

Comprehensive On-Site Evaluation for Full Accreditation
Site Visit Report

California State University-Chico
Didactic Program in Dietetics
Chico, CA
February 27-March 1, 2011

Overview of the Evaluation Visit

A comprehensive, on site evaluation of the California State University Didactic Program in Dietetics (DPD) at Chico, CA was conducted on February 27th through March 1st, 2011 to determine compliance with the 2008 Standards-of the Commission on Accreditation for Dietetics Education (CADE) for the purpose of full accreditation.

- **Lead Reviewer:** Karen Lacey, MS, RD, CD Senior Lecturer and DPD Director University of Wisconsin-Green Bay, Green Bay, WI
- **Accompanying Reviewer:** Terese M. Scollard, MBA, RD, LD Regional Clinical Nutrition Manager, Providence Health & Services, Portland, OR
- **Accompanying Reviewer:** Teri L. Burgess-Champoux, PhD, RD, LD Lecturer, Department of Food Science and Nutrition, University of Minnesota, St. Paul, MN

During the site visit, the CADE review team met with representatives of the program via individual sessions consisting of the Program Director, current students, graduates, faculty, Advisory Board members and Administrators.

During the site visit, the Program Director conducted a tour of the facilities on campus including the library. In addition, the review team observed a Foodservice, Equipment and Production class.

The Didactic Program in Dietetics (DPD) is housed within the Department of Nutrition and Food Sciences at California State University, Chico (CSU-Chico), one of the departments of the College of Natural Sciences. The Didactic Program in Dietetics (DPD) has been in existence at CSU-Chico since 1965.

A total of seventy students are currently enrolled in the program (10 third-year, 54 fourth-year and 6 special students). With this self study report and site visit the program is seeking full accreditation from CADE for a DPD at the baccalaureate level.

Program Strengths:

- Quality instruction and advising
- Graduation of students in a timely fashion
- Student, employer and DI director perception of adequate preparedness for careers in dietetics
- Evidence that resources are used in a sustainable manner
- Opportunities for students to gain pre-professional community nutrition experiences through the Center for Nutrition and Activity Promotion (CNAP)

Overall Organization and Clarity of the Self-Study Report

	Exemplary	Meets Expectations	Needs Improvement
Participation in the Self-Study Process	The self-study report was written and reviewed with broad-based input from students, faculty, preceptors, staff, administrators and a range of other stakeholders, such as patients, practitioners, and employers. <p style="text-align: right;">Exemplary <input type="checkbox"/></p>	The self-study report was written and reviewed with broad-based input from students, faculty, preceptors, staff and administrators. <p style="text-align: right;">Meets Expectations <input checked="" type="checkbox"/></p>	The self-study report was written by a small number of individuals who did not seek broad input from students, faculty, preceptors, staff, and administrators. <p style="text-align: right;">Needs Improvement <input type="checkbox"/></p>
Knowledge of the Self-Study Report	Students, faculty, preceptors, and staff are conversant in the major themes of the report and how the program intends to address any deficiencies. <p style="text-align: right;">Exemplary <input type="checkbox"/></p>	Students, faculty, preceptors, and staff are aware of the report and its contents. <p style="text-align: right;">Meets <input checked="" type="checkbox"/></p>	Students, faculty, preceptors, and staff have little or no knowledge of the content of the self-study report or its impact on the program. <p style="text-align: right;">Needs Improvement <input type="checkbox"/></p>
Completeness and Transparency of the Self-Study Report	All narratives and supporting documentation are thorough, clear and concise. The content appears thoughtful and honest. Interviews match the self-study findings. <p style="text-align: right;">Exemplary <input type="checkbox"/></p>	All narratives and supporting documentation are present. The content is organized and logical. <p style="text-align: right;">Meets <input checked="" type="checkbox"/></p>	Information is missing or written in a dismissive, uninformative or disorganized manner. Portions of the content appear biased or deceptive. <p style="text-align: right;">Needs Improvement <input type="checkbox"/></p>
Relevance of Supporting Documentation	Supporting documentation of activities is informative and used judiciously. <p style="text-align: right;">Exemplary <input type="checkbox"/></p>	Supporting documentation is present when needed. <p style="text-align: right;">Meets <input checked="" type="checkbox"/></p>	Additional documentation is missing, irrelevant, redundant, or uninformative. <p style="text-align: right;">Needs Improvement <input type="checkbox"/></p>
Evidence of Continuous-Quality Improvement	The program presents thoughtful, viable plans to not only address areas of deficiency, but also to further advance the quality of the program beyond the requirements of the Standards. <p style="text-align: right;">Exemplary <input type="checkbox"/></p>	The program proactively presents plans to address areas where the program is in need of improvement. <p style="text-align: right;">Meets <input checked="" type="checkbox"/></p>	No plans are presented or plans do not appear adequate or viable given the issues and the context of the program. <p style="text-align: right;">Needs Improvement <input type="checkbox"/></p>
Organization of the Self-Study Report	All sections of the report are complete and organized or hyper-linked to facilitate finding information, e.g., pages are numbered and sections have labeled or tabbed dividers. <p style="text-align: right;">Exemplary <input type="checkbox"/></p>	The reviewer is able to locate a response for each standard and the supporting documentation with minimal difficulty. <p style="text-align: right;">Meets <input checked="" type="checkbox"/></p>	Information appears to be missing or is difficult to find. Sections are not well labeled. <p style="text-align: right;">Needs Improvement <input type="checkbox"/></p>

Review team’s comments on the self-study report to assist in the program’s quality improvement:

The onsite documents were well organized in binders. The self-study report was concisely written and information was tabulated and tables were used to summarize information. There was congruency between the written report and the onsite interviews.

Summary of the Evaluation of All Eligibility Requirements & Accreditation Standards¹ (ERAS)

Eligibility Requirements & Accreditation Standards	Meets		Partially Meets	Does Not Meet	N/A
	<input type="radio"/>	<input type="checkbox"/> monitor			
Eligibility Requirements					
1. Program Structure and Finance (ER 1)	<input type="radio"/>	<input type="checkbox"/>	●	<input type="radio"/>	
2. Prior Recognition and Operation (ER 2)	●				● US Only
3. Required Program Characteristics (ER 3)	●	<input type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	
4. Requirements for Supervised Practice (ER 4)					● DPD
5. Requirements for Program Directors (ER 5)	●	<input type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	
6. Title IV Compliance for Dietetic Internships (ER 6)					● Not DI
7. Consortia (ER 7)	<input type="radio"/>	<input type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	● 1 Program
Program Planning and Outcomes Assessment					
8. Program Mission (1.1)	●	<input type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	
9. Program Goals (1.2)	●	<input checked="" type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	
10. Program Outcomes (1.3)	●	<input checked="" type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	
11. Program Assessment (1.4-1.5)	●	<input checked="" type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	
12. On-going Program Improvement (1.6-1.7)	●	<input checked="" type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	
Curriculum & Student Learning Outcomes					
13. Learning Activities (2.1)	●	<input type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	
14. Curriculum Plan (2.2)	●	<input checked="" type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	
15. Curriculum Length (2.3)	●	<input type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	
16. Learning Assessment (2.4-2.5)	●	<input type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	
17. On-going Curricular Improvement (2.6)	●	<input type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	
Program Management					
18. Qualifications of the Program Director (3.1)	<input type="radio"/>	<input type="checkbox"/>	●	<input type="radio"/>	
19. Responsibilities of the Program Director (3.1.1)	<input type="radio"/>	<input type="checkbox"/>	●	<input type="radio"/>	
20. Program Resources (3.2)	<input type="radio"/>	<input type="checkbox"/>	●	<input type="radio"/>	
21. Faculty (3.3)	●	<input type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	
22. Program Information (3.4)	<input type="radio"/>	<input type="checkbox"/>	●	<input type="radio"/>	
23. Policies and Procedures (3.5-3.6.1)	●	<input type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	
24. Program Handbook (3.6.2)	●	<input type="checkbox"/>	<input type="radio"/>	<input type="radio"/>	

(S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

¹ Findings of the evaluation team are advisory and should not be viewed as the CADE board of director's final determination of compliance or non-compliance with any CADE eligibility requirement or accreditation standard.

