FUTURES THINKING, VISIONING AND CHANGE LEADERSHIP PROCESS OF THE COUNCIL ON FUTURE PRACTICE

Purpose of the Council on Future Practice (CFP)
The CFP was originally created based on a recommendation from the Phase 2 Future Practice and Education Task Force. The Task Force recommended a permanent organized body within the Academy responsible for formalizing an ongoing visioning process to define future nutrition and dietetics practice at all levels and to identify educational and credentialing needs required for future practitioners and their development (see page 8 for final approved HOD Motion #1, May 2008 for details).

This Council works in collaboration with the Commission on Dietetic Registration (CDR), Accreditation Council for Education in Nutrition and Dietetics (ACEND) and Nutrition and Dietetics Educators and Preceptors (NDEP) to project the future practice needs for the profession of nutrition and dietetics. Each of these organizational units (future practice, education, credentialing and accreditation) represent the four critical segments necessary for producing new practitioners, as well as assisting experienced practitioners to move up the career ladder.

One of the functions of the Council is to ensure the viability and relevance of the profession of nutrition and dietetics via engaging in a visioning process to initiate recommendations for general practice roles, specialist practice roles and advanced practice roles. An additional benefit of the visioning process is identification of future mega issues for prioritization by the House of Delegates. This prioritized list provides the HOD Leadership Team (HLT) with topics for future HOD meeting dialogue sessions.

Definition of Visioning Process
A process in which a group describes the future it wants. Visioning creates a picture of the desired future status, affirms the best of what could be, visualizes what excellence looks like, and shows the best scenario for the time. Visioning illustrates how an organization or profession wants to “look” to insiders and outsiders and some say the vision is what you would describe if you had an overnight epiphany that illustrates the perfect position for an organization or profession.

Rationale/Value of Visioning
The visioning process focuses on the most important future image and allows consensus building. It allows development of goals, plans and objectives. All units within a group can see the future image, all members and stakeholders can understand the goals and objectives, motives and resource expenditure. The creation of a vision encourages cooperation, increases efficiency, links the work of different units, creates excitement within an organization, and provides a consistent direction. Proponents of the visioning process say it diminishes the time spent in unproductive or wasted efforts and builds a blueprint for action.

Overview of the Visioning Process
The Council on Future Practice (CFP) takes a systems view of the profession of nutrition and dietetics by looking externally at society’s future needs and changes and internally at the profession’s future needs and changes and how the profession is evolving. The Council is knowledgeable about the profession, utilizes evidence and observations, understands the job market, anticipates needed changes and analyzes implications to move the profession forward into innovative fields and practices and towards leadership roles. The CFP engages in futures thinking and visioning and identifies strategies to advance the profession. The Council uses leadership, collaboration and communication skills to build and sustain relationships, including those with ACEND, CDR, NDEP and other Academy units, in order to move strategies into action and lead and effect change in the Academy and in the profession.
Final 4/30/14

Guidelines and Timeline for Conducting the Visioning Process

The Visioning Process is continuous including a three-year cycle of activity identified below, and incorporates the components listed on pages 3-6 of this document.

Program Year 1 (June 1 – May 31)

1. CFP reviews the evidence and makes observations about trends, events, developments and issues (including brutal facts) affecting the profession and shaping future nutrition and dietetics practice. The Council utilizes the members of the CFP ‘Think Tank’ and identified external organizations for insight into important trends.
2. CFP utilizes the categories of the scanning framework to identify a maximum of 10 top priority areas and their related trends and change drivers. For more information on the scanning framework, refer to page 14, Council’s Futures Thinking and Change Leadership Report (June 2013).
3. Based on the analysis, evaluation and synthesis of the information obtained in numbers 1 and 2 above, the CFP prepares a written document which includes the 10 top priority areas and their related trends and change drivers along with the rationale, supporting evidence and appropriate documentation.
4. CFP submits the written document, which includes the 10 top priority areas and their related trends and change drivers along with the rationale, supporting evidence and appropriate documentation, to the HLT for review and feedback prior to sharing with other Academy organizational units and external organizations.
5. CFP identifies questions and develops a survey tool to seek input on priority areas, trends, and change drivers from all Academy organizational units and external organizations.
6. CFP educates all Academy organizational units on the purpose of visioning and members’ roles in providing input on the Council’s scanning framework and top priority trends and change drivers (January/February). Appropriate education ensures that all organizational units participate fully in the visioning process and incorporate activities related to the process into their organizational unit’s program of work.

