

**California State University, Chico**

**Dietetic Internship Program**

Self-Study Report for Continued Accreditation

for

**The Commission on Accreditation for Dietetics Education (CADE)**

December 13, 2010

**Application for Accreditation Cover Pages -- CADE 2008 ERAS  
Dietetic internships**

**Report being submitted (check one):**

  


Self-Study Report for New Program  
Application – Eligibility Requirements  
Self-Study Report for Continued  
Accreditation

  


Self-Study Report for New Program  
Application – Accreditation Standards  
Interim Report for Continued  
Accreditation

  


Interim Report for New  
Program Accreditation  
Program Assessment Report  
for Continued Accreditation

**Date:** December 13, 2010  
**Program name:** California State University, Chico Dietetic Internship  
**Sponsoring institution:** California State University, Chico  
**City:** Chico **State:** CA

**Concentration Areas — (at least one and no more than two):**

**Concentration Area name:** Nutrition Education  
**Concentration Area name:** \_\_\_\_\_

**Degree granted — (check all that apply):**

Master's

Master's Optional

Some Graduate Credit

Certificate Program

**Distance Education — (check all that apply):**

Coursework

Supervised practice rotations

**Existing Internship:** Enter maximum number of students for which program is seeking accreditation and current enrollment.

**New Internship:** Enter anticipated maximum number of students for which program is seeking accreditation.

<b>Dietetic Internship</b>				
	Degree		Non-Degree	
	Full-time	Part-time	Full-time	Part-time
Maximum enrollment			<b>5</b>	
Current enrollment			<b>4</b>	

**Program Director:**

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*The program is aware of and agrees to abide by the accreditation standards and policies and procedures established and published for accreditation by the Commission on Accreditation for Dietetics Education.*

**Administrators:** Provide names(s), credentials, title(s), and signature(s) of Administrator(s) to whom program director is responsible.

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Signature

*\*This form must be submitted with the application packet documenting compliance with CADE's 2008 Eligibility Requirements and Accreditation Standards.*

*\*\*The Commission on Accreditation for Dietetics Education will not process an application without the signature of the sponsoring institution's CEO or designated officer.*

**Self Study Report  
CSU, Chico Dietetic Internship**

**TABLE OF CONTENTS**

CONTENTS	Page
<b>Summary Information</b>	
Executive Summary of the Program	1
Summary of the Self-Study Process	1
Overall Organization and Clarity of the Self-Study Report	3
Summary of the Evaluation of All ERAS	4
<b>Eligibility Requirements</b>	
Program Structure and Finances	5
Required Program Characteristics	8
Requirements for Supervised Practice	10
Requirements for Program Directors	12
Title IV Compliance for Dietetic Internships	13
Consortia	14
<b>Standard One: Program Planning and Outcomes Assessment</b>	
Program Mission	15
Program Goals	19
Program Outcomes	20
Program Assessment	22
On-going Program Improvement	25
<b>Standard Two: Curriculum and Student Learning Outcomes</b>	
Learning Activities	29
Program Concentrations	32
Curriculum Plan	34
Curriculum Length	40
Learning Assessment	41
On-going Curricular Improvement	44
<b>Standard Three: Program Management</b>	
Qualifications of the Program Director	48
Responsibilities of the Program Director	50
Program Resources	53
Faculty	55
Preceptors	59
Continuing Professional Development	63
Supervised-Practice Facilities	64
Program Information	66
Policies and Procedures	68
Program Handbook	70

## APPENDICES

A Organizational Chart	
California State University, Chico	72
Dietetic Internship Program	73
B Program Budget	
Budget to Actual 7/1/10-12/8/10	74
Detailed Transactions 1/1/06-12/8/10	75
C MS Program Information	
Catalog Copy	91
MS Student Handbook	94
D Nutrition Education Concentration Matrix	112
E Program Brochure	113
F CV/CDR & Business Cards	
Program Director: Morris	117
Program Coordinator: Miller	134
G 2008 Advisory Board Meeting	
Agenda	137
Board Members	138
Minutes	140
2008 ERAS Presentation	146
H Program Assessment Matrix	155
I Program Assessment Evidence	
Registration Examination Five Year Summary Report	158
ACT August 2010 Report	160
Graduate Employment	163
J Supervised Practice Facilities	165
K DI Class	
Outline	169
Schedule	170
Orientation	171
Project Guidelines	175
L Curriculum Planning Matrix	178
M Sample Intern Rotation Schedule	180
N MNT Rotation Description	182
O Learning Assessment Matrix	184
P Program Director Position Description	197
Q Intern Handbook	198
R Sample Affiliation Agreement	228
S Program Application Information	
Email	243
Letter of Recommendation Form	244

## **Summary Information**

### **Executive Summary of the Program:**

California State University, Chico has been providing northern California with Registered Dietitians for over two decades, first through a master's plus six-month experience route, then through an AP4, and for the past 11 years, as an accredited Dietetic Internship. A new Dietetic Internship Director took on program responsibilities in January 2005, when the former Director retired. The Dietetic Internship Coordinator, responsible for many of the day-to-day operations, remained, thus providing some continuity of program leadership. Since 2005, 27 interns have completed the program and four are currently in rotations. The self-study process has allowed us to review and assess program goals as well as student learning outcomes, and to gather quantitative and qualitative data from constituents who have been affiliated with the program in the past five years. Of the six program outcome measures, all were met. Program strengths include graduation of interns in a timely fashion, a high first time pass rate on the registration examination, a high employment rate among graduates within three months of program completion, a majority of graduates are practicing in northern California, and high preceptor, employer and graduate satisfaction with the program and its preparation of entry-level practitioners. Preceptor commitment to the program and that the program admits master's level trained candidates, are considered additional strengths. Areas for improvement include the need for additional acute and long-term care facilities for MNT rotations so that the maximum number of interns for which the program is accredited can be placed. Student's perception that they lack adequate MNT knowledge prior to supervised practice was another finding. Finally, additional didactic learning activities related to program management/business skills and cultural competence, and poor survey response rate were identified as additional areas for improvement. Based on these findings, the DI Director is seeking new facilities for MNT rotations, a graduate course in MNT is now required in the master's curriculum, additional guest presentations are scheduled for the DI Class, and brief, on-line surveys are utilized. In the past five years, all interns met all student learning outcomes (competencies). For those competencies unique to the 2008 ERAS, only data from the 2010 class are available. New Nutrition Education Concentration competencies will build on the core competencies and provide interns with an opportunity to apply their master's degree evidence based training in this area. In addition to the supervised practice portion of the curriculum, the DI Class has incorporated new knowledge affecting the profession of dietetics. The Nutrition Care Process and Model, current food and nutrition policy, the Scope of Dietetics Practice Framework, and the Professional Development Portfolio process are among the topics added in the last five years. On-going training of preceptors was also provided. Curricular and programmatic changes to the Internship will ensure that its strengths are sustained, while also addressing areas for improvement.

### **Summary of the Self-Study Process:**

The self-study process began in 2008, with the release of the 2008 ERAS. The DI Director and Coordinator met during the summer to plan for their implementation. During the fall 2008 Department of Nutrition & Food Sciences Advisory Board meeting, the DI Director presented the 2008 ERAS and gathered feedback from program constituents regarding the current program mission, goals, and outcome measures in the context of the new standards. Feedback was also solicited regarding selection of a program concentration. Over the course of the last two years, the DI Director, with considerable assistance from program Preceptors and the DI Coordinator, aligned program goals and student learning outcomes with the new standards. In February 2010, the DI Director attended a Self-Study Buddy

Workshop, presented by Sharon Bode, PhD, RD, and Gina Wack, MS, RD, in Houston, TX. The DI Director returned from the workshop with a much greater understanding of the self-study process. She then proceeded to communicate with the DI Coordinator, program faculty, preceptors, employers, current interns, and program graduates in order to establish priorities for completing the report and preparing for the site visit. When the review team was announced and the site visit and report due dates set, the DI Director contacted the Lead Reviewer, Karen Lacey, MS, RD, CD, to arrange hotel reservations and arrange the site visit schedule. The DI Director also met with the DPD Director and department chair to plan the agenda for the 2010 Advisory Board meeting. The Director shared major self-study report findings with program constituents and prepared them for the site visit at that meeting. In addition, revisions of the Preceptor, Employer, and Graduate surveys were discussed and other data collected for the report. The DI Director is grateful to program constituents for their assistance and support in revising program materials, collecting and providing data for the report, and reviewing its contents. Any remaining mistakes are the responsibility of the DI Director.

## Overall Organization and Clarity of the Self-Study Report

Please evaluate your program's completed self-study report using the rubric below ().

	Exemplary	Meets Expectations	Needs Improvement
<b>Participation in the Self-Study Process</b>	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 checked="" 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 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>
<b>Knowledge of the Self-Study Report</b>	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 checked="" type="checkbox"/></p>	Students, faculty, preceptors, and staff are aware of the report and its contents. <p style="text-align: right;">Meets <input 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>
<b>Completeness and Transparency of the Self-Study Report</b>	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 checked="" type="checkbox"/></p>	All narratives and supporting documentation are present. The content is organized and logical. <p style="text-align: right;">Meets <input 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>
<b>Relevance of Supporting Documentation</b>	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>
<b>Evidence of Continuous-Quality Improvement</b>	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>
<b>Organization of the Self-Study Report</b>	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 checked="" 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 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>

### Provide additional comments on the Self-Study Report to assist in quality improvement:

The DI Director greatly appreciates the Self-Study Report template provided, as well as the assistance of Lead Reviewer Karen P. Lacey, MS, RD, CD, and CADE Staff Manager Janine Ricketts-Byrne, MA, RD, LD in preparing this report.

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

Complete this summary (●) after writing the self-study report.

Eligibility Requirements & Accreditation Standards	Pg.	Meets		Partially Meets	Does Not Meet	N/A
		<input checked="" type="checkbox"/>	<input type="checkbox"/> monitor			
<b>Eligibility Requirements</b>	<b>5</b>					
1. Program Structure and Finances	5	●	<input type="checkbox"/>	○	○	
2. Prior Recognition and Operation		○	<input type="checkbox"/>	○	○	● US Only
3. Required Program Characteristics	8	●	<input type="checkbox"/>	○	○	
4. Requirements for Supervised Practice	10	●	<input type="checkbox"/>	○	○	○ DPD
5. Requirements for Program Directors	12	●	<input type="checkbox"/>	○	○	
6. Title IV Compliance for Dietetic Internships	13	○	<input type="checkbox"/>	○	○	● Not DI
7. Consortia	14	○	<input type="checkbox"/>	○	○	● 1 Program
<b>Program Planning and Outcomes Assessment</b>	<b>15</b>					
8. Program Mission	15	●	<input type="checkbox"/>	○	○	
9. Program Goals	19	●	<input type="checkbox"/>	○	○	
10. Program Outcomes	20	●	<input type="checkbox"/>	○	○	
11. Program Assessment	22	●	<input type="checkbox"/>	○	○	
12. On-going Program Improvement	25	●	<input type="checkbox"/>	○	○	
<b>Curriculum &amp; Student Learning Outcomes</b>	<b>29</b>					
13. Learning Activities	29	●	<input type="checkbox"/>	○	○	
14. Program Concentrations	32	●	<input type="checkbox"/>	○	○	○ DPD/DTP
15. Curriculum Plan	34	●	<input type="checkbox"/>	○	○	
16. Curriculum Length	40	●	<input type="checkbox"/>	○	○	
17. Learning Assessment	41	●	<input type="checkbox"/>	○	○	
18. On-going Curricular Improvement	44	●	<input type="checkbox"/>	○	○	
<b>Program Management</b>	<b>48</b>					
19. Qualifications of the Program Director	48	●	<input type="checkbox"/>	○	○	
20. Responsibilities of the Program Director	50	●	<input type="checkbox"/>	○	○	
21. Program Resources	53	●	<input type="checkbox"/>	○	○	
22. Faculty	55	●	<input type="checkbox"/>	○	○	
23. Preceptors	59	●	<input type="checkbox"/>	○	○	○ DPD
24. Continuing Professional Development	63	●	<input type="checkbox"/>	○	○	
25. Supervised-Practice Facilities	64	●	<input type="checkbox"/>	○	○	○ DPD
26. Program Information	66	●	<input type="checkbox"/>	○	○	
27. Policies and Procedures	68	●	<input type="checkbox"/>	○	○	
28. Program Handbook	70	●	<input type="checkbox"/>	○	○	

## **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.

### **Program Structure and Finances (DI ER 1)**

#### **US Regional Accrediting Body**

California State University, Chico, is accredited under the Western Association of Schools and Colleges (WASC). CSUC was originally accredited in 1954 and was most recently commissioned June 19, 2009.

A copy of the letter with the most recent accreditation status may be found at:

<http://registration.wascenior.org/institutions/affiliation.aspx?accessID=27> and

[http://www.csuchico.edu/vpaa/wasc/docs/pdf/WASC\\_Action\\_Letter\\_6-26-09.pdf](http://www.csuchico.edu/vpaa/wasc/docs/pdf/WASC_Action_Letter_6-26-09.pdf).

A copy of the most recent WASC report may be found at:

<http://www.csuchico.edu/vpaa/wasc/docs/EERDocs/EERVisitationTeamReport.pdf>.

#### **Administrative Structure**

California State University, Chico (CSUC) is one of 23 campuses in the largest senior-level higher education system in the country, the California State University (CSU) System. The overall mission of the system, as defined by state legislation, is to offer baccalaureate and master's degree programs to the top one-third of high school graduates, emphasizing teaching over research. Governance for the CSU System rests with the Statewide Board of Trustees, appointed by the Governor. The Trustees appoint the Chancellor (the chief executive officer of the CSU System) and the President of each campus. The funding base for the CSU System is primarily through state support (also called General Fund), with the budget determined yearly by the state legislature.

Since the late 1970's, students received Master's degrees and many became Registered Dietitians through the now extinct Master's plus six-month experience route. In order to continue to provide dietitians for this area and allow residents the opportunity to become RDs, an AP4 program was developed in 1990. The program was approved but due to restructuring of the University, did not go into effect until 1993. At that time, the program was housed in the School of Home Economics, which subsequently became the School of Human Environmental Sciences, in the College of Agricultural and Human Environmental Sciences. In 1992, the Program in Nutrition and Food Sciences and all of its associated programs, including the DPD and AP4, were moved to the Department of Biological Sciences in the College of Natural Sciences. The original AP4 was integrated with the MS in Nutritional Sciences. As such, students enrolled and paid tuition for the supervised practice rotations to obtain unit credit through the Center for Regional and Continuing Education at CSU Chico, which was then counted towards their MS degree. In 1996, it was determined that most students completed all or nearly all of the required MS units by the time they began the internship and it would be more economically advantageous to run the program through the University Research Foundation and the College of Natural Sciences. This change resulted in greater financial flexibility for the operation of the program. In 1995, the AP4 applied for and received Developmental Accreditation as a Dietetic Internship. In 1999, the CSU, Chico DI was granted full accreditation status. In fall of 2007, the Program in Nutrition and Food Sciences was granted departmental status. Today, the DI is part of the Department of Nutrition and Food Sciences, which is housed in the College of Natural Sciences (Appendix A). Since 1999, 46 interns have completed the program and four are currently in supervised practice rotations.

**Budget**

The DI Director consults with the DI Coordinator and Advisory Board DI subcommittee members to determine short and long-term budgetary needs of the program. The University Research Foundation, an entity separate from the academic aspect of the University, handles accounts for grants and contracts and administers the program budget. DI revenue sources include a \$50 application fee, \$4,000 program fee, and occasional continuing professional education (CPE) event registration fees for non DI Preceptors. The \$4,000 program fee is comparable to the cost of other Internships and is approximately 58% of the cost of enrollment for an academic year as a full-time graduate student. Interns pay the \$4,000 program fee in four \$1,000 installments over the course of supervised practice.

These revenue sources are adequate to accomplish program goals and expected outcomes. Major program expenses include the DI Coordinator’s salary (approximately \$2,000 per intern plus workman’s compensation benefits), 7-10 days summer salary for the DI Director, travel to DEP Area 1 meetings by the DI Director on an annual basis, and by the DI Coordinator on a bi-annual basis, partial reimbursement for occasional travel to ADA FNCE and/or California Dietetic Association meetings, program materials (e.g., texts, RD exam review guides), a computer for the DI Coordinator and Director, general office supplies (e.g., printer, paper, toner), and copying, mail, print and fax costs. Program revenue also covers hosting occasional CPE events for DI Preceptor training, and travel to supervised practice sites. The Research Foundation charges approximately 10% in administrative fees to manage the DI account (Appendix B).

In addition to revenue sources listed above, the DI Director receives two assigned weighted teaching units (AWTU) over the academic year as support from the College of Natural Sciences. The university pays the Annual Program Maintenance Fees to ADA and covers the cost of the accreditation site visit.

The program is almost completely self-supporting and thus California State Legislature funding decisions do not impact its budget. As such, the program has not been negatively impacted by the recent economic downturn and grievous budget cuts to the California State University system. Stability of program revenue sources is anticipated and considered a major strength of the program.

The number of preceptors willing to provide supervised practice rotations determines the number of interns the program can accept. Compared to urban DIs the number of clinical facilities in particular available to the program is relatively small. In fact, the program was only able to accept four interns for the 2010-11 year even though it is accredited for five because one clinical facility was not able to take an intern this year. Therefore, the DI Director must budget for nurturing the relationship with Preceptors, which includes hosting occasional continuing professional education opportunities as a “thank you” for their service to the program and the profession.

