable/ biodegradable items, local and global produce sourcing and access to food. (S) 1.6.4 Analyzes the environmental factors affecting access to services and/or adequate nutrition. (S) 	 Demonstrate all eating is psychologically and socially rooted (e.g., provide counseling for eating disorder, nutrition/weight-loss, elderly population, oncology). Encourage and utilize mindful eating techniques. Compare how certain antidepressants or atypical antipsychotic medications have nutrient interactions. Develop effective public health assessment/screening tools. Take into consideration the client's/patient's situation and environment (e.g., homelessness, community, home-life, disability accommodations); and how these factors affect person's ability to meet basic nutritional needs. Explore the geographic aspects of food production, consumption and post-consumption. Identify disease outbreaks and environmental factors/events which impact food supply. Identify influences that affect health and nutrition, including physical/geographic circumstances (e.g., altitude, temperature regimes, and pollutants), social context (e.g., social networks, access to care, perception of risk behaviors), and economic conditions (e.g., quality of nutrition, access to food and water). Identify community resources for under serviced populations (e.g., foodbanks, meal delivery for homeless, shelters). 	 Role playing, case studies, project work, presentation Conduct a local food system investigation. Conduct a needs assessment with a group or community with known social services and/or mental health services needs. Develop and present a food system viewpoint. Develop a quantity food project for a local vendor or local non-profit food organization. Develop a community action plan to address access to adequate nutrition and outline implementation plan. Create a diet plan for a client with an eating disorder, mental illness or low socio-economic status. 		

	GP Unit 1: Foundational Knowledge Applies foundational sciences to food and nutrition knowledge to meet the needs of individuals, groups, and organizations.			
Competencies	Performance Indicators	Learning Activities and Practice Illustrations	Demonstration/Assessment	
1.7 Integrates the principles of cultural competence within own practice and when directing services. (D)	 1.7.1 Demonstrates knowledge of the cultural competence models. (K) 1.7.2 Applies knowledge of foods, eating patterns and food trends. (S) 1.7.3 Identifies challenges that arise when different cultures, values, beliefs and experiences exist between clients/patients and nutrition and dietetics professionals. (S) 1.7.4 Identifies and implements strategies to address cultural biases and differences. (D) 1.7.5 Applies culturally sensitive approaches and communication skills. (D) 	 Apply cultural competence including cultural awareness, cultural security, cultural respect and cultural safety. Incorporate diverse eating patterns and preferences (e.g., Jewish dietary laws, hot and cold theory, holiday traditions) into practice (e.g., nutrition care plan, meal planning, nutrition counseling, food preparation) Describe a way of eating that conflicts with one's own cultural method (religious, ethnic, etc.). Understand the family cultural influences and cultural foods. Understand meal planning, nutritional plan and cooking foods from different cultures. Be familiar with food preferences and eating patterns of a specific population. 	Case study, menu planning, community projects self-reflection exercise, self-assessment, role play Implement nutrition counseling or program planning for different cultures and populations. Create a specific menu based on a primary religion, ethnicity, personal beliefs and values. Observe a culturally competent/sensitive counseling session and note required competence and modifications. Attend a cultural event outside of student's own beliefs/cultural to expose self to other cultures and various eating patterns. Engage in a self-assessment of weight bias.	
1.8* Applies knowledge of pharmacology to recommend, prescribe and administer medical nutrition therapy. (S)	 1.8.1 Identifies the classifications of nutraceutical pharmacological agents and the action of the body. (K) 1.8.2 Demonstrates understanding of pharmacokinetics, absorption, clearance, drug metabolism, latency period, drug and supplement metabolism, accumulation, half-life, and routes of administration. (S) 1.8.3 Identifies potential drug and food interactions based on physiological responses to pharmacological agents and takes appropriate actions. (S) 	 Apply knowledge when recommending or prescribing nutrition related drug therapy. Make recommendations for changes in diet based on the client's/patient's current medication use. Evaluate a client's/patient's medication list or herbal supplement list for possible food/drug interactions. Identify medications that are nutrient depleting. Identify various drugs needed to help with absorption and/or decrease/improve gastric symptoms. Understand side effects of medication that affect nutritional status (e.g., medications that affect blood glucose or potassium levels; determine which antacids may interfere with dissolution of antiretroviral medications). 	Case studies, multiple choice test, create nutrition drug prescription • Create dietary treatment plan for a client/patient with diabetes, heart disease, or cancer, considering medication regime. • Create a chart showing the breakdown of a common nutrition-related pharmacology agent. Identify side effects, uses, contraindications. • Describe a drug-nutrient interaction and how treatment would be recommended to avoid it.	

	GP Unit 1: Foundational Knowledge Applies foundational sciences to food and nutrition knowledge to meet the needs of individuals, groups, and organizations.				
Competencies	Performance Indicators	Learning Activities and Practice Illustrations	Demonstration/Assessment		
1.9* Applies an understanding of the impact of complementary and integrative nutrition on drugs, disease, health and wellness. (S)	1.9.1 Critically evaluates evidence-based literature to inform decisions about use of complementary and integrative nutrition. (S) 1.9.2 Applies an understanding of the impact of complementary and integrative nutrition on drugs, food, disease states and wellness. (S) 1.9.3 Identifies indications, use and contraindications of complementary and integrative nutrition. (K)	 Provide evidence-based information and education related to the use of complementary and integrative nutrition. Review and compare findings for studies related to complementary and integrative nutrition to determine validity of the claims. Provide science-based answers to clients/patients about complementary and integrative nutrition therapy. Articulate the role and scope of practice for complementary health providers (e.g., natural path, chiropractor, Chinese medicine). 	Literature review and case study, presentation Develop client/patient education material. Reference evidence-based and science-based literature to support recommendations.		
1.10* Applies knowledge of math and statistics. (S)	 1.10.1 Chooses appropriate statistical methods, performs statistical analysis and interprets results in various data analysis situations. (S) 1.10.2 Communicates information on statistical methods, results and interpretation, both orally and in writing. (S) 1.10.3 Applies math skills to perform food and nutrition calculations. (S) 	 Communicate statistical methods and results in writing and orally. Conduct a research project on a food-related subject and apply statistical concepts to interpret the results correctly. Run sample data sets using statistical software, interpret results of sample data set, read articles and interpret results. Calculate complex math formula related to food and nutrition (e.g., nutrient needs, costing, budget) Apply formulas to basic statistical calculations (e.g., mean, average, standard deviation, quartiles, confidence intervals, binomial distribution). 	Literature review, case study, presentation, research project • Analyze the statistical results of a published study. • Conduct a nutrition epidemiology focused dataset analysis. • Calculate parenteral feeding infusion rate.		
Applies knowledge of medical terminology when communicating with individuals, groups and other health professionals.	 1.11.1 Interprets and communicates medical terminology to non-health professional audiences. (D) 1.11.2 Uses acceptable medical abbreviations and appropriate medical terminology in all forms of communication. (D) 	 Document in client/patient record using appropriate medical terminology and abbreviations. Interpret laboratory test results in relationship to diet therapy when conducting nutritional counseling. Use appropriate medical terminology and abbreviations to clearly communicate the condition and treatment method. Clearly communicate nutrition-related concerns to others ensuring proper interpretation and understanding. 	Chart review, present case study, develop patient / client education material, role playing, standardized testing, field placement • Participate in simulations of interdisciplinary care rounds. • Write sample client/patient chart notes based on a case study.		

