

Informational Town Hall

Summary of the Draft Proposed 2027 Accreditation Standards

Surveys for public comment posted on ACEND Website

Write down your comments and feedback to add to the
surveys

Recording link: <https://vimeo.com/1147816823>



Welcome!

- Lines have been muted.
- Use the Q&A feature to post your questions.
- To enable closed captioning, select **Show Captions** icon **CC** from the meeting controls toolbar.



Using Q&A During ACEND Town Hall

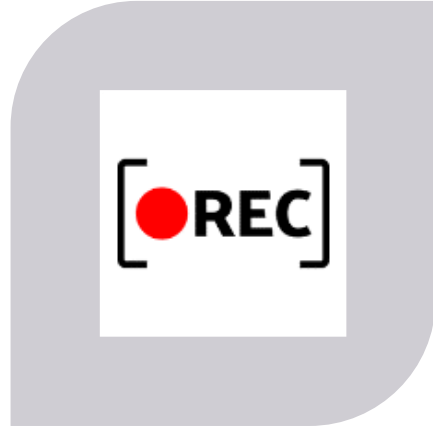


ACEND encourages attendees to use the Q&A feature to ask questions



At any point, ACEND reserves the right to remove an attendee from the Town Hall for inappropriate or harassing comments





This webinar is being
recorded



The slides and recording
will be shared on the
ACEND webpage and the
2027 standards webpage



Additional Webinars and Town Halls

- **Repeat** Webinar on 2027 Standards
December 18, 2025, 11:00 am – 12:30 pm CT
- **Q&A on the 2027 Standards** Town Hall
January 19, 2026, 11:00 am – 12:00 pm CT

Members of the Expanded Standards Committee (ESC)

ESC

- DPD faculty (n=2)
- DI faculty (n=3)
- CP faculty (n=1)
- GP faculty (n=2)
- NDTR faculty (n=1)
- Student member (n=1)
- RDN practitioners (n=3)
- Public members (n=2)

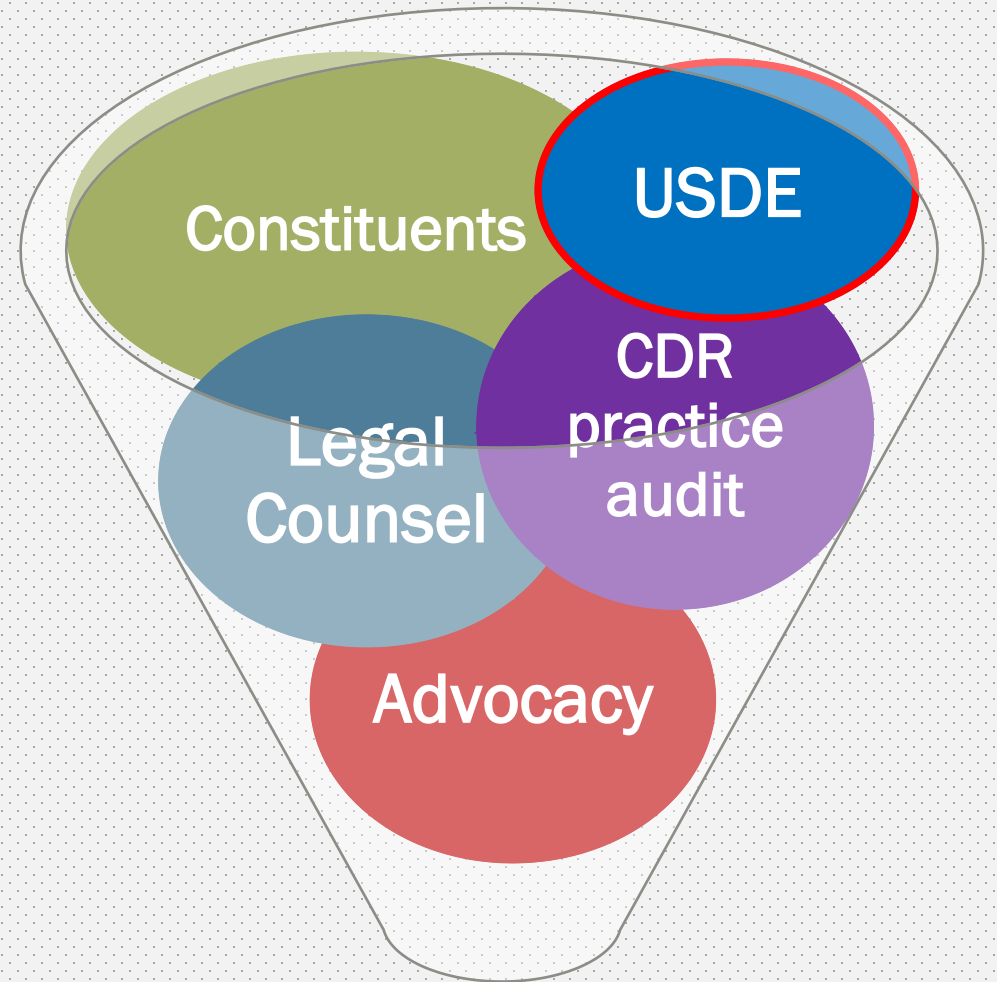
NDTR Subgroup

- NDTR faculty (n=3)
- NDTR practitioner (n=1)
- RDN faculty (n=2)
- RDN practitioner (n=1)
- Public member (n=1)