ELIGIBILITY REQUIREMENTS

All programs applying to the Commission on Accreditation for Dietetics Education (CADE) for accreditation must meet certain basic requirements, including sponsorship by an organization responsible for the program.

- **S:** The program has achieved this element of the standard at a **satisfactory** level.
- **MI:** The program is **missing information** necessary to evaluate this element of the standard.
- **NI:** The program **needs improvement** to achieve this element of the standard.

Program Structure and Finances (ER 1) ●	S	MI	NI
The program is housed in a college or university located in the U.S. or its territories and accredited in good standing by a U.S. regional institutional accrediting body for higher education. (DPD ER 1.1)	●	○	○
The program is integrated within the administrative structure of the college university or sponsoring organization, as evidenced by an organization chart showing the relationship of the program to other programs/services. (DPD ER 1.2)	●	○	○
The program has a budget to support the program. (DPD ER 1.3)	●	○	○

ER 1.1

The self study report stated that the university is regionally accredited by the Western Association of Schools and Colleges; the original accreditation was in 1954 and the most recent accreditation date was in June 2009. The program provided a link to the WASC Web site that documented the accreditation decision of 2009.

ER 1.2

California State University is one of the California State University System’s 23 campuses. The DPD is part of the Department of Nutrition and Food Sciences, which is housed in the College of Natural Sciences. The self study report included two organizational charts; one of the university to the level of the colleges and the other specific to the location of the DPD (*Appendix A*).

ER 1.3

The self study report provided the department budget; however, it was not clear what portion of the department budget is allocated to the DPD. The program notes that long-term budget planning is contingent on state funding and therefore is difficult to project far into the future. Revenue sources over the past five years were depicted in *Appendix B*.

On site, the review team discussed with the Program Director and department chair the need for a detailed program specific budget.

At this time, no additional information is needed.

Evaluation of the Criteria ● <input checked="" type="checkbox"/>	
● Meets	<ul style="list-style-type: none"> • No compliance problems are present. • No compliance problems are present, but they may arise in the future (<input type="checkbox"/> Monitor). • Compliance problems exist, but all are being resolved successfully (<input type="checkbox"/> Monitor).
○ Partially Meets	Plans for resolving compliance problems have not been implemented.
○ Does Not Meet	No plans for addressing compliance problems.

Prior Recognition and Operation (ER 2) ●	S	MI	NI
Not applicable to U.S. programs.	○	○	○

2.0

Not applicable; the program is a U.S. program.

Required Program Characteristics (ER 3) ●	S	MI	NI
The DPD provides didactic instruction to meet the Foundation Knowledge and Learning Outcomes defined in Standard Two - Appendix A for entering a Dietetic Internship. (DPD ER 3.1)	●	○	○
The DPD awards a degree. The DPD may award a baccalaureate degree, graduate degree or both. The institution is responsible for choosing and awarding a degree that is commensurate with the amount and complexity of the course work required to meet student learning outcomes. If the DPD awards a graduate degree, the dietetics-specific knowledge must be achieved through prerequisite or graduate courses that are required for completion of the graduate degree. (DPD ER 3.2)	●	○	○

ER 3.1

The program provides didactic instruction to meet the 2008 Foundation Knowledge and Learning Outcomes.

- *Appendix G* provides catalog course descriptions (as well as options for the major and minor)
- *Appendix H* provides course alignments for each Foundation Knowledge and Learning Outcomes
- *Appendix I* curriculum sequence plan
- Curriculum Planning Matrix found in *Appendix H*

ER 3.2

The DPD graduates are awarded a Baccalaureate of Science degree (BS) in Nutrition and Food Sciences, General Dietetics option.

At this time, no additional information is needed.

Evaluation of the Criteria ● <input checked="" type="checkbox"/>	
● Meets	<ul style="list-style-type: none"> • No compliance problems are present. • No compliance problems are present, but they may arise in the future (<input type="checkbox"/> Monitor). • Compliance problems exist, but all are being resolved successfully (<input type="checkbox"/> Monitor).
○ Partially Meets	Plans for resolving compliance problems have not been implemented.
○ Does Not Meet	No plans for addressing compliance problems.

Requirements for Supervised Practice (ER 4) ●	S	MI	NI
The program provides at least 1200 hours of supervised practice experiences to meet the Competencies defined in Standard Two - Appendix A (pages 16-18) for entry-level practice as a RD.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The DI includes one, but not more than two, concentrations that builds on the Competencies defined in Standard Two - Appendix A. If the DI offers two concentrations, each intern must choose only one..	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If the program includes international supervised practice experiences, these experiences must not exceed 25 percent of the total planned hours.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4.0

Not applicable to DPD programs.

Requirements for Program Directors (ER 5) ●	S	MI	NI
The program must have a designated director who:			
• has earned at least a master's degree. (DPD ER 5.1)	●	○	○
• is credentialed as a registered dietitian by the Commission on Dietetic Registration. (DPD ER 5.2)	●	○	○
• has a minimum of three years professional experience post credentialing. (DPD ER 5.3)	●	○	○
• is a full-time employee of the sponsoring institution as defined by the institution/organization. (DPD ER 5.4)	●	○	○
• does not direct another CADE-accredited dietetics education program. (DPD ER 5.5)	●	○	○

ER 5.1 – ER 5.5

The DPD Program Director meets educational, registration and experience requirements as she has a PhD and ten years experience as an RD. She only directs the DPD program.

On site, the program review team verified that a full-time faculty appointment is ten months and release time for the DPD Program Director is three credits per semester. A typical full-time teaching load is 24 credits/year (twelve teaching and three service and research); therefore the Program Director teaches nine credits per semester.

At this time, no additional information is needed.

Evaluation of the Criteria ● <input checked="" type="checkbox"/>	
● Meets	<ul style="list-style-type: none"> • No compliance problems are present. • No compliance problems are present, but they may arise in the future (<input type="checkbox"/> Monitor). • Compliance problems exist, but all are being resolved successfully (<input type="checkbox"/> Monitor).
○ Partially Meets	Plans for resolving compliance problems have not been implemented.
○ Does Not Meet	No plans for addressing compliance problems.

Title IV Compliance for Dietetic Internships (ER 6) ●	S	MI	NI
A DI certified by the USDE for eligibility for Title IV student financial aid must document compliance with Title IV responsibilities, including audits, program reviews, monitoring default rates, and other requirements. If the program's default rate exceeds the federal threshold (currently 25 percent over a three-year period or 40% in one year), a default reduction plan, as required by USDE, must be provided. (This applies only to DIs not included in the Title IV (student aid) eligibility of the sponsoring college or university.)	○	○	○

6.0

Not applicable to DPD programs.

Consortia (ER 7) ●	S	MI	NI	NA
The consortium considers itself a single education program. (DPD ER 7.1)	○	○	○	○
A formal agreement exists between the two or more organizations that jointly sponsor the program. (DPD ER 7.2.1)	○	○	○	○
The formal agreement among members of the consortium clearly defines financial and other resource contributions of each member to the total program. (DPD ER 7.2.2)	○	○	○	○
One individual serves as Consortium Program Director and has primary responsibility for the program and communications with CADE. (DPD ER 7.3)	○	○	○	○
Each member organization in the consortium has designated a Coordinator for the program within that organization who is employed by the organization. (DPD ER 7.4)	○	○	○	○
The organization chart clearly shows the relationship of each member of the consortium to the total program and the relationship of each Coordinator to the Consortium Program Director. (DPD ER 7.5)	○	○	○	○
• Membership of committees reflects representation of each member institution or organization. (DPD ER 7.5.1)	○	○	○	○
• Coordinators share responsibility for planning and assessment with the Consortium Program Director. (DPD ER 7.5.2)	○	○	○	○

7.0

The program is not a consortium

STANDARD ONE: PROGRAM PLANNING AND OUTCOMES ASSESSMENT

The program clearly states a mission, goals, expected program outcomes and assessment measures. The program implements a systematic continuous evaluation process, including assessing expected versus actual program outcomes and achievement of goals; and uses the results to take action to maintain or improve program effectiveness.

- **S:** The program has achieved this element of the standard at a **satisfactory** level.
- **MI:** The program is **missing information** necessary to evaluate this element of the standard.
- **NI:** The program **needs improvement** to achieve this element of the standard.