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

<b>Program Structure and Finances ●</b>	<b>S</b>	<b>MI</b>	<b>NI</b>
The DI is housed in a college or university, health care facility, federal or state agency, business or corporation. (DI ER 1.1) <ul style="list-style-type: none"> <li>• Colleges and universities must be located in the U.S. or its territories and accredited in good standing by a U.S. regional institutional accrediting body for higher education.</li> <li>• Hospitals must be accredited by The Joint Commission or Healthcare Facilities Accreditation Program (HFAP).</li> <li>• Facilities for individuals with developmental disabilities must be accredited by the Council on Quality and Leadership in Support for People with Disabilities or by The Joint Commission or HFAP.</li> </ul>	●	○	○

<ul style="list-style-type: none"> <li>• Other health-care-related facilities must be licensed by an agency of the state in which it is located or accredited by The Joint Commission.</li> <li>• Corporations must be publicly held. (Note: Privately-held corporations currently sponsoring DIs under the 2002 ERAS should contact CADE staff for direction.)</li> </ul>			
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. (CP/ICP/DI/DPD/DTP ER 1.2)	●	○	○
The program has a budget to support the program. (CP/ICP/DI/DPD/DTP ER 1.3)	●	○	○

**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

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

## Required Program Characteristics

### Required Program Characteristics (DI ER 3)

#### Tracks

The CSU, Chico Dietetic Internship is requesting accreditation as a full-time nine month program with a Nutrition Education Concentration. No degree or certificate is awarded through the DI, however, only applications from students with a DPD Verification Statement and a master’s in Nutritional Science— Option in Nutrition Education from CSU, Chico or near completion of the master’s, will be considered during the preselect application process. If available positions do not fill with CSU, Chico applicants, the DI will participate in the February computer match and only master’s prepared applicants may apply. A particular strength of the program includes a high level of evidence-based foundation nutrition knowledge among interns as they begin their supervised practice (Appendix C).

In her dual role as Graduate Coordinator for the master’s degree, the DI Director begins advising for the DI early in the graduate program. Students are encouraged to obtain clinical and other dietetic related work experience to complement their didactic coursework, and are connected with RDs in the community. Based on Intern and Preceptor feedback, this is a particular strength of the program. The DI Director is also in a position to influence MS curriculum to address identified areas of weakness. For example, a graduate course elective, Topics in Clinical Nutrition (NFSC 670), previously offered only once every five semesters was recently changed to a required course for those wishing to pursue the RD (and will now be offered once every three semesters), based on Intern and Preceptor requests for this policy change. The DI Director discussed this request with the department chair and curriculum committee who agreed to the change.

#### Didactic Curriculum

The didactic portion of the DI curriculum consists of a two-hour Friday afternoon class that meets twice per month during the MNT supervised practice rotation and one-two times a month during the Food Service Administration and Community Nutrition rotations. The DI Coordinator, Marsha Miller, MS, RD, is the course instructor and addresses several competencies through the use of lecture, discussion, activities, student presentation of case studies and CQI assignments, guest presentations by Preceptors, and a field trip to a supervised practice site. The class also serves as a support system for Interns and an opportunity for the DI Director and Coordinator to address Intern concerns, answer questions, and gather qualitative assessment data on Intern’s perception of Preceptors, facilities, and overall program effectiveness.

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

Required Program Characteristics ●	S	MI	NI
The DI schedules supervised practice experiences full-time, part-time, or both, to be completed within a two-year period. (DI ER 3.1)	●	○	○
The DI is a post baccalaureate program that admits only individuals who have completed Didactic Program in Dietetics requirements and at least a bachelor’s degree, (DI ER 3.2)	●	○	○

**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

Evaluation of the Criteria ●	
● Meets	• No compliance problems are present.

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

## Requirements for Supervised Practice (DI ER 4)

### Supervised Practice Rotations

The full-time Dietetic Internship includes 1200 hours of supervised practice in three major rotations including: MNT (600 hours), Food Service Administration (300 hours), and Community Nutrition (300 hours). Supervised practice begins in late August and the MNT rotation hours are completed in 16 weeks, followed by an eight-week Food Service Administration rotation and finally, an eight-week Community Nutrition rotation. The rotations are separated by a two-week break between the MNT and Food Service Administration and a one-week break between the Administration and Community Nutrition rotations. Thus, the interns complete the core and Nutrition Education Concentration competencies (Appendix D) for entry-level registered dietitians the first week in May.

### Concentration

In consultation with Advisory Board DI Subcommittee members, department faculty, Preceptors, current Interns and program Graduates, a Nutrition Education Concentration was chosen to meet the 2008 ERAS requirement that all DI programs have at least one concentration. Previously, the program was accredited as a General Emphasis DI. Since Interns are graduates or near graduates of the CSU, Chico MS in Nutritional Science, with an Option in Nutrition Education, they are well prepared to conduct needs assessments, and to develop, implement and evaluate nutrition education interventions among diverse populations. Given the strength of intern preparation in these areas, interested parties agreed that a Nutrition Education Concentration was a logical choice and is now noted in the program Brochure (Appendix E).

Concentration competencies build on core competencies met during the Community Nutrition rotation and include the following:

Competency
<b>5. Development and implementation of an evidence based nutrition education intervention to enhance the health and well being of individuals and populations served.</b>
DI 5.1 Conduct community nutrition needs assessment
DI 5.2 Develop an evidence based nutrition education intervention
DI 5.3 Implement the developed nutrition education intervention

The program does not offer international experience.

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

Requirements for Supervised Practice ● (Not Applicable to DPDs)	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, and (CP/ICP/DI ER 4.1)	●	○	○
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. (DI ER 4.2)	●	○	○

If the program includes international supervised practice experiences, these experiences must not exceed 25 percent of the total planned hours. (CP/DI/DTP ER 4.3)

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
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**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

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

## Requirements for Program Directors (DI ER 5)

### Program Director

The DI Director, Michelle Neyman Morris, earned her PhD in Nutrition from University of California, Davis in 1997. She then completed the San Jose State University Dietetic Internship and passed the RD exam in 2000 (Registration #0851558). Dr. Morris has 14 years of professional experience in higher education and research, 10 since passing the RD exam. Dr. Morris was hired as an Assistant Professor of Community Nutrition for the Program in Nutrition and Food Sciences (then housed within the Department of Biological Sciences) at CSU, Chico in 2000. She earned tenure and promotion to Associate Professor in 2004, became the DI Director in 2005, and was promoted to Full Professor in 2009 (Appendix F).

### Program Coordinator

The DI employs a part-time Program Coordinator, Marsha Miller, MS, RD, who has over 20 years experience as a registered dietitian (Appendix F). Ms. Miller's work history includes positions as a hospital food services director, clinical dietitian, and senior nutrition program director. Currently, as a Child Nutrition Consultant for the California Department of Education, Ms. Miller brings her expertise regarding policies and procedures associated with federally funded food and nutrition programs to the DI. In addition, in her role previously as a clinical dietitian in area hospitals, Ms. Miller knows program Preceptors and the particular strengths of the facilities where interns are placed. As a graduate of the CSU, Chico, Master's Program in Nutritional Science, Ms. Miller understands the preparation of our interns and programmatic needs. Ms. Miller is responsible for day to day operations of the program which include: arranging supervised practice rotation schedules, serving as course instructor for the DI Class, advising interns throughout their rotations, and communicating with Preceptors and the DI Director as needed.

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

Requirements for Program Directors ●	S	MI	NI
The program must have a designated director who (CP/ICP/DI/DPD/DTP ER 5.0)			
• has earned at least a master's degree, (CP/DI/DPD/DTP ER 5.1)	●	○	○
• is credentialed as a registered dietitian by the Commission on Dietetic Registration, (CP/DI/DPD ER 5.2)	●	○	○
has a minimum of three years professional experience post credentialing, (CP/DI/DPD/DTP ER 5.3)	●	○	○
• is a full-time employee of the sponsoring institution as defined by the institution/organization, and (CP /DI/DTP/DPD ER 5.4)	●	○	○
• does not direct another CADE-accredited dietetics education program. (CP/ICP/DI/DTP/DPD ER 5.5)	●	○	○

**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

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

## Title IV Compliance for Dietetic Internships (DI ER 6)

Not Applicable

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

Title IV Compliance for Dietetic Internships ●	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.) (DI ER 6)	○	○	○

**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

Evaluation of the Criteria ●	
○ <b>Meets</b>	<ul style="list-style-type: none"> <li>• No compliance problems are present.</li> <li>• No compliance problems are present, but they may arise in the future (☐ Monitor).</li> <li>• Compliance problems exist, but all are being resolved successfully (☐ Monitor).</li> </ul>
○ <b>Partially Meets</b>	Plans for resolving compliance problems have not been implemented.
○ <b>Does Not Meet</b>	No plans for addressing compliance problems.
● <b>Not Applicable</b>	Not applicable DPDs, CP, ICPs, DTPs or DIs that do not offer U.S. financial aid.

## Consortia (DI ER 7)

Not Applicable

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

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

**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

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

## **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.

### **Program Mission (DI 1.1)\***

\*Words in bold typeface indicate themes found throughout the mission statements

#### **California State University, Chico Mission:**

California State University, Chico is a comprehensive university principally **servicing Northern California**, our state and nation through excellence in instruction, research, creative activity, and **public service**. The University is committed to assist students in their search for **knowledge** and understanding and to prepare them with the attitudes, **skills**, and habits of **lifelong learning** in order to **assume responsibility in a democratic community** and to be useful members of a **global society**.

#### **College of Natural Sciences Mission:**

The mission of the College of Natural Sciences is 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. Our undergraduate, **pre-professional**, and graduate programs give students the rigorous **theoretical and practical training** required for **professional and personal success**. We provide the cornerstones for a wide variety of technical disciplines beyond our college through our foundational service courses. We strive to instill in the wider campus community an understanding of the nature of **science and its importance in modern society**. We affirm the importance of **servicing the community** beyond our campus as a resource for mathematics and science expertise.

#### **Department of Nutrition & Food Sciences Mission:**

The mission of the Department of Nutrition and Food Sciences at California State University, Chico is to provide students with a **broad educational background** in the **science of food and nutrition** and foodservice management. Non-major students will gain an understanding of the **role food plays in disease prevention and the promotion of positive health**. The BS and MS degrees offered by the department will prepare students to **apply their knowledge and skills** to become **competent and productive** nutrition, food science, and foodservice management **professionals**.

#### **BS in Nutrition & Food Sciences Program Mission:**

The mission of the BS program in Nutrition and Food Sciences is to **educate students in the areas of food science, nutrition, and foodservice management**. The BS degree will prepare students to **apply their knowledge and skills** for careers that require a Registered Dietitian (RD) credential, other nutrition-related careers, and careers in foodservice administration. Courses in the option in General Dietetics meet the requirements of the American Dietetic Association (ADA) for an accredited Didactic Program in Dietetics (DPD). Website: (<http://www.eatright.org/cade/>).

### **MS in Nutritional Science Program Mission:**

The mission of the graduate program in Nutritional Science at California State University, Chico is to provide **educational experiences** for students to increase their expertise in the **science of nutrition and nutrition education**. Students gain confidence in **conducting and analyzing research**. The program will **prepare students to become competent, evidence-based nutrition professionals and practitioners**.

### **CSU, Chico Dietetic Internship Mission:**

The Mission of the California State University, Chico Dietetic Internship is to provide the opportunity for graduate students in the University service area to become Registered Dietitians who will **enhance the quality of life and health of individuals and families** through their **service in institutions and agencies in northern California**.

### **Analysis of the Congruency of Mission Statements**

**Serving Northern California.** In the mission statement for California State University, Chico, the importance of serving northern California is emphasized. This emphasis is carried over into the mission statement for the College of Natural Sciences as well as the DPD and DI mission statements. This is carried out through placing interns in MNT, Food Service Administration and Community Nutrition institutions and agencies in the Chico State service area to complete the DI competencies. Many program graduates are employed by these agencies upon completion of the DI.

**Knowledge and Skills.** Providing students with knowledge, skills, and practical pre-professional training, are also common themes throughout each mission statement. Throughout the DPD coursework, students are not only taught facts and figures pertaining to the field of dietetics, but are also provided with opportunities to apply this knowledge and develop skills in such areas as nutritional assessment, medical charting, counseling, menu planning, food preparation, and designing nutrition education interventions. At the graduate level, foundation knowledge is strengthened and MS students are trained in research methods and evidence-based practice with an emphasis on learning, developmental, and behavior change theory which informs the development and evaluation of nutrition education programs. In the DI, students apply their knowledge and develop skills to become competent and productive dietetic professionals.

**Science.** The Department of Nutrition and Food Sciences is appropriately housed in the College of Natural Sciences. In the mission statements at the college, and department level, sciences are emphasized. Specifically, the department mission statement emphasizes that a broad educational background in the sciences is provided. DPD coursework includes individual courses in a variety of sciences including inorganic chemistry, organic chemistry, biochemistry, physiology, microbiology, and psychology. At the MS level, students conduct and analyze research, thus preparing them to become competent, evidence-based nutrition professionals and practitioners.

**Theoretical and Practical Training.** Throughout the mission statements there is emphasis on foundation knowledge acquisition as well as practical application. Through training in theoretical frameworks and evidence-based practice, the MS and DI programs prepare students to become

competent food and nutrition professionals who will effectively enhance the quality of life and health of individuals and families in northern California.

A program strength includes consistent themes found in the mission statements from the institution to the program level. A focus on obtaining knowledge and skills in order to serve the public in northern California is also emphasized.

### **Analysis of the consistency of program's mission with the preparation of registered dietitians**

**SOPP 1: Provision of services: Provide quality service based on customer expectations and needs.** Enhancing the quality of life and health of individuals and families through their service in institutions and agencies in northern California is specifically mentioned in the DI mission statement. In addition, the program's mission is to **provide an opportunity for graduate students in the University service area to become Registered Dietitians**. Without the program, students who have family and other obligations requiring them to stay in the geographic area may not be able to become RDs and fill north state employment needs.

**SOPP 2: Application of Research: Apply, practice in, or generate research to enhance practice.** Research is the cornerstone of the master's program through which interns are recruited and selected. Master's level trained dietetic interns have completed graduate coursework in **research methods and statistical analyses** and have a strong background in **evidence-based practice**.

**SOPP 3: Communication and Application of Knowledge: Effectively apply knowledge and communicate with others.**

**Through their service in institutions and agencies in northern California** is specifically mentioned in the DI mission statement and addresses the application of knowledge gained through didactic and supervised practice experience. Competencies aligned with the Nutrition Education Concentration ensure that interns will obtain proficiency in communicating evidence-based recommendations through the development and implementation of nutrition education interventions to **enhance the quality of life and health** of those served.

**SOPP 4: Utilization and Management of Resources: Use resources effectively and efficiently.**

By providing **the opportunity for graduate students in the University service area to become Registered Dietitians**, the DI allows individuals to maintain residence in **northern California** and thus may reduce the time, money, and natural resources required if they were forced to move from the area to complete an internship. Every effort is made to utilize program resources in an efficient manner, consistent with the university's **commitment to sustainability**.

**SOPP 5: Quality in Practice: Systematically evaluate the quality of services and improve practice based on evaluation results.**

**On-going program assessment** ensures that a quality education is provided to interns. Competency completion is evaluated throughout the supervised practice rotations and a variety of evaluation tools such as Mid-Unit and Final Rotation Evaluations, and rubrics to assess counseling, teaching, and case study presentation skills are utilized. In addition, program Graduates, Preceptors, and Employers are surveyed. Qualitative data are also provided by frequent phone, email and in-person exchanges. The annual Advisory Board meeting provides a formal setting to address program strengths and weaknesses

in order to ensure that the program is preparing competent and confident entry-level professionals. A major strength of the program is its relationship to the DPD and MS programs in the Department. Frequent communication and coordination with the DPD Director, Department Chair and program faculty allows a cohesive and streamlined educational experience with **systematic assessment** occurring at all levels.

**SOPP 6: Competency and Accountability: Engage in lifelong learning.**

Interns must meet all core and Nutrition Education Concentration competencies at the “adequate proficiency” level, though supervised practice and didactic learning experiences provided throughout the major rotations in order to receive a Verification Statement. Various rubrics are used to assess proficiency as well as Preceptor and DI Coordinator verification of competency completion. When providing staff relief, interns are accountable to their Preceptors and facilities for meeting patient and staffing needs. In addition, the program’s mission to prepare **Registered Dietitians who will enhance the quality of life and health of individuals and families** requires a commitment to lifelong learning. As the science of nutrition evolves, graduates must remain current in the field to remain competent practitioners. They must also meet CDR registration requirements by documenting their completion of 75 units of continuing professional education every five years in the Professional Development Portfolio process.

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

Program Mission ●	S	MI	NI
The program has a mission that distinguishes it from every other program in the college/university/organization. (CP/ICP/DI/DPD/DTP 1.1)	●	○	○
The program mission is compatible with the mission statement or philosophy of the sponsoring college/university/organization. (CP/ICP/DI/DPD/DTP 1.1)	●	○	○
The program mission is consistent with the preparation of entry-level registered dietitians (CP/ICP/DI/DPD/DTP 1.1)	●	○	○

**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

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

**Program Goals (DI 1.2)**

**DI Goals:**

1. To prepare graduates to meet eligibility requirements for becoming Registered Dietitians as established by the Commission on Dietetic Registration (CDR).
2. To prepare graduates who will be able to fulfill employment requirements for entry-level dietitians.
3. To prepare dietetic professionals who will develop and implement evidence based nutrition education interventions to enhance the health and well being of individuals and populations served.