Program Year 2

First 6 months of program year (June 1 - November 30; December is used to allow groups who need more time to submit their input).

1. CFP distributes the written document, as approved by the HLT, and survey tools and directions to all Academy organizational units and external organizations at the start of the program year (early June).
2. Organizational units utilize the survey tools to solicit constituent input.
3. Organizational unit leaders analyze, evaluate, synthesize and prioritize their constituents’ input.
4. Organizational unit leaders submit their unit’s 5 top priority trends and change drivers, including their implications for the future of the profession and practice of nutrition and dietetics to CFP, along with the rationale, supporting evidence and appropriate documentation.
5. External organizations submit input on what they perceive as the 5 top priority trends and change drivers, including their implications for the future of the profession and practice of nutrition and dietetics to CFP, along with the rationale, supporting evidence and appropriate documentation.

Last 6 months of program year (January 1-May 31)

6. CFP reviews the input from Academy organizational units and external organizations and drafts recommendations based on evaluation, analysis and synthesis of the input and feedback.
7. CFP seeks organizational unit and external organization feedback on the draft recommendations.
8. CFP reviews the feedback on the draft recommendations from the organizational units and external organizations to finalize as needed changes to the recommendations.

Program Year 3 (CFP may use former CFP members to complete the work during Year 3 as appropriate)

1. CFP develops a visioning report (which includes a specific title, date of release and publication).
2. CFP finalizes and distributes the visioning report to the HOD, followed by all other Academy organizational units, for their discussion and determination of unit actions to be taken based on the recommendations.
3. CFP publishes the visioning report in the Journal of the Academy of Nutrition and Dietetics.
## Components of Visioning