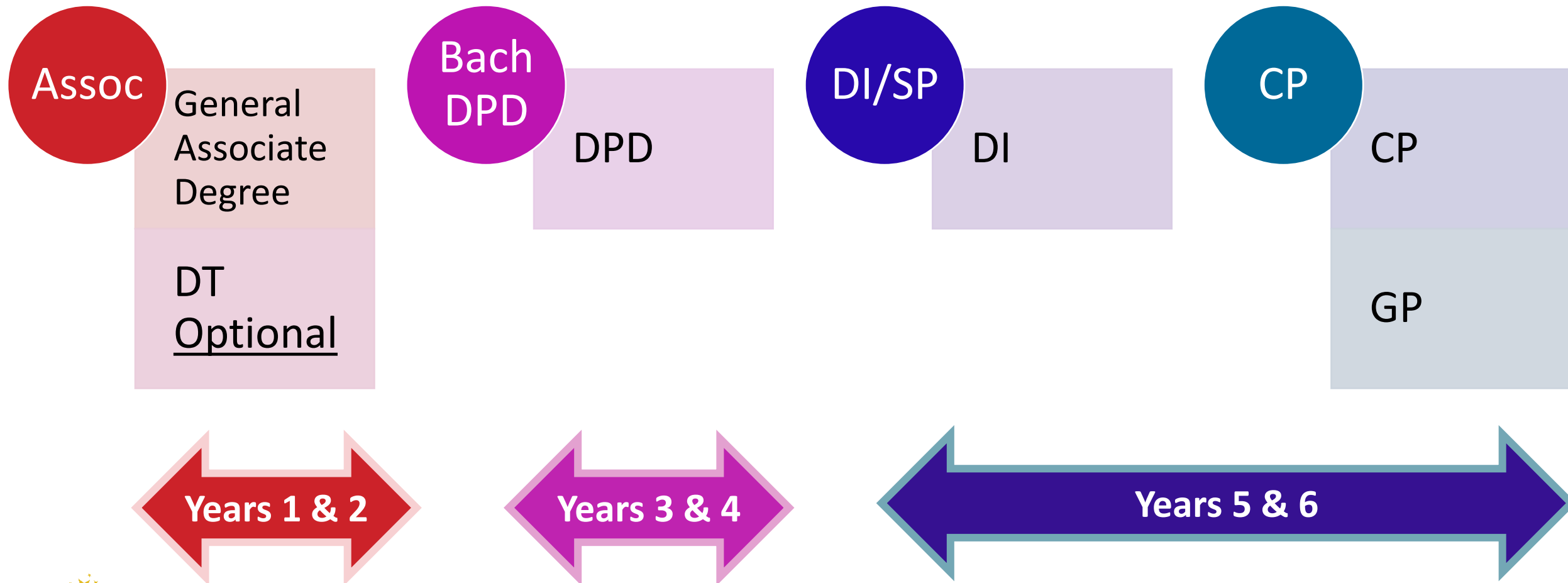
Revision Process of the Draft 2027 Standards

Revision Process:

- Required by USDE at least every 5 years
- Input from various sources



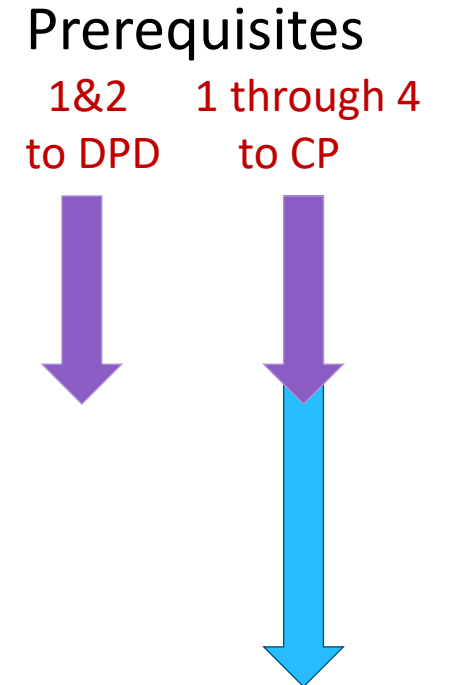
The 2027 Standards Types



Competencies Required for the RDN

Curriculum from Associate to Graduate

| | |
|---|--|
| Competencies for the first 2 years (sciences, electives, general nutrition, etc.) | Associate (~Years 1 & 2) |
| Competencies for the next 2 years (organic, biochem, metabolism, MNT, community, food science, quantity foods, foodservice, etc.) | DPD (~Years 3 & 4) |
| Competencies for the last 2 years (supervised practice rotations and academic coursework, e.g., epidemiology, research, etc.) | CP or DI with graduate degree (~Years 5 & 6) |





©I-Stock Purchased image

The RDN Curriculum Avoids Redundancy

| 2027 Standards | Existing 2022 Standards | |
|--|-------------------------|----------------------------------|
| Associate (~Years 1 & 2) | DPD Required Components | CP Required Components and KRDNs |
| DPD (~Years 3 & 4) | ↓ | |
| CP or DI with graduate degree (~Years 5 & 6) | | |

Summary of Major Changes by Standard

| Standard | Impact on Changes |
|------------|---|
| Standard 1 | Major Changes |
| Standard 2 | - |
| Standard 3 | Move to CBE Clinical skills |
| Standard 4 | - |
| Standard 5 | - |
| Standard 6 | Only for programs where students identify their own sites/preceptors |
| Standard 7 | - |
| Standard 8 | - |

Minimal changes to the standards templates



ACEND Promise of Support to Our Programs

- ACEND will develop crosswalks
- **Waterfall Implementation:** Time will be provided for major changes
- Free training for one year from ACEND on CBE
- Curated webpage on clinical skills
- Welcome other suggestions:
ACEND@eatright.org

Standard 1- Program Characteristics and Resources

RE 1.3 – Resources

RE 1.4 – Program Completion

RE 1.5 – Program Director Responsibilities

RE 1.6 – Program Length



RE 1.3 – Adequate Resources

Supporting our programs

Administrative

Emphasized support of
upper-level
administration

Budgeting Process

Shared decision making
between PD &
administration

Sufficient supervised
practice sites

Supervised Practice Sites

ISPP incorporated
into the standards

Removed ISPP

RE 1.4 – Program Completion Requirements CP/DI

“The graduate degree must be in a major course of study in human nutrition, food and nutrition, dietetics, public health, food systems management, or equivalent.”

- Remains broad: All current ACEND master’s degrees fit
- CDR eligibility requirement remains that the graduate degree requirement may be met in any area
- **No impact on current students** - recommend adopt new definition for future advisement
- Requirement **only for graduate programs under ACEND**

RE 1.4 - Program Completion Requirements

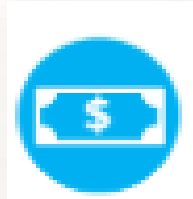
Protecting students- saving time and money

| Associate Degree | Bachelor's No DPD | DPD |
|--|---|--------------------------------|
| ACEND- accredited program, meets C&PIs of Years 1 & 2 | Must ensure that C&PIs of Years 1-4 are met (prerequisites or within program) | Meets C&PIs of Years 1-4 |

RE 1.5b Ensuring Program Director Authority



Authority for oversight over all activities related to program management



Authority for oversight over program's budget

RE 1.5b Admission and Traffic Rules (DPD, CP, DI)



CP and DI only must abide by the Dietetics Application Process Traffic Rules



DPD advisement must incorporate the Dietetics Application Process Traffic Rules for Applicants

Dietetics Applicant and Program Traffic Rules

These traffic guidelines have been established by the Accreditation Council for Education in Nutrition and Dietetics (ACEND) Dietetics Application Process Task Force and approved by the ACEND Board. These traffic rules represent the guidelines under which the nutrition and dietetics supervised practice programs [Dietetic Internships (DIs), Coordinated Programs (CPs), and Graduate Programs (GPs)] and their institutions have agreed to conduct the annual admissions process.