**Goal definition and alignment with program mission**

DI Advisory Board DI subcommittee members, Preceptors, department faculty, current Interns, and program Graduates provided feedback on the development of program goals. At the fall 2008 Advisory Board meeting the DI Director introduced the 2008 ERAS and the program plan for their implementation (Appendix G). Board members provided feedback on program goals approved in the 1999 self-study report and the goals were modified based on their recommendations. The program’s first two goals remain the same as approved previously and were perceived by constituents as still relevant indicators of the program’s success in carrying out its mission, which they also felt was still relevant as written. Goal 1. addresses the requirements for becoming a registered dietitian. Goal 2. addresses the mission by specifying the need for individuals to fulfill entry-level dietitian employment requirements of health care institutions and agencies serving northern California. Goal 3. was added to address the 2008 ERAS requirement that all DIs have at least one Concentration. Goal 3. reflects the program mission in that preparing professionals to develop and implement evidence-based nutrition education interventions they may enhance the quality of life and health of those served. On-going program assessment of outcomes related to these recently revised goals will allow the program to determine if it is successfully carrying out its mission.

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

<b>Program Goals ●</b>	<b>S</b>	<b>MI</b>	<b>NI</b>
The program has goals that reflect the program’s mission. (CP/ICP/DI/DPD/ DTP 1.2)	●	○	○
The program's goals are accomplished through activities conducted by the faculty, preceptors and graduates. (CP/ICP/DI/DPD/ DTP 1.2)	●	○	○

**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

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

### **Program Outcomes (DI 1.3)**

**Goal 1.** To prepare graduates to meet eligibility requirements for becoming Registered Dietitians as established by the Commission on Dietetic Registration (CDR).

#### **Expected Outcomes and Target Measures**

1. Program Completion

Over a five-year period, 90% of interns enrolled in the DI program will complete all program requirements within 13.5 months or 150% of the time planned for completion.

2. Pass Rate

Over a five-year period, the pass rate for DI graduates taking the registration examination for the first time will be at least 80%.

**Goal 2.** To prepare graduates who will be able to fulfill employment requirements for entry-level dietitians.

#### **Expected Outcomes and Target Measures**

1. Graduate Employment

Over a five-year period, 70% or more of DI graduates who sought employment in dietetics will be employed within three months of program completion.

2. Employer Satisfaction

Over a five-year period, 75% of employers will rate DI graduates ability to meet performance requirements for entry-level dietitians and nutrition education responsibilities specifically, at the proficiency or mastery level.

**Goal 3.** To prepare dietetic professionals who will develop and implement evidence based nutrition education interventions to enhance the health and well being of individuals and populations served.

#### **Expected Outcomes and Target Measures**

1. Graduate Satisfaction

Over a five-year period, 80% of graduates will indicate that the DI program developed their competency to meet performance requirements for entry-level dietitians and additional requirements related to the nutrition education concentration at the proficiency or mastery level, one year after graduation.

2. Over a five-year period, 60% of graduates will be employed in northern California and providing evidence-based nutrition education to patients/clients served.

#### **Process used to define program outcomes and target measures**

Based upon historical data, the DI Director and Coordinator recommended the completion rate, pass rate, graduate employment rate, and other outcome measure benchmarks. Preceptors, current Interns, and program Graduates concurred with the recommendations at Advisory Board meetings and through personal communication. Given the program mission of preparing **Registered Dietitians who will enhance the quality of life and health of individuals and families through their service in institutions and agencies in northern California**, outcomes were developed and will be measured by Employer and Graduate satisfaction and employment rate in northern California.

Assessment tools such as the Employer, Graduate, and Preceptor surveys were revised with input from Advisory Board members in order to assess outcomes and target measures associated with Goals 2 and 3. The DI Director presented examples from programs across the country obtained via the ADA Dietetic Educators of Practitioners (DEP) listserv. Those, in combination with surveys used during the last self-study process, were modified to address current program needs reflecting the 2008 ERAS and Nutrition Education Concentration. Use of an on-line survey tool is expected to enhance return rate of surveys and simplify data analyses, thereby addressing a previous program weakness. In addition, over the last five years Employer Satisfaction of DI graduates was assessed informally through conversations at Advisory Board meetings, local CPE events, and social gatherings attended by Employers and the DI Director and Coordinator. The frequent interaction of program constituents provides opportunity to discuss and address program strengths and weaknesses. This frequent interaction is considered one of the major program strengths, and both quantitative and qualitative outcomes data are used in ongoing program evaluation.

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

Program Outcomes ●	S	MI	NI
The program has established expected program outcomes with appropriate target measures to assess achievement of each of the program's goals. (CP/ICP/DI/DPD/DTP 1.3)	●	○	○
Each outcome measure is aligned to one or more of the program goals. (CP/ICP/DI/DPD/DTP 1.3)	●	○	○
Expected program outcome measures <i>must</i> include, but are not limited to, the following (CP/ICP/DI/DPD/DTP 1.3):	●	○	○
<ul style="list-style-type: none"> <li>Program Completion Percentage of interns enrolled in the DI program that is expected to complete all program requirements within 150% of the time planned for completion (DI 1.3.1)</li> </ul>	●	○	○
<ul style="list-style-type: none"> <li>Graduate employment (CP/ICP/DI/DTP 1.3.2 see below) The Employment Rate for the program meets CADE's national benchmarks for monitoring dietetic education programs.* (CP/ICP/DI/DTP 1.3.2)</li> </ul>	●	○	○
<ul style="list-style-type: none"> <li>The Pass Rate for graduates taking the registration exam meets CADE's national benchmarks for monitoring dietetic education programs.* (CP/ICP/DI/DPD/DTP 1.3.3)</li> </ul>	●	○	○
<ul style="list-style-type: none"> <li>Other measures of graduate and program performance appropriate to assess the full intent of the program mission and goals (such as employer satisfaction, graduate school acceptance rates, contributions to the community, continuing education activities, professional leadership (DPD-DI program satisfaction with DPD graduates)) (CP/ICP/DI/DTP 1.3.4)</li> </ul>	●	○	○

**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

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

\* Refer to *CADE Policies and Procedures* and Appendix B.

## **Program Assessment (DI 1.4)**

### **Assessment Process**

Former Program Director, Dr. Barbara Kirks, developed the DI assessment plan, which was inherited by the current Director in 2005. While some program goals and outcomes remain the same, some have changed in order to achieve compliance with the 2008 ERAS. The 2008 Advisory Board meeting was dedicated to addressing the new standards and developing a plan for revising program goals, outcomes, and assessment procedures (Appendix G).

In the past five years, interns were queried about program strengths and weaknesses at the end of each major rotation, during the Exit Interviews, and one-two years after program completion by way of a survey. DI Preceptors provide annual feedback at Advisory Board meetings, via email, and phone conversations, and Employers provide feedback on program graduates. This feedback is collected annually and more frequently in some cases. A particular strength of the program is the tight knit community the DI operates within, thus providing frequent informal as well as formal opportunities for contact with Preceptors and Employers of our graduates.

Recent revision of program evaluation tools and the assessment plan reflecting the 2008 ERAS, with considerable input from program constituents, will strengthen the quantitative assessment of program outcomes (Appendix H). The DI Director will survey Preceptors and Employers at least once every two years in the future and will survey program graduates one year after program completion using an on-line survey tool. This should address a previous program weakness of low survey return rate discussed below.

The DI Director will continue to review ACT pass rate reports twice annually, and intern completion rate and employment rate in May of each year.

### **Analysis of Goal and Outcome Achievement**

From 2005-2010, only one intern of 27 did not complete all program requirements within 13.5 months (150% time planned for completion). Therefore, 96% of interns met the target measure for this outcome. The one intern's physical disabilities required that he work at a slower pace and for fewer hours per day than is typical for full-time supervised practice. The intern's preceptors were made aware of his physical limitations before placement and were willing to work with him to complete the program. This was an exceptional case and it is not anticipated to happen again.

#### **Goal 1. Outcome 1. met**

The 2005-2009 first time pass rate was 83%. In addition, four of the five interns from the 2010 graduating class have taken the exam and passed the first time. The fifth intern is taking time with her young son and plans to take the exam at a later date (Appendix I).

#### **Goal 1. Outcome 2. met**

From 2006-2010, 19 out of 23 program graduates (83%) found full or part-time employment within three months of program completion. It is not uncommon for an intern to be offered a position with a

facility where she/he completed a supervised practice rotation. When an intern is hired, it is typically required that they take and pass the RD exam within six months of employment.

#### Goal 2. Outcome 1. met

Employers are pleased with the performance of program graduates based on conversations that happen at Advisory Board meetings, through email and phone correspondence and in person with the DI Director or Coordinator when visiting area facilities and agencies. An Employer survey was sent to 17 individuals and 10 (59%) responded. Survey results indicate that Employers view program graduates as proficient at incorporating nutrition knowledge into practice, modeling effective communication skills, providing nutrition education and counseling, working independently, and demonstrating critical thinking skills. All responded that they would be highly likely to employ a CSU, Chico program graduate in the future. Two respondents noted a weakness regarding the business/management skills of graduates.

#### Goal 2. Outcome 2

There was a 25% return rate for Graduate Surveys sent multiple times to the 12 program graduates from 2005-2007. The three who did respond, indicated that the internship prepared them to meet the previous ERAS core competencies for entry-level dietitians at the “good” or “very good” level, which corresponds to the “proficiency” or “mastery” level on current evaluation tool Likert scales. Advisory Board members recommended a shorter, anonymous, on-line survey to increase response rate. The revised Graduate Survey was sent to 27 program graduates from 2005-2010 in November 2010. Fifteen Graduates returned the survey (56%). Ninety-three percent of respondents indicated that they were currently employed in dietetics, 79% full-time, and 57% in community based programs. Graduates viewed themselves as proficient at incorporating nutrition knowledge into practice, modeling effective communication skills, providing nutrition education and counseling, working independently, and demonstrating critical thinking skills, similar to Employer Survey results. Graduates ranked, “effectively provides management functions” lowest among those listed. Some graduates were working toward additional credentials including: CDE, CLE, IBCLC, and CNSC.

#### Goal 3. Outcome 1

Nineteen out of 27 program graduates from 2005-2010 (70%) are employed in northern California and provide nutrition education to patients/clients as part of their job responsibilities in clinical and food service settings, as well as in community and public health programs, such as the Center for Nutrition & Activity Promotion (<http://www.csuchico.edu/cnap/index.shtml>), WIC, and Del Norte Clinics (Appendix I).

#### Goal 3. Outcome 2 met

### **DI 1.5**

The program has implemented the assessment process on a continuous basis and successful achievement of target measures for all program outcomes suggest that program goals are currently being met. While not included specifically as a program outcome, Preceptor Survey results indicate a high level of

satisfaction with Interns as well. A brief, on-line survey was sent to 26 supervising Preceptors in November 2010. Eighteen responses (69%) were received. Intern strengths noted by Employers were reiterated, and two areas for improvement were suggested. These included increasing opportunities to gain cultural competence, as well as administration/management experience.

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

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

**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

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

## **On-going Program Improvement (DI 1.6)**

### **Process for using cumulative assessment of feedback and data during last five years**

Qualitative and quantitative data were used to identify program strengths and address areas for improvement. Policy changes that occurred in the last five years as a result of cumulative assessment include the following:

1. In response to on-going Intern and Preceptor feedback, the graduate level Topics in Clinical Nutrition (NFSC 670) was changed from a master's program elective to a required course for those applying to the internship. Because interns had earned a master's degree since the time of their DPD MNT courses, a review of the didactic material was deemed necessary before beginning supervised practice.

2. In response to Department faculty concerns, applicants are now required to have their MS research proposal on file with the Graduate Coordinator before the DI interviews, and points are allocated on the application rubric depending on MS research status. This is expected to encourage students to complete all MS requirements before beginning supervised practice.

3. In response to a DI Preceptor request and Intern interest in outpatient employment options following the internship, a field trip to Enloe Outpatient Center was incorporated into the DI Class schedule.

4. Given the program is limited by the number of clinical facilities available for supervised practice rotations, the DI Director continues to initiate relationships with RDs at hospitals and LTC facilities serving the north state.

5. Additional DI Class presentations cultural competence and program management/business skills will be added in spring 2011 based on survey data.

### **Overall program strengths**

Program strengths identified in the last five years include:

1. Small program allows for high preceptor to intern ratio and frequent communication among program constituents
2. 96% program completion rate within 150% of planned time
3. First time RD exam pass rate exceeds benchmark
4. Approximately 90% of graduates are employed within three months of program completion
5. Exceptional Preceptor commitment to providing a high quality internship experience
6. Master's level trained interns have a strong nutrition knowledge foundation and proficient problem solving and critical thinking skills resulting from their research experience
7. Program graduates, Preceptors and Employers express a high degree of satisfaction with the program

### **Overall areas for improvement**

Areas for improvement identified in the last five years include:

1. Intern perception that their MNT knowledge was inadequate at the start of supervised practice
2. Limited number of acute and long-term care facilities providing MNT supervised practice rotations, and lower acuity levels than may be available to urban programs
3. Limited exposure to ethnically and racially diverse populations

4. Poor response rate for graduate surveys
5. Perceived need to improve intern management/business knowledge and skills

**Rationale for short and long-term actions taken to maintain strengths and address areas for improvement**

Changes in policies and procedures related to program admission and didactic curriculum changes are considered short-term actions to address areas for improvement. Attempts by the DI Director to increase the number of hospitals and LTC facilities in the service area offering supervised practice rotations is likely to be an on-going and long-term process. In addition, the program must nurture the relationships that already exist. The most concrete way the program has found to thank Preceptors for their commitment is to provide occasional local and free CPE events, and to acknowledge their leadership at Advisory Board meetings. Revision of the Graduate, Preceptor and Employer Surveys to a shorter format and using an on-line survey tool has already proven successful in increasing response rate. In addition, based on Employer feedback, their survey does not ask about a particular employee but rather CSU, Chico graduates as a whole. Based on Preceptor and Graduate feedback, the Graduate survey is now completed anonymously. The Department of Nutrition and Food Sciences purchased an on-line survey tool, thus, the program does not have to budget for this expense.

To maintain program strengths the DI Director will continue to budget for one CPE event for program Preceptors at least once every two years, maintain frequent contact with program constituents, continue to consistently and systematically assess program outcomes, student learning objectives, curriculum adequacy, Preceptor training, and facility adequacy. The program will also continue to emphasize preparation for the registration exam and provide mentoring and references for graduates seeking employment.

**Budgeting process**

The DI Director is responsible for budgeting annual program expenses based on revenue. The chart below illustrates typical revenue and expense allocation for the year. As travel to the ADA FNCE or California Dietetic Association annual meeting, and hosting CPE events does not occur every year, the program maintains a \$2,000-3,000 account balance. As the balance grows, funds may be allocated for infrequent expenses such as new computers for the DI Director and Coordinator purchased in 2008, travel for the DI Director to attend a Self-Study Accreditation preparation workshop in Houston in February, 2010, and travel to rotation facilities/agencies for site visits.

<b>Revenue</b>		<b>Expenses</b>	
Application fee (\$50 x 7)	\$350	DI Coordinator salary (\$2080 x 5)	\$10,400
Intern fee (\$4,000 x 5)	\$20,000	Benefits (10%)	\$1,040
CPE registration fees	\$250	7 days DI Director summer salary	\$3,142
		Acct. management fee (8% of revenue)	\$1,648
		CPE event	\$1,000
		Travel to DEP/ADA/CDA	\$2,000

		Program materials (texts, RD exam review materials)	\$750
		Office supplies (copy, printing, postage)	\$300
Total:	\$20,600	Total:	\$20,280

**Institution’s planning and assessment processes and alignment with program’s processes**

The Office of the Vice Provost for Planning, Resource Allocation and Evaluation is responsible for coordinating the planning and implementation of California State University, Chico’s assessment and performance measurement systems. Assessment is accomplished through Academic Program Reviews, which play a key role in the improvement of undergraduate and graduate education at California State University, Chico. Each program (such as the Didactic Program in Dietetics and MS in Nutritional Science) is reviewed every five years. The Academic Program Review is systematic and intentional about gathering data about performance and effectiveness and then using the resulting information to continuously improve what the program does. The Academic Program Review requires that programs demonstrate the programs’ ability to generate and analyze indicators of performance aligned with the programs’ mission, goals and objectives, and teaching and learning resources. Each department is allocated funds for a faculty member to serve as assessment coordinator. This represents 6 units of release per year for the Department of Nutrition and Food Sciences. This past year these 6 units were divided evenly between the Didactic Program Director and the Dietetic Internship Director to give them one course release so that they could write the self-study reports.

**DI 1.7**

The DI program’s planning and assessment processes are consistent with those of the institution. Assessment is systematic and intentional about collecting performance and effectiveness data and then using the resulting information to continuously improve program performance related to outcomes, goals and mission.

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

<b>On-going Program Improvement ●</b>	<b>S</b>	<b>MI</b>	<b>NI</b>
Results of the assessment process are used to identify strengths and areas for improvement. (CP/ICP/DI/DPD/DTP 1.6)	●	○	○
Results of the assessment process are based on achievement of expected program outcomes and goals. (CP/ICP/DI/DPD/DTP 1.6)	●	○	○
Areas in the assessment process include policies, procedures, curriculum, faculty, preceptors and resources (CP/ICP/DI/DPD/DTP 1.6)	●	○	○
• Actions are taken to maintain program strengths and address areas for improvement identified through the assessment process. (CP/ICP/DI/DPD/DTP 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. (CP/ICP/DI/DPD/DTP 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. (CP/ICP/DI/DPD/DTP 1.6.2.1)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• If other expected outcome measures are not achieved, the program implements and monitors strategies to improve results. (CP/ICP/DI/DPD /DTP 1.6.2.2)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
• Costs to accomplish short and long term strategies are included in the budgeting process. (CP/ICP/DI /DPD/DTP 1.6.3)	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
Programmatic planning and outcomes assessment is integrated with institutional planning and assessment. (CP/ICP/DI/DPD/DTP 1.7)	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>

**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

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

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\* Refer to *CADE Policies and Procedures* and Appendix B.