| 1. Use a scanning framework to look systematically at society’s future needs and changes (externally) and at how the profession is evolving (internally) and identify major change drivers. | The Council utilizes the scanning framework on page 14 of the Council’s Report on Futures Thinking and Change Leadership, which includes the following **16 categories**: | The Council completed the scanning framework at its June 2013 meeting which resulted in the following priority trend categories for the program year: |
| --- | SOciety’s Future Needs & Changes | 1. Demographics | 1. Demographics (diversity, generations, geographical distribution, income & equity, education levels) |
|  | 5. Public Health Policy & Priorities | 5. Global Context |  |
|  | 6. Economics/Market Forces | Profession’s Future Needs & Changes |  |
|  | 7. Science & Technology | 9. Education/Professional Development |  |
|  | Professions Future Needs & Changes | 11. Workforce Projections |  |
|  | 9. Education/Professional Development | 12. Practice Requirements |  |
|  |  | 14. Credentialing & Licensure |  |
|  |  | 15. Research to Practice |  |
|  |  | 16. Values & Ethics |  |
| a. Identify issues, events, developments and trends and their patterns which form change drivers that indicate the potential need for change | As another external view of society’s future needs, the Council can utilize the **10 change drivers** identified in the *Future Changes Driving Dietetics Workforce Supply and Demand: Future Scan 2012 -2022*:
1. Aging population drives opportunities and challenges |
<p>| b. Issues – matters of public or organizational concern | 2. Population and workforce diversity challenges profession to change |
| c. Events – when something big happens that may be a turning point | 3. Workforce education meets job market demand |
| d. Developments – when new capability or attributes emerge | 4. Interdisciplinary teaming drives innovation |
| e. Trends – a string of issues, events or developments that build momentum | 5. Generalists gain edge on specialists |
| f. Change drivers – issues, events, developments and trends coming together as a major force of change | 6. Technology transforms nutrition counseling |
|  | 7. Personalized nutrition evolves |  |
|  | 8. Food industry transforms for public priorities |  |
|  | 9. Health care reform boosts access to dietetics services |  |
|  | 10. Population risk factors and nutrition initiatives increase demand |  |</p>
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<th>Components of Visioning</th>
<th>What Does It Mean?</th>
<th>Example of CFP Action</th>
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<td>2. Challenge the assumptions and explore the future as it could be by examining the following: a. Our world as it is - trends, issues, events &amp; developments b. Our world as we believe it is - history, values, identity c. Our world as it could be - provocative forecasts, scenarios/alternative futures, vision of a preferred future.</td>
<td>The Council examines assumptions and develops one or more of the following: 1. Provocative forecast - describe the implications of a specific change driver in 2-3 sentences. 2. Scenarios/alternative futures - describe different alternative paths based on the potential impact of the change driver in 2-3 pages. 3. Vision of a preferred future - develop scenarios that go from present to future to get to the preferred future.</td>
<td>The Council surveyed members of NDEP DPG regarding various issues facing dietetics education before initiating the development of the Visioning Report. During the development of The Visioning Report: Moving Forward – A Vision for the Continuum of Dietetics Education, Credentialing and Practice (2012), the Council workgroup made assumptions about what would happen to the profession if nothing was done. These assumptions helped to shape the recommendations found in the document.</td>
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<td>3. Filter all that happens in our world for sense making and insight and using the priorities from the scanning framework exercise identify: a. Meaningful and relevant patterns-weak signals gaining strength. b. Game changers—things gone wrong that could change the profession quickly or breakthroughs/innovations gone right that could advantage the profession. c. Strategic issues—issues that matter to the profession from your</td>
<td>The Council determines if there are patterns, game changers, and/or strategic issues which should be addressed and whether action is needed. The Council examines if any prior efforts to address the patterns, game changers and/or strategic issues have made an impact. Based on the above analyses and the questions noted in the first column, the Council determines the priority strategic issue to address and identifies potential strategies, initiatives and actions to address the strategic issue. The Council then discusses and prioritizes the potential strategies, initiatives and actions.</td>
<td>In developing The Visioning Report: Moving Forward – A Vision for the Continuum of Dietetics Education, Credentialing and Practice, the CFP workgroup looked for patterns, game changers and strategic issues and things that should not change. One of the patterns observed was the increase in the number of unmatched DPD students who did not obtain an internship. (Patterns) Also, the implementation of the ISPP as a new route to RDN registration did not demonstrate a positive impact on the number of DPD students who did not have a route to registration eligibility. (Game changers)</td>
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<td>Perspective and Priorities</td>
<td>The Council also identifies things that should not change, such as core values, and works to preserve them.</td>
<td>The Council workgroup identified the patterns and game changers related to the continuum of education and credentialing as strategic issues and created The Visioning Report: Moving Forward — A Vision for the Continuum of Dietetics Education, Credentialing and Practice, which contained recommendations to address the issues (Strategic issues)</td>
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| Use a 3 part test to evaluate strategic issues:  
  - Does the change affect our mission?  
  - Can you intervene in the course of events? If not, just monitor the change to avoid getting blindsided.  
  - Is this issue one you must lead for the future of the profession? If yes, then this is your strategic issue. |                                                                                                      | In its recommendations, the workgroup agreed to keep dietetics as a broad-based profession, by maintaining consistency with the current definition of dietetics, which differentiates dietetics from other areas of nutrition (Things that should not change) |
| What’s not changing and why? |                                                                                                      |                                                                                                  |

4. Engage in anticipatory learning  
   a. Make scanning a continuous systematic core function.  
   b. Drive the learning through your organization.  
   c. Make what you learn readily accessible.  
   d. Adopt easy to read and use formats.  
   e. Get information into the hands of key users and decision makers (units & groups who have the ability to affect change).  
   f. Engage members in the sense making and explore the implications.  

The Council identifies members or Academy organizational units who are willing to adopt a new vision for the future and challenges them to help move the strategies into action. This can involve both internal and external stakeholders to obtain reaction and determine how to proceed.  