GP Unit 1: Foundational Knowledge Applies foundational sciences to food and nutrition knowledge to meet the needs of individuals, groups, and organizations. **Demonstration/Assessment** Competencies **Performance Indicators Learning Activities and Practice Illustrations** 1.11 (cont.) • Conduct a chart review in clinical placement. • Create client/patient education material using layman terms to explain medical terminology. 1.12 Demonstrates understanding of safe • Create a recipe and scale it. Case study, field placement, capstone 1.12.1 work habits and safety hazards and /theme meal • Modify meal plans to meet the needs of the clients/patients, considering the current food Demonstrates employs preventive safety measures. supply and the environment (e.g., during a disaster, electrical outage). knowledge of and is able to manage food • Plan, prepare, execute and evaluate a meal. 1.12.2 Converts recipes and ingredients based preparation • Evaluate and make recommendation for staff resources for food preparation. techniques (D) on client/patient's preferences or dietary needs. (D) Develops recipes and menus and 1.12.3 increases or decreases quantities served from the recipe. (D) Evaluates recipes using sensory evaluation methods. (D) 1.13* Project work, practical skills labs, simulations, 1.13.1 Analyzes appropriate data in electronic • Explain how technology can be used to enhance nutrition education or treatment. format to make best decisions related to chart review **Demonstrates** Document in an electronic health record. nutrition and diet. (S) computer skills and • Analyze online insulin pump upload. • Create and teach patients/clients to use nutrition related technology (e.g., track

1.13.2 Evaluates accuracy and reliability when uses nutrition food/ exercise program). • Conduct live chats answering dietary informatics in the accessing and evaluating nutrition questions. Use electronic resources to analyze nutrient content and adequacy of specific recipes in a decision making information in electronic format. (S) food service operation. • Utilize electronic data to conduct community process. (D) Operates nutrition informatics systems in 1.13.3 needs assessments, public health program • Act as a nutrition content expert for the design of a new nutrition and dietetics software, practice. (D) planning/grant applications. system, technology (e.g., electronic health records). 1.13.4 Uses electronic databases to obtain • Export data from a system, analyze and make appropriate recommendations and decisions. nutrition information and evaluate • Identify trends in food and nutrition using health information systems. credible sources in decision making. Act as a subject matter expert for the development of electronic and nutrition informatics Uses technology and informatics skills systems. proficiently to aggregate data, enhance practice and client/patient care. (D)

GP Unit 1: Foundational Knowledge Applies foundational sciences to food and nutrition knowledge to meet the needs of individuals, groups, and organizations. **Demonstration/Assessment** Competencies **Performance Indicators Learning Activities and Practice Illustrations** • Create nutrition and physical activity program for a specific age group and implement 1.14 1.14.1 Evaluates, integrates and communicates Case study, presentation, develop client/patient (e.g., school system, hospital, outpatient clinic). Integrates nutritional requirements across the life education material • Make appropriate exercise recommendations based on the client's/patient's ability, knowledge of cycle. (D) • Give a presentation in community setting on nutritional intake and blood glucose results. Identifies nutritional risk factors across nutrition and 1.14.2 nutrition and physical activity tips. • Emphasize the importance of physical activity in controlling metabolic risk factors when physical activity in the life cycle. (D) • Develop an educational website, conducting counseling or group sessions. handout/pamphlet, for various stages of the the provision of Teaches the benefits of physical activity 1.14.3 • Identify the benefits of exercise and current recommendations for clients/patients lifecycle; incorporate appropriate nutrition nutrition care across the life cycle to individuals, groups across the life and populations. (D) throughout the lifecycle. and physical activity components. cycle. (D) 1.14.4 Explains and takes into consideration • Support patient's/client's realistic health goals incorporating activities to achieve them how nutrients, nutritional supplements based on anthropometric measurements, age, personal and cultural preferences and and hydration influence physical activity resources available. and wellness. (K) Evaluate caloric requirements considering relevant factors including activity level. • Understand the impact of exercise on disease and nutritional intake. • Evaluate fluid and calorie requirements for those engaging in various levels of physical activity. 1.15* Recognizes and communicates the cause • Develop plans to address dimensions of wellness important to groups and individuals. Case study, presentation, research project, paper 1.15.1 of disease and nutrition risks. (K) Applies knowledge of • Develop community classes to encourage health and wellness (e.g., breastfeeding nutrition • Design a billboard sign, commercial or other nutritional health 1.15.2 Identifies, prioritizes and implements class, cooking classes, diabetes nutrition program). media that educates public on chronic promotion and disease health risk reduction strategies for disease risks. • Develop a wellness program for individuals, groups and population. individuals, groups and populations. prevention for • Design a wellness activity for a specific • Conduct a patient, community and population assessment documenting demographics, individuals, groups (S) audience. lifestyle risk factors, epidemiology, socio-psychological and economic factors, and ecological and populations. (S) Examines the influence of the 1.15.3 • Develop a lesson plan and presentation to issues to promote wellness. determinants of health on health and classroom or a community audience. • Apply knowledge of health promotion and prevention for individuals, groups and wellness. (S) populations when planning and conducting employee wellness programs. • Plan and conduct a supermarket tour to Designs food and nutrition activities for increase client/patient awareness of • Identify population markers to determine overall health status of a new minority group of various audiences considering factors advertising influence, food labels, and health immigrants coming from an impoverished area. relevant to individuals, groups and meals/foods. • Complete a needs assessment within a local community. communities. (S) • Develop, implement and evaluate an intervention which targets the community's needs. Applies behavior change theories for nutritional health promotion and disease

prevention. (S)

	GP Unit 1: Foundational Knowledge Applies foundational sciences to food and nutrition knowledge to meet the needs of individuals, groups, and organizations.					
Competencies	Performance Indicators	Learning Activities and Practice Illustrations	Demonstration/Assessment			
1.16* Gains a foundational knowledge on public and global health issues, policies and nutritional needs. (K)	 1.16.1 Examines the trends, policies and current issues that impact public and global health from existing, new and reemerging diseases that spread through immigration, travel and global trade. (K) 1.16.2 Examines the impact of global food supply and sustainability and related factors. (K) 1.16.3 Examines how globalizing processes impact nutrition, nutrition education and nutrition related diseases in developing countries. (K) 	 Write policy briefs and articles related to global health issues. Identify nutritional deficiencies in developing countries and make recommendations to meets needs. List major food problems around the world and identify the impact to the health of the population. Demonstrate awareness of environmental issues and government policies in procuring and exporting foods. Identify the impact of US food related policies on other countries. Identify the role of dietitians in other countries. 	Case studies, literature review, paper, presentation, study abroad • Trace food to market, identifying the energy costs at each step. • Present and discuss a news article/story on global nutrition. • Write a report on a selected developing country, include the country's health statistics, particularly nutritional aspects, and aspects related to agriculture, disease incidence and prevalence pertinent to the country.			