Program Mission (1.1) ●	S	MI	NI
The program has a mission that distinguishes it from every other program in the college/university/organization. (DPD 1.1)	●	○	○
The program mission is compatible with the mission statement or philosophy of the sponsoring college/university/organization. (DPD 1.1)	●	○	○
The program mission is consistent with the academic preparation for dietetics practice. (DPD 1.1)	●	○	○

1.1

The Mission of the Didactic Program in Dietetics is to:

- Provide a broad educational background to develop competent and productive students that can apply their knowledge and skills for careers in the dietetics profession, while using resources in a sustainable manner.
- Prepare students to serve a culturally diverse community by engaging students in pre-professional nutrition related activities that serve Northern California.

University Mission: California State University, Chico is a comprehensive university principally serving Northern California, our state and nation through excellence in instruction, research, creative activity, and public service.

College of Natural Sciences Mission: to serve as an anchor institution in Northern California for mathematics and the sciences, providing a diverse set of services to our students and the larger community.

Department of Nutrition and Food Science Mission: to provide students with a broad educational background in the science of food and nutrition and foodservice management.

The mission of the program is compatible with the mission statement for California State University, Chico, especially in terms of serving northern California. This emphasis is carried over into the mission statement for the College of Natural Sciences as well as the DPD and DI mission statements.

The self-study report also discussed how the goals were consistent with the ADA Standards of Professional Practice (SOPP).

On site, the review team reviewed the Advisory Board and faculty minutes and verified involvement of discussion and revision of mission, goals and outcomes. The Advisory Board members verified that they had input in the revision of the program’s mission and goals. The Provost of Academic Assessment acknowledged how the program’s mission was compatible with the university and a good fit.

At this time, no additional information is needed.

Evaluation of the Criteria ● <input checked="" type="checkbox"/>	
● Meets	<ul style="list-style-type: none"> • No compliance problems are present. • No compliance problems are present, but they may arise in the future (<input type="checkbox"/> Monitor). • Compliance problems exist, but all are being resolved successfully (<input type="checkbox"/> Monitor).
○ Partially Meets	Plans for resolving compliance problems have not been implemented.
○ Does Not Meet	No plans for addressing compliance problems.

Program Goals (1.2) ●	S	MI	NI
The program has goals that reflect the program's mission. (DPD 1.2)	●	○	○
The program's goals are accomplished through activities conducted by the faculty, preceptors and graduates. (DPD 1.2)	●	○	○

1.2

The program has identified three goals based on the program's resources:

Goal One:

Provide pre-professional, practical training opportunities that benefit the students while serving the diverse Northern California community.

Goal Two:

Graduate diverse, competent, entry-level practitioners who obtain employment in dietetics or related fields.

Goal Three:

Use program resources in a sustainable manner while providing a quality educational experience.

On site, the team reviewed the Advisory Committee and faculty meeting minutes that verified the involvement of these constituencies in development of the mission, goals and outcomes. Goals Two and Three that are broad program goals; however, Goal One is focused on students currently in the program and the outcomes developed to assess it (criterion 1.3) do not measure impact of the program on its graduates; therefore, it is recommended that the program revises the goal to focus on graduates of the program, or choose to delete Goal One.

At this time, no additional information is needed.

Evaluation of the Criteria ● <input checked="" type="checkbox"/>	
<input checked="" type="radio"/> Meets	<ul style="list-style-type: none"> • No compliance problems are present. • No compliance problems are present, but they may arise in the future (<input checked="" type="checkbox"/> Monitor). • Compliance problems exist, but all are being resolved successfully (<input type="checkbox"/> Monitor).
<input type="radio"/> Partially Meets	Plans for resolving compliance problems have not been implemented.
<input type="radio"/> Does Not Meet	No plans for addressing compliance problems.

Program Outcomes (1.3) ●	S	MI	NI
The program has established expected program outcomes with appropriate target measures to assess achievement of each of the program's goals. (DPD 1.3)	●	○	○
Each outcome measure is aligned to one or more of the program goals. (DPD 1.3)	●	○	○
Expected program outcome measures <i>must</i> include, but are not limited to, the following:			
<ul style="list-style-type: none"> Program Completion Percentage of students enrolled in the professional courses in the third year of a bachelor-level DPD or first year of a graduate-level DPD that are expected to complete program/degree requirements within 150% of the time planned for completion. (DPD 1.3.1) 	●	○	○
<ul style="list-style-type: none"> Graduate Performance Supervised practice application rate: Over a five-year period, 60% of DPD graduates will apply to supervised practice programs the academic year they complete the program. Supervised practice acceptance rate: Over a five-year period, 80% of those applying to supervised practice programs the academic year they complete the program will be accepted. Additional expected outcome measures determined by the DPD for graduates not applying to or accepted to supervised practice programs. (DPD 1.3.2) 	●	○	○
<ul style="list-style-type: none"> Pass rate of first-time test takers on the registration examination Over a five-year period, the pass rate for CP graduates taking the registration examination for the first time will be at least 80%. (DPD 1.3.3) 	●	○	○
<ul style="list-style-type: none"> Other measures of graduate and program performance appropriate to assess the full intent of the program mission and goals (such as DI program satisfaction with DPD graduates, contributions to the community, professional leadership). (DPD 1.3.4) 	●	○	○

1.3

The program has established outcome measures to assess achievement of its goals:

Goal One: Provide pre-professional, practical training opportunities that benefit the students while serving the diverse Northern California community.

Outcome Measures:

- 1.1: At least 90% of students will complete a nutrition-related practicum or externship experience that serves the Northern California community prior to program completion.
- 1.2: At least 70% of students will report on their exit survey that they participated in a pre-professional organization (e.g. NFSA, CNAP, CDA).

Goal Two: Graduate diverse, competent, entry-level practitioners who obtain employment in dietetics or related fields.

Outcome Measures:

- 2.1: Over a five-year period, more than 60% of the students graduating from a bachelor-level DPD program will complete program requirements within six years, or 150% of time for completion. (DPD 1.3.1.)
- .2: Over a five-year period, the pass rate for DPD graduates taking the registration examination for the first time will be at least 80%. (DPD 1.3.3.)
- 2.3: Over a five-year period, 60% or more of DPD graduates will apply to supervised practice programs the academic year they complete the program. (DPD 1.3.2.)
- 2.4: Over a five-year period, 80% or more of those applying to supervised practice programs the academic year they complete the program will be accepted. (DPD 1.3.2.)
- 2.5: Over a five-year period, 75% or more of DPD graduates will indicate that their overall academic preparation was high or very high.
- 2.6: Over a five-year period, 80% or more of DPD graduates who complete a supervised practice program

will indicate that their academic preparation by the NFSC program was average to very high when surveyed within 12-24 months of the graduation date.

- 2.7: Over a five-year period, 75% or more of employers of DPD graduates will indicate that the graduate was prepared or very prepared in all of the content and skill areas when surveyed within 12-24 months of the graduation date.
 - 2.8: Over a five-year period, 75% or more of dietetic internship directors will indicate that the DPD graduate was prepared or very prepared in all of the content and skill areas when surveyed within 12-24 months of the graduation date.
 - 2.9: At least 30% or more of the DPD students will be ethnic/race and gender minorities.
- Outcome 2.10: Over a five-year period, at least 60% of DPD graduates will obtain employment in dietetics or related field.

Goal Three: Use program resources in a sustainable manner while providing a quality educational experience.

Outcome Measures:

- 3.1: Maintain a student-to-faculty ratio in NFSC courses that is less than or equal to the university ratio.
- 3.2: At least 80% of faculty will report using a minimum of three sustainable teaching practices either always or often.

1.3.1

The program has identified an outcome measure to address program completion (2.1).

1.3.2

The program has identified outcome measures to address graduate performance (2.3 and 2.4).

1.3.3

The program has identified an outcome measure to address the first-time pass rate on the Registration Examination for Dietitians (2.2).

1.3.4

The program has identified additional outcome measures to assess graduate and program performance (2.15-2.8 and 2.10).