## **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.

### **Learning Activities (DI 2.1)**

#### **Curriculum Addresses Various Conditions**

Interns are provided with supervised practice and didactic learning activities that expose them to a variety of conditions. In general, regardless of facility placement during their MNT rotation, interns will work with overweight and obese patients as well as those with diabetes, cancer, cardiovascular disease, gastrointestinal, and renal disease (Appendix J). Specifically, a 1-2 week renal rotation is provided during the MNT rotation at outpatient dialysis clinics. Interns also rotate through cardiac rehabilitation programs, Sweet Success programs (diabetes during pregnancy), and cancer care centers. Didactic learning activities including Case Studies completed during the MNT rotation provide an opportunity for Interns to research the pathophysiology and MNT associated with various conditions. Each Intern presents a patient case in the DI Class (Appendix K) after presenting the patient case to the health care team. The patient cases selected are particularly challenging. For example, Case Studies on fistulae and colostomy, gallstone obstructive pancreatitis postpartum, gastrectomy related to cancer, and hypermetabolic response related to traumatic injury were presented in the DI Class this fall. Thus each intern gets a thorough discussion of 4-5 patient cases enabling the interns to learn about a wider variety of conditions than they are able to experience alone. Guest lectures on renal disease (presented by Anne Kleimann, MS, RD, a preceptor who provides a renal rotation to at least one intern each year) and nutrition support (presented by Ardith Friday, RD, Chief Clinical Dietitian) provide additional didactic learning opportunities. As most interns complete the Food Service Administration rotation in a hospital setting, they are also exposed to a variety of clinical conditions at that time. During the Community Nutrition rotation, interns are exposed to overweight, diabetic, and cardiac rehab patients most commonly.

#### **Curriculum Addresses Various Populations and Diverse Cultures**

The supervised practice rotations also provide an opportunity for interns to work with patients/clients at various stages of the life cycle. Interns and Preceptors acknowledge that while many of the hospitals used for MNT rotations have small OB/GYN and pediatric units, the census is primarily comprised of adults and seniors. Extended care and rehabilitation facilities also expose interns to an older population. Interns are exposed to pregnant and breastfeeding women through rotations at WIC, and Sweet Success. School food service rotations, as well as those offered by the California Department of Education, and University of California Cooperative Extension, expose Interns to children and adolescents. Prior to this Self-Study, long-term care facilities were not included in all rotations, although Enloe Rehabilitation and extended care unit at Oroville Hospital provide LTC-like experience for at least half of the Interns. Based on the 2008 ERAS requirement, identification and selection of additional LTC rotations has begun. One additional facility has already been identified and Loni Presley, MS, RD (a 2009 program graduate) has agreed to supervise one to two interns next year. The process for initiating a legal agreement with the university and the facility has begun, and the current class of Interns will participate in a half-day field trip to the facility in spring 2011. In addition, an acute LTC facility in Redding, CA is willing to supervise interns and the DI Director has scheduled a site visit there for mid December. In addition, during the 2010 Advisory Board DI subcommittee breakout session, the DI Director was given leads to increase the number of LTC facilities available for Intern placement. Thus, every intern's MNT

schedule will include a LTC rotation beginning in fall 2011. This will lead to increased experience working with the most rapidly growing segment of our population, seniors.

According to the U.S. Census Bureau (<http://quickfacts.census.gov/qfd/states/06/06007.html>), Butte County, where a majority of the DI rotations occur, has the following ethnic/racial profile: 76% Caucasian, non-Hispanic, 13% Hispanic/Latino, 4% Asian, 2% African American, 2% Native American. Exposure to a culturally diverse population is thus limited relative to urban dietetic internships. Tehama and Shasta Counties, home to two of the four primary hospitals used for DI rotations, have similar profiles. Interns and Preceptors report that the patients/clients they see most frequently are Caucasian. Hispanic/Latino (primarily Mexican-American) are the next most frequently seen. A growing Hmong and East Indian population allow for additional exposure to diverse cultures. In addition, the DI Director has arranged for the Directors from the CSU, Chico Office of Diversity, and the Cross Cultural Leadership Center to begin providing a training for the DI Class beginning in spring 2011. This additional didactic training on cultural competence in health care settings will address this identified area for improvement.

**Curriculum Addresses All Interventions Defined in the NCP.**

Supervised practice opportunities that address all aspects of the Nutrition Care Process and Model are found throughout the MNT, Food Service Administration, and Community Nutrition rotations. Specifically, food and/or nutrient delivery interventions, which encompass meals and snacks, enteral and parenteral nutrition, supplements, feeding assistance, feeding environment, and nutrition-related medication management, most commonly occur during the MNT in-patient rotation. In addition, one DI class is spent with guest speaker, Oroville Hospital Chief Clinical Dietitian, Ardith Friday, RD, presenting on nutrition support toward the beginning of the MNT rotation. In a subsequent DI class meeting, Interns present on their facility’s policy and procedures regarding meal replacements, enteral, and parenteral nutrition. Nutrition education interventions encompassing content and application, and nutrition counseling interventions addressing the theoretical basis/approach and strategies, are addressed during both the MNT and Community Nutrition rotations. As the Interns have completed a master’s degree in Nutritional Sciences—Option in Nutrition Education, they are well prepared to address such interventions during their rotations. Indeed, this evidence-based research training led to the natural selection of a Nutrition Education Concentration for the program. The supervised practice rotations as well as DI Class also addresses the coordination of nutrition care. That is, Interns interact with other members of the health care team including physicians, nurses, physical, occupational, speech and respiratory therapists, wound care specialists, pharmacists, physician assistants, social workers, and case managers throughout their MNT rotation, and are able to participate in patient rounds as available at the various facilities. In addition, one DI Class is devoted to the NCP and Model, and renal and nutrition support guest lectures are also provided.

The program curriculum is designed and continuously updated to allow interns to meet the core and Nutrition Education competencies through supervised practice and didactic learning experiences.

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

<b>Learning Activities ●</b>	<b>S</b>	<b>MI</b>	<b>NI</b>
The curriculum is planned to provide learning activities to attain all the Competencies (Appendix A) defined to enter practice as a registered dietitian. (DI 2.1)	●	○	○

Didactic and supervised practice learning activities prepare interns for professional practice with patients/clients with various conditions, including but not limited to weight management and obesity, diabetes, cancer; cardiovascular, gastrointestinal and renal diseases (CP/ICP/DI/DPD/DTP 2.1.1)	●	○	○
Supervised practice and didactic learning activities prepare interns to implement the nutrition care process with various populations and diverse cultures, including infants, children, adolescents, adults, pregnant/lactating females and the elderly (CP/ICP/DI/DPD/DTP 2.1.2)	●	○	○
Didactic and supervised practice learning activities prepare interns 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). (CP/ICP/DI/DPD 2.1.3)	●	○	○

**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

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

## Program Concentrations (DI 2.2)

### Concentration, Rationale, and Competencies

The program was previously designated as a General Emphasis DI. In order to comply with the 2008 ERAS requiring at least one Concentration, consultation was initiated with Preceptors, Graduates, Employers, Interns, Advisory Board members, and Department of Nutrition and Food Sciences faculty, and a Nutrition Education Concentration was identified (Appendix G). Rationale for choosing this Concentration includes the fact that the program accepts applications from master’s students finishing their degree at California State University, Chico in Nutritional Sciences—Option in Nutrition Education. The master’s curriculum includes graduate level courses in Nutrition Education and Counseling Psychology which both emphasize evidence based behavior change theory and strategies (Appendix C). In addition, the focus of many of the applicants’ MS research is evaluation of the impact of nutrition education interventions. Other common MS research areas include nutrition education needs assessments and cross sectional sampling and evaluation of nutrition knowledge, attitudes and behaviors among various populations. The Nutrition Education Concentration is aligned with the program mission, goals, resources available and expected learning outcomes. Assessment tools were revised and strategies developed for on-going program evaluation based on the selection of this Concentration. The competencies for the Concentration were developed to reflect the processes involved in evidence based nutrition education interventions, and include the following:

- DI 5.1 Conduct a community nutrition needs assessment
- DI 5.2 Develop an evidence based nutrition education intervention
- DI 5.3 Implement the developed nutrition education intervention

The Nutrition Education Concentration competencies build on core competencies, specifically:

- DI 2.2 Demonstrate professional writing skills in preparing professional communications
- DI 2.3 Design, implement and evaluate presentations considering life experiences, cultural diversity and educational background of the target audience
- DI 2.4 Use effective education and counseling skills to facilitate behavior change
- DI 3.2 Develop and demonstrate effective communications skills using oral, print, visual, electronic and mass media methods for maximizing client education, employee training and marketing
- DI 3.4 Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management merging consumer desire for taste, convenience and economy with nutrition, food safety, health messages and interventions
- DI 3.5 Deliver respectful, science-based answers to consumer questions concerning emerging trends.

The Community Nutrition planned supervised practice and didactic learning experiences meet the core competencies and interns are prepared to independently assess the nutrition education needs of a target population, and develop and implement an evidence-based, theory driven intervention that includes an evaluation component based on the results of their assessment.

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

Program Concentrations (Not Applicable DPD/DTP) ●	S	MI	NI
In addition to the Competencies defined in Appendix A, the DI includes one, but not more than two, concentrations designed to begin development of the entry-level depth necessary for future proficiency in a	●	○	○

particular area. (DI 2.2)			
The concentration area(s) is chosen on the basis of mission, goals, resources and expected learning outcomes (CP/ICP/DI 2.2.1)	●	○	○
Competencies and learning activities are developed by the DI for the concentration area(s) that build on the Competencies defined in Appendix A.	●	○	○

**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

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

## **Curriculum Plan (DI 2.3)**

### **Curriculum plan for supervised practice and didactic learning**

A program orientation is held two-three weeks prior to the first supervised practice rotation. During the orientation, a DI binder is provided to each intern. The binder includes orientation information; DI Class schedule and learning objectives; Intern rotation schedules; the Intern Handbook; MNT, Food Service Administration, and Community Nutrition competency forms; Case Study and Menu Project guidelines; and a facility and Preceptor directory. Interns are instructed to purchase required materials and to contact their supervising MNT rotation Preceptor to determine specific facility orientation requirements (e.g., name badge acquisition, TB tests, background check). The DI Coordinator provides an overview of program policies and procedures as well as rotation competencies and evaluation tools used throughout the program (Appendix L).

Interns begin supervised practice in late August with a 16 week (600 hour) MNT rotation. A two week holiday break is provided following the MNT rotation and during the first week in January interns begin an 8 week (300 hour) Food Service Administration rotation. This is followed by a one week spring break. Interns then begin an 8 week (300 hour) Community Nutrition rotation. Agency placements for the Community Nutrition rotation are discussed between the DI Coordinator and interns and decided upon during the Food Service Administration rotation. Interns are allowed to choose up to three, 2-3 week placements at available sites during the Community Nutrition rotation (Appendix M).

Currently, there are four main acute care hospitals associated with the program and each Intern is placed with a supervising Preceptor at one as their “primary clinical site.” As some of the hospitals used in the program have a relatively low level of acuity, and based on Preceptor feedback that it is advantageous for Interns to be exposed to policies and procedures at different hospitals, Interns typically rotate to one other hospital during their MNT rotation (Appendix N).

In all but one of the current hospitals used for MNT rotations, Interns also complete their Food Service Administration rotation at the same hospital as their MNT rotation. Interns are exposed to a new supervising preceptor at this time. The Intern placed for a MNT rotation at St. Elizabeth Community Hospital rotates to Enloe Medical Center for the Food Service Administration rotation because St. Elizabeth’s food service department is considered too small to provide adequate experience to meet the Administration rotation competencies. Debbie Silveira, MS, RD, is the Food & Nutrition Services Manager at Enloe and a champion of the DI program. As such, she regularly and enthusiastically supervises two Interns at a time to accommodate program needs. In addition, in the past an Intern has completed the Administration rotation in a school food service setting. DI preceptors and Advisory Board members acknowledge that while therapeutic diets may not be covered in a school food service setting, all Interns are exposed to such diets during their MNT rotation, and other core Administration competencies completed are adequate to meet the needs of an entry-level dietitian.

The eight week (300 hour) Community Nutrition rotation is completed last. At this point, Interns have increased knowledge of disease states and MNT associated with those states, extensive practice providing the NCP and familiarity with standardized language, increased proficiency at documenting ADIME in the patient/client record and have gained leadership skills and other professional attributes through provision of staff relief during their MNT and Administration rotations. The Nutrition

Education Concentration competencies build on the core competencies completed during all previous rotations.

While the program has met its outcomes and target measures during the last five years, constituents are always eager to improve the program above and beyond the established criteria. At the 2010 Advisory Board meeting, Karen Norris, MBA, RD, CDE and Director of Nutrition Services at Oroville Hospital, suggested that the program consider scheduling the Food Service Administration rotation before the MNT rotation, so Interns understand more realistically the capabilities and limitations of the Food Service Department before making recommendations during their MNT rotation. It was also noted that Ms. Norris, and perhaps other Food Service Directors, would have more time to supervise Interns if the rotation were in the late summer/early fall. During site visits in November 2010 to the hospitals currently providing MNT and Administration rotations, the DI Director and Coordinator discussed this suggestion with Preceptors in order to identify pros and cons. The supervising Preceptors were open to further discussion and noted additional advantages to changing the rotation order. Preceptors noted that the MNT rotation closer to the end of the internship may benefit Interns in terms of them successfully passing the RD exam and securing employment in the acute care setting following completion of the program. In addition, if Interns were trained in MNT during a lower census time (November/December) they could provide staff relief during a higher census time (January/February) thus decreasing MNT supervising Preceptors' workload. Staff relief provides further benefits for the Preceptors. No major disadvantages to this suggested change were noted and it will be discussed further in the spring.

In addition to the supervised practice rotations, Interns meet twice a month during the MNT rotation, and at least once a month during the Food Service Administration and Community Nutrition rotations for a two hour DI Class (Appendix K). The DI Coordinator is the instructor for the course and communicates with the DI Director regarding curriculum and guest presentations. Some of the competencies throughout all three major rotations are met during the didactic DI Class. Course content and schedule are developed and revised with Preceptor input. For example, a review of the NCP and Model and medical record documentation early during the MNT rotation was recommended. In addition, guest lectures by DI preceptors on the topics of renal disease and nutrition support are scheduled during this rotation. Additional topics such as the Scope of Dietetics Practice Framework, SOP, SOPP, human resources management, the Professional Development Portfolio process and food and nutrition legislation are covered in the DI Class. The DI Class is also a time for interns to present major projects completed (e.g., Case Study, CQI, Menu Project) and ask questions, share experiences and discuss professional development issues in a supportive environment.

### **Examples of sequential and integrated learning experiences**

Sequential and integrated learning experiences throughout the DI Class and supervised practice rotations build on prior learning and facilitate intern achievement of required competencies (Appendix M). For example, the DI Coordinator schedules classes on the NCP and Model and invites guest speakers to cover nutrition support and renal disease during the MNT rotation. Interns are able to integrate these didactic learning experiences with their supervised practice. In addition, Interns become familiar with the ADA EAL by abstracting two research articles applying evidence based guidelines. Their research skills are further developed as they gather and interpret data for their clinical Case Studies. Interns interact with other members of the health care team when they present their Case Study. Scheduled towards the end of the MNT rotation, the presentation encompasses the disease state pathophysiology,

MNT as reported in the ADIME format, and incorporates research articles using the EAL to support their nutrition recommendations.

In another example, one DI Class focuses on the ADA Scope of Dietetics Practice Framework, SOP, SOPP and Code of Ethics for the Profession of Dietetics. For this class the DI Coordinator also assigns a topic for each Intern such as, Title 22, Cal Code, and the role of The Joint Commission in accreditation of health care facilities. Interns are then responsible for presenting their topic and leading class discussion on how these regulations complement professional practice expectations, both during the internship and throughout their career.

In most facilities, Interns perform the NCP starting in lower acuity units and progressing to ICU and trauma patients over the course of the MNT rotation. Many Interns note that they are given the opportunity to work independently and then consult with their supervising Preceptor regarding nutrition plan and documentation in the medical record. By the time Interns complete two weeks of staff relief in the MNT rotation, they are able to work independently with higher acuity patients (e.g., ventilator, nutrition support) and then meet with a dietitian to sign off on their nutrition notes. Staff relief allows Interns to develop leadership qualities and other professional attributes as they take on the responsibilities of an entry-level dietitian. Supervising Preceptors evaluate Interns after this experience and share their findings in a formal End of Unit Rotation Evaluation rubric. An additional one week of staff relief is also provided during the Food Service Administration rotation.

Another sequential and integrated learning experience includes completion of the Menu Project during the Food Service Administration rotation. Interns conduct research for a target market and then discuss their findings with the supervising Preceptor. Based on their findings, Interns develop a target market menu with standardized recipes and test the recipes with food service staff using facility equipment. Finally, Interns complete a brief written report that includes evaluation findings regarding acceptance of the target market menu developed and discuss the report with their Preceptor. This project builds on skills developed as Interns complete core competencies associated with this rotation.

Another example is that Interns take on leadership roles by planning work schedules for the food service staff and provide one week of staff relief at the end of the Food Service Administration rotation. They are able to do this after they review policy and procedures of the food service department, determine costs, review budgets and balance sheets, assist with purchasing and inventory and complete reports per facility format.

During the Community Nutrition rotation, interns review nutrition education materials used in the agencies/organizations they are placed. Materials are critiqued and revised to increase effectiveness as needed. Interns are able to observe individual counseling sessions and group nutrition education sessions before developing a class for clients or staff themselves. Interns receive feedback via the Evaluation of Teaching Presentation rubric and also receive feedback of their counseling skills via the Evaluation of Counseling Skills rubric.