GP Unit 2: Client/Patient Services Applies and integrates client/patient-centered principles and competent nutrition and dietetics practice to ensure positive outcomes. **Demonstration/Assessment** Competencies **Performance Indicators Learning Activities and Practice Illustrations** 2.1* 2.1.1 Conducts or coordinates an assessment of • Conduct an environmental scan to determine competition of related programs, services Project work, community project, project the environment, competitive landscape or products. development project, field placement, industry Applies a framework and stakeholder opinions to identify and field placement Create data collection tools (survey, focus group interview questions) to test or market new to assess, develop, evaluate data needed to make decisions implement and nutrition and diet product or services. • Coordinate and manage a community event. regarding nutritional products, programs evaluate products, • Develop an instrument for analyzing an existing product, program or service. • Write and present a proposal for a new and services. (D) programs and services. • Create an evaluation tool (e.g., patient/client/consumer survey, outcome measures program or service. 2.1.2 Designs nutritional products, programs or checklist). • Co-lead product testing focus groups. services that promote consumer • Conduct an environmental scan and SWOT analysis for a new program or service. nutritional health, dimensions of wellness, • Write a report based on program, service or and lifestyle management. (D) • Create feedback surveys and conduct focus groups. project evaluation data. 2.1.3 Creates a work plan or project plan to • Identify required team members and stakeholders to develop and implement nutrition and implement nutritional programs and food services, program or product. services or launch products. (D) 2.1.4 Conducts an evaluation of a product, program or service by analyzing reasons for variance from expected outcomes and implements new strategies as appropriate. (D) 2.2 2.2.1 Considers all client/patient factors when • Identify appropriate validated screening tool appropriate for the patient population. Case studies, tool develop and evaluation, a selecting, developing nutrition screening simulation activity, field placement Selects, develops Develop a screening tool to determine level of care and the required nutrition and tools. (D) and/or implements dietetics professional required to meet client/patient care needs. • Develop a screening tool for high risk 2.2.2 Evaluates the validity and reliability of the nutritional screening • Coordinate community health and nutrition events. populations. tools for individuals, nutrition screening tools and modifies • Educate other professionals on the use of the screening tool and indicators. • Organize a community health fair. groups or populations. based on current evidence-informed • Develop and implement a needs assessment (D) practice. (S) for community nutrition program. 2.2.3 Leads the implementation of nutrition • Utilize screening tool to assess risk for screening tools in collaboration with other malnutrition. health professionals. (D) • Identify the applicability of using a screening 2.2.4 Prioritizes care based on results of tool in a specific population, and/or screening considering complexity of care environment. needs. (D) • Modify an existing screening tool based on

outcome data.

Competencies	Perfo	ormance Indicators	Learning Activities and Practice Illustrations	Demonstration/Assessment
2.3 Utilizes the nutrition care process with individuals, groups or populations in a variety of practice settings. (D)	2.3.6 2.3.7 2.3.8 2.3.9 2.3.10 2.3.11	subjective information considering the determinants of health. (D) Conducts a nutrition focused physical exam. (D) Takes a food and nutrition related medical history. (D) Assesses physical activity and history of physical activity. (D) Collects, assesses and interprets anthropometric measures and body composition. (D) Orders, collects and interprets biochemical tests. (D) Analyzes diagnostic test results relevant to nutrition (e g. diagnostic imaging related to fluoroscopy, swallowing evaluation, enteral feeding tube placement). (D)	 Coordinate the nutrition care process for individuals, groups or populations. Complete a comprehensive nutrition assessment, including a nutrition focused physical exam for clients/patients who have major or complex health and nutrition needs. Order and interpret laboratory test to inform nutrition and supplement requirements (e.g., blood glucose, potassium, iron, cholesterol, triglycerides, serum pre-albumin, serum transferrin, total lymphocyte count, nitrogen balance). Create a nutrition care plan based on assessment data for a wide range of clients/patients with basic to highly complex health and nutrition needs. Consider social (e.g., live alone, family/community support), and economic factors (e.g., low income, homeless, kitchen resources) and food security, procurement and preparation that may influence the nutrition care process. 	Case study, role play, return demonstration, modified triple jump, chart stimulated recall, charreview/audit, field placement • Write examples of PES statements for clients/patients throughout the life cycle. • Determine protein intake and adequacy through food intake questionnaires and laboratory and urinalysis testing. • Create a complex nutrition care plan for patients who are newly diagnosed with diabetes/heart failure, cardiac disease, patient in ICU receiving parental nutrition therapy, patient with extensive wound care needs, homeless clients, breastfeeding mother, teenager with eating disorder.

Competencies	Performance Indicators	Learning Activities and Practice Illustrations	Demonstration/Assessment
2.3 (cont.)	Diagnosis 2.3.13 Analyzes and synthesizes nutrition assessment data to inform nutrition diagnosis(es) and nutritional plan of care. (D) 2.3.14 Devises PES (problem, etiology and sign symptom) statement and outlines reasons for professional opinion cause and contributing factors. (D) 2.3.15 Prioritizes the nutrition diagnosis(es). (D)		
	Intervention	 Summarize client/patient assessment information and explain PES statement. Utilize the nutrition care process with individuals to manage basic to highly complex health and nutrition needs at different stages of the lifecycle and in different environments (e.g., acute care, long-term care, rehabilitation, community, mental health facilities, grocery stores, clinics). Order or modify orders for parenteral nutrition therapy, supplements and minerals and nutrition related drugs (e.g., insulin, antiemetics, pancreatic enzyme replacement therapy). Determine required monitoring plan, including required diagnostic and laboratory tests, referral, frequency of nutrition and dietetic services. Prescribe nutrition related drug therapy and supplements to address nutrition health needs. Collaborate with the client/patient to develop and monitor the nutrition plan of care and ensure client/patient understanding. Complete a follow-up client/patient assessment and identify the impact of the nutrition plan of care. Identify barriers to accessing food for under-serviced populations, individuals with special needs (e.g., homeless individuals, elderly clients/patients, clients/patient with disabilities) and developing countries. Enter billing coding. Document PES statements in client/patient record to help other health professionals quickly obtain the nutrition diagnosis. 	Case study, chart stimulated recall, chart audit, simulation, role playing, field placement • Present a variety of case studies that included rug therapy modification or introduction a part of the nutrition plan. • During field placement make recommendations for nutrition drug therape and write a mock order. • Create a nutrition care plan, including appropriate intervention; consider (real or mock) hospital admission data, laboratory test results, intake/output records, and the physician's progress notes. The case is followed by a series of questions that focus on pathophysiology; assessment; clinical, nutritional and behavioral outcomes; interventions; and appropriate follow-up for the patient. • Enter billing coding for case studies.

Competencies	Performance Indicators	Learning Activities and Practice Illustrations	Demonstration/Assessment
2.3 (cont.)	2.3.22 Identifies barriers to meeting client/patient's nutrition goals and makes recommendations to modify nutrition plan of care or nutrition intervention, and communicates ch to client/patient and others. (D)	the	
	2.3.23 Summarizes impact of nutrition interventions on client/patient's nu outcomes, considering client/patie centered care. (D)		
	2.3.24 Identifies, analyzes and communicate reasons for deviation from expected nutrition outcomes. (D)		
	2.3.25 Evaluates the availability of service support access to nutrition care a help meet client/patient nutrition (D)	nd to	
	<u>Documentation</u>		
	2.3.26 Documents all elements of the nut care process following professiona standards and organizational polici (D)		
	2.3.27 Demonstrates coding and billing procedures to obtain payment for nutrition services under alternate hocare payment models. (D)	ealth	