However, as noted previously, Goal One does not have outcomes that focus on the outcomes of graduates. The program must develop graduate-focused outcomes for this goal. If the program chooses to rewrite Goal One, it will need to have graduate focused outcomes aligned with it to assess goal achievement.

At this time, no additional information is needed.

Evaluation of the Criteria ● <input checked="" type="checkbox"/>	
● Meets	<ul style="list-style-type: none"> • No compliance problems are present. • No compliance problems are present, but they may arise in the future (<input checked="" type="checkbox"/> Monitor). • Compliance problems exist, but all are being resolved successfully (<input type="checkbox"/> Monitor).
○ Partially Meets	Plans for resolving compliance problems have not been implemented.
○ Does Not Meet	No plans for addressing compliance problems.

Program Assessment (1.4-1.5) ●	S	MI	NI
The program has a written plan for ongoing assessment of the program's mission, goals and expected outcomes. (DPD 1.4)	●	○	○
The program assessment plan includes the following: • Each program goal and the outcome measures that will be used to assess achievement of the goal. (DPD 1.4.1)	●	○	○
• Qualitative and/or quantitative data needed to determine if expected outcome measures have been achieved. (DPD 1.4.2)	●	○	○
• Groups from which data will be obtained; internal stakeholders (such as students, graduates, administrators, faculty) and external/those not involved with the program (such as employers, practitioners, dietetics education program directors, faculty from other disciplines) must be represented. (DPD 1.4.3)	●	○	○
• Assessment methods that will be used to collect the data. (DPD 1.4.4)	●	○	○
• Individuals responsible for ensuring data are collected. (DPD 1.4.5)	●	○	○
• Timeline for collecting the necessary data. (DPD 1.4.6)	●	○	○
The program has implemented the assessment process on a continuous basis. (DPD 1.5)	●	○	○
The assessment process provides evidence of the following: • Data on actual program outcomes for each track or option are collected, summarized and analyzed by comparing actual outcomes with expected outcomes according to the timeline in the assessment plan. (DPD 1.5.1)	●	○	○
• Data analysis is used to assess the extent that expected program outcomes and goals are being achieved. (DPD 1.5.2)	●	○	○

1.4 – 1.5

The program has a written assessment plan that includes goals and outcomes; the qualitative and/or quantitative data needed; the groups from which data will be obtained; the assessment methods; who will collect the data; and the timeline for data collection. The Program Assessment Plan was provided in *Appendix D*.

The summary of outcome measures results was provided in *Appendix E*. Ten out of 14 outcomes were met. The program provided discussion regarding each goal and outcome measure.

Goal One:

Outcome Measures:

- 1.1: At least 90% of students will complete a nutrition-related practicum or externship experience that serves the Northern California community prior to program completion. This outcome was developed in 2010 and was met at 100%.
- 1.2: At least 70% of students will report on their exit survey that they participated in a pre-professional organization (e.g. NFSA, CNAP, CDA). This outcome was developed in 2010 and was met at 100%.

Goal Two: Graduate diverse, competent, entry-level practitioners who obtain employment in dietetics or related fields.

Outcome Measures:

- 2.1: Completion of program requirements within six years. Criterion was met at 90%.
- 2.2: Pass rate for DPD graduates taking the registration examination for the first time. Criterion was met at 90% (2006-2010).
- 2.3: 60% or more of DPD graduates will apply to supervised practice programs the academic year they complete the program. Outcome was not met at 32%.
- 2.4: 80% or more of those applying to supervised practice programs the academic year they complete the program will be accepted. Outcome was not met at 69%.

- 2.5: 75% or more of DPD graduates will indicate that their overall academic preparation was high or very high. Outcome was met at 86%.
- 2.6: 80% or more of DPD graduates who complete a supervised practice program will indicate that their academic preparation by the NFSC program was average to very high when surveyed within 12-24 months of the graduation date. Outcome was met at 100%.
- 2.7: 75% or more of employers of DPD graduates will indicate that the graduate was prepared or very prepared in all of the content and skill areas when surveyed within 12-24 months of the graduation date. Outcome was met at 80%.
- 2.8: 75% or more of dietetic internship directors will indicate that the DPD graduate was prepared or very prepared in all of the content and skill areas when surveyed within 12-24 months of the graduation date. Outcome was met 89% and above.
- 2.9: At least 30% or more of the DPD students will be ethnic/race and gender minorities.
- 2.10: At least 60% of DPD graduates will obtain employment in dietetics or related field. Outcome was not met at 28%.

Goal Three: Use program resources in a sustainable manner while providing a quality educational experience.

Outcome Measures:

- 3.1: Maintain a student-to-faculty ratio in NFSC courses that is less than or equal to the university ratio. Outcome was met at 22.1%.
- 3.2: At least 80% of faculty will report using a minimum of three sustainable teaching practices either always or often. Outcome was not met at 100%.

On site, the review team observed records of actual data collected from a variety of sources including employers, graduates and DI Program Directors.

The Program Director verified that limited and incomplete data were collected prior to 2007 under the previous Program Director. The program has developed an impressive system of reporting recent data; a new Excel spreadsheet was created to facilitate data collection. On site, the review team verified that former students had received surveys. The Program Director acknowledged that she has adequate time to maintain records.

The program will need to provide a revised Program Assessment Plan once it has revised its goals and outcomes.

At this time, no additional information is needed.

Evaluation of the Criteria ● <input checked="" type="checkbox"/>	
● Meets	<ul style="list-style-type: none"> • No compliance problems are present. • No compliance problems are present, but they may arise in the future (<input checked="" type="checkbox"/> Monitor). • Compliance problems exist, but all are being resolved successfully (<input type="checkbox"/> Monitor).
○ Partially Meets	Plans for resolving compliance problems have not been implemented.
○ Does Not Meet	No plans for addressing compliance problems.

On-going Program Improvement ●	S	MI	NI
Results of the assessment process are used to identify strengths and areas for improvement. (DPD 1.6)	●	○	○
Results of the assessment process are based on achievement of expected program outcomes and goals. (DPD 1.6)	●	○	○
Areas in the assessment process include policies, procedures, curriculum, faculty and resources (DPD 1.6)	●	○	○
• Actions are taken to maintain program strengths and address areas for improvement identified through the assessment process. (DPD 1.6.1)	●	○	○
• Short- and long-term strategies are planned to maintain or improve program effectiveness and achievement of expected program outcomes and goals in future years. (DPD 1.6.2)	○	●	○
• If the program does not meet CADE's national benchmarks for pass rates for dietetic education programs, the program implements and monitors a plan of action that addresses program components, including policies, procedures, curriculum and methods of assessing student learning as they progress through the program, to improve graduate performance. (DPD 1.6.2.1)	●	○	○
• If other expected outcome measures are not achieved, the program implements and monitors strategies to improve results. (DPD 1.6.2.2)	○	●	○
• Costs to accomplish short and long term strategies are included in the budgeting process. (DPD 1.6.3)	○	●	○
Programmatic planning and outcomes assessment is integrated with institutional planning and assessment. (DPD 1.7)	●	○	○

1.6

The self study report described the assessment process and changes resulting from it. Based on the results of the assessment process, the following strengths and areas for improvement were identified:

Program strengths:

- Opportunities for community nutrition experiences
- Students felt prepared and were satisfied with DPD program
- Satisfied DI Directors and employers
- Timely graduation of students
- Quality instruction
- Lower than institutional student to faculty ratio
- Employment in nutrition related fields (linked with outcome 2.10); however, the program did not meet the outcome. Therefore, it should be listed under area for improvement and include a strategy to improve results in criterion 1.6.2.2.

Areas for improvement:

- Number of applicants to DI (linked with outcome 2.3)
- Dietetic internship acceptance rates (linked with outcome 2.4)
- Ethnic and gender diversity
- Increase nutrition counseling
- Lack of clinical nutrition experiences
- Lack of tenured faculty with expertise in foodservice
- Limited alumni feedback

There are two areas of improvement that are linked to the ongoing assessment process. However, the program did not link the remaining outcomes. In addition, the faculty use of a minimum of three sustainable teaching practices (outcome 3.2) was not met and must be included in the areas of improvement.

1.6.1

The program has taken action to address areas needing improvement. Among the actions are funding for community experiences through the Center for Nutrition and Activity Promotion, development of an advising newsletter, minimizing printing resources and utilizing technology effectively.