The Nutrition Education Concentration competencies of conducting a nutrition education needs assessment, developing an evidence based intervention and implementing and evaluating the intervention build on the core Community Nutrition rotation competencies addressed above. In addition, core competencies met during the MNT and Administration rotations inform all aspects of developing

and implementing an evidence based nutrition education intervention. Specifically, over the course of supervised practice and didactic learning experiences interns: 1. are exposed to the ADA EAL; 2. practice performing the NCP among diverse populations with varied health states, life cycle stage, cultural backgrounds, literacy levels and in various stages of change; 3. gain experience in data collection and analyses; 4. are provided numerous opportunities to develop professional writing and verbal communication skills, and critical thinking and problem solving skills; and 4. gain experience in management. Ultimately, Interns are preparing to work independently as entry-level dietitians and are developing professional attributes consistent with the SOPP and Code of Ethics for the Profession of Dietetics.

On-going assessment of student learning outcomes occurs throughout the program by using Bi-Weekly Reports completed by the Interns, Evaluations of Teaching and Counseling Skills, Case Study Presentations, and Mid Unit and Final Unit Rotation Evaluations completed by the supervising Preceptor (with input from all RDs who supervised Interns) to assess Intern achievement of competencies at the breadth and depth expected.

### **Culminating Supervised Practice Experience**

During the MNT rotation, Interns demonstrate entry-level competence when performing at the proficiency or higher level on the Case Study Presentation to the health care team. The Menu Project report completed during the Food Service Administration rotation requires skills gained while completing many of the core competencies during that rotation. The Nutrition Education Concentration competencies (i.e., needs assessment, development and implementation of an intervention) completed toward the end of the Community Nutrition rotation build on the core competencies completed previously during all three major rotations. In addition, Staff Relief provides a culminating experience to demonstrate entry-level competence at the end of both the MNT and Food Service Administration rotations.

### **Educational methods and rationale**

Supervised practice allows Interns to work directly with RDs and other members of the health care team and is the major educational method employed by the DI. In addition, other educational methods are used including DI Class lectures by the DI Coordinator and Preceptors, discussion, oral presentations by Interns on assigned topics (e.g., food and nutrition legislation, federal regulations and state statutes), assignments related to supervised practice experience and also requiring outside research (e.g., Case Study, Clinical CQI, Menu Project), and field trips and group activities. A variety of methods are used to enhance the educational experience of Interns with diverse learning needs and preferences. The DI Coordinator and DI Director are responsive to Preceptor, Employer, Graduate, and Intern feedback when developing and revising the curriculum and methods used. For example, in response to a request by Preceptor Mary Aram, MS, RD, a field trip to the Enloe Outpatient Center was incorporated into the DI Class Schedule.

### **Examples of interdisciplinary learning experiences**

Interns attend patient rounds during their MNT rotation. While some facilities conduct rounds only in the ICU, other hospitals conduct rounds in step-down and other units. During patient rounds the Interns

are exposed to the scope of practice of physicians and physician assistants, nurses, physical, occupational, speech and respiratory therapists, pharmacists, wound care specialists, and case managers to name a few. Interns also present a Case Study to RDs and other members of the health care team during their MNT rotation. Interns may also work with social workers and case managers when patients are being discharged from the hospital. Various members of the food service staff as well as public health and community based practitioners also interact with the Interns during their Food Service Administration and Community Nutrition rotations, respectively.

### Examples of opportunities to develop professional attitudes, values and skills

The program is designed to develop knowledge, attitudes, values and skills required by the profession. Specifically, during the MNT rotation, Interns must develop collaborative relationships with their preceptors and other members of the health care team in order meet the program competencies. Problem solving and critical thinking are developed as Interns assess, diagnose, intervene, monitor and evaluate patient nutritional needs and document relevant information in the medical record. Opportunities to develop cultural competence are provided as Interns work with diverse patient/client/coworkers. Leadership and decision making skills are further developed when Interns provide staff relief during the MNT and Food Service Administration rotations. In this capacity, Interns are responsible for performing the duties of an entry-level dietitian and must foster teamwork and collaboration among staff in order to effectively carry out their duties. Self assessment and reflection is incorporated into the Bi-Weekly Report form that Interns complete every two weeks of the DI. Interns must list specific competencies as well as professional goals they have accomplished through their supervised practice and didactic learning experiences. Interns also meet with their supervising Preceptor to discuss their strengths and areas for improvement as identified by the Preceptor on the Mid-Unit and Final Unit Rotation Evaluation forms. Finally, Interns complete an Intern Evaluation of Rotation form at the end of each major rotation (i.e., MNT, Administration, Community Nutrition). Interns are thus able to reflect on their learning process, and are able to provide feedback on the facilities they were placed at and the supervision they received.

The DI Preceptors, Coordinator, and Director model professional attributes and hold Interns to high standards as they progress through the program.

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

Curriculum Plan ●	S	MI	NI
The program's curriculum plan includes the following (CP/ICP/DI 2.3 or DPD/DTP 2.2):	●	○	○
Identification of supervised practice rotations that interns will complete to meet each of the Competencies defined in Appendix A and the program-defined competencies for the concentration area(s) (DI 2.3.1)	●	○	○
Organized, sequential supervised practice rotations that logically progress from introductory learning activities and build on previous experience to achieve the expected competency upon completion of the program (DI 2.3.2)	●	○	○
Culminating experiences (such as planned staff experience) to demonstrate entry-level competence (CP/ICP/DI 2.3.3)	●	○	○
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. (CP/ICP/DI 2.3.4/DPD 2.2.3/DTP 2.2.3)	●	○	○
Opportunities for students or interns to participate in interdisciplinary learning activities (CP/ICP/DI 2.3.5; DPD	●	○	○

2.2.4; DTP 2.2.4)			
Opportunities for students or interns to develop collaboration and skills. (CP/ICP/DI 2.3.6; DPD 2.2.5; DTP 2.2.5)	●	○	○
Opportunities for students or interns to develop problem solving and critical thinking skills, (CP/ICP/DI 2.3.6; DPD 2.2.5; DTP 2.2.5)	●	○	○
Opportunities for students or interns to develop self-assessment skills. (CP/ICP/DI 2.3.6; DPD 2.2.5; DTP 2.2.5)	●	○	○
Opportunities for students or interns to develop personal and professional attitudes and values. (CP/ICP/DI 2.3.6; DPD 2.2.5; DTP 2.2.5)	●	○	○
Opportunities for students or interns to develop cultural competence. (CP/ICP/DI 2.3.6; DPD 2.2.5; DTP 2.2.5)	●	○	○
Opportunities for students or interns to develop leadership and decision-making skills (CP/ICP/DI 2.3.6; DPD 2.2.5; DTP 2.2.5)	●	○	○
Supervised practice rotation descriptions with clearly defined objectives reflecting the breadth and depth of supervised practice and expected intern performance (DI 2.3.7)	●	○	○

**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

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

## Curriculum Length (DI 2.4)

### Supervised practice hours

The MNT rotation consists of 600 supervised practice hours completed over 16 weeks. The Food Service Administration and Community Nutrition rotations are 300 hours completed over 8 weeks each. Core competencies are completed throughout all three major rotations, and the Nutrition Education Concentration competencies are completed at the end of the Community Nutrition rotation building on prior learning and core competencies completed earlier in supervised practice rotations. The DI supervised practice hours were established to maintain compliance with the 1,200 required hours specified in the 2008 ERAS. While 1,200 hours of supervised practice can be completed in thirty 40-hour work weeks, an additional two weeks is built into the rotations in order to accommodate holidays and 28 hours of scheduled DI Class time. When the requirements for practice hours was increased to 1,200, the program was close to that already and therefore no major schedule changes were needed. However, program policy regarding missed supervised practice hours due to illness or personal reasons was changed to require that all missed hours be made up at the end of the rotation in which they were missed. This policy change ensures that interns meet the 1,200 hour minimum.

Although the program recruits interns from among students finishing the MS in Nutritional Sciences—Option in Nutrition Education, the DI itself does not grant a degree, certificate or credits.

### Rationale for curriculum length

The program length of 32 weeks providing 1,200 supervised practice hours and 28 DI Class hours is adequate to meet the core and Nutrition Education Concentration competencies and is consistent with other Dietetic Internships. Success at achieving program objectives and learning outcomes suggests that program goals, which are aligned with the program mission, are being met.

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

Curriculum Length ●	S	MI	NI
The curriculum's length including planned number of supervised practice hours is based on the program mission and goals. (CP/ICP/DI 2.4; DPD/DTP 2.3)	●	○	○
The curriculum's length conforms to commonly accepted practice in higher education. (CP/ICP/DI 2.4; DPD/DTP 2.3)	●	○	○
The curriculum's length is consistent with the program's learning outcomes. (CP/ICP/DI 2.4; DPD/DTP 2.3)	●	○	○

**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

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

## **Learning Assessment (DI 2.5)**

### **Student learning outcomes assessment plan**

Over the last five years, DI Preceptors have been instrumental in assisting the DI Director and Coordinator revise the MNT, Food Service Administration, and Community Nutrition rotation competency forms used to assess intern learning outcomes. The greatest changes came when the 2008 ERAS were introduced. While many of the supervised practice and didactic learning experiences established to meet the 2002 ERAS were still relevant, it was necessary to align them with the revised competencies and in some cases activities were deleted and others developed to maintain compliance with the new standards (Appendix O). In addition, Nutrition Education Concentration competencies were developed. Preceptors and other stakeholders were invited to review the competency forms and provide feedback at the annual Advisory Board meeting, as well as via email or phone calls, in person, or by faxing recommendations to the DI Director at any time. During the summers of 2008 and 2009 the DI Director revised the competency forms and emailed them to DI Preceptors. The competency forms are working documents and input from key constituents will continue to be incorporated each summer when program materials are revised. In addition to the competency forms, Mid Unit and Final Unit Rotation Evaluation forms, Evaluation of Teaching, Counseling Skills, and Case Study Presentation forms were also revised.

### **Assessment Implementation**

In the last five years, intern learning has been assessed throughout the 32 week program. Interns are required to have their Preceptors or the DI Coordinator sign off on their competency forms as supervised practice and didactic learning activities are completed. In addition, a Mid-Unit Rotation Evaluation (for any rotation lasting two or more weeks) and Final Unit Rotation Evaluations are completed and reviewed by the DI Coordinator. If there are any areas of concern, the Coordinator and DI Director consult, and meet with the Intern to determine a plan to remedy noted deficiencies. Quantitative assessment of learning outcomes also occurs through the use of the Evaluations of Teaching Presentation, Case Study Presentation, and Counseling Skills Forms. Finally, feedback received from Preceptors regarding Intern progress via phone conversations, emails and/or in-person interactions with the DI Coordinator and Director is common. At the end of the program, the DI Coordinator reviews all evaluation tools, summarizes the information on the Final Intern Evaluation form, and shares the findings with the DI Director. This form is discussed with and signed off by the Intern during the DI Exit Interview.

An area for improvement noted in the last five years involves the lack of consistency in assessment tools used to evaluate student learning outcomes. Competency forms developed previously did not have a Likert scale to assess the extent to which the intern achieved the competencies. The DI Director added a Likert scale to the forms in 2006, but not all Preceptors completed the scale as they were used to the old format and the scale was not adequately defined. Thus, when the DI Coordinator completed the Intern Final Evaluation (listing all competencies) which did have a Likert Scale with 1-2=substandard performance, 3-4=meets expectations, 5=exceeds expectations, it was not completed based on the major rotation competency forms, but rather a 1-5 scale intern's received on their Final Unit Rotation Evaluation forms. These forms however, did not address the extent to which intern's met individual competencies but rather, professional attributes of the intern (e.g., promptness and dependability, critical

thinking, decision making and problem solving skills, ability to work with clients, written and oral communication skills).

Revision of the rotation competency forms to meet the 2008 ERAS allowed the DI Director to align the Likert scale on the evaluation tools thus making completion of the Intern Final Evaluation by the DI Coordinator less subjective. This scale allows the Preceptor or DI Coordinator to evaluate intern performance from 1=lacks proficiency, 2=adequate proficiency, 3=proficiency, 4=mastery. All interns must meet at least 2=adequate proficiency on all competencies. Based on historical data however, the program chose a benchmark of 75% of interns meeting each core and Nutrition Education competency at the proficiency or higher level, indicating a higher level of achievement that merely “passing” (Appendix O). For the years before a Likert scale was included on the forms, sign off on the competencies suggests that an intern demonstrated adequate proficiency, but Intern Final Evaluation forms suggests their level of performance exceeded this minimum standard.

Aggregate data for the last five years indicates that all Interns met every competency at the 2=adequate proficiency level and the vast majority demonstrated 3=proficiency or 4=mastery (Appendix O).

Other DI assessment tools such as the Employer, Preceptor and Graduate surveys, now use this same Likert scale for consistency making interpretation of assessment data collected clearer. The DI Director, Coordinator, and Preceptors enthusiastically embrace the revised assessment tools.

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

<b>Learning Assessment ●</b>	<b>S</b>	<b>MI</b>	<b>NI</b>
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 abilities necessary to attain each Competency specified in Appendix A and the program-defined competencies for the concentration area(s). (DI 2.5)	●	○	○
The written plan includes	●	○	○
• The assessment methods that will be used (CP/ICP/DI 2.5.1; DPD/DTP 2.4.1)	●	○	○
• The didactic and/or supervised practice course(s)/rotation(s) in which assessment will occur (CP/ICP/DI 2.5.2; DPD/DTP 2.4.2)	●	○	○
• The individuals responsible for ensuring assessment occurs (CP/ICP/DI 2.5.3; DPD/DTP 2.4.3)	●	○	○
• The timeline for collecting formative and summative assessment data (CP/ICP/DI 2.5.4; DPD/DTP 2.4.4)	●	○	○
The program has implemented the process for assessing intern competencies/student learning outcomes (CP/ICP/DI 2.6; DPD/DTP 2.5):	●	○	○
Data on actual intern/student learning outcomes are collected, aggregated, and analyzed by comparing to expected competencies/outcomes according to the timeline in the assessment plan. (CP/ICP/DI 2.6.1; DPD/DTP 2.5.1)	●	○	○
Analysis of aggregate data is used to determine the extent that expected competencies/learning outcomes are being achieved. (CP/ICP/DI 2.6.2; DPD/DTP 2.5.2)	●	○	○

**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

Evaluation of the Criteria ●	
● <b>Meets</b>	<ul style="list-style-type: none"> <li>• No compliance problems are present.</li> <li>• No compliance problems are present, but they may arise in the future (☐ Monitor).</li> </ul>

	• Compliance problems exist, but all are being resolved successfully ( <input type="checkbox"/> Monitor).
<input type="radio"/> <b>Partially Meets</b>	Plans for resolving compliance problems have not been implemented.
<input type="radio"/> <b>Does Not Meet</b>	No plans for addressing compliance problems.

## **On-going Curricular Improvement (DI 2.7)**

### **Ongoing curriculum review process**

The Department of Nutrition and Food Sciences holds an annual Advisory Board meeting in the fall. DI Preceptors, Employers, Interns, and program Graduates serve on the Board and attend meetings. Time is allocated at each meeting to discuss program curriculum, gather assessment data, and ask for feedback on perceived strengths and areas for program improvement. In addition, curricular length, content and educational methods are also discussed in-person and via email and phone with Preceptors and Interns throughout the year. Based on the feedback received, the DI Director and Coordinator review program curriculum during the summer months and revise as necessary.

### **Curriculum strengths**

Over the last five years Preceptors have consistently expressed pleasure at the overall level of maturity, knowledge base, problem solving skills and confidence that the interns display. Master's level trained interns are perceived as able to "hit the ground running" and work with a higher degree of independence sooner in the supervised practice setting than interns without a graduate degree.

Data from the Preceptor and Graduate surveys also suggest that Interns are proficient at using technology and mass media, model effective communication skills, work effectively as a member of the team, and are proficient at interpreting research and incorporating new knowledge into practice.

### **Curriculum areas for improvement**

It was at the 2009 Advisory Board meeting that Preceptors and Interns suggested that an area for improvement was the length of time between their undergraduate MNT courses and the start of their supervised practice rotations. As MS students, for some it was more three years since they had completed MNT coursework and thus they lacked confidence in their knowledge and skills regarding disease pathophysiology and MNT. In addition, in the last five years, the program began incorporating the NCP and Model, which was not covered consistently in all intern's DPD curriculum.

Another area for improvement identified in the past five years was the limited number of hospitals and LTC facilities available for MNT rotations. Due to budget cuts, one facility (Fremont-Rideout) was no longer able to take interns beginning with the 2009-10 class. This facility is undergoing reorganization and is likely to be bought by another facility. As such, the Chief Clinical Dietitian remains unwilling to accept another Intern at this time. In the last five years the program also lost a MNT and Administration rotation at Kaiser Hospital in Vallejo, CA. The CSU, Chico Office of Risk Management was unwilling to enter into an updated legal agreement with this facility as its legal representative required indemnification for Interns, and this is against university policy. The loss of this facility was very unfortunate given that the Chief Clinical Dietitian is a program Graduate and more than willing to accept an Intern at what was arguably the highest acuity facility associated with the program. Due to the loss of these facilities, the DI was only able to accept four Interns for the 2010-11 year even though it is accredited for five.

### **Incorporation of new knowledge and technology**

New knowledge and technology impacting dietetic practice is obtained by the DI Director and Coordinator through membership in ADA, attendance at DEP, ADA FNCE, and CDA annual meetings, professional development activities, the DEP Line Newsletters and DEP listserv, and through webinars. For example, the DI Director attended a session at DEP regarding the NCP and Model and invited the speakers to Chico to present at a CPE event for program Preceptors in 2007. The program was thus able to acknowledge the hard work and dedication of Preceptors with a local opportunity for free CPE units, and provide them with training on new knowledge that Interns were learning in their DPD and graduate program curriculum.