A. Applicant Traffic Rules

Applicants to dietetics programs, although some are not yet members of the dietetics profession, are bound to legal and ethical standards of behavior during the admission process.

TRAFFIC RULES FOR ALL APPLICANTS:

As an applicant to the profession of nutrition and dietetics, I pledge to:

- Act with honesty and integrity throughout the admission process when interacting with nutrition and dietetics programs, including program directors, faculty, staff, and Dietetics Inclusive Centralized Application System (DICAS) staff.
 - As an applicant, I will submit my own thoughts and original work/not falsify or plagiarize information in my application and/or interview.
- Be responsible and accountable for my actions.

RE 1.5b Training on the Standards

Protecting
Programs

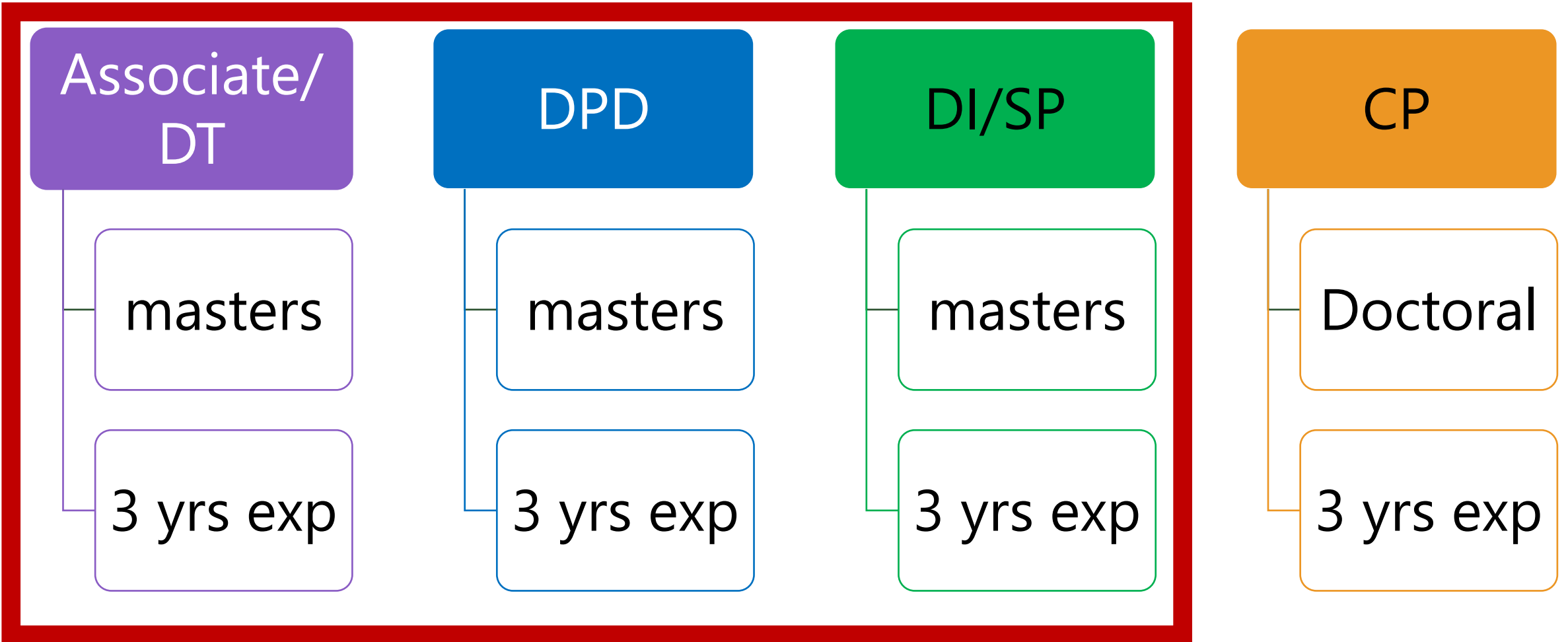
Completing ACEND training

Within 1 year of hire only for
those who have not previously
served as a program director

A circular diagram consisting of three thick, dark blue curved arrows forming a continuous loop. The arrows point clockwise, starting from the top, moving to the right, then down, and finally back up to the start.

Within 1 yr
of hire &
every 5 yrs

RE 1.5c – Education Requirement for Program Director



RE 1.5c Doctoral Degree for CP Program Directors (PDs)

- Does **NOT** apply to Associate, DT, DPD or DI programs
- Doctorate in any field- PhD, DCN, EdD, Dr.PH, etc.
- Existing PDs have > 10 years until June 1, 2037 to obtain
- Requirement only for the PD of the CP and not other faculty

ACEND is seeking feedback from CP Program Directors who currently do not meet this requirement

Associate/
DT

Not
specified

DPD

≤ 25 :
0.35 FTE

≥ 26 : 0.5
FTE

DI/CP

≤ 5 :
none

6-10:
0.5 FTE

11-20:
1 FTE

+0.5 FTE
for 10

RE 1.5d – Release Time for Program Director

FTE Calculations for Release Time (CPs and DIs only)

Programs with 6-10 students require .5 FTE

Programs with 11-29 students require 1 FTE

Programs with 30-39 students require 1.5 FTE

Programs with 40-49 students require 2.0 FTE

Programs with 49-59 students require 2.5 FTE

Programs with 60-69 students require 3.0 FTE

Programs with ≥ 70 students require 3.0 FTE + an extra 0.5 FTE for every additional 10 students beyond 79 students.