GP Unit 2: Client/Patient Services Applies and integrates client/patient-centered principles and competent nutrition and dietetics practice to ensure positive outcomes.				
Competencies	Performance Indicators	Learning Activities and Practice Illustrations	Demonstration/Assessment	
2.4* Implements or coordinates nutritional interventions for individuals, groups or populations. (D)	 Medical Nutrition Therapy 2.4.1 Manages medical nutrition therapy for clients/patients. (D) 2.4.2 Applies and integrates understanding of foundational sciences to manage medical nutrition therapy, diet and disease management. (D) 2.4.3 Applies foundational science knowledge and medical nutrition therapy principles to establish, order, manage and evaluate the need for nutrition support when prescribing and administering nutritional oral, enteral and parenteral diets. (D) 2.4.4 Considers and applies all relevant factors when recommending the use of oral nutritional supplements. (D) 2.4.5 Refers/transfers care to relevant professionals when client/patient needs or required interventions are beyond personal competence or professional scope of practice. (D) 	 Medical Nutrition Therapy Recommend a specific enteral and parenteral nutrition formula for complex client/patient (e.g., an unconscious patient with extensive burns). Understand indications and contraindications for parenteral and enteral nutrition (e.g., patients with chronic pancreatitis). Analyze evidence-based practice and clinical indicator for oral nutritional supplements. Explain the concepts of oxidation/antioxidants to clients/patients when recommending vitamins or antioxidant supplements. Consider potential barriers to meeting nutrition goals (e.g., health literacy, finances, mobility/disability, food accessibility, cultural differences, social support). 	Case studies, chart stimulated recall, modified triple-jump assessment, field placement Recommend and write a mock order for medial nutrition therapy. Refers client/patient to physician to diagnose and initiate diabetic protocols.	
	Education 2.4.6 Applies education theories, adult learning, pedagogy and education principles when developing, modifying, delivering or implementing education materials. (D) 2.4.7 Assesses audience's readiness to learn and identifies barriers to learning. (D)	 Education Apply educational theories and principles for both adult and child learning. Select appropriate educational materials based on audience and needs. Create education materials using a variety of modes (paper, electronic, verbal) and delivery methods (online, telehealth, group and individual session, radio / TV broadcast). Create education materials at appropriate reading levels. 	Case studies, modified triple-jump assessment presentation, project work, role playing, simulation, research project, self-assessment exercises, field placement • Teach adolescents skills essential for mal dietary change and provide information	

• Give presentation to a diverse audience.

• Create written pre-and post-tests for the target population.

• Create or adjust existing materials to support culturally sensitive education.

2.4.8 Develops or modifies nutrition education

needs of the audience. (D)

materials or delivery methods to meet the

how to sustain behavior change.

• Teach a nutrition class specific to a health

condition to non-nutrition students.

Competencies	Performance Indicators	npetent nutrition and dietetics practice to ensure positive outcomes. Learning Activities and Practice Illustrations	Demonstration/Assessment
2.4 (cont.)	2.4.9 Develops and provides evidence-informed nutritional wellness and therapeutic diet education to variety of audiences. (D) 2.4.10 Translates basic to advanced food and nutrition science knowledge into understandable language tailored to the audience. (D)	 Consider the population's/audience's literacy level, age, deficient(s), and readiness to learn. Develop education evaluation methods, analyze results and make appropriate changes. Create and present a workshop or education session to a community group. Develop education materials to support a public health and global health issue. 	 Prepare and present a nutrition class at a school or community program for child of different age. Modify the education and presentation based on age. Counsel clients/patients on healthy lifestyle and weight management using various counseling techniques.
	2.4.11 Communicates complex nutrition information to broad and diverse audiences. (D)		Create a nutrition care plan which includes behavior modification to address eating disorder (e.g., anorexia nervosa, bulimia
	2.4.12 Evaluates effectiveness of nutrition education and makes modifications as required. (D)		nervosa, binge eating disorder). • Review evidence-based literature related to eating disorders and identify evidence-based psychotherapy modalities: the different
	Psychological Counseling and Therapies		indications, risks, contraindications, benefits
	2.4.13 Assesses client/patient's nutritional needs	Psychological Counseling and Therapies	and limitations.
	and appropriateness for the	Implement counseling strategies to promote behavioral change	
	recommended counseling or therapy. (D) 2.4.14 Applies counseling principles and	Counsel clients/patients on healthy lifestyles and weight management using various counseling techniques.	
	evidence-informed practice when providing individual or group sessions. (D)	• Use motivational interviewing skills to obtain food and nutrition practices of a patient and promote behavior change.	
	 2.4.15 Identifies the indications, contraindications, benefits, risks and limitations of the counseling or therapy. (K) 2.4.16 Demonstrates understanding of transference and counter transference in Identify psychotherapy approaches (psychoanalysis, psychodynamic therapies, behavior, cognitive, humanistic therapy, integrative therapy). Provide nutritional counseling and psychological therapy modalities (e.g., behavioral an cognitive therapy) to increase awareness of patterns of thinking and the impact of healthy eating habits and eating behaviors on nutritional and mental wellness. Define transference and countertransference in the therapeutic relationship; and recognitive therapy. 		
		1 5 17:	
		 healthy eating habits and eating behaviors on nutritional and mental wellness. Define transference and countertransference in the therapeutic relationship; and recognize possible situations when this may occur in the nutrition and dietetic therapeutic 	
	the therapeutic relationship. (K)	relationship.	
	2.4.17 Demonstrates awareness of various appropriate counseling techniques. (K)	Refer client/patient to psychiatrist when acute mental health needs are identified (e.g., psychosis).	

GP Unit 2: Client/Patient Services Applies and integrates client/patient-centered principles and competent nutrition and dietetics practice to ensure positive outcomes.					
Competencies	Performance Indicators	Learning Activities and Practice Illustrations	Demonstration/Assessment		
2.4 (cont.)	2.4.18 Evaluates effectiveness of the counseling or therapy and makes modifications as required. (D) 2.4.19 Refers/transfers client/patient to appropriate health professionals when counseling therapy or client/patient's mental health issues are beyond personal competence or professional scope of practice. (D)				

GP Unit 2: Client/Patient Services Applies and integrates client/patient-centered principles and competent nutrition and dietetics practice to ensure positive outcomes.

Competencies	Perfo	ormance Indicators	Learning Activities and Practice Illustrations	Demonstration/Assessment
2.5* Prescribes, recommends and administers nutrition- related pharmacotherapy. (S)	2.5.1 2.5.2 2.5.3	interactions. (S)	 Assess the need for prescribing a nutrition related drug therapy considering drug factors: indication, interactions, contraindications, benefits, risk, dose, duration and frequency; and client/patient factors: health and medication history, disease state, laboratory values and the appropriateness of the drug before prescribing or recommending drug therapy. Review laboratory results to support decision related to prescribing and/or recommending nutrition related drugs. Demonstrate understanding of the scope of practice legislation and organization policies related to RDs prescribing and recommending nutrition-related drug therapy. 	Multiple choice examinations, case studies, chart simulated recall, modified triple jump, learning lab, field placement • Case study or field work - Use the elements of blood glucose, nutrition intake, activity and health status to make modifications to prescribed diabetes medications. • Prescribe digestive aids for a client/patient
	2.5.4			 undergoing bariatric surgery, following an established protocol or directive from the surgeon. Prescribe iron supplements to a prenatal client/patient. Administer B12 injections to a client/patient with long-term history of
	2.5.5	Critically analyzes the potential negative effects of the nutrition therapy or supplement and determines the required knowledge, skill and judgment required to manage negative outcomes. (S)		B12 deficiency, using appropriate technique (Intermuscular, z-track method).
	2.5.6	Prescribes, recommends and administers nutrition related pharmacotherapy adhering to the professional standards and evidence-informed practice. (S)		
	2.5.7	Applies the standard of practice, legislation, organizational policies and evidence-informed practices for prescribing. (S)		
	2.5.8	Applies the principles of safe drug administration. (S)		
	2.5.9	Monitors the response and the effects of the nutrition related drugs on the		

GP Unit 2: Client/Patient Services Applies and integrates client/patient-centered principles and competent nutrition and dietetics practice to ensure positive outcomes.					
Competencies	Performance Indicators	Learning Activities and Practice Illustrations	Demonstration/Assessment		
2.5 (cont.)	individual and takes the required action to make modifications or adjustments. (S)				
	2.5.10 Consults and refers/transfers client/patient to the appropriate health professional when client/patient's needs are beyond personal competence or professional scope of practice. (S)				

GP Unit 3: Food Systems Management

Applies food systems principles and management skills to ensure safe and efficient delivery of food and water.