The Council worked with the HOD Leadership Team to develop a dialogue session for the HOD based on The Visioning Report: Moving Forward — A Vision for the Continuum of Dietetics Education, Credentialing and Practice. This allowed the Council, ACEND, and CDR to engage members in exploring the implications of the Visioning Report and to understand their reactions and concerns. Members’ reactions, along with feedback from the National WIC Association, the Association of Nutrition Departments and Programs and the VA Internship Program Directors, were used to inform next steps.
Components of Visioning  | What Does It Mean?  | Example of CFP Action
---|---|---
5. Understand your choices and examine alternative futures to help define and pursue a preferred future.  
   a. *Used future* – image of the future is borrowed from someone else who may not make the same choices today.  
   b. *Disowned future* – in choosing a future, we rely too much on what makes us successful and fail to integrate other potentially important goals, values or capabilities that are also important.  
   c. *Alternative futures* - focusing on a range of alternatives, so we can better prepare to thrive regardless of whatever happens because no one can predict the future.  
   d. *Preferred future* - your vision of what will exist if you perform at your highest potential in leading change.

| The Council determines whether the strategies, initiatives and actions for moving forward are valid and will be beneficial to the profession.  
   The Council chooses those strategies, initiatives and actions that will keep nutrition and dietetics professionals at the forefront of new roles and capabilities and that will facilitate movement towards a preferred future for the profession and the Academy.  
   The Council uses the strategies, initiatives and actions identified to address strategic issues to:  
   - drive the CFP’s program of work  
   - make recommendations to other Academy units  
   - inform actions to be taken by Academy organizational units.

| This feedback received on The Visioning Report: Moving Forward – A Vision for the Continuum of Dietetics Education, Credentialing and Practice was utilized by the joint leaders of ACEND, CDR, CFP, NDEP and the Education Committee to determine next steps in implementation.
Appendix A: History of Visioning by the Council on Future Practice Since its Inception in 2009

2009-2010: A Council workgroup did some exploratory work to identify the rationale and value of a visioning process. This workgroup did not complete its charge due to the workgroup chair’s resignation from the Council due to retirement.

2010-2011: The first visioning process was conducted to identify future practice roles for the DTR, RD, Specialist RD and the Advanced Practice RD. The process utilized DPGs to provide input along with external organizations. The final CFP Visioning Report 2011 was distributed electronically and posted on the Council’s web page.

2011-2013: The need for visioning related to future education and credentialing was identified as a need during the first Joint Leaders Meeting (ACEND, CDR, and CFP) in November 2011. The Council established a workgroup to lead the visioning process, which included the review and analysis of over 60 key articles and reports from the literature and the Academy. The process also incorporated input and feedback from NDEP DPG (now NDEP, an Academy organizational unit), ACEND, CDR, and the Education Committee, as well as members of the Council’s Think Tank.

The Visioning Report: Moving Forward – A Vision for the Continuum of Dietetics Education, Credentialing and Practice was released to the House of Delegates (HOD) and the membership in September 2012 and more than 600 Academy members provided electronic feedback to the report. A dialogue session was conducted by the HOD in October 2012, with the Visioning Report serving as the backgrounder for the session.

The results of this dialogue were the basis for discussions by a second joint meeting of ACEND, CDR, CFP, NDEP and the Education Committee in January 2013. The outcome of this meeting was a report on directions to be taken by the various organizational units which was released in April 2013. The Visioning Report and status of the recommendations and agreements for moving forward were published in the December 2013 *Journal of the Academy of Nutrition and Dietetics*.

Other Examples of Council Initiatives Based on Some Version of a Visioning Process:

- **2009-2010:** Established the Dietetics Career Development Guide (including the definition of generalist, specialist and advanced practice).
- **2010-2011:** Collaborated with ACEND (previously called the Commission on Accreditation of Dietetics Education), CDR and Education Committee to conduct the Future Connections Summit on Dietetic Practice, Credentialing and Education. A select group of 207 participants assembled in seven regional locations and virtually to participate in a collaborative experience of future search and design thinking. Over three days, they worked together in a future search to understand the profession’s future challenges and opportunities and discover a shared vision. A final report of the Summit was distributed to Academy organizational units and posted on the Council’s web page. Proceedings of the Summit were published in the form of two articles in the October 2011 *Journal of the American Dietetic Association (currently titled Journal of the Academy of Nutrition and Dietetics)*.
- **2011-2012:** Recommended to the Academy BOD the need to create a fellow program for Academy members to recognize their contributions to the profession (FAND).
- **2012-2013:** Recommended that DIFM DPG develop a Certificate of Training Program in Integrative and Functional Nutrition.
- **2012-2013:** Recommended that CDR develop a board certified specialist in Obesity and Weight Management.
- **2013-2014:** Developed and distributed the report entitled ‘A Future - Focused Vision for a New Model of Differentiated Entry-Level Nutrition and Dietetics Practice’.
- **2013-2014:** Developed the concept for a new CFP award to recognize a team of innovative visionary leaders.
SUBJECT: Phase 2 Future Practice & Education Task Force Final Recommendations #1, #9, #10 and #11