1.6.2

The program has developed short- and long-term strategies to improve the program although the majority of these do not directly address the areas the program identified that need improvement. These include:

Short-Term Strategies:

Addition of full-time faculty

Implementation of pre-select process for Dietetics Option

Addition of optional clinical nutrition experiences

Long-Term Strategies:

Develop a clinical simulation center for MNT course

Change MNT course series to improve progression of learning

1.6.2.1

The program's current first-time pass rate on the dietitian registration examination (2006-2010) is 90%, exceeding the 80% CADE-required minimum.

1.6.2.2

Outcomes that were not achieved:

- 2.3: 60% or more of DPD graduates will apply to supervised practice programs the academic year they complete the program. Outcome was not met at 32%.
- 2.4: 80% or more of those applying to supervised practice programs the academic year they complete the program will be accepted. Outcome was not met at 69%.
- 2.10: At least 60% of DPD graduates will obtain employment in dietetics or related field. Outcome was not met at 28%.
- 3.2: At least 80% of faculty will report using a minimum of three sustainable teaching practices either always or often. Outcome was not met at 100%.

The above outcomes are not linked with a short- and long-term strategy. Therefore, the program needs to identify strategies for the outcome measures that were not achieved, and describe how the program will implement and monitor the strategies to improve results.

1.6.3

The funding associated with accomplishing the short and long-term strategies was described. However, it needs to include the strategies related to the outcomes that were not achieved.

1.7

Each program at CSUC is required to undergo a program review every five years, thus, the DPD program is integrated with the institutional review process.

On site, the review team verified documentation of communication between the DPD Program Director and faculty through review of minutes of meetings. The review team discussed with the Program Director the importance of management plans/strategies to maintain strengths and address areas needing improvement. The Program Director acknowledged how the process can be improved in the future by more carefully "closing the loop."

The program needs to provide additional information to address criteria 1.6.1, 1.6.2.1, 1.6.2.2 and 1.6.3 (See above).

Evaluation of the Criteria ● <input checked="" type="checkbox"/>	
● Meets	<ul style="list-style-type: none"> • No compliance problems are present. • No compliance problems are present, but they may arise in the future (<input type="checkbox"/> Monitor). • Compliance problems exist, but all are being resolved successfully (<input checked="" type="checkbox"/> Monitor) 1.6.1, 1.6.2.1, 1.6.2.2 and 1.6.3.
○ Partially Meets	Plans for resolving compliance problems have not been implemented.
○ Does Not Meet	No plans for addressing compliance problems.

STANDARD TWO: CURRICULUM AND STUDENT LEARNING OUTCOMES

The Dietetics Program has a planned curriculum based on the program’s environment, mission, goals and expected outcomes. The curriculum supports achievement of student learning and expected competence of the graduate.

- **S:** The program has achieved this element of the standard at a **satisfactory** level.
- **MI:** The program is **missing information** necessary to evaluate this element of the standard.
- **NI:** The program **needs improvement** to achieve this element of the standard.

Learning Activities (2.1) ●	S	MI	NI
The curriculum is planned to provide learning activities to attain all the Foundation Knowledge and Learning Outcomes (Appendix A) defined for entering a Dietetic Internship for eligibility for the RD examination. (DPD 2.1)	●	○	○
Didactic learning activities prepare students for pre-professional supervised practice with patients/clients with various conditions, including but not limited to overweight and obesity, diabetes, cancer; and cardiovascular, gastrointestinal and renal diseases. (DPD 2.1.1)	●	○	○
Didactic learning activities prepare students to implement the nutrition care process in pre-professional supervised practice with various populations and diverse cultures, including infants, children, adolescents, adults, pregnant/lactating females and the elderly. (DPD 2.1.2)	●	○	○
Didactic learning activities prepare students to implement all nutrition interventions defined in the nutrition care process (food and/or nutrient delivery, nutrition education, nutrition counseling and coordination of nutrition care) in pre-professional supervised practice. (DPD 2.1.3)	●	○	○

2.1 - 2.1.3

The DPD curriculum is planned to provide learning activities to attain all of the 2008 Foundation Knowledge and Learning Outcomes. The self study report included a matrix with learning activities, the course in which they were met and the learning activity that address the required disease states and life cycle groups and provide exposure to diverse cultures. The matrix also listed the implementation of nutrition interventions defined in the nutrition care process that prepares students to address in various settings.

On site, the review team discussed with the Program Director how the curriculum changed with the 2008 Foundation Knowledge and Learning Outcomes. In addition, the review team reviewed evidence of student projects and notebooks for each of the courses and verified that the required learning activities are included in the curriculum. Discussions with students and graduates further verified the learning activities included in the curriculum.

At this time, no additional information is needed.

Evaluation of the Criteria ●☑	
● Meets	<ul style="list-style-type: none"> • No compliance problems are present. • No compliance problems are present, but they may arise in the future (☐ Monitor). • Compliance problems exist, but all are being resolved successfully (☐ Monitor).
○ Partially Meets	Plans for resolving compliance problems have not been implemented.
○ Does Not Meet	No plans for addressing compliance problems.

Curriculum Plan (2.2) ●	S	MI	NI
The program's curriculum plan includes the following:			
Identification of course(s) that students will complete to meet each of the Foundation Knowledge and Learning outcomes, included the Support Knowledge defined in Appendix A. (DPD 2.2.1)	●	○	○
Organized, sequential courses that logically progress from introductory learning activities and build on previous knowledge to achieve the expected depth and breadth of knowledge and competency upon completion of the program. (DPD 2.2.2)	●	○	○
A variety of educational approaches necessary for delivery of curriculum content, to meet learner needs and to facilitate expected learning outcomes, e.g. field trips, role-playing, simulations, problem-based learning, classroom instruction, laboratory experiences and other practice-related experiences. (DPD 2.2.3)	●	○	○
Opportunities for students to participate in interdisciplinary learning activities. (DPD 2.2.4)	●	○	○
Opportunities for students to develop collaboration, teamwork, problem solving, critical thinking and self-assessment skills; and personal and professional attitudes and values, leadership and decision-making skills. (DPD 2.2.5)	●	○	○
Opportunities for students to develop cultural competence. (DPD 2.2.5)	●	○	○
Course syllabi with clearly defined objectives reflecting the breadth and depth of course content and expected student performance. (DPD 2.2.6)	●	○	○

2.2

The self study provided a curriculum planning matrix that identified the courses in which each of the FKLO are included (Appendix H).

2.2.2

The curriculum is organized so that courses progress from introductory learning, to more complex concepts. This was verified through discussions with faculty and students.

2.2.3

Review of syllabi verified that the program uses a variety of educational approaches. DPD student portfolios were reviewed and confirmed the variety of educational approaches such as field trips, lab experiences, lectures, in class discussions, inter-teach, projects, assigned reading and reflections, and research papers. The Program Director described examples of new assignments such as using the EAL, doing case studies and collaborative study guides and described examples of where the NCP is incorporated into courses. (MAT: The green highlights were moved from 2.1 and broken down into each subcategory in this section).

2.2.4

The curriculum includes experiences with other disciplines and exposure to a variety of dietetics practice settings, individuals and groups. Students are exposed to diet technicians, public health professionals, physicians, physical therapists, psychologists, school foodservice directors, K-12 educators, gerontologists, licensed social workers, addiction specialists. Among the changes were adding the SOPP, addressing roles of other members of the health care team.

2.2.5

The curriculum provides opportunities to develop teamwork, collaboration, problem solving, critical thinking, self-assessment, personal and professional attitudes and values, cultural competence, leadership and decision-making skills. A real strength is the strong curriculum in community nutrition and the many options that students have to gain practical experience especially with the Center for Nutrition and Activity Promotion. Faculty members include service learning opportunities and externships to build skills in counseling, communication and overall self-confidence in their students.

2.2.6

The course syllabi reviewed had course objectives and listed the expected student performance. However, the CADE FKLOs are not included on the syllabi. The program has a plan to standardize syllabi and include the FKLO. The program has added statistics as a requirement, changing Clinical Nutrition and Seminar to MNT I, MNTII and adding a case study presentation by student.