Competencies	Performance Indicators	Learning Activities and Practice Illustrations	Demonstrated/Assessment
3.1* Directs the production	3.1.1 Manages or oversees the planning, designing and coordination of meals to ensure delivery of nutritionally sound meals (D)	Prepare an evaluation of the production and distribution processes and make recommendations for improvements. Project and a sixty of the production and distribution processes and make recommendations for improvements.	Project work, course work, mock policies, role play, review, field placement, case studies
and distribution of quantity and quality of food products. (D)	nutritionally sound meals. (D) 3.1.2 Analyzes the workflow design and makes recommendations for modifications or approves for implementation. (D) 3.1.3 Communicates the organization's mission and how work activities impact the services and organization. (D) 3.1.4 Establishes and analyzes policies and performance measures for quality and quantity of work. (D) 3.1.5 Implements systems to report on local, state and federal compliance. (D) 3.1.6 Directs and analyzes the evaluation of foodservice production and services to inform, change, and/or budget resources and department or corporate direction. (D) 3.1.7 Establishes a culture that is ethical and free of safety and health hazards. (D) 3.1.8 Investigates and optimizes opportunities to reduce the environmental impact of foodservice operations and to enhance sustainability. (D)	 Review organizational policies and make recommendations for modifications. Collect data and recommend changes based on outcome data. Create an evaluation tool to help staff evaluate productivity and safety; make recommendations based on outcome data. Design a kitchen considering, safety, workflow, productivity, budget etc. Take steps in a known kitchen to reduce carbon footprint. Create a new meal plan, including budget, for a large organization. 	 Direct the production and service of a capstone meal. Develop new policies and education materials to address safety issues, incorporating HACCP principles. Create a new menu for a large employee cafeteria. Conduct a mock kitchen inspection. Prepare staff education materials to support implementation of new processes and policies. Create mock budget for foodservice department.

GP Unit 3: Food Systems Management Applies food systems principles and management skills to ensure safe and efficient delivery of food and water.

Competencies	Performance Indicator	Learning Activities and Practice Illustrations	Demonstrated/Assessment
3.2* Oversees the purchasing, receipt and storage of products used in food production and services. (D)	 3.2.1 Follows a matrix or measures to evaluate the need for financial, technical and equipment resources for the provision of foodservices. (D) 3.2.2 Applies ethical decision making to determine the need for reduction or increase in resources. (D) 3.2.3 Creates internal or external professional relations and/or agreements to solve problems in foodservice operations. (D) 3.2.4 Acts as a departmental and organizational liaison between contractual parties involved. (S) 3.2.5 Demonstrates knowledge of inventory control as it pertains to the food and supplies of the foodservice operation. (K) 3.2.6 Applies the principles of the process of receiving and storing products demonstrating adherence to food safety code, nutrition guidelines and regulations. (D) 3.2.7 Applies the relationship between forecasting and production as it pertains to recipe needs and organizational demand. (D) 	 Identify evaluation criteria or measures for the technical and equipment resources needed for foodservice in a variety of settings (hospital, long-term care, industry, community). Create an operational plan including a budget for purchasing of food and supplies. Complete a purchase order requisition and direct staff to manage food delivery. Conduct a review of the inventory and storage; identify problem issues (e.g., waste, shortage, safety, lack of availability); make recommendations; and communicate changes. Identify ethical dilemmas related to the management of resources and ensure safety and appropriate delivery of food. Identify valuable internal and external resources (staff, food producers/suppliers. Identify potential local, national and international foodservice suppliers. Modify an existing supplier contract incorporating the terms related to the required goods and services. Trace a food product from back dock to serving area, noting Critical Control Points. 	 Project work, case studies, field placement Present students with ethical case studies that address staff reduction, organizational restructuring, merging services or organizations. Student weighs the pros and cons of several options to manage the situation. Present ethical cases to students and allow class debate on how to manage the situation. Create and present a plan to identify and establish internal and external suppliers/partners (including local/community, national and international suppliers). Modify an existing supplier contract relevant to the required goods and services.

GP Unit 3: Food Systems Management Applies food systems principles and management skills to ensure safe and efficient delivery of food and water. **Performance Indicators Learning Activities and Practice Illustrations Demonstrated/Assessment** Competencies Project work, case studies, presentation, field • Review, compare and establish organizational policies to identified relevant legislation and 3.3 3.3.1 Maintains currency in and follows applicable placement Applies principles of legislation and guidelines. (D) quidelines. food safety and 3.3.2 Incorporates the required safety and nutritional • Use food safety and sanitation principles in the inspection of the production and service of • Participate in an accreditation process sanitation to the health policies and procedures in the (e.g., Joint Commission, CMS) storage, production organization's mission and policies. (D) • Identify food safety violation, develop a plan to address vulnerabilities, and develop staff • Create a disaster plan for a water or world and service of food. 3.3.3 Develops a plan to minimize vulnerabilities in education material to encourage compliance with polices, guidelines and legislation. food shortage (e.g., wheat). the food supply chain. (D) • Develop a safety plan for disasters (e.g., bioterrorism, weather related, lack of supplies 3.3.4 Takes into consideration food allergies when / resources (e.g., water, waste, electricity). preparing menus and foods. (D) • Partner with a local organization to review their policies compared to regulatory obligations, assess compliance, and vulnerabilities; make recommendations. Project work, case studies, testing, 3.4.1 Has a working knowledge of different 3.4 Utilize local food products, in compliance with applicable regulations, for an institutional presentation, field work agricultural food production systems and food service by sourcing local food growers. Applies and related terminology and concepts including demonstrates an • Identify the difference between local, regional, national and international • Create a project plan for the procurement potential nutritional impact. (K) process from farmer to retail, considering understanding of agricultural practices and processes. 3.4.2 Understands the local and global food markets agricultural practices food safety principles and applicable • Identify the potential impact of a national, international and global disaster and disease on and applicable nutrition regulations. (S) and processes. (S) legislation. food production and processes. 3.4.3 Identifies and supports partnerships with local • Identify the significant agricultural trends (e.g., GMO, organic foods, gluten free) and and global food growers and producers. (S) the impact to foodservice.

• Create a plan to support local and global food growers and producers.