The House of Delegates conducted a dialogue on the final recommendations of the Phase 2 Future Practice & Education Task Force on May 3, 2008. The purpose of the dialogue was to respond to the proposed final recommendations presented by the Phase 2 Future Practice & Education Task Force.

As a result of this dialogue, the majority of delegates supported and understood Task Force recommendations #1, #9 (previously #10), #10 (previously #11) and #11 (previously #12).

Therefore, be it resolved that the House of Delegates approve the following Phase 2 Future Practice & Education Task Force recommendations including the referral to the appropriate ADA organizational unit:

Recommendation #1: The Task Force recommends establishment of a formalized unit within the House of Delegates to:
- formalize an ongoing visioning process to identify/define future practice roles and the broad knowledge and skills needed for these roles.
- identify and monitor emerging practice roles, opportunities, and related formal and informal educational needs on an ongoing basis.
- collaborate with CADE, CDR, DPGs and other organizational units as needed.
- oversee the implementation and evaluation of the Phase 2 Future Practice & Education Task Force recommendations and provide a yearly progress report to the House of Delegates (Refer to HOD).

Recommendation #10: The Task Force recommends that adequate resources be allocated by the ADA Board of Directors to support the planning and implementation of a Future Practice and Education Summit involving both Dietetic Practice Groups and all types of dietetics education programs (Refer to HOD Leadership Team).

Recommendation #11: The Task Force recommends the establishment of a two-prong grant program to promote the integration of practice and education by supporting educators to obtain updated practice experience and practitioners to increase their exposure to academic settings (Refer to ADA Foundation).

Recommendation #12: The Task Force recommends enhancing the efficiency and effectiveness of academic and experiential education through:
- development of practice simulations and utilization of other appropriate educational technologies.
- development of educational opportunities for dietetic educators to obtain updated practice exposure, and for practitioners to enhance skills in developing and evaluating practice experiences of students.
- continuing education to assist dietetic education program directors in managing programs effectively (Refer to CADE).

Originator: HOD Leadership Team
Implementation Steps to Conduct the Visioning Process

In Preparation for Program Year 1, Step 1 of the Visioning Process

Process for Reviewing the Evidence to Make Observations
All Council members use the 16 categories of the Scanning Framework as the basis for looking for information (e.g. articles, publications, reports, and data) related to issues, events, developments and trends on an ongoing basis, share with other Council members via email and request staff to post to the CFP Portal.

Program Year 1, Step 1 of the Visioning Process
- The Academy’s Knowledge Center librarian will conduct a targeted literature review of the topics identified by the Council on Future Practice as priority categories in the Scanning Framework.
- Council members will provide the librarian with appropriate key words and phrases and the time frame for the search.
- A follow-up search may be requested in Year 2, as needed, to insure that all information is current.
- Review futures literature and resources.
  On behalf of the Academy and the Council, Academy HOD Governance staff will join the World Future Society, which was started in 1966, consists of 25,000 individuals and groups in 80 countries, and serves as a clearinghouse for sharing information on new developments, forecasts possibilities, trends and scenarios. Members receive resources such as the Futurist Magazine which showcases the results of the work of leading futurists from around the world, and free reports; there is also a publication titled The Art of Foresight: Preparing for a Changing World. Academy staff will share information from these publications with Council members to review and determine if an ongoing subscription is warranted.
- Scan the news media.
- Examine public policy documents.
- Search and review information from research institutes.
- Review and update the Brutal Facts Document.

Program Year 1, Steps 1, 2 and 3 of the Visioning Process

Questions to Guide the Identification and Analysis of Trends

General questions to answer to identify a trend
- How are we defining a trend? A trend is a string of issues, events or developments that build momentum. It is a direction of change, usually a long-term development, and usually influences society, systems, organizations, institutions and sometimes nations and the world.