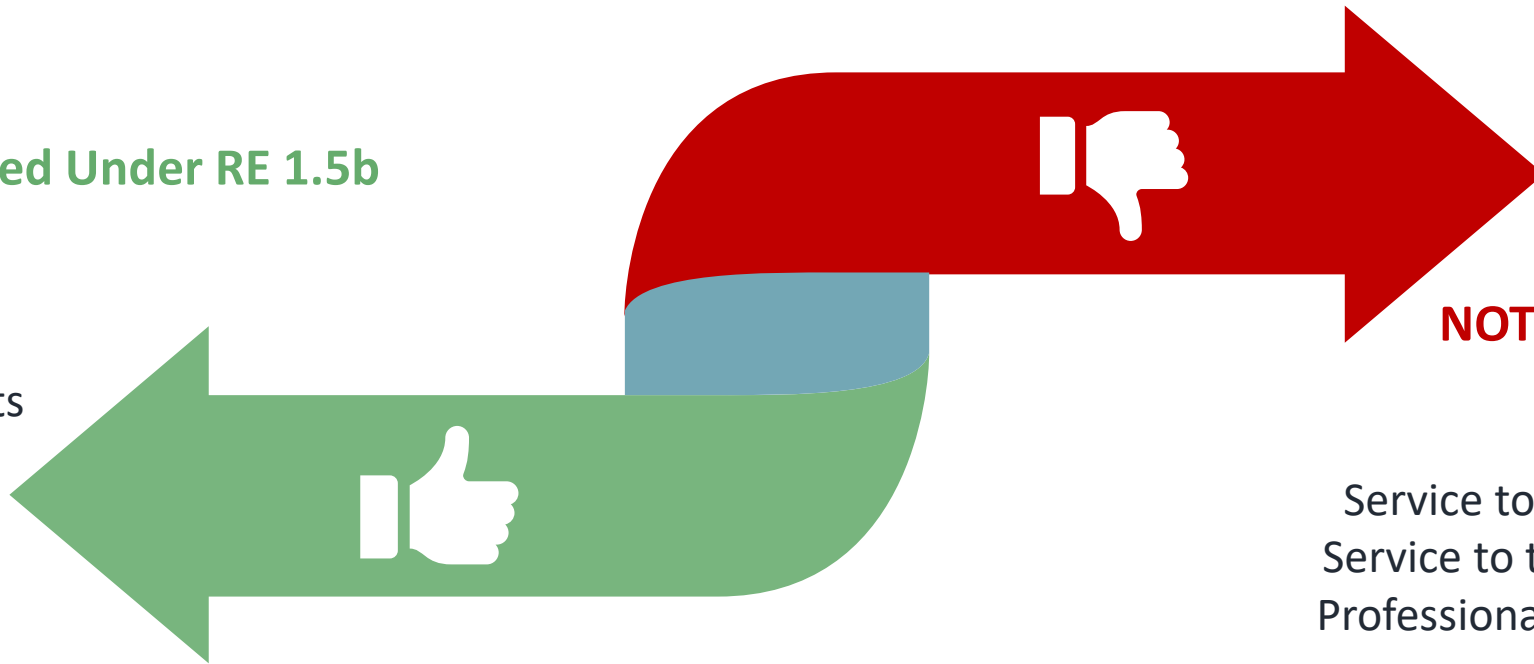
What Qualifies as Program Management

Acceptable Program Management Activities

ACCEPTABLE

Activities Listed Under RE 1.5b

Marketing
Recruiting
Advising
Placing students
ACEND reports



NOT ACCEPTABLE

Research
Teaching
Service to the institution
Service to the community
Professional development

Release time can be divided among multiple individuals

RE 1.5d – Release Time for Program Directors

Minimum FTE based on maximum enrollment (FT or PT) per cohort

Programs will be given a chance to decrease their maximum enrollment, if they wish

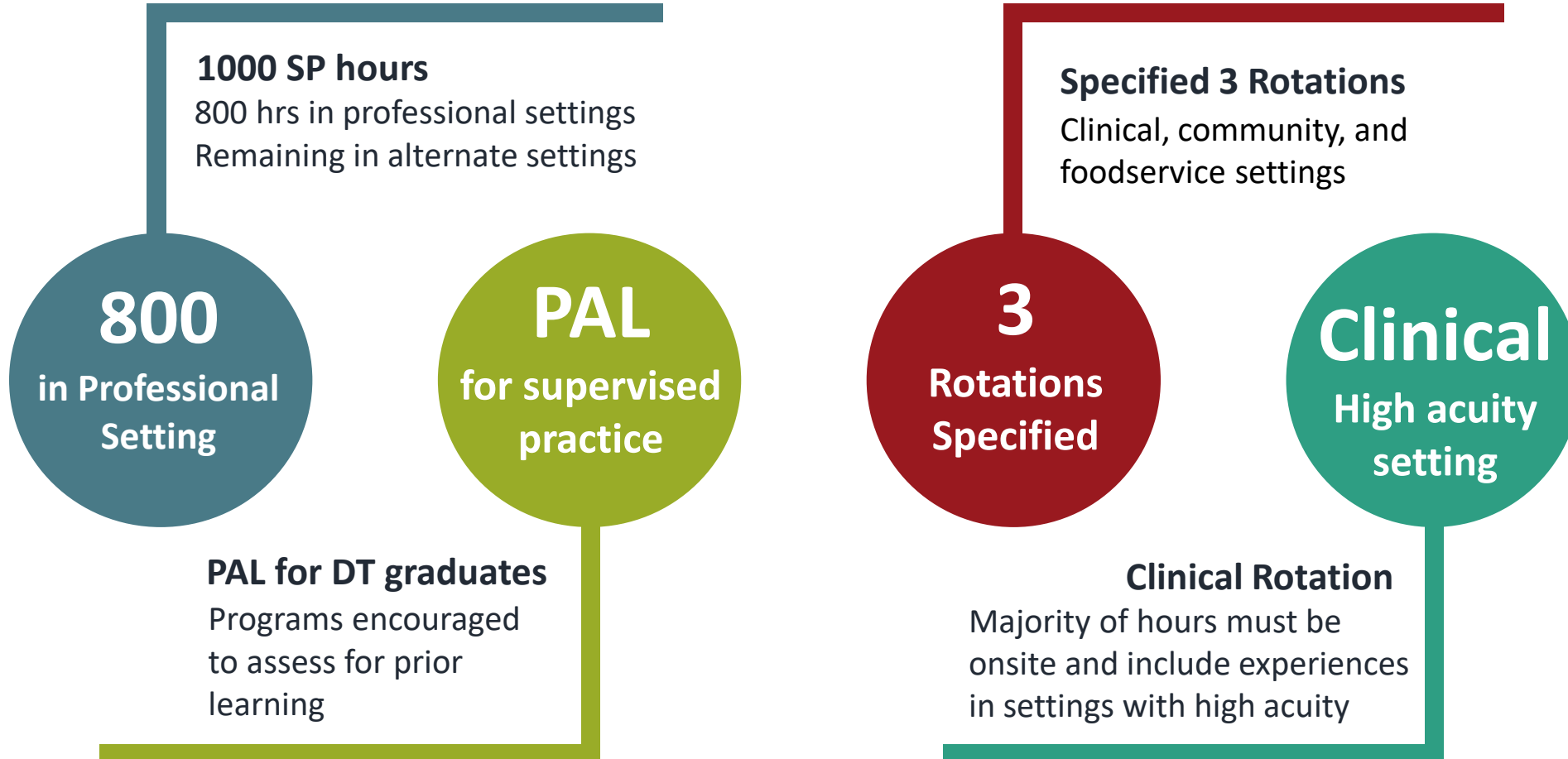
Providing **Survey Feedback** on Release Time