GP Unit 4: Community and Population Health Nutrition						
Applies community a	Applies community and population nutrition health theories when providing support to community or population nutrition programs.					
Competencies	Performance Indicators	Learning Activities and Practice Illustrations	Demonstration/Assessment			
4.1* Utilizes program planning steps to develop, implement,	4.1.1 Recognizes how determinants of health, epidemiological findings, health disparities, political interest, availability of resources, and accessibility influence the nutritional health	 Assess and evaluate a current nutrition public health program; identify strengths, weaknesses, threats (e.g., sustainability, access), new opportunities or areas for improvement. Conduct an assessment to determine the scope of project, availability of resources, 	Real or simulated community, national or international project, research, presentation, field placement			
monitor and evaluate community and	and well-being of a community and population. (D)	intended audience needs and limitations.	Evaluate the effectiveness of an existing public health or wellness program and			
population programs. (D)	4.1.2 Conducts community and population based assessments considering all relevant factors.	 Design a program to solve a nutrition related problem in the community. List factors that influence food availability in a developing country. 	present finding with recommendations.Plan the implementation of a nutrition			
	(D)	• Utilize current research to propose a public health/health promotion program at a facility or agency.	program at a school to evaluate a nutrition-related behavior.			
	 4.1.3 Identifies the resources and connects with partners needed for sustainability of the program. (D) 4.1.4 Develops and implements a program considering relevant data addressing the nutrition needs of the community or population. (D) 4.1.5 Interprets and uses nutrition surveillance and 	• Search nutrition surveillance data from the CDC, WHO, and/or other government agencies or organizations to identify key health and safety issues impacted by access to food, water and nutrition.	Assess, plan, or evaluate an obesity prevention program to improve the nutritional health of low-income			
		• Use health informatics and data analytics to gather population information about nutrition and health outcomes.	populations. • Evaluate a current public health hazard			
		• Collect and analyze data related to the values, beliefs, limitations and strengths of the population.	and management in a written paper; include recommendations for improvement and application to other			
	global health and safety data. (D)	• Identify the risk factors or risk conditions that the program plan will address.	public health issues.			
	4.1.6 Evaluates the program using measurement indicators and outcomes. (D)	Obtain data from the National Institutes of Health and national disease reporting systems, including the Centers for Disease Control and Prevention, state health departments and	Create a mock plan to address foodborne illness within a community, state or			
	4.1.7 Communicates evaluation findings, outcomes, recommendations and research findings to	vital records. • Select methods and strategies for the intervention (e.g., education, information delivered	country.Develop an emergency preparedness plan			
	promote change and justify program. (D)	by multimedia modes).	for community food security and			
		Apply for grants and/or seek funding partners.	participate in or coordinate the			
		Complete a cost analysis to develop, implement and sustain program.	management of the situation as			
		• Collaborate with stakeholders using data analytics in the process of data collection, extraction, transformation, analysis, interpretation and reporting.	demonstrated during emergency drills.			

GP Unit 4: Community and Population Health Nutrition Applies community and population nutrition health theories when providing support to community or population nutrition programs.				
Competencies	Performance Indicators	Learning Activities and Practice Illustrations	Demonstration/Assessment	
Engages in legislative and regulatory activities that address community, population and global nutrition health and nutrition policy. (D)	 4.2.1 Interprets legal terminology used to establish nutrition regulations and policies for populations. (K) 4.2.2 Navigates governmental, intergovernmental and nongovernmental organizations to promote nutrition legislation and regulations that address public, population and global nutrition health. (D) 4.2.3 Analyzes political interests and their impact on program development, goals and objectives. (D) 	 Identify search engines to access nutrition related local, national and global legislation and regulations. Review local, national and global legislation and establish policies for public health programs. Identify governmental, intergovernmental and nongovernmental organizations that advocate/influence nutrition legislation and regulations that address public, population and global nutrition health. Recall the steps to passing legislation or regulations. Communicate nutritional implications of legislation to representatives at the local, state or national level. Engage in individual advocacy (e.g., changing the situation for an individual) and systems advocacy (e.g., changing policy and practice at the local, national or international level; and changing the situation for groups of individuals). Use advocacy tools to effect positive change in community-based, national and global nutrition health programs and policies (e.g., survey tools, legislative tracking/posting websites, social media outreach, email communications to stakeholders, a blog, create and delivery surveys, advocacy events). 	 Project work, literature review, paper, presentations Write a letter to a legislator promoting legislative change and awareness. Develop an internet blog. Respond to a call for policy consultation. Create a proposal for a new community program, including stakeholder consultation, considering accessibility, sustainability and target audience. Create and distribute surveys to gain awareness of advocacy issues and general sentiments. Organize or participate in advocacy events such as press conferences, marches and advocacy days. Engage in a practice debate defending (or arguing against) a specific nutrition legislative issue. Write a short paper detailing the pros and cons of a specific nutrition policy. 	

GP Unit 5: Leadership, Business, Management and Organization				
Demonstrates leade Competencies	ership, business and management principles to gu Performance Indicators	lide practice and achieve operational goals. Learning Activities and Practice Illustrations	Demonstration/Assessment	
5.1* Demonstrates leadership skills to guide practice. (D)	 5.1.1 Exhibits self-awareness in terms of personality, learning, and leadership style. (S) 5.1.2 Demonstrates understanding of social cues and team dynamics. (K) 5.1.3 Communicates at the appropriate level and understands emotions and emotional situations. (D) 5.1.4 Develops conversational and interpersonal skills. (D) 5.1.5 Reflects on situations and critically evaluates outcomes and possible alternate courses of action. (D) 5.1.6 Understands the mentoring role and practices mentoring and precepting others. (D) 	 Engage in situational leadership, personality, generational learning and learning style activities to understand group dynamics and personal preferences and skills. Recognize different communication strategies and personality styles in the individuals on their team and how it impacts performance. Participate in an interprofessional project, initiative or a committee. Demonstrate conflict management skills. Demonstrate understanding of the phases of team dynamics (forming, storming, norming and performing). 	 Self-reflective/assessment exercise, case studies, role play, field placement Lead a group project. Other students evaluate leadership skills and team productivity. Identify all four stages of the team dynamics. Observe several team meetings and note different leadership styles and the impact on team dynamics Lead or engage in a team building exercise. Mentor a first-year student. 	
5.2* Applies principles of organization management. (D)	Planning 5.2.1 Establishes operational plan considering budget, inventory control, labor and regular daily tasks. (D) 5.2.2 Aligns plans with the organizational strategic plan, mission and vision. (D) Organizing 5.2.3 Assigns responsibilities to various team members according to scope of practice and personal competence. (D) 5.2.4 Sets and monitors clear targets for team members, departments and the organization aligned with common objectives and goals. (D)	 Planning Develop an operational plan for an organization that includes a budget and staff resource allocation. Develop criteria or measures to evaluate the plan, aligned to organization's strategic plan, mission and vision. Organizing Identify key staff members and their scope of practice in a variety of practice settings. Utilize principles of organization management, prepare tools and documents for use in operation of a nutrition services program (e.g., job description, work schedules, quality assurance standards and monitoring tools and performance evaluations.) Develop performance review templates with measures, mapped to organizational strategic plan. 	Case study, project work, role play, group projects, field placement. Conduct a mock accreditation audit. Review a current budget and assign required budget changes. Require student to reallocate and trim budget accordingly. Conduct a mock interview using behavior-based methodology. Lead a team building activity. Develop and implement a project using management principles to achieve the project goals and objectives. Conduct a risk assessment for each project.	