- What are characteristics of trends? Trends begin in the past, continue today, and seem likely to go on into the future. Trends have a potentially increasing impact on the profession. Trends are about society, technology, education, science, the economy, politics, regulations, food, nutrition, health, behavior, motivation, culture and values.

- Are nutrition and dietetics practitioners and other health professionals doing anything differently in practice than they did a few years ago? What are they planning to change and why?

- Are patients, clients and the public acting in new or different ways than they used to in terms of their food, nutrition and health related behaviors?
Specific questions about trends based on the categories (indicated in bold print) in the Scanning Framework

**Society’s Future Needs and Changes**

1. What demographic trends related to diversity, generations, geographic distribution, income and equity, and education levels will impact nutrition and dietetics practice?

2. How will client/patient needs and preference trends related to lifestyles, cultural values, consumer trends, health disparities and nutrition literacy influence nutrition and dietetics practice?

3. What are important trends affecting the areas of food and nutrition related to the food industry, food systems management, food security, food safety and sustainability?

4. What healthcare trends related to healthcare reform, coordinated care, health delivery systems and models, and alternative medicine/health impact nutrition and dietetics practice?

5. Which trends in public health policy and priorities related to obesity, child nutrition and activity, aging, chronic diseases and prevention will influence nutrition and dietetics practice?

6. How will economic/market force trends related to economic outlook, wages and benefits, and areas for job growth influence nutrition and dietetics practice?

7. How will trends and advancements in science and technology related to genetics, genomics, behavioral science, information communication technologies and mobile connectivity impact nutrition and dietetics practice?

8. How will trends related to the global context, such as nutrition and dietetics practices in other countries, migration/immigration and the global workforce, and global professional collaboration impact nutrition and dietetics practice?

**Profession’s Future Needs and Changes**

9. What trends in education/professional development related to knowledge and continuing competence, education programs and curriculum, and learning technologies and platforms will impact nutrition and dietetics practice?

10. Which work and workplace trends related to practice roles, business models, emerging opportunities, competitive alternatives for nutrition and dietetics, work and family balance and salaries and benefits impact nutrition and dietetics practice?

11. Which workforce projection trends related to supply and demand (mobility and adaptability and workplace settings and focus areas) and staffing models and ratios influence nutrition and dietetics practice?

12. How will practice requirement trends related to evidence-based practice, business and enterprise awareness, technology use, cultural competency, interdisciplinary proficiency, practice efficiency methods and behaviors influence nutrition and dietetics practice?

13. How will trends in career advancement related to reward and recognition, leadership and management and drive and motivation influence nutrition and dietetics practice?

14. Which credentialing and licensure trends related to patterns in credentialing in nutrition and dietetics and competing and related credentials impact nutrition and dietetics practice?
15. Which **research to practice** trends related to comparative effectiveness research, new developments in nutrition and health sciences and informatics and data analytics will influence nutrition and dietetics practice?

16. What **values and ethics** trends related to science-based nutrition, social responsibility and personal integrity and professionalism will influence nutrition and dietetics practice?

**Questions to answer in the analysis of trends**
- How will this trend impact how businesses, institutions and organizations operate?
- How will the trend change how executives and managers lead?
- How will the trend impact supervisors?
- How will the trend impact workers?
- How will the trend impact operations?
- How will the trend impact services?
- How will the trend impact nutrition care of patients/clients?
- What economic or financial implications might result from the trend?
- What do we believe about the overall length, strength and impact of the trend?
- How can we capitalize on our understanding of this trend?
- What new opportunities might arise from the trend?
- What new risks could emerge from the trend?
- Acknowledging what we believe will occur, what are our optimal action steps?

**Program Year 1, Steps 1 and 5 of the Visioning Process**

**External Organizations to Participate in the Process**

The external organizations that will be asked to participate in the visioning process will be determined by members of the Council based on the 10 top priority areas and their related trends and change drivers. In addition, initially some or all of these external organizations will assist the Council to identify the top 10 priority areas including related trends and change drivers.

The following organizations include those identified by the Council and organizations that have current alliance relationships with the Academy.