With a maximum enrollment
number reasonable for your
program:

- Are the proposed ratios reasonable?
- Will they work for your program? If not, what changes need to be made to the proposed ratios?

RE 1.6 Program Length (CP and DI Only)

No change to DT/DPD



Standard 2 – Mission, Goals, and Objectives

No major changes

RE 2.2:

- **DPD only:** removed DPD pass rate objective
- **All program types:** removed employer satisfaction objective

RE 2.3: Statement to ensure actions taken to improve outcomes for unmet objective

- moved from 2.2 to 2.3 and strengthened

Standard 3 – Curriculum and Learning Activities

Appendix A: Competencies and performance indicators

RE 3.1: Student competency assessment

RE 3.2: Curriculum map

RE 3.3: Learning activities

No changes to the concepts of RE 3.1-3.3

Curriculum Competencies and Performance Indicators

ACEND's CBE is a
HYBRID
educational
model



CBE Curriculum Structure

Level 1: UNITS

Broad, describe a group of competencies and a focus area



Level 2: COMPETENCIES

Identify expected performance (knowledge, skill and judgment)



Level 3: PERFORMANCE INDICATORS

Define the competency or the level of expected performance

Curriculum Assessment

- Competencies must be **assessed**
- The Performance Indicators should be **covered** in the curriculum, but not assessed



Performance Indicators

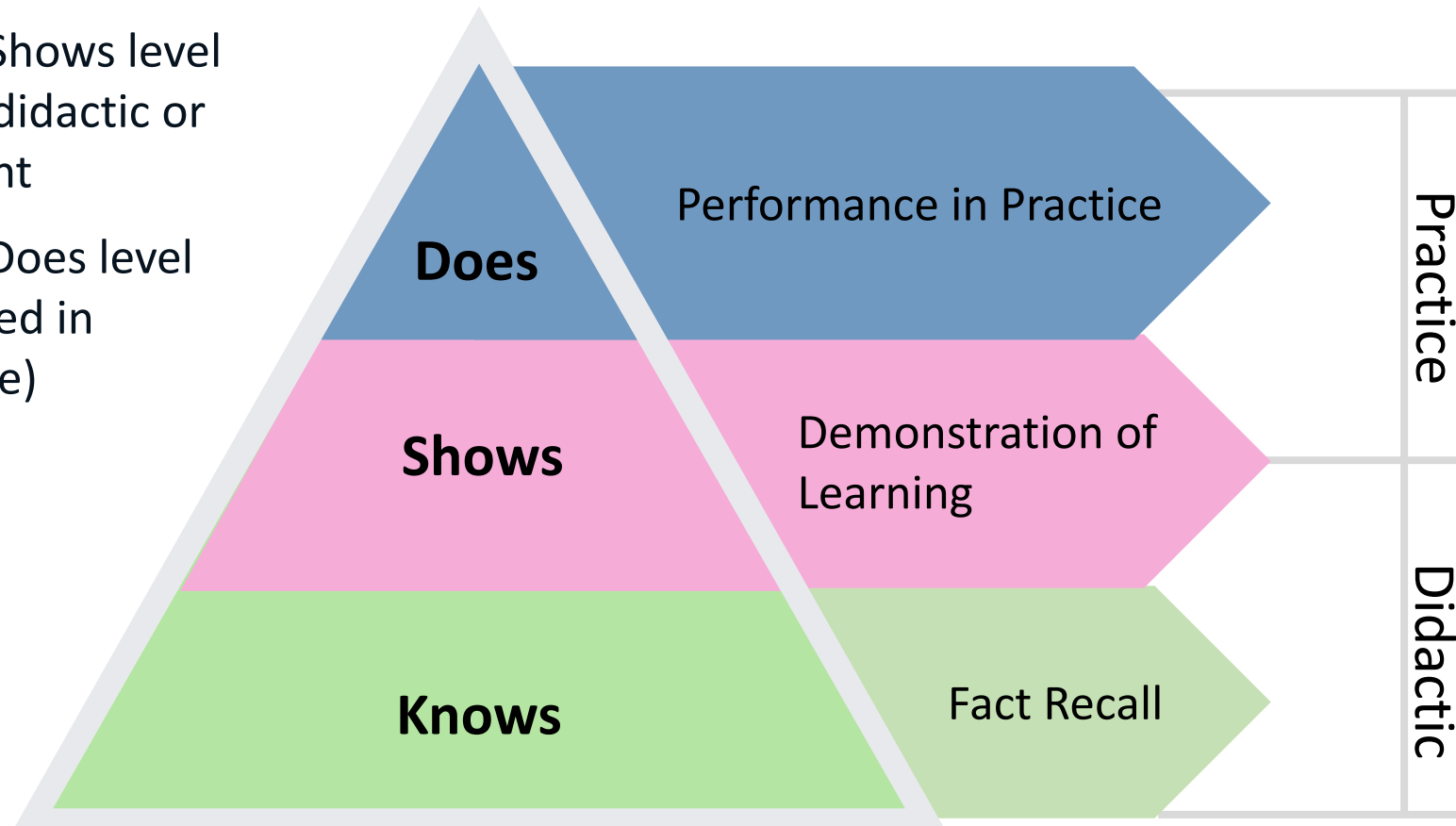
A gift

- Only covered in the curriculum
- Do not have to be assessed
- Clarify the competency - make expectations clear