	GP Unit 5: Leadership, Business, Management and Organization Demonstrates leadership, business and management principles to guide practice and achieve operational goals.				
Competencies	Performance Indicators	Learning Activities and Practice Illustrations	Demonstration/Assessment		
5.2 (cont.)	 5.2.5 Demonstrates an understanding of how individuals and groups interact within the organization. (D) 5.2.6 Takes into consideration individual and organizational culture and behaviors when planning and managing. (D) Management 5.2.7 Engages in, manages or leads human resource activities adhering to applicable legislation and regulations. (D) 5.2.8 Integrates change management theories and conflict resolution skills to manage and promote positive change. (S) 5.2.9 Uses persuasive communication skills to influence or produce a desired outcome during negotiations and conflict resolution discussions. (D) 5.2.10 Understands and respects roles and responsibilities of inter professional team 	 Participate in multi-department team meetings; recognize the impact of the different department cultures. Management Develop an education or remediation plan to ensure staff maintain and meet competence. Apply change management theories and principles when implementing or promoting organization or department change (e.g., merging departments or organizations, staff workload changes, implementation of new services, equipment, products, change in client/patient population). Demonstrate interviewing skills by engaging in the hiring process. Develop a staffing schedule. Address staff or organizational conflict by identifying the potential source(s) of the conflict, required communication skills, and potential resolution. 	 Conduct a SWOT analysis for the development of a new program, services or product. Complete a project using FOCUS-PDCA, Lean Six Sigma or other PI/QI methodology. Present the project (e.g., poster, presentations, paper). 		
	members. (D) Controls 5.2.11 Collects, understands and analyzes financial data to support fiscally responsible decision making. (D) 5.2.12 Conducts cost effectiveness and cost benefit analyses to identify ways to meet budget priorities. (D) 5.2.13 Analyzes components of a productivity system including units of service and work hours and makes recommendations. (D)	 Controls Identify department outcome measures based on department goals and organizational strategic plan. Conduct a cost benefit analysis on food service operation. Conduct a review and analysis of monthly expenditures and budget for a food service operation. Analyze department statistics (e.g., client/patient satisfaction surveys, department/organizational goals) against benchmark. Participate in an accreditation process or audit. 			

Competencies	Performance Indicators	Learning Activities and Practice Illustrations	Demonstration/Assessment
5.2 (cont.)	 5.2.14 Sets controls to analyze the progress and effectiveness of the operational plan and budget. (D) 5.2.15 Collects and analyzes data to evaluate outcomes and determine if established goals and objectives are met. (D) 5.2.16 Reevaluates the plan to make modifications to ensure positive outcomes and that goals and objectives are met. (D) 	 Assess productivity of staff against facility standard. Make recommendations for distribution of workflow. Conduct a job analysis of operations and make written recommendations for improved productivity through improved time management. Identify factors affecting the cost of producing a meal in an organization (e.g., school, hospital). Create production schedule. Conduct a personal time management study; assess outcomes and create a change plan. Develop and implement quality improvement activities in a nutrition program; recommend changes to improve quality of services; create an implementation plan. 	
	 Time Management 5.2.17 Applies principles of time management to monitor and enhance personal productivity and productivity of others. (D) 5.2.18 Prioritizes activities to effectively manage time and workload. (D) 	 Time Management Measure productivity and ability to meet established organizational goals based on established criteria. Meet assignment and project timelines. 	
	 Motivation and Recognition 5.2.19 Promotes team involvement and values the skills of each member. (D) 5.2.20 Models behaviors that maximize group participation by consulting, listening and communicating clearly. (D) 5.2.21 Takes innovative approaches to build support and maintain a varied workforce. (D) 5.2.22 Coaches and advises team leaders on resolving differences or dealing with conflict. (D) 	 Motivation and Recognition Lead or participate in team building activities Identify key staff members and their scope of practice in a variety of practice settings. 	

Competencies	Performance Indicators	Learning Activities and Practice Illustrations	Demonstration/Assessment
5.3* Applies project management principles to achieve project goals and objectives. (D)	 5.3.1 Leads the development and completion of a project plan and budget. (D) 5.3.2 Identifies the project strengths, weaknesses, opportunities and threats. (D) 5.3.3 Identifies and manages potential and real risks to the plan, individuals or organization. (D) 5.3.4 Conducts regular review of project to note strengths and opportunities for improvement and to implement adjusted actions. (D) 	 Develop and implement a project using management principles to achieve the project goals and objectives. Use a variety of project management tools (e.g., Charter, Project Plan, Gantt Chart, Stakeholder Analysis). 	Project work, group work, project work, field work Create a project plan for a research project or course project. Lead a stakeholder analysis session with project team members.
5.4 Leads quality and performance improvement activities to measure evaluate and improve a program services products and initiatives. (D)	 5.4.1 Identifies and communicates quality and/or performance improvement indicators and benchmarks using evidence-informed practice (D) 5.4.2 Develops quality and/or performance improvement measurement tools and analyzes data to inform baselines and to identify root causes and potential solutions. (D) 5.4.3 Develops, implements and communicates a quality and/or performance improvement action plan for further improvement and monitors impact. (D) 	 Engage in Quality Improvement process activities. Strategize to correct deviation from established goals. Develop a business plan, performance metrics and the measures that will aid in determining achievement of the goals. Conduct a financial feasibility study and make recommendations for improvement, following the strategic goals. Develop and implement risk management plans for nutrition programs. Complete a SWOT (Strengths, Weaknesses, Opportunities, Threats), Focused PDCA (Plan, Do Check, Act), or Lean analysis. 	Project work, course work, group activity, field placement Create a continuous quality improvement plan that studies production indicators and analyzes the results with respect to established goals. Complete a risk analysis for a new program, service or product. Create a feasibility study focused on the increase or decrease staff.
	5.4.4 Develops, implements and communicates an ongoing measuring and monitoring system to ensure ongoing quality and performance improvement. (D)		
	5.4.5 Applies change management theories and principles to effectively implement change . (D)		

GP Unit 5: Leadership, Business, Management and Organization Demonstrates leadership, business and management principles to guide practice and achieve operational goals.					
Competencies	Performance Indicators	Learning Activities and Practice Illustrations	Demonstration/Assessment		
5.5 Develops and leads implementation of risk management strategies and programs. (D)	 5.5.1 Assesses potential and real risks to an individual, group and or organization. (D) 5.5.2 Identifies and takes action to manage, reduce and or eliminate risk to self, others and the organization. (D) 5.5.3 Develops risk management plans and protocols. (D) 	 Create a plan to address the potential or real risks to the individual, staff, organization, community and population. Conduct a safety review or audit to ensure safety guidelines are followed. 	Project work, mock or simulation, case study, field placement • Develop a safety inspections checklist or audit tool. • Create a plan to address potential or real risks (e.g., food allergies, safety, breach of confidentiality, staff harassment,)		

GP Unit 6: Critical Thinking, Research and Evidence-Informed Practice Integrates evidence-informed practice, research principles, and critical thinking into practice.			
Competencies	Performance Indicators	Learning Activities and Practice Illustrations	Demonstration/Assessment
6.1 Incorporates critical thinking skills in practice. (D)	 6.1.1 Considers multiple factors when problem solving. (D) 6.1.2 Incorporates the thought process used in critical thinking models. (D) 6.1.3 Engages in reflective practice to promote change and continuous learning. (D) 	 Identify a problem, including contributory factors and assess multiple solutions and outcomes. Weigh benefits and disadvantage of potential options and rationale actions. Reflect on past experiences and relevant education to make informed decisions. Problem solve with clients/patients whose needs are complex. Assimilate, analyze and interpret data from various sources and make a decision and a plan. Analyze data related to a critical incident and develop options to manage the situation and to reduce future risks. Identify own strengths and areas for improvement; complete a plan to address the identified needs. Consider a nutrition problem (e.g., obesity, poor calcium intake, unsafe food served at a facility); develop solutions to this problem that take into account viewpoints and positions of various stakeholders. Consider the arguments for and against exposing a colleague/classmate engaged in unethical behavior. Develop recommendations on this issue that could serve as a guide for others. 	Critical thinking is assessed in all papers, course work, case studies, self-reflection, projects, nutrition care plans, field placement • Write a reflective practice exercise related to critical thinking and problem solving (e.g., Identify the problem, what were the contributing factors, why is this an important problem, how will the problem and solutions affect client/patient care, what policies or legislation did you consider). • Interview several different leaders, compare leadership skills and complete a self-assessment to identify desired leadership characteristics. • Complete bio-ethics case studies. • Review a case study involving a client in a complex situation or managing a complex disease/health issue, identify relevant data, problem and options and recommendations. • Review and contemplate the effect of making schedule changes on the running of a department. • Write a literature review. • Write a manuscript.

