Accreditation Council for Education in Nutrition and Dietetics (ACEND®)

Comprehensive On-Site Evaluation for Accreditation

Site Visit Report

San Francisco State University
San Francisco, CA
Nutrition and Dietetics Internship Program (DI)
Wanda M. Siu-Chan, MS, RD, Program Director

November 4-6, 2018
The findings of the review team are used to advise the ACEND board of directors and are not the board’s final judgment of compliance or non-compliance with any ACEND standard. The ACEND board of directors will consider the Site Visit Report along with other supplementary written or verbal information (such as discussions with program representatives during the ACEND board meeting) in order to determine the program’s overall compliance with ACEND standards and to prepare the ACEND decision letter which includes the official accreditation action.

**Review Team Members:**

**Lead Reviewer:** Sharon L. Gallagher, MEd, RD, LDN  
*Assistant DI Director and Associate Professor of Practice*  
*Simmons University, Boston, Massachusetts*

**Accompanying Reviewer:** RoseAnna B. Holliday, PhD, MPH, RD, FAND  
*Department Chair, Health Sciences Human Services*  
*College of Southern Idaho, Twin Falls, Idaho*
### Rubric to Evaluate the Overall Organization and Clarity of the Self-Study Report

<table>
<thead>
<tr>
<th>Participation in the Self-Study Process</th>
<th>Exemplary</th>
<th>Meets Expectations</th>
<th>Needs Improvement</th>
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</thead>
<tbody>
<tr>
<td>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.</td>
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<tr>
<td>Students, faculty, preceptors, and staff are conversant in the major themes of the report and how the program intends to address any deficiencies.</td>
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<tr>
<td>Supporting documentation of activities is informative and used judiciously.</td>
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<tr>
<td>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.</td>
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<tr>
<td>All sections of the report are complete and organized or hyper-linked to facilitate finding information, e.g., pages are numbered and a table of contents is provided for both the narrative report and the appendices.</td>
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<thead>
<tr>
<th>Knowledge of the Self-Study Report</th>
<th>Exemplary</th>
<th>Meets Expectations</th>
<th>Needs Improvement</th>
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<tbody>
<tr>
<td>Students, faculty, preceptors, and staff are aware of the report and its contents.</td>
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<td>Supporting documentation is present when needed.</td>
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<td>The program proactively presents plans to address areas where the program is in need of improvement.</td>
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<tr>
<td>The reviewer is able to locate a response for each standard and the supporting documentation with minimal difficulty.</td>
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<tr>
<th>Completeness and Transparency of the Self-Study Report</th>
<th>Exemplary</th>
<th>Meets Expectations</th>
<th>Needs Improvement</th>
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<tbody>
<tr>
<td>All narratives and supporting documentation are thorough, clear and concise. The content appears thoughtful and honest. Interviews match the self-study findings.</td>
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<td>All narratives and supporting documentation are present. The content is organized and logical.</td>
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<td>Information is missing or written in an uninformative or disorganized manner.</td>
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<tr>
<th>Relevance of Supporting Documentation</th>
<th>Exemplary</th>
<th>Meets Expectations</th>
<th>Needs Improvement</th>
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<tbody>
<tr>
<td>Supporting documentation is informative and used judiciously.</td>
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<tr>
<td>Additional documentation is missing, irrelevant, redundant, or uninformative.</td>
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<tr>
<th>Evidence of Continuous-Quality Improvement</th>
<th>Exemplary</th>
<th>Meets Expectations</th>
<th>Needs Improvement</th>
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<tr>
<td>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.</td>
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<td>No plans are presented or plans do not appear adequate or viable given the issues and the context of the program.</td>
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<tr>
<th>Organization of the Self-Study Report</th>
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<tr>
<td>Information appears to be missing or is difficult to find. Sections are not well labeled.</td>
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## Summary of the Evaluation of ACEND Accreditation Standards for U.S. Programs

<table>
<thead>
<tr>
<th>Accreditation Standards for U.S. Programs</th>
<th>All Required Evidence Provided</th>
<th>Additional Evidence Needed</th>
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<tbody>
<tr>
<td><strong>Standard 1: Program Characteristics and Resources</strong></td>
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<tr>
<td>Required Element 1.1</td>
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<td>Required Element 1.2</td>
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<td>Required Element 1.7</td>
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<td><strong>Standard 2: Consortia</strong></td>
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<td>Required Element 2.5</td>
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<td><strong>Standard 3: Program Mission, Goals and Objectives</strong></td>
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<td><strong>Standard 4: Program Evaluation and Improvement</strong></td>
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<td><strong>Standard 5: Curriculum and Learning Activities</strong></td>
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<td>Accreditation Standards for U.S. Programs</td>
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<td><strong>Standard 6: Student Learning Outcomes Assessment and Curriculum Improvement</strong></td>
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<td>Required Element 6.1</td>
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<td>Required Element 6.3</td>
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<td><strong>Standard 7: Faculty and Preceptors</strong></td>
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<td>Required Element 7.1</td>
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<td>Required Element 7.3</td>
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<td><strong>Standard 8: Supervised Practice/Experiential Learning Sites</strong></td>
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<td>Required Element 8.1</td>
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<td><strong>Standard 9: Information to Prospective Students and the Public</strong></td>
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<td>Required Element 9.1</td>
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<td>Required Element 9.3</td>
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<td><strong>Standard 10: Policies and Procedures</strong></td>
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<td>Required Element 10.1</td>
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<td>Required Element 10.2</td>
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**KEY**

**All Required Evidence Provided:** There is sufficient evidence to demonstrate that the program meets the required element.