ACEND's Adaptation of Miller's Pyramid of Competence

- Competencies at the Knows level could be seen as didactic
- Competencies at the Shows level could be divided into didactic or SP, depending on intent
- Competencies at the Does level are generally completed in practice (incl. alternate)



CBE Curriculum Components

Associate/DT and DPD

| Unit | | Competencies | | Performance Indicators | |
|--------------------------------|---|---|--|--|--|
| | | COMPETENCIES (skills/abilities to be assessed) | | PERFORMANCE INDICATORS (skills/abilities that define/describe the competency to be addressed) | |
| Unit 1: Foundational Knowledge | | | | | |
| 1.1. | Apply foundational knowledge in nutrition and dietetics (K) | 1.1.1 | | Describe nutrition metabolism, including the integration and regulation of micro- and macro-nutrition in metabolism (K) | |
| | | 1.1.2 | | Apply organic chemistry and biochemistry knowledge to make informed food and nutrition decisions for medical nutrition therapy and optimal health (K) | |
| | | 1.1.3 | | Apply an understanding of social, physical, and behavioral factors that impact food and nutrition across the lifespan (K) | |
| | | 1.1.4 | | Integrate knowledge of molecular factors, including genes, proteins, and metabolites, in the development and management of disease (K) | |
| 1.2 | Apply knowledge of pharmacology to recommend, prescribe, and administer medical nutrition therapy (K) | 1.2.1 | | Identify the classifications of nutraceutical pharmacological agents and their actions on the body (K) | |
| | | 1.2.2 | | Apply knowledge of medication classifications, categories and indicators for commonly used prescription and over-the-counter medications and dietary supplements. (e.g., weight loss, hypertension, diuretics, diabetes) (K) | |
| | | 1.2.3 | | Demonstrate understanding of pharmacokinetics as it applies to medications and supplements (K) | |

Expected Performance Level

CBE Curriculum Components

CP and DI

Unit

Competencies

Performance Indicators

Setting: Academic or Supervised Practice

Expected Performance Level

| COMPETENCIES (C) (skills/abilities to be <u>assessed</u>) and their PERFORMANCE INDICATORS (PIs) (skills/abilities to be <u>addressed</u> that define/describe the competency) | | ENVIRONMENT where Cs are to be assessed and where PIs are to be addressed | |
|---|---|--|---------------------|
| | | Academic | Supervised Practice |
| Unit 2: Nutrition Care Process and Medical Nutrition Therapy | | | |
| 2.1 Integrate food and nutrition sciences into the nutrition care process (D) | | | ✓ |
| 2.1.1 | Evaluate the evidence-based information on the relationship of molecular <u>science</u> (e.g., genes, proteins, metabolites) and microbes with disease states (S) | ✓ | |
| 2.1.2 | Integrate principles of anatomy, physiology, biochemistry, and food science to make decisions related to nutrition care (D) | | ✓ |
| 2.2 Conduct a nutrition assessment for individuals and groups, including clients/patients with high acuity (D) | | | ✓ |
| 2.2.1 | Implement nutrition assessment tools based on client/patient factors (D) | | ✓ |

CBE Curriculum Components

DI Programs Only

Setting: Academic
or Supervised
Practice

| COMPETENCIES (C) (skills/abilities to be <u>assessed</u>) and their PERFORMANCE INDICATORS (PIs) (skills/abilities to be <u>addressed</u> that define/describe the competency) | | ENVIRONMENT where Cs are to be assessed and where PIs are to be addressed | |
|--|---|---|------------------------|
| | | Academic | Supervised Practice |
| Unit 2: Nutrition Care Process and Medical Nutrition Therapy | | | |
| 2.1 Integrate food and nutrition sciences into the nutrition care process (D) | | | ✓ |
| 2.1.1 | Evaluate the evidence-based information on the relationship of molecular <u>science</u> (e.g., genes, proteins, metabolites) and microbes with disease states (S) | ✓ | |
| 2.1.2 | Integrate principles of anatomy, physiology, biochemistry, and food science to make decisions related to nutrition care (D) | | ✓ |
| 2.2 Conduct a nutrition assessment for individuals and groups, including clients/patients with high acuity (D) | | | ✓ |
| 2.2.1 | Implement nutrition assessment tools based on client/patient factors (D) | | ✓ |

- Must be in SP/DI
- Academic setting optional

- Must be in academic setting
- SP/DI optional

New Clinical Skills at the K/S Levels

- Injections
- Swallow assessment
- Imaging
- New content: genetics

At knows or shows levels and in the academic setting

| COMPETENCIES (C) (skills/abilities to be <u>assessed</u>) and their PERFORMANCE INDICATORS (PIs) (skills/abilities to be <u>addressed</u> that define/describe the competency) | | ENVIRONMENT where Cs are to be assessed and where PIs are to be addressed | |
|---|---|--|---------------------|
| | | Academic | Supervised Practice |
| 3.4 Perform intramuscular, subcutaneous and intravenous injections for nutrition-related pharmacotherapy (e.g., vitamins or insulin) (S) | | ✓ | |
| 3.4.1 | Apply knowledge of anatomy to landmark different injection or infusion sites and the rationale and indication for choosing the site (K) | ✓ | |
| 3.4.2 | Discuss with the client/patient the substance's benefits, risks, anticipated outcomes and <u>alternative approaches before initiating the injection or infusion</u> (K) | ✓ | |

| | | | |
|---|---|---|---|
| 3.5 Perform swallowing assessments to determine safety issues (S) | | | ✓ |
| 3.5.1 | Identify indications for the swallowing assessment based on client/patient risk factors and swallowing difficulties (K) | ✓ | |
| 3.5.2 | Identify etiological risk categories, including evaluating cranial nerve function and oral motor assessment (K) | ✓ | |
| 3.5.3 | <u>Assess signs of aspiration and dysphagia such as cough, changes in voice post swallow, and</u> | | |

| | | | |
|--|---|---|--|
| 3.6 Order and interpret imaging to identify the etiology of nutrition problems and to inform nutrition decisions (K) | | ✓ | |
| 3.6.1 | Understand the indications, limitations, and protocols for various imaging modalities (e.g., DEXA, x-ray, CT, MRI) (K) | ✓ | |
| 3.6.2 | Select the imaging modality based on the clinical question and client/patient characteristics (e.g., age, medical history, allergies) (K) | ✓ | |

| | | | |
|---|---|---|--|
| 2.5 Incorporate genetic data into a personalized nutrition plan (S) | | ✓ | |
| 2.5.1 | Examine the influence of genetic variations (e.g., SNPs) on nutrient metabolism and diet response (K) | ✓ | |
| 2.5.2 | Analyze and interpret results from genetic and nutrigenetic tests (S) | ✓ | |