Competencies	Performance Indicators	Learning Activities and Practice Illustrations	Demonstration/Assessment
Applies scientific methods utilizing ethical research practices when reviewing, evaluating and conducting research. (D)	 62.1 Identifies, explains and applies the steps of the scientific method and processes. (D) 62.2 Articulates a clear research question or problem and formulates a hypothesis. (D) 62.3 Identifies and demonstrates appropriate research methods. (D) 62.4 Interprets and applies research ethics and responsible conduct in research. (D) 62.5 Collects and retrieves data using a variety of methods (qualitative, quantitative) and technologies. (D) 62.6 Analyzes research data using appropriate data analysis techniques (qualitative, quantitative, mixed). (D) 62.7 Translates and communicates research findings and conclusions through a variety of media. (D) 	 Read journal articles, analyze, summarize and draw a conclusion. Interpret a piece of research to a lay audience. Create a detailed research design and submit for ethics board approval. Identify a research project and methodology; follow research protocols. 	Research project, literature search, presentation Conduct a research project, write report and present finding to the group. Review research and organizational guidelines when developing teaching goals and objectives for an education program. Develop and submit an IRB application. Present a research poster or abstract and defend conclusions. Write and submit manuscript for a publication. Develop an annotated bibliography.

GP Unit 6: Critical Thinking, Research and Evidence-Informed Practice Integrates evidence-informed practice, research principles, and critical thinking into practice.			
Competencies	Performance Indicators	Learning Activities and Practice Illustrations	Demonstration/Assessment
Applies current research and evidence-informed practice to services. (D)	 6.3.1 Uses research terminology when communicating with other professionals and publishing research. (D) 6.3.2 Critically examines and interprets current research and evidence-informed practice findings to determine the validity, reliability and credibility of information. (D) 6.3.3 Integrates current research and evidence-informed practice findings into delivery of safe and effective nutrition care. (D) 6.3.4 Analyzes and formulates a professional opinion based on the current research and evidence-based findings and experiential learning. (D) 	 Implement a change in a nutrition program based on research and/or evidence based practices; support and justify the decision to change. Dispel myths using scientific / evidence-informed information. Interpret, perform and analyze nutrition research and translate research to the public or communicate in the scientific journal. Examine other research projects and their analyses. Design research and incorporate/utilize appropriatestatistical analysis. Critically evaluate and read research. Create a nutrition plan of care based on evidence-based literature and evidence-informed practice. Apply research and evidence-informed practice when planning a community, national or global nutrition plan. 	Course work, oral defense, papers, patient/client education materials, research project, presentation, analysis of other research Review a published research article and identify the implications to practice or to a client/patient population. Develop an educational hand-out on a clinical nutrition topic related to evidence-based literature. Create a hand-out (cheat sheet) for a professional use in clinical practice. Conduct a peer review of another student research paper. Create PowerPoint analyzing and comparing/contrasting two studies. Communicate the research methods and results to others. Analyze the food journal of a client with diabetes for protein and carbohydrate intake and make dietary recommendations based on the interpretation of the client's food journal and blood glucose monitoring results.

GP Unit 7: Core Professional Behaviors Demonstrates professional behaviors and effective communication in all nutrition and dietetics interactions.				
7.1 Assumes professional responsibilities to provide safe, ethical and effective nutrition services. (D)	 7.1.1 Demonstrates ethical behaviors in accordance to the professional Code of Ethics. (D) 7.1.2 Engages in self-reflective practice activities to develop and maintain ongoing competence and professional behaviors. (D) 7.1.3 Adheres to nutrition related legislation, regulations and standards of practice. (D) 7.1.4 Applies client/patient-centered principles to all activities and services. (D) 7.1.5 Identifies and takes steps to manage unethical, incompetent and unsafe behavior. (S) 7.1.6 Practices in a manner that is respectful. (D) 7.1.7 Adheres to legislative requirements and facility/employer guidelines regarding protection of privacy and security of information. (D) 7.1.8 Maintains confidentiality and security in the sharing, transmission, storage and management of protected health information. (D) 	 Demonstrate understanding of Continuing Competence. Set SMART (specific, measurable, achievable, relevant, time-based) goals based on feedback from preceptors, peers and/or clients/patients. Attend ongoing trainings, seminars and webinars to keep abreast in the field of nutrition and be competent. Complete a self-assessment of own knowledge, skill and judgment. Consider and incorporate personal experiences. Incorporate client's/patient's needs and wishes in the nutrition care plan. Demonstrate understanding of mandatory reporting obligations (e.g., child or elderly abuse, professional misconduct). Accept responsibilities and accountability for own actions and decisions. Recognize and maintain professional boundaries; demonstrate an understanding of transfer and counter transference. Critically evaluate ethical situations and manage ethical dilemma. Understand bioethics and health case law; and the implications to practice. Apply principles of informed consent process to ensure the client/patient can accept or refuse services. Demonstrate understanding of privacy and confidentiality legislation and organizational policies. Obtain client/patient consent for the collection, use, and disclosure of personal information. Demonstrate understanding of confidentiality laws and regulations such as the Health Insurance Portability and Accountability Act (HIPAA). 	Course work, self-reflection/assessment activities, CDR Professional Development Portfolio, case study, project work, field placement • Research state and CDR licensure and recertification requirement. • Review ethical case studies and identify the ethical behaviors presented in the case (trust, respect, accountability etc.). • Review current legal cases and identify the impact to ethical practice (e.g., confidentiality, right to life) • Review case studies that present an ethical dilemma, weigh the pros and cons of the situation and make recommendations for managing the situation. • Complete a self-reflective exercise to identify one's own beliefs and values, and how these attributes impact professional relationships and practice. • Complete a learning module on the topic (confidentiality, privacy, HIPAA).	

GP Unit 7: Core Professional Behaviors Demonstrates professional behaviors and effective communication in all nutrition and dietetics interactions.			
Competencies	Performance Indicators	Learning Activities and Practice Illustrations	Demonstration/Assessment
7.2 Uses effective communication, collaboration and advocacy skills. (D)	 7.2.1 Applies effective and ethical communication skills and techniques to achieve desired goals and outcomes. (D) 7.2.2 Works with and facilitates intraprofessional and interprofessional collaboration and teamwork. (D) 7.2.3 Participates in advocacy activities to change or promote new legislation and regulation. (D) 7.2.4 Selects mode of communication appropriate to the messaging to meet the needs of the audience. (D) 	 Communicate in a clear, effective and respectful manner. Select mode of communication to meet the needs of the audience. Identify and address barriers to communication. Adapt communication styles to meet the needs of various individuals, groups and populations. Ensure timely, clear, accurate and valid documentation using correct spelling and grammar. Demonstrate proficient use of nutrition informatics. Demonstrate networking skills to build liaisons. Understand the mentoring role and practice mentoring others. Communicate to others the role, scope of practice, areas of expertise and value of the RDN and NDTR. Lead and participate in advocacy activities to change or promote new legislation and regulation. 	Role play, case studies, prepare education materials, presentations, field placement, chart review • Mentor a first-year student. • Speak with a legislator. • Attend a legislative assembly meeting/ event. • Conduct an in-service. • Conduct a chart review with a preceptor. • Write a blog post related to nutrition and dietetic advocacy.