- Action for Healthy Kids (alliance organization)
- American Academy of Family Physicians
- American Academy of Pediatrics
- American Association of Family and Consumer Sciences
- American College of Nutrition
- American College of Sports Medicine (alliance organization)
- American Heart Association-Nutrition Committee (alliance organization)
- American Medical Association
- American Public Health Association
- American Society for Nutrition
- American Society for Parenteral and Enteral Nutrition
- Association of Healthcare Foodservice (alliance organization)
- Association of Nutrition and Foodservice Professionals
- Association of Nutrition Departments and Programs
- Association of State Public Health Nutritionists
- Commission on Cancer (alliance organization)
- Food Research and Action Center
- Healthier Generation Benefit (alliance organization)
- Health Information Management & Systems Society (HIMSS) (alliance organization)
Final 4/30/14

- Institute of Food Technologists (alliance organization)
- International Confederation of Dietetic Associations (alliance organization)
- International Food Information Council Foundation
- National Commission on Correctional Health Care (alliance organization)
- National Diabetes Education Program (alliance organization)
- National Kidney Foundation (alliance organization)
- National Pressure Ulcer Advisory Panel (alliance organization)
- National Restaurant Association (alliance organization)
- National Transition of Care Coalition
- National WIC Association
- School Nutrition Association
- Society for Allied Health Professions
- Society for Hospitality and Foodservice Management
- Society for Nutrition Education and Behavior
- Think Tank Members of the Council on Future Practice
- US Breastfeeding Committee (alliance organization)

All Academy Organizational Units to Participate in the Process
Accreditation Council on Education in Nutrition and Dietetics (ACEND), Board of Directors (BOD), Commission on Dietetic Registration (CDR), Foundation, House of Delegates (HOD), Nutrition and Dietetics Educators and Preceptors (NDEP), Dietetic Practice Groups (DPGs) (26), Member Interest Groups (MIGs) (9), Affiliates (53), Student Advisory Committee and Academy committees (20)/sub-committees (2).

Academy standing committees (as of January 2014):
HOD Committees: Academy Positions Committee (APC), Council on Future Practice, Diversity Committee, and Quality Management Committee (QMC).

Joint HOD/BOD Committees: Committee for Professional Development, Ethics Committee, Evidence-Based Practice Committee, Legislative & Public Policy Committee (LPPC), Consumer Protection and Licensure Subcommittee (of LPPC), Nutrition Care Process/Standardized Language Committee, Nutrition Informatics Committee (NIC), Interoperability & Standards Sub-committee (of NIC), Public Health/Community Nutrition Committee (as of June 1, 2014), Dietetics Practice Based Research Network Oversight Committee (as of June 1, 2014) and the Council on Research (as of June 1, 2014).

BOD Committees: Appeals Committee, Coding and Coverage Committee, Finance & Audit Committee, Honors Committee, and Member Value Committee.

Academy Committees that Function Independently from BOD and HOD: AND Political Action Committee and Nominating Committee.

Program Year 1, Step 5 of the Visioning Process

Process for Developing a Survey Tool to Solicit Input on the Priority Areas, Trends and Change Drivers
The Council on Future Practice will request the assistance of the Council on Research in developing the survey. The Council’s Think Tank members will also be utilized in pilot testing the survey.

Program Year 1, Step 6 of the Visioning Process

Plan for Educating Academy Organizational Units on the Visioning Process
For initial educational purposes, include as an agenda item in the Academy’s orientation sessions for committee vice-chairs and for affiliate president-elects (face-to-face meetings in March).
Final 4/30/14
Also, conduct a webinar, record and make available on the Academy website for those unable to attend the webinar (December-January). This will be the process used for DPGs, MIGs, House of Delegates and Foundation.

Request time for short orientation on the agendas for the Board of Directors, HOD Leadership Team, ACEND, CDR, and NDEP (spring)

For ongoing educational purposes, the Council will track participation of each of the Academy’s organizational units in the visioning process. Using the Feedback Tracking form, the Council will track and maintain a list of each unit’s response to the survey and the Council’s consideration of and decisions made about the comments and will share the tracking document with the various Academy units.
Final 4/30/14

Feedback Tracking Form—see attached document.