Scope of Practice Does NOT Belong in Education



Feedback comments about being “out of scope” are NOT accurate

Competency Units for the Associate Degree Program

- Unit 1: Foundational Knowledge (1 C)
- Unit 2: Community Services (2 C)
- Unit 3: Leadership (3 C)
- Unit 4: Professional Behaviors (3 C)



9 Competencies
+ 2 Competencies
for the DT Option

Additional Units for the DT Option

- Unit 5: Patient/Care Services (2 C)
- Unit 6: Foodservice (3 C)

Competency Units for the DPD


- Unit 1: Foundational Knowledge (5 C)
- Unit 2: Community Services (3 C)
- Unit 3: Professional Behaviors and Leadership (3 C)
- Unit 4: Patient/Client Services (4 C)
- Unit 5: Foodservice (4 C)



Competency Units for the CP and DI

-CP responsible for all 26 competencies

- DI responsible for 18 SP competencies
- MS responsible for 8 competencies



26
Competencies
131 PIs

- Unit 1: Community, Public Health, and Population Health (4 C)
- Unit 2: Nutrition Care Process and Medical Nutrition Therapy (8 C)
- Unit 3: Clinical Skills (6 C)
- Unit 4: Leadership and Management (5 C)
- Unit 5: Critical Thinking and Research (3 C)

Current GPs have 36 C and 216 PIs

Providing Survey Feedback on the Curriculum

- Are the C&PIs clear?
- Is the level of performance (K, S, D) appropriate?
- Are any general concepts missing? Redundancies?
- Wording to improve clarity?

CP and DI only

- Is the setting (Academic or Supervised Practice) assigned to the C or PI appropriate?

Prerequisites for the DPD

Required Components

- 3.1 The program's curriculum must be designed to ensure the breadth and depth of requisite knowledge needed for entry to supervised practice to become a registered dietitian nutritionist.
- a. The program's curriculum must include the following required components, including prerequisites:
1. Research methodology, interpretation of research literature and integration of research principles into evidence-based practice
 2. Communication and documentation skills sufficient for entry into professional practice
 3. Principles and techniques of effective education, counseling and techniques
 4. Governance of nutrition and dietetics practice, such as the Code of Ethics for the Professional Dietitian and the Code of Ethics for the Professional Nutritionist, and the relationships in various practice settings
 5. Principles of medical nutrition therapy, the Nutrition Care Process, and the Nutrition Care Manual
 6. Role of environment, food, nutrition and lifestyle choices
 7. Management theories and business principles required to deliver nutrition and dietetics services
 8. Continuous quality management of food and nutrition services
 9. Fundamentals of public policy, including the legislative and regulatory environment of nutrition and dietetics practice
 10. Licensure and certification in the practice of nutrition and dietetics
 11. Individual National Provider Identifier (NPI)
 12. Health care delivery systems (such as accountable care organizations, managed care, medical homes, local health care agencies)
 13. Coding and billing of nutrition and dietetics services to obtain reimbursement for services from public or private payers, fee-for-service and value-based payment systems
 14. Food science and food systems, food safety and sanitation, environmental sustainability, global nutrition, principles and techniques of food preparation, and development, modification and evaluation of recipes, menus and food products acceptable to diverse populations
 15. Organic chemistry, biochemistry, anatomy, physiology, genetics, microbiology, pharmacology, statistics, logic, nutrient metabolism, integrative and functional nutrition and nutrition across the lifespan
 16. Reflective practice
 17. Human behavior, psychology, sociology or anthropology

Associate Degree

| COMPETENCIES (skills/abilities to be assessed) | | PERFORMANCE INDICATORS (skills/abilities that define/describe the competency to be addressed) | |
|--|--------|---|--|
| Unit 1: Foundational Knowledge | | | |
| 1.1. Apply foundational knowledge in nutrition and dietetics (K) | 1.1.1. | Perform food and nutrition calculations using math skills (S) | |
| | 1.1.2. | Apply knowledge of microbiology to food safety principles (K) | |
| | 1.1.3. | Demonstrate knowledge of chemistry to the fundamentals of nutrition (K) | |
| | | Demonstrate knowledge of basic food science to food preparation techniques and culinary arts (S) | |
| | | Identify normal and abnormal anatomy and physiology related to disease, wellness, and nutrition (K) | |
| | | Apply knowledge of psychology, sociology, or anthropology to human behavior (K) | |
| | | Identify the role of nutrition across the lifespan (K) | |
| | | Identify appropriate use of medical terminology (K) | |
| | | Identify the components of the Nutrition Care Process (K) | |
| | | Identify health care delivery systems that impact nutrition and dietetics (K) | |
| Unit 2: Community Services | | | |
| 2.1. Promote health and wellness for individuals and groups (D) | 2.1.1. | Plan meals that promote health for individuals and target groups (D) | |
| | 2.1.2. | Identify nutrition and health assessment strategies to create a consultation and meal plan | |

C&PIs for years 1&2
(Associate Degree)