At this time, no additional information is needed.

Evaluation of the Criteria ●☑	
● Meets	<ul style="list-style-type: none"> • No compliance problems are present. • No compliance problems are present, but they may arise in the future (☑Monitor). • Compliance problems exist, but all are being resolved successfully (☐Monitor).
○ Partially Meets	Plans for resolving compliance problems have not been implemented.
○ Does Not Meet	No plans for addressing compliance problems.

Curriculum Length (2.3) ●	S	MI	NI
The curriculum's length is based on the program mission and goals. (DPD 2.3)	●	○	○
The curriculum's length conforms to commonly accepted practice in higher education. (DPD 2.3)	●	○	○
The curriculum's length is consistent with the program's learning outcomes. (DPD 2.3)	●	○	○

2.3

The program graduates earn a Bachelor of Science degree in Nutrition and Food Sciences, Option in General Dietetics. The curriculum provides 120 credits, the minimum standard for the institution. A curriculum plan was provided in *Appendix I*.

On site, the review team had discussions with faculty, Program Director and administrators and verified the curriculum length.

At this time, no additional information is needed.

Evaluation of the Criteria ● <input checked="" type="checkbox"/>	
<input checked="" type="radio"/> Meets	<ul style="list-style-type: none"> • No compliance problems are present. • No compliance problems are present, but they may arise in the future (<input type="checkbox"/> Monitor). • Compliance problems exist, but all are being resolved successfully (<input type="checkbox"/> Monitor).
<input type="radio"/> Partially Meets	Plans for resolving compliance problems have not been implemented.
<input type="radio"/> Does Not Meet	No plans for addressing compliance problems.

Learning Assessment (2.4-2.5) ●	S	MI	NI
The program has a written plan for ongoing assessment.	●	○	○
The plan for ongoing assessment demonstrates the process by which students are regularly evaluated on their acquisition of the knowledge and abilities necessary to attain each competency/learning outcome specified in Appendix A. (DPD 2.4)	●	○	○
The written plan includes the following:			
• The assessment methods that will be used. (DPD 2.4.1)	●	○	○
• The didactic and/or supervised practice course(s)/rotation(s) in which assessment will occur. (DPD 2.4.2)	●	○	○
• The individuals responsible for ensuring assessment occurs. (DPD 2.4.3)	●	○	○
• The timeline for collecting formative and summative assessment data. (DPD 2.4.4)	●	○	○
The program has implemented the process for assessing student learning outcomes. (DPD 2.5):	●	○	○
Data on actual student learning outcomes are collected, aggregated, and analyzed by comparing to expected outcomes according to the timeline in the assessment plan. (DPD 2.5.1)	●	○	○
Analysis of aggregate data is used to determine the extent that expected learning outcomes are being achieved. (DPD 2.5.2)	●	○	○

2.4 - 2.5

The program has developed a student learning assessment plan that demonstrates the process by which students are regularly evaluated for each of the learning outcomes. The plan includes the assessment methods (2.4.1), the class in which assessment will occur (2.4.2), individual responsible for the assessment (2.4.3) and the timeline for collecting the assessment data (2.4.4).

The Student Learning Assessment Plan was provided in *Appendix K*. A summary of aggregate data collected for each learning outcome was provided in *Appendix L*. The Student Learning Assessment Plan was very well done although the extensive data collection required may become burdensome over time. The DPD Program Director and Department Chair manage the assessment matrix. Input is provided annually from each faculty member. Faculty discusses strategies at faculty meetings.

On-site, the review team was provided evidence of assessment of student learning outcomes with data and department minutes that demonstrated integration with the institution and department. The team discussed the desirability of simplifying the learning outcome assessment plan with the Program Director.

At this time, no additional information is needed.

Evaluation of the Criteria ● <input checked="" type="checkbox"/>	
● Meets	<ul style="list-style-type: none"> • No compliance problems are present. • No compliance problems are present, but they may arise in the future (<input type="checkbox"/> Monitor). • Compliance problems exist, but all are being resolved successfully (<input type="checkbox"/> Monitor).
○ Partially Meets	Plans for resolving compliance problems have not been implemented.
○ Does Not Meet	No plans for addressing compliance problems.

On-going Curricular Improvement (2.6) ●	S	MI	NI
Ongoing, formal review of the program curriculum maintains or improves educational quality. (DPD 2.6)	●	○	○
Didactic objectives, curricular content, length and education methods undergo ongoing, formal review. (DPD 2.6)	●	○	○
Curriculum review uses results of the student learning and program outcomes assessment processes to determine strengths and areas for improvement. (DPD 2.6.1)	●	○	○
Curriculum review includes awareness and integration of new knowledge and technology impacting dietetics practice. (DPD 2.6.2)	●	○	○
Curriculum review includes assessment of comparability of educational experiences and consistency of learning outcomes when different courses, delivery methods (such as distance education) or supervised practice sites are used to accomplish the same educational objectives. (DPD 2.6.3)	●	○	○
Curriculum review results in actions to maintain or improve student learning. (DPD 2.6.4)	●	○	○

2.6

Ongoing curriculum review is based on data collected using the learning outcome assessment plan.

2.6.1

The review process has resulted in the following strengths and areas for improvement being identified:

Curriculum strengths:

- Most of the SLO met (exception were KR 2.3.a and KR 4.1.b)
- Use of a variety of simulated and real-life experiences
- Faculty active in research and knowledgeable in subject areas
- Appropriate reinforcement of key topics and subjects
- Adequate preparation through three-one credit courses

Areas for improvement:

- Knowledge of SOPP and Scope of Practice
- Knowledge of budgeting
- Knowledge of drug and nutrient interactions
- Knowledge of public policy
- Inconsistent formatting of syllabi

2.6.2-2.6.3

The program ensures comparability of educational experiences and consistency of learning outcomes and course objectives are met. This is achieved as the courses that are taught by multiple instructors, materials are shared, assignments are consistent across instructors, syllabi are similar, and textbooks are the same. The program follows the articulation agreements with 109 California Community Colleges for Chico State lower division major preparation courses. The articulation information is available on the ASSIST Web site. The team also found evidence of the incorporation of new knowledge in the curriculum. in different courses and delivery methods are used to accomplish the same educational objectives.

2.6.4

Actions have been taken to maintain strengths and address areas of improvement. “These include restructuring of the MNT sequence and students develop professional posters for use in the community “Chico on \$10 a Day”, and other programs.

On site, the team reviewed the minutes of department and Advisory Board meetings and confirmed evidence of curriculum development. Discussions with the Advisory Board and the faculty further verified their involvement in on-going curriculum review.

At this time, no additional information is needed.

Evaluation of the Criteria ● <input checked="" type="checkbox"/>	
● Meets	<ul style="list-style-type: none"> • No compliance problems are present. • No compliance problems are present, but they may arise in the future (<input type="checkbox"/> Monitor). • Compliance problems exist, but all are being resolved successfully (<input type="checkbox"/> Monitor).
<input type="radio"/> Partially Meets	Plans for resolving compliance problems have not been implemented.
<input type="radio"/> Does Not Meet	No plans for addressing compliance problems.

STANDARD THREE: PROGRAM MANAGEMENT

Management of the Dietetics Program and availability of program resources are evident in defined processes and procedures. Fair, equitable, and considerate treatment of both prospective students and those enrolled in the program is incorporated into all aspects of the program.

- **S:** The program has achieved this element of the standard at a **satisfactory** level.
- **MI:** The program is **missing information** necessary to evaluate this element of the standard.
- **NI:** The program **needs improvement** to achieve this element of the standard.

Qualifications of the Program Director (3.1) ●	S	MI	NI
The program director is a full-time employee of the sponsoring college/university/organization. (DPD 3.1)	●	○	○
The program director has the authority, responsibility and sufficient time allocated to manage the program. (DPD 3.1)	●	○	○
The program director's other responsibilities do not compromise the ability to manage the program. (DPD 3.1)	●	○	○
Responsibilities and time allocation for program management are reflected in a formal position description for the program director and approved by administration. (DPD 3.1)	○	●	○

3.1

The Program Director is a full-time ten month employee of CSUC. She is provided three units of release time each semester to manage the program. Discussions with the Program Director indicated that she has sufficient time to fulfill her responsibilities as Program Director.