In November 2010, the program hosted another CPE event on the Health at Every Size paradigm. Researcher, professor and author, Dr. Linda Bacon, provided a three hour interactive seminar and was met with enthusiastic reviews by the nearly 60 north state RDs in attendance, many of whom are program Preceptors. The current revenue stream for the DI will allow the program to offer a CPE event at least once every two years as a “thank you” to our DI Preceptors and an opportunity to share new knowledge in the field.

In the last five years, the program has incorporated new knowledge into the curriculum either directly, by adding to didactic or supervised practice learning experiences, or indirectly, by adding to the master’s in Nutritional Science curriculum, from which interns are recruited. Topic areas added over the last five years include: Scope of Dietetics Practice Framework, SOP/SOPP, Nutrition Care Process and Model, ADIME, ADA Code of Ethics, Evidence Analysis Library, IDNT Reference Manual, managed care, pharmacology, food allergies, motivational interviewing, Health at Every Size, Satter Eating Competence Model, Intuitive/Mindful Eating, sustainable food systems, The Joint Commission, electronic medical records, Professional Development Portfolio. Many Interns also completed DPD requirements through the Department and were also exposed to the following new topic areas in the last five years: HACCP certification, quality assurance, marketing survey administration, professional poster design, mass media nutrition education, nutrigenetics/nutrigenomics, foodservice occupations and culinary terminology/brigade system, sustainable practices in foodservice, policy and procedure development, and cultural competence. A strength of the program includes the fact that Department Curriculum Committee members include representation from the DPD, MS, and Internship programs, and continuity of learning across programs is emphasized.

### **Comparability of educational experiences**

Another strength of the program is the frequent communication among program Preceptors and the DI Coordinator and Director. Preceptors are actively involved in assessment of student learning outcomes, serve on the Advisory Board, and most know one another professionally and personally and are in frequent contact. As such, while there may be some differences in specific activities that Interns complete to meet the competencies at various facilities, Preceptors are involved in determining program standards and are committed to providing Interns with comparable experiences. Indeed, Preceptors help to develop the rotation competency forms, identifying supervised practice and didactic learning activities, broadly written, for Interns to complete. In addition, three major assignments, i.e., the Case Study, Clinical CQI, and Menu Project, have standardized guidelines to follow regardless of facility placement. Major rotation objectives as well as other orientation materials shared with new Preceptors also contribute to comparability of experiences. Many of the DI Preceptors are program Graduates, either at the BS or MS and RD level, and are highly committed to producing competent and confident

entry-level dietitians. There is a qualitative aspect to the program that can not be fully appreciated by examining Likert scale data, but it is a critical aspect nonetheless. That is, the DI Director or Coordinator can contact a program Preceptor and without hesitation they are willing to do what is needed to ensure program success and advance the profession. In summary, there is a high level of trust between the DI Director and Preceptors that allows for the flexibility needed by individual facilities to supervise interns, without compromising program integrity and thus assuring that all interns receive a high quality and comparable internship experience.

**Actions to maintain strengths and address areas for improvement**

At the 2009 Advisory Board meeting, Preceptors and a current Intern suggested that the graduate level Topics in Clinical Nutrition course (NFSC 670) be changed from an elective offered once every five semesters, to a required course for the Option in Nutrition Education. Therefore, lack of Intern confidence in their MNT skills was addressed with a policy change to the MS curriculum. Now as a required course, NFSC 670 will be offered once every three semesters on par with other required MS level courses. Thus, all graduate students applying to the program will be able to take it and update their MNT knowledge closer to the beginning of supervised practice.

To address another area for improvement, the DI Director continues to follow up on leads and contact RDs at facilities in northern California so that the maximum number of Interns the program is accredited for can matriculate. This year, with the assistance of MNT Preceptor Laura Fox, MS, RD, a three week trauma rotation was arranged at Mercy Medical Center in Redding, CA. It would be ideal if eventually an entire MNT rotation could be negotiated with this facility. Another Preceptor, Margaret Kelly, MS, RD, having learned of the program predicament at the 2010 Advisory Board meeting, mentioned at the site visit to her facility that she may be willing to take two Interns in the future, but must get buy-in from her staff first. Finally, the DI Director is actively pursuing two facilities in Redding, CA, Shasta Regional Medical Center, and Northern California Rehabilitation Hospital, as well as several LTC facilities in the region to address this area for improvement. At the same time, the DI Director acknowledges the need to foster existing relationships with current Preceptors as the program’s existence depends on their willingness to continue supervising interns.

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

<b>On-going Curricular Improvement ●</b>	<b>S</b>	<b>MI</b>	<b>NI</b>
Ongoing, formal review of the program curriculum maintains or improves educational quality. (CP/ICP/DI 2.7; DPD/DTP 2.6)	●	○	○
Didactic and supervised practice course/rotation objectives undergo ongoing, formal review. (CP/ICP/DI 2.7; DPD/DTP 2.6)	●	○	○
Curricular content undergoes ongoing, formal review. (CP/ICP/DI 2.7; DPD/DTP 2.6)	●	○	○
Curricular length undergoes ongoing, formal review. (CP/ICP/DI 2.7; DPD/DTP 2.6)	●	○	○
Educational methods undergo ongoing, formal review. (CP/ICP/DI 2.7; DPD/DTP 2.6)	●	○	○
Curriculum review uses results of the student/intern learning and program outcomes assessment processes to determine strengths and areas for improvement (CP/ICP/DI 2.7.1; DPD/DTP 2.6.1)	●	○	○
Curriculum review includes awareness and integration of new knowledge and technology impacting dietetics practice (CP/ICP/DI 2.7.2; DPD/DTP 2.6.2)	●	○	○
Curriculum review includes assessment of comparability of educational experiences when different courses, delivery methods (such as distance education) or supervised practice sites are used to accomplish the same	●	○	○

educational objectives (CP/ICP/DI 2.7.3; DPD/DTP 2.6.3)			
Curriculum review includes assessment of 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 (CP/ICP/DI 2.7.3; DPD/DTP 2.6.3)	●	○	○
Curriculum review results in actions to maintain or improve student learning (CP/ICP/DI 2.7.4; DPD/DTP 2.6.4)	●	○	○

**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

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

## **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/interns and those enrolled in the program is incorporated into all aspects of the program.

### **Qualifications of the Program Director (DI 3.1)**

#### **Program Director Employment status and faculty position**

The Program Director, Michelle Neyman Morris, PhD, RD, is responsible for administration of the program as part of her duties as a faculty member in the Department of Nutrition & Food Sciences (Appendix P). Dr. Morris is a tenured full professor who has been associated with the Department since fall 2000. Dr. Morris is also the Graduate Coordinator for the Master's Program in Nutritional Sciences. In this administrative position Dr. Morris is responsible for addressing inquiries regarding the program, reviewing MS program applications and meeting with faculty to discuss, advising approximately 24 graduate students on their 30 unit program plan, completing Office of Graduate Studies paperwork, attending Graduate Council meetings, reading and signing off on all MS candidates research proposals and theses/professional papers, and advertising and attending research oral defenses. Dr. Morris receives one course release in the spring (4 AWTU per year or 13% of her position) for these responsibilities. Additionally, Dr. Morris teaches courses in both the undergraduate (e.g., Nutrition Through the Life Cycle, Community Nutrition), and graduate (e.g., Nutrition Education, Topics in Community Nutrition), programs (typically three courses in the fall semester and two in the spring), directs the research of Master's candidates, serves on the committee of additional Master's candidates, maintains an active research program submitting grants and manuscripts for publication, and serves on and has chaired various departmental, university and community committees and Boards (Appendix F).

#### **Adequacy of time allocated**

It was noted in the 1999 DI Self-Study Report completed by the prior Program Director that the Department Administrative Support Coordinator typed and duplicated DI materials, completed other clerical tasks in support of the DI and received and processed requests for information regarding the program. The prior DI Director estimated that she spent approximately 20% of her time on program responsibilities, and she suggested that the next Director receive at least one course release per year. The current DI Director completes most tasks previously handled by the Administrative Support Coordinator and 1 AWTU per semester (2.8 hours/week) is allocated for her role as DI Director. In preparation for the self-study it became apparent that this was not adequate time to fulfill the on-going program planning and evaluation responsibilities. The DI Director worked uncompensated summer hours since taking over the role in 2005 for revising program materials (e.g., competency forms, DI Handbook, evaluation tools) collecting assessment data, communicating with Preceptors, revising policies and procedures as necessary, attempting to add additional acute care facilities, facilitating the updating of legal agreements with facilities, and revising the curriculum with the DI Coordinator.

In fall 2009, the DI Director requested meetings with the Department Chair and College of Natural Sciences Dean to discuss her concerns regarding the inadequate time allocated to maintaining a high quality program. An additional 7-10 days of summary salary compensation for the DI Director was negotiated. This has been incorporated into the program budget and it is understood that the level of summer salary is dependent on availability of account funds.

DI Coordinator, Marsha Miller, MS, RD, is responsible for day to day program operations during the supervised practice rotations. Ms. Miller earns approximately \$2,000 per intern enrolled in the program. Her responsibilities are outlined in DI 3.1.1.

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

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

**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

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

## **Responsibilities of the Program Director (DI 3.1.1)**

### **Role of Program Director in developing and updating program policies and procedures**

The Program Director is responsible for developing and revising program policies and procedures and for communicating them to all interested parties. Program materials including the program Brochure (Appendix E), website information (<http://www.csuchico.edu/nfsc/internship/index.shtml>), Intern Handbook (Appendix Q), Orientation Binder, rotation competency forms, and evaluation tools are reviewed every summer for accuracy and compliance with current accreditation standards. Policies and procedures are also updated as needed. Feedback received at Advisory Board meetings in the fall and communication with the DI Coordinator, Preceptors, and Department Faculty throughout the year, contribute to the need for changes. For example, the policy change within the MS program to require Topics in Clinical Nutrition (NFSC 670) for all students applying to the program resulted from Intern and Preceptor feedback. Another policy change in the last five years includes revising the application rubric used to select Interns for the program. After reviewing the rubric, Department faculty requested that points be allocated depending on how far along interns were in the research process and also requested that students be required to have their research proposal signed off before the DI interviews were conducted. Faculty felt this would limit the number of students who procrastinated on their research and then rushed to complete the MS before beginning the DI in August. These policy changes were implemented, added to the DI Brochure which was posted to the website, and were communicated directly to prospective Interns last year.

### **Role of Program Director in student recruitment, advising, evaluation and counseling**

The Program Director is the primary person responsible for Intern recruitment, advising, evaluation and counseling. At the beginning of each academic year, the DI Director provides a brief presentation in graduate courses on the process for obtaining the MS degree and applying to the DI. As program spaces are filled with MS graduates, there has not been a need to recruit Interns from outside the university. However, the DI Director, in her role as Graduate Coordinator, attends events on and off campus to advertise the MS program and fields inquiries that frequently lead to advising on the DI. Once graduate students are enrolled in the program and identify becoming a dietitian as a career goal, advising for the DI begins. In order to participate in the preselect process, applicants submit materials to the DI Director in November. The Director reviews the applications and then forwards them to the other selection committee members, i.e., DI Coordinator and Department Chair, for their review. Interviews are typically held the second week in December and applicants are notified promptly of the committee's decision. The DI Director meets with those who were not accepted in order to provide feedback should they choose to reapply to this or another program. The DI Director strongly encourages these students to participate in the February computer match and directs them to meet with DPD Director, Dawn Clifford.

The DI Coordinator reviews Intern evaluations first and then shares them with the DI Director at the end of each major rotation. If a problem arises, the DI Director, Coordinator and Intern meet to discuss a plan of action to remedy the situation. The DI Director and Coordinator provide additional counseling as needed throughout the program. Toward the end of the internship, Interns frequently want to discuss career goals and seek guidance if they are presented with multiple job opportunities. In addition, the DI Director serves as a reference and writes letters of recommendations for program graduates seeking employment.

## **Role of Program Director in maintaining program accreditation, maintaining records and issuing verification statements**

The Program Director is responsible for maintaining program accreditation. Annual reports, fees and other requirements are completed and submitted throughout the year. The DI Coordinator maintains current Intern files during the course of supervised practice. The Director maintains program graduate records in a file cabinet in the Department office and is also responsible for issuing verification statements at the Exit Interview after confirming that all program requirements have been met.

## **Process for handling complaints**

Because the DI Coordinator has more contact with the interns during the supervised practice rotations, she is usually the first person to hear Intern or Preceptor complaints. The DI Coordinator promptly addresses the issue, and is typically able to resolve the problem and informs the DI Director of the outcome. If however, the Coordinator is unable to resolve the problem, the DI Director becomes involved and works to resolve the issue promptly. For example, one Intern in the last five years was not meeting Preceptor expectations regarding the speed at which she assessed patients and determined appropriate care plans. The DI Coordinator, Director and Intern met and discussed a plan for the Intern to review common disease states and their MNT every evening, in order to improve her speed in determining and documenting an appropriate nutrition plan.

## **Role of Program Director in ongoing curriculum review, and continuous program and student learning assessment**

The Program Director is also responsible for ongoing curriculum review as documented in DI 2.7. As new accreditation requirements are issued or when the Director or Coordinator learn about curricular changes at local, state, or national dietetics meetings, or through the ADA website or DPG listservs, these are discussed and a plan for implementation is agreed upon. Much of this work occurs during the summer months. Program curriculum is also addressed at annual Advisory Board meetings.

The Program Director is also responsible for continuous and systematic program and student learning outcome assessment. Program completion, RD exam pass rates, and graduate employment rates, are reviewed one to two times a year. In addition, the Director reviews Intern evaluation forms periodically during the supervised practice rotations to ensure that interns are achieving defined learning outcomes, and discusses Intern progress with the DI Coordinator once a week. Evaluation forms are more thoroughly examined before the Exit Interview when the DI Director issues verification statements. The Director recently queried the ADA DEP listserv to gather examples of Preceptor, Employer and Graduate surveys. These examples were modified to meet program needs.

## **Communication among program constituents**

The Program Director meets in person with the DI Coordinator at least every other week and talks with the Coordinator at least once a week. In addition, the Director meets with several Preceptors once a year at the Advisory Board meeting, and meets in-person with others as needed. Email and phone are most frequently used to communicate with program constituents. MNT and Administration Preceptors

appreciated site visits conducted in November 2010, and the DI Director and/or Coordinator will continue these at least once every three years.

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

<b>Responsibilities of the Program Director ●</b>	<b>S</b>	<b>MI</b>	<b>NI</b>
The program director responsibilities include development of policies and procedures for effectively managing all components of the program (CP/ICP/DI/DPD/DTP 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) (CP/ICP/DI/DPD/DTP 3.1.1)	●	○	○
The program director responsibilities include student/intern recruitment (CP/ICP/DI/DPD/DTP 3.1.2)	●	○	○
The program director responsibilities include student/intern advising (CP/ICP/DI/DPD/DTP 3.1.2)	●	○	○
The program director responsibilities include student/intern evaluation (CP/ICP/DI/DPD/DTP 3.1.2)	●	○	○
The program director responsibilities include student/intern counseling (CP/ICP/DI/DPD/DTP 3.1.2)	●	○	○
The program director responsibilities include maintenance of program accreditation, including timely submission of fees, reports and requests for major program changes (CP/ICP/DI/DPD/DTP 3.1.3)	●	○	○
The program director responsibilities include maintenance of DI intern records, including transcripts and DPD verification statements for admission, rotation schedules and verification statements at completion (DI 3.1.4)	●	○	○
Verification statements are kept indefinitely ((CP/ICP/DPD/DTP/DI 3.1.4)	●	○	○
The program director responsibilities include maintenance of complaints about the program received from students/interns or others, including disposition of the complaint (CP/ICP/DI/DPD/DTP 3.1.5)	●	○	○
The program director responsibilities include ongoing review of program curriculum to meet the accreditation standards (CP/ICP/DI/DPD/DTP 3.1.6)	●	○	○
The program director responsibilities include communication and coordination with program faculty, preceptors and others involved with the program (CP/ICP/DI/DPD/DTP 3.1.7)	●	○	○
The program director responsibilities include facilitation of processes for continuous assessment of program (CP/ICP/DI/DPD/DTP 3.1.8)	●	○	○
The program director responsibilities include facilitation of processes for continuous assessment of student/intern learning outcomes (CP/ICP/DI/DPD/DTP 3.1.8)	●	○	○

**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

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

## **Program Resources (DI 3.2)**

### **Administrative, technical and other support services available**

The DI program budget is administered through the California State University, Chico University Research Foundation and Foundation representatives provide technical and administrative assistance to the Director as needed. The DI Coordinator is responsible for day-to-day program operations while interns are completing their supervised practice rotations, and thus provides a great level of program support. The Department of Nutrition and Food Sciences Administrative Support Coordinator supports the program by depositing intern fees with the Foundation, submitting check requests for reimbursement of program expenses, handling express mail requests related to program business, and securing rooms for program meetings as needed, e.g., Advisory Board meeting, DI Interviews. The Department Administrative Support Coordinator provided extra support during the self-study process, such as purchasing binders and tabs for the report, and offering her student assistant to create on-line survey tools for program assessment purposes. The Department offers additional program support by paying for the Director's annual ADA membership fee and allocating 1 AWTU per semester to carry out program duties. The Department provided an additional one course release this fall to complete the self-study report. The university pays the Annual Program Maintenance Fees to ADA and covers the cost of the accreditation site visit. The CSU, Chico Offices of Risk Management and Procurement and Contracts frequently assist the DI Director with establishing legal agreements between the university and supervised practice rotation facilities/agencies. Additional faculty support services are available to the DI Director for program related business as needed (e.g., mail service, copying, faxing, printing, IT support, library, software).