If concept is not in the DPD curriculum,
check the Associate's



Prerequisites for the CP and DI

Required Components & KRDNs

- 3.1 The program's curriculum must be designed to ensure the breadth and depth of requisite knowledge needed for entry to supervised practice to become a registered dietitian nutritionist.
- a. The program's curriculum must include the following required components, including prerequisites:
1. Research methodology, interpretation of research literature and integration of research principles into evidence-based practice
 2. Communication and documentation skills sufficient for entry into professional practice
 3. Principles and techniques of effective education, counseling and behavior change techniques
 4. Governance of nutrition and dietetics practice, such as the role of the Registered Dietitian Nutritionist and the Code of Ethics for the Profession of Dietetics in various practice settings
 5. Principles of medical nutrition therapy, the Nutrition Care Process, and the role of the Registered Dietitian Nutritionist
 6. Role of environment, food, nutrition and lifestyle choices
 7. Management theories and business principles required to deliver nutrition and dietetics services
 8. Continuous quality management of food and nutrition services
 9. Fundamentals of public policy, including the legislative and regulatory environment of nutrition and dietetics practice
 10. Licensure and certification in the practice of nutrition and dietetics
 11. Individual National Provider Identifier (NPI)
 12. Health care delivery systems (such as accountable care organizations, managed care, medical homes, local health care agencies)
 13. Coding and billing of nutrition and dietetics services to obtain reimbursement for services from public or private payers, fee-for-service and value-based payment systems
 14. Food science and food systems, food safety and sanitation, environmental sustainability, global nutrition, principles and techniques of food preparation, and development, modification and evaluation of recipes, menus and food products acceptable to diverse populations
 15. Organic chemistry, biochemistry, anatomy, physiology, genetics, microbiology, pharmacology, statistics, logic, nutrient metabolism, integrative and functional nutrition and nutrition across the lifespan
 16. Reflective practice
 17. Human behavior, psychology, sociology or anthropology

2022

2027

DPD

| COMPETENCIES (skills/abilities to be assessed) | | PERFORMANCE INDICATORS (skills/abilities that define/describe the competency to be addressed) | |
|---|---|--|--|
| Unit 1: Foundational Knowledge | | | |
| 1.1. | Apply foundational knowledge in nutrition and | 1.1.1 | Describe nutrition metabolism, including the integration and regulation of micro- and macro-nutrition in metabolism (K) |
| | | | Apply organic chemistry and biochemistry knowledge to make informed food and nutrition choices for medical nutrition therapy and optimal health (K) |
| | | | Understand the impact of social, physical, and behavioral factors that impact food and nutrition across the lifespan (K) |
| | | | Understand the role of molecular factors, including genes, proteins, and metabolites, in the prevention and management of disease (K) |
| | | | Understand the classifications of nutraceutical pharmacological agents and their actions on the body (K) |
| | Recommend, prescribe and administer medical nutrition therapy (K) | 1.2.3 | Apply knowledge of medication classifications, categories and indicators for commonly used prescription and over-the-counter medications and dietary supplements. (e.g., weight loss, hypertension, diuretics, diabetes) (K) |
| | | 1.2.5 | Demonstrate understanding of pharmacokinetics as it applies to medications and |

C&PIs for years 1 through 4
(Associate Degree and DPD)

Curriculum builds on each other
Avoided redundancy and repetition



RE 3.1 – Student Competency Assessment

Moved current RE 4.1 to RE 3.1

- Minimize confusion and redundancy: curriculum and student assessment are now in same standard
- CAT (Competency assessment table) template includes only the competencies (not Pls)

Free CBE training on assessment of competencies for one-year

Standard 4 – Curriculum Evaluation and Improvement

No major changes - mostly reorganization

| Existing 2022 | Proposed 2027 |
|-------------------------------|---|
| RE 4.1: Competency Assessment | Moved to Standard 3, RE 3.1 |
| RE 4.2 | Combined into RE 4.1- Curriculum review and improvement |
| RE 4.3 | |



Standard 5 – Faculty and Preceptors

Based on program feedback to keep faculty and preceptors separate

RE 5.1: Program Faculty

RE 5.2: Program Preceptors (no change)



RE 5.1 Program Faculty

DPD/CP: At least one full-time faculty member, in addition to the program director, must hold the RDN credential.

All Programs: The Nutrition Care Process component must be taught by an RDN.



Standard 6 – Supervised Practice Sites

RE 6.1: Supervised Practice Sites Policies and Procedures

RE 6.2: Student-Identified Supervised Practice



Programs with Student-Identified Supervised Practice

RE 6.2 – New RE

RE 7.2k – Strengthened



RE 6.2: For Programs with Student-Identified SP



Ensure that all sites
are secured before
students begin
their SP
component



Written policies
describing process
of securing sites
when students
unable to

Standard 7 – For Programs with Student-Identified SP (CP & DI only)

RE 7.2k: If students are required to locate their own supervised practice sites and/or preceptors, requirements for this must be described, including the program's role and responsibility to secure geographically accessible sites for students before they begin their supervised practice component to ensure timely completion of the program.

Geographically accessible: USDE term - a site within reasonable distance

Standard 7

RE 7.1 – No changes

RE 7.2 – minimal changes



Standard 8 – Policies & Procedures for Enrolled Students

- Existing RE 8.1 and 8.2 combined into a single RE
- Reorganized for a more logical flow
- Minor changes to improve clarity



Standard 8 – Maximum Time for Program Completion

All Programs

Maximum time allowed to complete program requirements and receive a verification statement must follow the sponsoring academic institution's policy or no less than five years.

If no institution policy: No less than 5 years from the time the student begins the program

International Programs

- Follow the Standards – No separate international standards
- Exceptions located in Appendix B
- DT and DI excluded

International
Associate

International
Bachelor's DPD

International
Graduate CP

**Practice in own country
Apply to DPD**

**Practice in own country
Apply to CP or SP/DI
Use PAL for SP hours**

**Practice in own country
Sit for RD exam**

Surveys for Public Comments

- Total of four (4) surveys
- Option in Standards survey to give detailed or general feedback



Total of Four (4) Surveys

Curriculum (3 surveys)

Competencies & Performance Indicators

Standards

Survey to comment on the draft Standards and Required Elements

CP/DI

Survey to comment on the draft C&PIs for the CP/DI (includes competencies in academic settings)

DPD

Survey to comment on the draft C&PIs for the DPD

Associate/DT

Description of variable costs

Examples:
books,
transportation,
housing

Public Comments

Opportunity to Provide Feedback on the Draft 2027 Standards

Public Comments Surveys:

- Surveys to evaluate the Draft 2027 Accreditation Standards are posted on the ACEND website:
<https://www.eatrightpro.org/acend/accreditation-standards-fees-and-policies/proposed-2027-standards>
- Close Tuesday February 10, 2026



**THANK
YOU**

Any Questions?





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