The self study report provided a Program Director position description; however, the review team did not have evidence of a formal position description approved by administration as defined in 3.1 above. Therefore, the program needs to provide a formal position description needs to include all of the responsibilities expected of a Program Director and the time allocation for program management.

The program must provide additional information to address criterion 3.1 (a formal position description for the Program Director approved by Administration is needed).

Evaluation of the Criteria ●☑	
○ Meets	<ul style="list-style-type: none"> • No compliance problems are present. • No compliance problems are present, but they may arise in the future (☐ Monitor). • Compliance problems exist, but all are being resolved successfully (☐ Monitor).
● Partially Meets	Plans for resolving compliance problems have not been implemented.
○ Does Not Meet	No plans for addressing compliance problems.

Responsibilities of the Program Director (3.1.1-3.1.8) ●	S	MI	NI
The program director responsibilities include development of policies and procedures for effectively managing all components of the program. (DPD 3.1.1)	●	○	○
The program director responsibilities include development of policies and procedures to ensure fair, equitable and considerate treatment of prospective and enrolled students (such as program admission, retention and completion policies). (DPD 3.1.1)	●	○	○
The program director responsibilities include student recruitment, advising, evaluation and counseling. (DPD 3.1.2)	●	○	○
The program director responsibilities include maintenance of program accreditation, including timely submission of fees, reports and requests for major program changes. (DPD 3.1.3)	●	○	○
The program director responsibilities include maintenance of DPD student records, including student advising plans and verification statements. (DPD 3.1.4)	●	○	○
Verification statements are kept indefinitely. (DPD 3.1.4)	○	○	●
The program director responsibilities include maintenance of complaints about the program received from students or others, including disposition of the complaint. (DPD 3.1.5)	●	○	○
The program director responsibilities include ongoing review of program curriculum to meet the accreditation standards. (DPD 3.1.6)	●	○	○
The program director responsibilities include communication and coordination with program faculty and others involved with the program. (DPD 3.1.7)	●	○	○
The program director responsibilities include facilitation of processes for continuous assessment of program and student learning outcomes. (DPD 3.1.8)	●	○	○

3.1.1-3.1.8

The self study report provided the following materials in *Appendix M*:

- Position description
- Position announcement
- Personal task calendar

All of these provide written evidence of the above duties as part of this position. Detailed discussion of each of the major functions was also provided in the self-study report.

On site, the review team reviewed the Verification statements. The Program Director assured the review team that files will be locked from this point forward and she will develop a specific policy that assures that all students will receive verification statements regardless of request. The Program Director will also secure copies of verification statements via e-records for future access if needed.

The Verification statement policy needs to be revised to assure completion requirements are clearly defined: All students receive verification statements without being required to request the statement.

On-site, the review team verified the following information:

- There were no student complaints
- Faculty communication with the Program Director exists
- The student files are maintained in the registrar's office

The program must provide additional information to address criterion 3.1.4 (verification statement policy and maintenance/storage policy).

Evaluation of the Criteria ● <input checked="" type="checkbox"/>	
<input type="radio"/> Meets	<ul style="list-style-type: none"> • No compliance problems are present. • No compliance problems are present, but they may arise in the future (<input type="checkbox"/> Monitor). • Compliance problems exist, but all are being resolved successfully (<input type="checkbox"/> Monitor).
<input checked="" type="radio"/> Partially Meets	Plans for resolving compliance problems have not been implemented.
<input type="radio"/> Does Not Meet	No plans for addressing compliance problems.

Program Resources (3.2) ●	S	MI	NI
The program has the administrative and financial support, learning resources, physical facilities and support services needed to accomplish its goals. (DPD 3.2)	●	○	○
The annual budget for the program or other financial information, such as percentage of department budget allocated to support the program, is sufficient to produce the desired outcomes. (DPD 3.2)	○	○	●

3.2

The program has two full-time staff for administrative support: a laboratory technician and an administrative support coordinator. The program also has support from part-time student employee. Revenue sources available to the program and how funds are utilized was discussed in the self study report. The funding base for the CSU System is primarily through state support, with the budget determined yearly by the state legislature.

On site, the review team was provided input from the DPD Program Director regarding adequacy of budget to cover needs. As noted in ER 1, the team discussed with Program Director the need for a separate DPD budget above and beyond simply the percentage of the departmental budget that supports the program.

At this time, no additional information is needed.

Evaluation of the Criteria ●☑	
● Meets	<ul style="list-style-type: none"> • No compliance problems are present. • No compliance problems are present, but they may arise in the future (☐ Monitor). • Compliance problems exist, but all are being resolved successfully (☐ Monitor).
○ Partially Meets	Plans for resolving compliance problems have not been implemented.
○ Does Not Meet	No plans for addressing compliance problems.

Faculty (3.3) ●	S	MI	NI
The program has a sufficient number of qualified faculty to provide the depth and breadth of learning activities required in the curriculum. (DPD 3.3)	●	○	○
The program has a sufficient number of qualified faculty to provide the diversity of practice. (DPD 3.3)	●	○	○
In addition to the program director, other faculty teach profession-specific courses in the program. (DPD 3.3.1)	●	○	○
Program faculty, including the program director, meets the college/university's/institution's criteria for appointment. (DPD 3.3.2)	●	○	○
Program faculty, including the program director, show evidence of continued competency appropriate to teaching responsibilities, through professional work experience, graduate education, continuing education, research or other activities leading to professional growth and the advancement of their profession. (DPD 3.3.3)	●	○	○

3.3

Eleven faculty, including the Program Director (seven tenured or tenure-track faculty; three Assistant professors, one Associate professor, three full professors; and four instructors) teach courses for the program. The self study report provided a list of courses taught and experience of the faculty and a list of their professional memberships and recent conferences attended by the faculty.

On site, the review team reviewed the faculty curricula vita and verified that all faculty meet the university's criteria for appointment. The review team observed excellent diversity of faculty with a wide range of expertise.

At this time, no additional information is needed.

Evaluation of the Criteria ● <input checked="" type="checkbox"/>	
● Meets	<ul style="list-style-type: none"> ● No compliance problems are present. ● No compliance problems are present, but they may arise in the future (<input type="checkbox"/> Monitor). ● Compliance problems exist, but all are being resolved successfully (<input type="checkbox"/> Monitor).
○ Partially Meets	Plans for resolving compliance problems have not been implemented.
○ Does Not Meet	No plans for addressing compliance problems.

Program Information (3.4) ●	S	MI	NI
The program provides clear, consistent and accurate information about all program requirements [and components] to prospective students and the public at large. (DPD 3.4)	●	○	○
All information about the program specified below is readily available to prospective students and the public. (DPD 3.4.1)	●	○	○
If various print and electronic methods are used, such as a catalog, program bulletin, brochure and web site, all of the information is in one place or each provides references to where the remaining information can be found. (DPD 3.4.1)	●	○	○
Information about the program includes at least the following: (DPD 3.4.2)			
• Description of the program, including mission, goals and graduate outcomes that will be monitored for program effectiveness. (DPD 3.4.2.1)	●	○	○
• Description of how the program fits into the credentialing process to be a registered dietitian and state certification/licensure for dietitians, if applicable. (DPD 3.4.2.2) Reviewers: verify that the program is informing prospective and enrolled students of the magnitude of the shortage of internship sites and that successful completion of the program does not guarantee acceptance into an internship.	○	●	○
• Cost to student, such as estimated expenses for travel, housing, books, liability insurance, medical exams, uniforms and other program-specific costs, in addition to application fees and tuition. (DPD 3.4.2.3)	●	○	○
• Accreditation status, including the full name, address, and phone number of CADE. (DPD 3.4.2.4)	○	●	○
• Admission requirements for all options for which the program is accredited. (DPD 3.4.2.5)	●	○	○
• Academic and/or program calendar or schedule. (DPD 3.4.2.6)	●	○	○
• Graduation and program completion requirements for all options for which the program is accredited. (DPD 3.4.2.7)	●	○	○

3.4

All of the CADE-required information for prospective students and the public is available on the program's Web site with the exception of:

- 3.4.2.2 CADE's complete address
- 3.4.2.4 Specify that students must complete an accredited DPD program to be eligible to apply to Dietetic Internship programs.