### **Program revenue use in accomplishing goals**

As addressed in DI 1.6 Budgeting Process, DI revenue sources include a \$50 application fee, \$4,000 program fee, and occasional CPE event registration fees from non DI Preceptors. The \$4,000 program fee is comparable to other Internships and is approximately 58% of the cost of full time graduate student enrollment for an academic year at CSU, Chico. These revenue sources are adequate to accomplish program goals and are used to pay the DI Coordinator approximately \$2,000 per intern, 7-10 days summer salary for the DI Director, travel to DEP, ADA FNCE or CDA meetings, occasional hosting of a CPE event for DI Preceptors, program materials (e.g., texts, RD exam review guides), office supplies, copying, mail, print and fax costs, and approximately 10% in Research Foundation administration fees.

### **Adequacy of resources**

Financial, administrative, and technical support services are currently adequate to meet program outcomes. Fortunately, the program is almost entirely self-supporting and thus, California State Legislature funding decisions do not impact its budget. Therefore, the program has been relatively unscathed by the recent economic downturn and grievous budget cuts to the California State University system. However, it should be noted that in the 2009-2010 academic year, faculty, including the program Director, were furloughed nine days a semester with a concomitant 10% pay cut. At the same time, major program changes were needed to address the 2008 ERAS and begin planning for the self-study process. This created great tension and illustrates the need to continue advocating for increased funding for education in the state of California.

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

<b>Program Resources ●</b>	<b>S</b>	<b>MI</b>	<b>NI</b>
The program has the administrative support needed to accomplish its goals. (CP/ICP/DI/DPD/DTP 3.2)	●	○	○
The program has the financial support needed to accomplish its goals. (CP/ICP/DI/DPD/DTP 3.2)	●	○	○
The program has the learning resources needed to accomplish its goals. (CP/ICP/DI/DPD/DTP 3.2)	●	○	○
The program has the physical facilities needed to accomplish its goals. (CP/ICP/DI/DPD/DTP 3.2)	●	○	○
The program has the support services needed to accomplish its goals. (CP/ICP/DI/DPD/DTP 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. (CP/ICP/DI/DPD/DTP 3.2)	●	○	○

**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

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

## Faculty (DI 3.3)

### Program faculty and preceptors

In addition to the Program Director, there are currently six additional tenure/tenure track faculty members and six additional part-time instructors in the Department of Nutrition & Food Sciences. Since the DI recruits Interns from the MS program, these faculty members serve as instructors and research mentors to the students prior to the internship. The Department Chair also serves on the DI Selection Committee. The DI Coordinator, while not a tenure track member of the Department, has taught food management courses as a part-time instructor for the Department. Five of the seven tenure/tenure track faculty members are also registered dietitians and six of the seven have earned PhDs. The former DI Director serves on the Advisory Board and consults for the program as needed.

There are currently 26 supervising or “primary” Preceptors in MNT, Food Service Administration, and Community Nutrition rotations associated with the program. There are many additional RDs at the various hospitals who also supervise interns. All preceptors in clinical facilities are Registered Dietitians, and those who are supervising have extensive experience. Community Nutrition and Food Service Administration Preceptors are nearly all Registered Dietitians with considerable experience. Preceptors who are not RDs have appropriate education and training and are able to share a wealth of experience with interns.

The number and expertise of program faculty and Preceptors is adequate to meet program goals. Each Department faculty member was hired to teach courses based on their education and training and the food science, human nutrition, clinical and community nutrition, and food service management fields are well represented. Many program Interns were undergraduates as well as graduate students in the Department and therefore took DPD courses from the faculty. The DI Coordinator, who is responsible for the DI Class, is a Child Nutrition Consultant for the California Department of Education and has extensive food service administration, program management, and community nutrition program experience. The program faculty are successful in teaching, research and service and there is frequent communication about all aspects of program planning, implementation and evaluation from the level of the DPD to the MS to the Internship program. Strengths of the program include the collegial nature among faculty, a shared commitment to advancing the profession of dietetics, dedication to student success, and active research and scholarship endeavors. An area for improvement is the heavy teaching and advising workload exacerbated by recent untenable budget cuts to the California State University system. A faculty search is currently underway and will begin to address this area for improvement. The table below illustrates faculty qualifications.

### Faculty Teaching Assignments and Qualifications (600 level courses are graduate courses)

Faculty	Title	DPD/MS Courses Taught	Experience
Tracy Berman, MA	Instructor	None	<ul style="list-style-type: none"><li>• Currently provides nutrition education to CSU, Chico athletes and serves as a preceptor to student volunteers who would like to gain experience in sports nutrition</li><li>• 20 years of teaching experience</li></ul>

			<ul style="list-style-type: none"> <li>• Education in exercise physiology</li> </ul>
Stephanie Bianco-Simeral, MS, RD	Assistant Professor and Assistant Director for the Center for Nutrition and Activity Promotion	<p>NFSC 122 Food Safety and Sanitation  NFSC 230 Introduction to Foodservice Administration  NFSC 430 Foodservice Procurement and Management  NFSC 431 Foodservice Equipment and Production</p>	<ul style="list-style-type: none"> <li>• Five years of teaching experience</li> <li>• Registered Dietitian for nine years</li> <li>• Work experience in school foodservice, community nutrition, and as a clinical nutrition manager</li> <li>• Supervision of graduate student research</li> <li>• Recipient of several research grants</li> <li>• 2 published manuscripts and 2 published books</li> </ul>
Dawn Clifford, PhD, RD	Assistant Professor, Didactic Program in Dietetics Director and Director of FitU	<p>NFSC 155 Introduction to Nutrition and Food Sciences  NFSC 460 Nutrition Counseling and Education  NFSC 471 MNT II  NFSC 457 Futures in Dietetics  NFSC 497 Portfolio Review</p> <p>NFSC 662 Advanced Nutrition Counseling</p>	<ul style="list-style-type: none"> <li>• Five years of teaching experience</li> <li>• Registered Dietitian for ten years</li> <li>• Ten years of work experience in clinical nutrition, counseling and community nutrition</li> <li>• Supervision of graduate student research</li> <li>• Recipient of several research grants</li> <li>• Three published manuscripts</li> </ul>
Keiko Goto, PhD	Associate Professor and Director of Research and Evaluation for the Center for Nutrition and Activity Promotion	<p>NFSC 120 Elementary Food  NFSC 320 Science of Food  NFSC 345 Dietary Supplements and Functional Foods  NFSC 429 Cultural Foods</p> <p>NFSC 667 Topics in International Nutrition</p>	<ul style="list-style-type: none"> <li>• Six years of teaching experience</li> <li>• Over 15 years of experience in international nutrition and epidemiology</li> <li>• Supervision of graduate student research</li> <li>• Recipient of several research grants and awards</li> <li>• 15 published manuscripts</li> </ul>
Deb McCafferty, MS, RD	Instructor	<p>NFSC 470 MNT I  NFSC 471 MNT II</p>	<ul style="list-style-type: none"> <li>• 12 years of teaching experience</li> <li>• Registered Dietitian for 12 years</li> <li>• Eight years experience in community nutrition</li> </ul>
Michelle Neyman Morris, PhD, RD	Professor, Dietetic Internship Director, and Graduate Coordinator	<p>NFSC 360 Nutrition Through the Life Cycle  NFSC 465 Community Nutrition</p> <p>NFSC 660 Nutrition Education  NFSC 665 Topics in Community Nutrition</p>	<ul style="list-style-type: none"> <li>• 13 years of teaching experience</li> <li>• Registered Dietitian for 10 years</li> <li>• 14 years of community nutrition research experience</li> <li>• Supervision of graduate student research</li> <li>• Recipient of several</li> </ul>

			<ul style="list-style-type: none"> <li>research grants and awards</li> <li>• 12 published manuscripts</li> </ul>
Melissa Nicholaw, MPH, RD	Instructor	NFSC 360 Nutrition Through the Life Cycle NFSC 120 Elementary Food	<ul style="list-style-type: none"> <li>• Four years of teaching experience</li> <li>• Registered Dietitian for 30 years</li> <li>• 25 years of community and clinical nutrition experience</li> </ul>
Loni Presley, MS, RD	Instructor	NFSC 230 Introductory to Foodservice Administration	
Julie Schneider, PhD	Assistant Professor	NFSC 240 Human Nutrition  NFSC 600 Research Methods	<ul style="list-style-type: none"> <li>• Six years of teaching experience</li> <li>• 10 years of experience in nutrition science and community nutrition research</li> <li>• Supervision of graduate student research</li> <li>• Recipient of several research grants and awards</li> <li>• Nine published manuscripts</li> </ul>
Katie Silliman, PhD, RD	Professor, Department Chair, and Assessment Coordinator	NFSC 155 Introductory to Nutrition and Food Sciences NFSC 370L Nutrition Assessment Lab NFSC 440 Advanced Human Nutrition  NFSC 641 Topics in Macronutrients NFSC 642 Topics in Vitamins & Minerals	<ul style="list-style-type: none"> <li>• 20 years of teaching experience</li> <li>• Registered Dietitian for 23 years</li> <li>• Over 20 years of experience in nutrition science research</li> <li>• Supervision of graduate student research</li> <li>• Recipient of several research grants and awards</li> <li>• Thirteen published manuscripts and one textbook</li> </ul>
Cindy Wolff, PhD, RD	Professor and Director of the Center for Nutrition and Activity Promotion	None	<ul style="list-style-type: none"> <li>• Over 25 years of teaching experience</li> <li>• Registered Dietitian for 34 years</li> <li>• Over 30 years of community nutrition research</li> <li>• Supervision of graduate student research</li> <li>• Recipient of several research grants and awards</li> <li>• 15 published manuscripts and one textbook</li> </ul>

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

Faculty ●	S	MI	NI
The program has a sufficient number of qualified faculty or preceptors to provide the depth and breadth of learning activities required in the curriculum. (CP/ICP/DI/DPD 3.3)	●	○	○
The program has a sufficient number of qualified faculty or preceptors to provide the diversity of practice.	●	○	○

(CP/ICP/DI/DPD 3.3			
In addition to the DI director, other faculty are involved with the program, if the DI is sponsored by a university (DI 3.3.1)	●	○	○
DI faculty, including the program director, meets the college/university's criteria for appointment if the DI is sponsored by a university. (DI 3.3.2)	●	○	○

**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

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

## Preceptors (DI 3.3.3)

### Selection of program Preceptors

The DI Director and Coordinator identify new Preceptors through their community contacts or referrals from current Preceptors, Interns, and program Graduates. In some cases, new Preceptors are identified as program Graduates become employed in the north state. In order to be a supervising Preceptor, individuals must have at least one year experience post credentialing. In most cases supervising preceptors have over 10 years experience post credentialing. Primary Preceptors must be willing to supervise interns, complete evaluation tools throughout and at the end of the supervised practice rotation, participate in orientation activities, display excellent oral and written communication skills and be willing to serve at some point on the DI subcommittee of the Department of Nutrition and Food Sciences Advisory Board.

### Number and credentials of primary preceptors

Currently, there are seven primary Preceptors providing MNT rotations, three hospital Food Service Administration primary Preceptors, two school food service Administration primary Preceptors and 14 Community Nutrition primary Preceptors. All preceptors in clinical facilities are Registered Dietitians, and those who are supervising have extensive experience. Community nutrition and Food Service Administration Preceptors are nearly all Registered Dietitians with considerable experience. Preceptors who are not RDs have appropriate education and training and are able to share a wealth of experience with interns. For example, Susan Donohue, MA, has 32 years of experience with University of California Cooperative Extension (UCCE) and Nancy Taylor has 16 years experience working in various positions related to the Title IIIC Elderly Nutrition Programs.

### Preceptor Degrees, Credentials, and Years of Experience

Supervising Preceptor Last Name	First Name	Degrees/Credentials	Rotation	Years experience post credentialing
Aram	Mary	MS, RD	COM	20
Bricker	Andrea	MS, RD	COM	8
Chase	Carol	MS, RD	COM	25
Cullen	Stacy	MS, RD, CDE	COM	7
Donohue	Susan	MA	COM	32
Fox	Laura	MS, RD	MNT	10
Friday	Ardith	RD	ADM	27
Garcia	Susan	MS, RD	COM	20
Gnass	June	MA, RD, CDE, CCN	COM	23
Harter	Tanya			
Kelly	Margaret	MS, RD	MNT	
Kleimann	Anne	MS, RD, CSR	MNT	16
Lea	Judson		COM	
Locke	Gail	MA, RD	MNT	26
McDonnell	Leslie	RD, IBCLC	COM	17
Nelson	Michael	RD, CNSC	MNT	25
Norris	Karen	MBA, RD, CDE	ADM	21
Patterson	Patty		ADM	
Rodgers	Jane	MS, RD	COM	25
Shevlin	Karen	MS, RD	COM	22

Silveira	Debbie	RD	ADM	33
Taylor	Nancy		COM	16
Tooker	Victoria	MS, RD	MNT	25
Welty	Carol	MA, RD	COM	9
Wetmore	Julie	MS, RD	COM	24
Yelverton	Crayton		ADM	

### **New preceptor orientation**

As new primary Preceptors are identified, the DI Coordinator meets with them to discuss rotation objectives and expected student learning outcomes. The rotation competency forms as well as evaluation tools are provided and discussed. At the last Advisory Board meeting, Preceptors indicated a desire to have a copy of all materials provided to the Interns at their orientation, in addition to the competency forms already provided. The DI Director and Coordinator will be responsible for creating this expanded Preceptor Handbook and will make one hard copy available to each facility. An e-copy will also be sent to Supervising Preceptors.

Typically, at this time the DI Director is also working with the Preceptor to identify the facility/agency individual responsible for signing a legal agreement between the facility and the university. The DI Director communicates with all parties by phone or email in order to initiate the process. When questions arise about the legal agreement, either from the university or facility/agency, the DI Director addresses them.

Periodically, the DI Director emails Supervising Preceptors to orient them to new standards, revision of the competency forms, opportunities for continuing professional education (e.g., the free Preceptor Training offered by CDR), or other matters that affect their supervision of interns. Additional training is provided at the annual Advisory Board meetings.

### **Preceptor evaluation**

Preceptor evaluation is an on-going process. A strength of the program includes the fact that only one intern at a time is in a facility (with the exception of two interns completing the Food Service Administration rotation at Enloe Medical Center concurrently). The intern may work independently at times but is always overseen by a primary Preceptor and may interact with many other registered dietitians during the course of the supervised practice rotation. Interns also meet twice monthly (MNT rotation) and monthly (Food Service Administration and Community Nutrition rotations) with the DI Coordinator for the DI Class. During this time Interns are able to provide evaluation of their supervision. The DI Coordinator also makes herself available for private consultation with the Interns if they have supervision concerns they do not wish to share with other Interns. When the DI Director has attended class sessions it is apparent that most Interns are more than willing to discuss concerns, ask questions, and share their rotation experiences. In addition, the Intern Evaluation of Rotations and the DI Exit Interview held with the DI Coordinator and Director provide additional opportunities for Interns to evaluate their experience, which includes supervision by their primary Preceptor and other Registered Dietitians. The DI Director and Coordinator are able to evaluate Preceptor performance through in-person, email and phone communication throughout the year, as well as during the summer months when Preceptors are actively involved in reviewing and revising program materials, and at the annual Advisory Board meetings. The greatest strength of the program is the primary Preceptors' commitment

to excellence in their training of future dietetic professionals. This may be attributed at least in part to the fact that many are program Graduates who have strong ties to the university and relatively small community in which they live and work. Great credit must be given to the previous DI Director, Barbara Kirks, EdD, RD, for establishing the original AP4 and producing many dietitians for the area who continue to supervise program Interns.

When describing Preceptors during the Exit Interviews, Intern feedback included comments such as “this was a great experience,” “the RDs interact with and are respected by the health care team”, “Teresa Crippa (RD at Enloe Medical Center) was amazing to work with,” “Mary Aram (Outpatient RD at Enloe Medical Center) taught me so much,” “Julie Whetmore (WIC RD) was awesome,” “the North Valley Indian Health RD (Stacy Cullen) provided a great experience,” Nancy Taylor (Area Agency on Aging) was great, very nurturing, and she had me shadow RDs that they contract with to review senior menus.”

DI Class guest lectures by Preceptors Anne Kleimann (renal dietitian) and Ardith Friday (Chief Clinical Dietitian at Oroville Hospital) are similarly praised during the DI class and Exit Interviews.

The interns also offer constructive criticism such as “a longer renal rotation (than one week) would be good,” “there seemed to be a lot of complaining among RDs,” (this comment referred to the hospital that is going through reorganization due to the economy and interns are no longer placed there), “some Preceptors aren’t ADA members.”

The DI Director and Coordinator discuss Preceptor performance frequently and are absolutely grateful for the high level of commitment and professionalism modeled by each of them. In recognition of outstanding leadership and their service to the program, supervising Preceptors were acknowledged at the 2010 Advisory Board meeting with a framed certificate of appreciation.

### On-going preceptor training

On-going Preceptor training occurs throughout the year. The DI Director and Coordinator communicate training opportunities (e.g., Webinars, DI hosted CPE events) and training is incorporated into the annual Advisory Board meetings. In the past five years, the NCP and Model, the 2008 ERAS, changes to the DPD, MS and DI curriculum, and the DI Self-Study have been on the agenda with breakout time for the DI subcommittee to meet and discuss relevant programmatic issues. Based on Preceptor feedback in the last five years, DI hosted CPE events will be budgeted for and planned at least once every two years.