On site, the review team verified information with the Program Director, who indicated that students are informed of the shortage of internship sites in several classes and in the student handbook. This was verified with students. The Program Director also informs students about opportunities to become a DTR.

The program must provide additional information to address criterion 3.1.4 (copy of the Web site pages indicating the necessary corrections stated above have been made).

Evaluation of the Criteria ● <input checked="" type="checkbox"/>	
○ Meets	<ul style="list-style-type: none"> • No compliance problems are present. • No compliance problems are present, but they may arise in the future (<input type="checkbox"/> Monitor). • Compliance problems exist, but all are being resolved successfully (<input type="checkbox"/> Monitor).
● Partially Meets	Plans for resolving compliance problems have not been implemented.
○ Does Not Meet	No plans for addressing compliance problems.

Policies and Procedures (3.5-3.6.1) ●	S	MI	NI
Program policies, procedures and practices related to student recruitment and admission comply with state and federal laws and regulations to ensure nondiscrimination and equal opportunity. (DPD 3.5)	●	○	○
The program has written policies and procedures that protect the rights of enrolled students and are consistent with current institutional practice. (DPD 3.6)	●	○	○
Policies and procedures are provided to students, but are not limited to the following:			
University- or College-based program has policies and procedures required by institutional regional accreditation, ordinarily published in the university/college catalog or student handbook. (DPD 3.6.1)	●	○	○
• Withdrawal and refund of tuition and fees. (DPD 3.6.1.1)	●	○	○
• Scheduling and program calendar, including vacation and holidays. (DPD 3.6.1.2)	●	○	○
• Protection of privacy of student information. (DPD 3.6.1.3)	●	○	○
• Access to personal files. (DPD 3.6.1.4)	●	○	○
• Access to student support services, including health services, counseling and testing and financial aid resources. (DPD 3.6.1.5)	●	○	○

3.5 – 3.6.1

The self study report stated that students have access to all policies and procedures through the university catalog. In NFSC 155 (Introduction to Nutrition and Food Sciences), students pursuing dietetics are required to read the General Dietetics Handbook, complete an assignment that requires reading the handbook, and sign a form indicating that they have read the handbook. Several of university policies and procedures are referenced in the handbook.

On site, the review team verified information with the Program Director and students. Once students are selected into the dietetics options they are required to sign a form acknowledging receipt and reading of the handbook.

At this time, no additional information is needed.

Evaluation of the Criteria ●☑	
● Meets	<ul style="list-style-type: none"> • No compliance problems are present. • No compliance problems are present, but they may arise in the future (☐ Monitor). • Compliance problems exist, but all are being resolved successfully (☐ Monitor).
○ Partially Meets	Plans for resolving compliance problems have not been implemented.
○ Does Not Meet	No plans for addressing compliance problems.

Program Handbook (3.6.2) ●	S	MI	NI
Additional policies and procedures specific to the program including supervised practice components are provided to students in a program handbook on a timely basis. (DPD 3.6.2)	●	○	○
● Filing and handling complaints from students that includes recourse to an administrator other than the program director and prevents retaliation. (DPD 3.6.2.1)	●	○	○
● Assessment of prior learning and credit toward program requirements (coursework and/or experiential). (DPD 3.6.2.2)	●	○	○
● Formal assessment of student learning and regular reports of performance and progress at specified intervals throughout the program, such as within and at the conclusion of any given course, unit, segment or rotation of a planned learning experience. (DPD 3.6.2.3)	●	○	○
● Program retention and remediation procedures when student performance does not meet criteria for progressing in the program. (DPD 3.6.2.4)	●	○	○
● Disciplinary/termination procedures. (DPD 3.6.2.5)	●	○	○
● Graduation and/or program completion requirements for all options including maximum amount of time allowed to complete program requirements in place at the time student enrolls. (DPD 3.6.2.6)	●	○	○
● Verification statement procedures ensuring that all students completing requirements as established by the program, not just those applying to Dietetic Internships, receive verifications statements in a timely manner. (DPD 3.6.2.7)	●	○	○

3.6.2

The self study report stated that students in NFSC 155 (Introduction to Nutrition and Food Sciences) who are interested in becoming a Registered Dietitian are required to read the General Dietetics Handbook (*Appendix N*) which includes all of the CADE-required policies. In addition, they must write a one-page summary of their findings and sign a document indicating that they have read and understand the contents of the handbook.

On site, the review team verified the above information with students and Program Director.

At this time, no additional information is needed.

Evaluation of the Criteria ●☑	
● Meets	<ul style="list-style-type: none"> ● No compliance problems are present. ● No compliance problems are present, but they may arise in the future (☐ Monitor). ● Compliance problems exist, but all are being resolved successfully (☐ Monitor).
○ Partially Meets	Plans for resolving compliance problems have not been implemented.
○ Does Not Meet	No plans for addressing compliance problems.

Site Visit Schedule CSU, Chico DPD and DI

Saturday, April 30, 2011

Various times Pick up review team at airport

Sunday, May 1, 2011

Breakfast at hotel
8:30-10:00 am Pick up review team at hotel
Welcome from DPD & DI Directors and tour of offices, campus
program facilities, and library
10:15-11:30 am Introductory session with DPD Director
11:30 am-12:45 pm Introductory session with DI Director
12:45-1:45 pm Lunch and break
1:45-4:30 pm Document review

Monday, May 2, 2011

Breakfast at hotel
7:45 am Pick up team at hotel
8:00-9:25 am Meeting with DI preceptors:

Marsha Miller, MS, RD
Laura Fox, MS, RD
Margaret Kelly, MS, RD
Ardith Friday, RD
Karen Norris, MBA, RD, CDE
Leslie McDonnell, RD
Mary Aram, MS, RD

9:30-10:45 am Tour of Enloe Hospital:

Debbie Silveira, RD
Victoria Tooker, MS, RD
Interns: Ashleigh Eastman, Laura Gilmore

Tour of Chico WIC:
Julie Wetmore, MS, RD
Kelly Cawthorn, MS, RD

10:45-11:00 am Return to campus and break

11:00-11:45 pm Meeting with current DPD students:

Amy Goedert
Devan Guiliani
Kim Jacobson
Rheanne Lima
Brittney Patera
Andrea Roitman
Natalie Rold

11:45-12:30 pm Meeting with current interns:

Megan DeGregori, MS
Ashleigh Eastman, MS
Laura Gilmore, MS
Julie Thompson, MS

12:30-1:15 pm

Lunch and break

1:15-1:55 pm

Meeting with Advisory Board members:

Tanya Harter
Barbara Kirks, EdD, RD
Suzanna Nye, MS, RD, FADA
Carol Welty, MS, RD
Anne Kleimann, MS, RD
Susan Donohue, MA
Jane Rodgers, MS, RD

2:00-2:20 pm

Observe NFSC 431 (Foodservice Equipment & Production)

2:30-3:30 pm

Meeting with faculty on curriculum & assessment:

Stephanie Bianco-Simeral, MS, RD
Keiko Goto, PhD
Deb McCafferty, MS, RD
Julie Schneider, PhD

3:30-4:15 pm

Meeting with department chair, dean & vice provost evaluation
Katie Silliman, PhD, RD
Margaret Owens, PhD
Arno Rethans

4:15-4:20

Break

4:20-5:10 pm

Meeting with recent DPD graduates:

Rose Sylvia, RD
Shauna Huston, RD
Aili Kangas
Karalyn Shreeve
Kristin Weil, RD

5:10-6:00 pm

Meeting with recent DI graduates:

Felicia Ponce, MS, RD
Michelle Monastra, MS, RD
Jennifer Murphy, MS, RD
Tiffany Hayes, MS, RD
Loni Presley, MS, RD
Vanessa Welden, MS, RD

Tuesday, May 3, 2011

8:00-10:00 am

Breakfast and report preparation at hotel

10:00 am

Pick up review team at hotel

10:15-11:15 am	Exit Report with DPD Director
11:15-12:15 pm	Exit Report with DI Director
12:15-1:30 pm	Lunch and break
1:30-2:30 pm	Exit report with administrators and other interested parties
4:00 pm	Depart for airport