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

<b>Preceptors (Not Applicable DPD) ●</b>	<b>S</b>	<b>MI</b>	<b>NI</b>
Primary preceptors are credentialed or licensed as appropriate to meet state and federal regulations for the area in which they are supervising students/interns (CP/ICP/DI/DTP 3.3.3)	●	○	○
Primary preceptors have a minimum of one year professional practice experience post credentialing (CP/ICP/DI/DTP 3.3.3)	●	○	○
Preceptors are provided orientation to the supervised practice activity/practicum/rotation objectives and expected student/intern learning outcomes. (CP/ICP/DI/DTP 3.3.4)	●	○	○
Orientation occurs before preceptors assume responsibilities. (CP/ICP/DI/DTP 3.3.4)	●	○	○
Preceptors are provided ongoing training. (CP/ICP/DI/DTP 3.3.4)	●	○	○

Preceptor training is based on evaluation by the program director and feedback from students/interns.  
(CP/ICP/DI/DTP 3.3.4)

<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>
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**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

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

## Continuing Professional Development (DI 3.3.5)

### Program Director, Coordinator, Faculty and Preceptor professional growth activities

The Program Director attends ADA DEP Area 1 meetings on an annual basis and also attends ADA FNCE and California Dietetic Association meetings occasionally. The DI Coordinator attends the DEP Area 1 meetings at least twice every five years, and maintains ADA membership. The DI Director also attends the Experimental Biology Annual meeting as a member of the American Society for Nutrition, and maintains membership in ADA, Dietetic Educators of Practitioners DPG, California Dietetic Association, Society for Nutrition Education, American Society for Nutrition, and Association for Size Diversity and Health, and as such, receives professional development information via newsletters, webinars and listservs. The DI Director maintains an active research and scholarship program which includes grant writing and publication in peer reviewed journals. The Department of Nutrition and Food Science faculty participate in similar activities and maintain membership in additional professional organizations such as Institute of Food Technologists. The DI Director, Coordinator and Preceptors complete at least 75 hours of continuing professional education activities in order to maintain their credential through the Professional Development Portfolio process. The DI program hosts occasional free local CPE events as a “thank you” to program Preceptors. Some Preceptors hold additional certificates such as CDE and CNSD.

### Program Director, Coordinator, Faculty and Preceptor activities advancing the profession

The Program Director, Faculty and Preceptors advance the profession of dietetics by maintaining membership in professional organizations, attending annual conferences of those organizations, assuming leadership roles such as chair of special interest groups within organizations, serving on Board of Directors of community organizations, serving as reviewers of professional journals, serving as Preceptors of Dietetic Interns, serving on special committees within their organizations, participating in legislative actions related to food and nutrition, and advocating for healthy food in our local schools and access to safe and adequate food for all community members.

The DI Director specifically serves as a reviewer for the Journal of the American Dietetic Association, Nutrition Journal, and California Agriculture.

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

Continuing Professional Development ●	S	MI	NI
Program faculty, including the program director, and preceptors 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 (CP/ICP/DI/DTP 3.3.5; DPD 3.3.3)	●	○	○

**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

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

## **Supervised-Practice Facilities (DI 3.4)**

### **Policies and procedures related to facility selection for supervised practice**

Facilities must meet the following minimum qualifications to be considered for a supervised practice rotation:

1. Located in northern California
2. In good standing with The Joint Commission and/or State of California (Title 22)
3. Able to provide a variety of experiences to meet rotation competencies (e.g., serve diverse populations with various conditions, perform aspects of the nutrition care process)
4. Does not use intern to replace RD position

Additional requirements for MNT rotations:

5. Must have at least one full-time RD Preceptor to supervise Intern
6. Must be licensed for at least 70 beds

### **Evaluation of facilities**

The evaluation of adequacy and appropriateness of facilities is on-going and includes the following written policy and procedures:

1. DI Director and/or DI Coordinator will visit facility and meet on-site with supervising Preceptor at least once every three years to evaluate adequacy and appropriateness
2. Supervising Preceptor or representative will attend DI Advisory Board Meeting at least once every three years
3. Interns will provide evaluation of facilities on Intern Evaluation of Rotation form, at DI Exit Interview, and through the Graduate Survey.

The DI Director and DI Coordinator most recently evaluated facilities used for MNT and Food Service Administration rotations at site visits conducted in November, 2010. While Preceptors keep the DI Coordinator and Director informed of facility strengths and areas for improvement that may impact an intern's experience, this time provided an excellent opportunity to tour of the facilities (some had undergone major renovations since previous visits), clarify resources available, and gather information for the self-study report. The primary Preceptors and additional RDs supervising Interns appreciated these visits and it was decided that the Program Director and/or Coordinator would make on-site visits at least once every three years from now on. The site visits provided the Director and Coordinator with a better understanding of the range of experiences provided to the Interns. It was clear for example, that the smallest facility, St. Elizabeth Community Hospital in Red Bluff, would not be able to provide an adequate Food Service Administration rotation and thus Interns placed there for an MNT rotation will continue to complete the Administrative rotation at Enloe Medical Center. In addition, it was noted that Oroville Hospital has an Extended Care Unit that future Interns will rotate through in order to gain LTC type experience. Overall, each primary MNT facility is adequate to provide a range of experiences but based on Preceptor feedback, the program will continue to have Interns rotate to one other hospital during their MNT rotation in order to observe how different facilities integrate nutrition services into overall patient care, and how this impacts RD scope of practice.

## Policy and procedures for maintaining written agreements with facilities

The policy and procedures for maintaining written agreements between the program and facilities/agencies/organizations providing supervised practice includes:

1. Before an intern is placed with a facility/agency/organization, the DI Director will ensure that a Student Learning Agreement (SLA) is developed and signed by facility representative(s) and California State University, Chico representatives (Appendix R)
2. When a new SLA is in place, the DI Director will inform the supervising Preceptor and the DI Coordinator that an Intern may begin supervised practice at the facility
3. Copies of current SLAs will be kept in the DI Director's office
2. The DI Director will review all SLAs in the spring in order to identify those with impending expiration dates and contact the Office of Procurement and Contracts to initiate the renewal process.

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

<b>Supervised-Practice Facilities (Not Applicable to DPDs) ●</b>	<b>S</b>	<b>MI</b>	<b>NI</b>
The program has a policy and procedures for selecting and periodically evaluating adequacy and appropriateness of facilities. (CP/ICP/DI/DTP 3.4)	●	○	○
The program has a policy and procedures to ensure facilities are able to provide supervised practice learning experiences compatible with the competencies students/interns are expected to achieve. (CP/ICP/DI/DTP 3.4)	●	○	○
The program has a policy and procedures to maintain written agreements with institutions, organizations and/or agencies providing supervised practice experiences to meet the competencies. (CP/ICP/DI/DTP 3.5):	●	○	○
Agreements are signed by administrators with appropriate authority in advance of placing students/interns (CP/ICP/DI/DTP 3.5.1)	●	○	○
Agreements delineate the rights and responsibilities of both the sponsoring organization and affiliating institutions, organizations and/or agencies (CP/ICP/DI/DTP 3.5.2)	●	○	○

**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

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

## Program Information (DI 3.6)

### Program information

All required program information is contained in the Intern Handbook (Appendix Q) and program Brochure (Appendix E). The Brochure is available on the Department of Nutrition and Food Sciences website for prospective applicants and the public at large (<http://www.csuchico.edu/nfsc/internship/index.shtml>). The Brochure is also emailed to prospective applicants as they near the completion of the MS in Nutritional Sciences—Option in Nutrition Education. A hardcopy of the Intern Handbook (Appendix Q) is provided to Interns at their orientation as part of the DI Binder. The DI Director is responsible for updating the Handbook and Brochure on an annual basis to ensure accuracy and consistency of program information, and is responsible for ensuring that the revised Brochure is posted to the Department webpage under the Prospective Students section. When prospective Interns call or email the DI Director for program information they are made aware of the website Brochure if they have not already reviewed it. In the last five years, all prospective applicants who have inquired about the program had Internet access. In the event that someone requesting program information does not have access, a hard copy of the Brochure can be mailed.

While all required program information was included in either the program Brochure or Intern Handbook, the Brochure was revised during the self-study process in order that all prospective applicants and the public at large have easy access to all program information addressed in DI 3.6.2.1-3.6.2.9.

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

Program Information ●	S	MI	NI
The program provides clear, consistent and accurate information about all program requirements and components to prospective students/interns and the public at large. (CP/ICP/DI/DTP 3.6; DPD 3.4)	●	○	○
All information about the program specified below is readily available to prospective students/interns and the public. (CP/ICP/DI/DTP 3.6.1; 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. (CP/ICP/DI/DTP 3.6.1; DPD 3.4.1)	●	○	○
Information about the program includes at least the following (CP/ICP/DTP/DI 3.6.2; DPD 3.4.2):	●	○	○
• Description of the program, including mission, goals and graduate outcomes that will be monitored for program effectiveness (CP/ICP/DI/DTP 3.6.2.1; 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 (CP/ICP/DI 3.6.2.2; DPD 3.4.2.2)	●	○	○
• Cost to student/intern, 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 (CP/ICP/DI/DTP 3.6.2.3; DPD 3.4.2.3)	●	○	○
• Availability of financial aid and loan deferments (federal or private) scholarships and/or other monetary support (DI 3.6.2.4)	●	○	○
• Accreditation status, including the full name, address, and phone number of CADE (CP/ICP/DTP 3.6.2.4/DI 3.6.2.5; DPD 3.4.2.4)	●	○	○
• Admission requirements for all options for which the DI is accredited; if the DI is combined with graduate coursework or a graduate degree, graduate school admissions information is provided	●	○	○
• Academic and/or program calendar or schedule (CP/ICP 3.6.2.6/ DI 3.6.2.7; DPD/DTP 3.4.2.6)	●	○	○
• Graduation and program completion requirements for all options for which the program is accredited (CP/ICP	●	○	○

3.6.2.7/DI 3.6.2.8; DPD/DTP 3.4.2.7)			
• Computer matching information. (DI 3.6.2.9)	●	○	○

**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

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

## **Policies and Procedures (DI 3.7)**

### **Policies and procedures for program recruitment and admission**

The program participates in the preselect process. As MS students are nearing the end of their coursework and making significant progress towards their research proposal, the DI Director sends an email inviting them to apply to the program. The program Brochure and standard letter of recommendation form is attached to the email (Appendix S). The Director invites students to call or meet with her if they have any questions about the application process or the program in general.

The program adheres to the California State University, Chico nondiscrimination policy and does not discriminate on the basis of race, color, national origin, sex, gender, or sexual orientation in its educational programs or activities it conducts. Title VI and Title VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972, and other federal and state laws prohibit such discrimination on any of the CSU campuses. This information is included in the Intern Handbook (Appendix Q) and the DI Director is responsible for ensuring that applicant rights are protected. The Intern Handbook is included in the DI Binder provided to Interns at their orientation.

### **Admission criteria**

Students must have their MS research proposal signed off by their committee members and Graduate Coordinator (who also happens to be the DI Director) by the time DI interviews are held. This typically occurs 2-3 weeks after application materials are due. This policy was implemented last year as Department faculty felt it would reduce the number of students hurrying to finish their research as the internship approached. It would be ideal if all MS requirements were completed prior to the August start date of the Internship but at the very least, admission criteria states that all MS research data collection must be complete, with only writing of the final professional paper left to finish. Application criteria as identified on the DI Brochure (Appendix E) includes:

1. A **cover letter of application** addressing preparation for the internship and how it relates to applicant's professional goals;
2. A non-refundable **application fee of \$50.00** made payable to the Research Foundation;
3. A baccalaureate degree from an accredited institution (**official undergraduate transcript**);
4. **Verification Statement** of completion of an ADA-approved Didactic Program in Dietetics (DPD) within the past five years;
5. **Official transcript of graduate coursework** (minimum 3.0 GPA);
6. Confirmation from MS committee chair that all graduate coursework has been completed as well as significant progress toward completion of the thesis/professional paper, i.e., an **approved and signed research proposal** on file with the Graduate Coordinator;
7. **Three letters of recommendation** from previous or current employers or supervisors on form provided. No more than one may be from a CSU, Chico NFSC professor;
8. Work experience in nutrition/dietetics (**current resume**).

The DI Director developed an application rubric that addresses these dimensions with input from other Program Directors, Department faculty, Preceptors and the DI Coordinator. The DI Selection Committee, consisting of the DI Director, Coordinator and Department Chair, uses this rubric to

evaluate applicants and ensure admissions procedures are applied equitably. Applications are ranked based on points earned in the rubric, and applicants meeting minimum qualifications are invited for an interview with the Selection Committee. Following the interviews, the Committee discusses the applicants and final decisions are made. The DI Director then contacts applicants regarding the Committee's decision.

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

<b>Policies and Procedures ●</b>	<b>S</b>	<b>MI</b>	<b>NI</b>
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. (CP/ICP/DI/DTP 3.7; DPD 3.5)	●	○	○
The program has written policies and procedures that protect the rights of enrolled students/interns. (CP/ICP/DI/DTP 3.8; DPD 3.6)	●	○	○
Written policies and procedures are consistent with current institutional practice. (CP/ICP/DI/DTP 3.8; DPD 3.6)	●	○	○
Policies and procedures are provided to students/interns, but are not limited to the following: (CP/ICP/DI/DTP 3.8; DPD 3.6)	●	○	○
University- or College-based program has policies and procedures required by institutional regional accreditation, ordinarily published in the university/college catalog or intern handbook (CP/ICP/DI/DTP 3.8.1; DPD 3.6.1) Non-University or non-College-based DI has its own policies and procedures to address the following and provides them to interns in a DI handbook (DI 3.8.2)	●	○	○
• Withdrawal and refund of tuition and fees (CP/ICP/DTP 3.8.1.1; DPD 3.6.1.1; DI 3.8.1&2.1)	●	○	○
• Scheduling and program calendar, including vacation and holidays (CP/ICP/DI/DTP 3.8.1.2; DPD 3.6.1.2; DI 3.8.1&2.2)	●	○	○
• Protection of privacy of student or intern information (CP/ICP/DI/DTP 3.8.1.3; DPD 3.6.1.3; DI 3.8.1&2.3)	●	○	○
• Access to personal files (CP/ICP/DI/DTP 3.8.1.4; DPD 3.6.1.4; DI 3.8.1&2.4)	●	○	○
• Access to student/intern support services, including health services, counseling and testing and financial aid resources (CP/ICP/DI/DTP 3.8.1.5; DPD 3.6.1.5; DI 3.8.1&2.5)	●	○	○

**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

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

## Program Handbook (DI 3.8.3)

### Intern Handbook

The DI Coordinator provides Interns with a DI Binder that includes the Intern Handbook during their orientation held two-three weeks prior to the start of the first supervised practice rotation (Appendix Q). The Handbook contains all written policies and procedures specified in DI 3.8.3

Examples illustrating the equitable application of policies and procedures found in the Handbook include the following. First, an application rubric is used to evaluate prospective Interns so that admissions decisions are based on objective measures. Second, regardless of where Interns complete their MNT, Food Service Administration and Community Nutrition rotations, each uses the same evaluation tools and rotation competency forms to mark their progress. Third, all Interns are required to make up missed supervised practice hours in order to meet the minimum 1,200 required. In addition, absence from a DI Class must be made up with the DI Coordinator. Fourth, all Interns are required to meet all core and Nutrition Education competencies at the adequate proficiency level and complete all other program requirements before receiving a verification statement.

Credit is not given for prior learning.

**2. Directions:** Use the checklist below to rate how well your narrative, documents and exhibits show that your program meets the criteria (S-Satisfactory, MI-Missing Information, NI-Needs Improvement).

Program Handbook ●	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 (CP/ICP/DI 3.8.3; DPD 3.6.2 DTP 3.8.2)	●	○	○
• Insurance requirements, including those for professional liability (CP/ICP/DTP 3.8.2.1; DI 3.8.3.)	●	○	○
• Liability for safety in travel to or from assigned areas (CP/ICP/DTP 3.8.2.2; DI 3.8.3.2)	●	○	○
• Injury or illness while in a facility for supervised practice (CP/ICP/DTP 3.8.2.3; DI 3.8.3.3)	●	○	○
• Drug testing and criminal background checks if required by the supervised practice facilities (CP/ICP/DTP 3.8.2.4; DI 3.8.3.4)	●	○	○
• Educational purpose of supervised practice to prevent the use of students to replace employees (CP/ICP/DTP 3.8.2.5; DI 3.8.3.5)	●	○	○
• Filing and handling complaints from students and preceptors that includes recourse to an administrator other than the program director and prevents retaliation (CP/ICP/DTP 3.8.2.6; DPD 3.6.2.1; DI 3.8.3.6)	●	○	○
• Assessment of prior learning and credit toward program requirements (coursework and/or experiential) (CP/ICP/DTP 3.8.2.7; DPD 3.6.2.2; DI 3.8.3.7)	○	○	○
• If the program grants credit or supervised practice hours for prior learning, it must define procedures for evaluating equivalency of prior education or experience to the knowledge and/or competencies covered by the courses or rotations for which the credit is granted. (CP/ICP/DTP 3.8.2.7.1; DI 3.8.3.7.1)	○	○	○
• 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 (CP/ICP/DTP 3.8.2.8; DPD 3.6.2.3; DI 3.8.3.8)	●	○	○
• Program retention and remediation procedures when student performance does not meet criteria for progressing in the program (CP/ICP/DTP 3.8.2.9; DPD 3.6.2.4; DI 3.8.3.9)	●	○	○
• Disciplinary/termination procedures (CP/ICP/DTP 3.8.2.10; DPD 3.6.2.5; DI 3.8.3.10)	●	○	○
• 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 (CP/ICP/DTP 3.8.2.11; DPD 3.6.2.6; DI 3.8.3.11)	●	○	○
Verification statement procedures ensuring that all students completing requirements as established by the	●	○	○

program receive verification statements and their names are submitted to CDR for eligibility for the RD examination (CP/ICP 3.8.2.12; DI 3.8.3.12)

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**3. Directions:** Use the checklist below to evaluate how well the program meets the overall criteria.

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