**Additional Evidence Needed:** One or more compliance problems with the required element have been identified.

**N/A:** The required element is not applicable to the program.
Overview of the Evaluation Visit

A comprehensive, on-site evaluation of the Dietetic Internship (DI) at San Francisco State University, in San Francisco, CA was conducted on November 4-6, 2018 to determine compliance with the 2017 Accreditation Standards of the Accreditation Council for Education in Nutrition and Dietetics (ACEND) for the purpose of continuing full accreditation. The program is seeking accreditation for a non-degree DI with an enrollment of 14 interns and a Medical Nutrition Therapy concentration. Interns who successfully complete four graduate courses and the other internship requirements will be awarded a verification statement and Graduate Certificate in Dietetics issued by the University.

During the site visit, the ACEND review team met with representatives of the program via individual sessions consisting of the program director, interns, program graduates, preceptors, faculty, advisory board members, staff from the Disability Program and Resource Center, Library Services, Student Health Services the Campus Academic Resource Program and Administrators. The review team also toured the Laguna Honda Hospital and Project Open Hand community practice site. Overall, the facilities appeared to be conducive to intern training and learning and supportive of the requirements of ACEND’s 2017 accreditation standards.

The program is housed in the Department of Family, Interiors, Nutrition and Apparel (FINA) within the College of Health and Social Sciences. The Department also sponsors a Didactic Program in Dietetics (DPD) and the DPD and DI accreditation site visits were conducted concurrently. The program was established in 1991 and was most recently granted accreditation by the ACEND board in 2009.

Program Strengths:
- Excellent pass rate
- Excellent job placement with interns frequently hired by their supervised practice sites
- Program Director is supportive and responsive and well-respected by all stakeholders
- Intern interests and strengths are taken into consideration with rotation placements
- Diversity in rotation experiences
- Excellence in faculty qualifications, commitment and dedication to program
- Rigorous curriculum that prepares interns to be successful and competent in the workplace
- Enthusiastic, high-caliber preceptors
- Supportive, committed and forward-thinking administration

Areas Needing Improvement:
- No formalized preceptor or faculty training
- Mission, Goals and Objectives need revisions
- Student Learning Outcomes need revisions
**Standard 1: Program Characteristics & Resources**

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

<table>
<thead>
<tr>
<th>Program Characteristics and Resources</th>
<th>All Req Ev Provided</th>
<th>Addl Ev Needed</th>
<th>N/A</th>
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<tbody>
<tr>
<td><strong>Required Element 1.1</strong></td>
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<tr>
<td>The program must be housed in a college or university, health care facility, federal or state agency, business or corporation.</td>
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<tr>
<td>a. 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.</td>
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<td>b. Hospitals must be accredited by The Joint Commission, Det Norske Veritas (DNV), Healthcare Facilities Accreditation Program (HFAP) or other approved national accreditation organization.</td>
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<td>c. 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, DNV, HFAP or other approved national accreditation organization.</td>
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<td>d. 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, DNV, HFAP or other approved national accreditation organization.</td>
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<td>e. Business entities or publicly- or privately-held corporations without oversight by one of the regulatory bodies listed above must meet all the requirements below:</td>
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<tr>
<td>1. Be legally organized and authorized to conduct business by the appropriate state agency for a minimum of five years.</td>
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<td>2. Be in compliance with all local, state and federal laws and regulations.</td>
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<td>3. Provide statements covering the past five years from a licensed public accountant that indicates a review of the company’s financial statements shows no irregularities and a positive net worth.</td>
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<td>4. Have an entity external to the program that provides oversight for the program’s operations.</td>
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<tr>
<td><strong>Evidence to support the review team’s findings:</strong></td>
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<tr>
<td>A letter in the self-study report from the Western Association of Schools and Colleges (WASC) indicates that San Francisco State University is in compliance and was accredited in 2013 for a ten year period. WASC is the accreditation organization providing oversight for the university.</td>
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<td><strong>Required Element 1.2</strong></td>
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<td>The program must be integrated within the administrative structure of the sponsoring organization, as evidenced by an organization chart showing the relationship of the dietitian nutritionist education program to other programs/services.</td>
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<tr>
<td><strong>Evidence to support the review team’s findings:</strong></td>
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<tr>
<td>The program provided an organizational chart showing that the SFSU DI/Certificate in Dietetics program is part of the curriculum for the Department of Family, Interiors, Nutrition and Apparel (FINA), which is part of the College of Health and Social Sciences (one of the six colleges within the university). The chart depicts the relationship between the DI program and other programs in the department and the department within the college.</td>
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<td><strong>Required Element 1.3</strong></td>
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<td>The program must demonstrate that it has the administrative, technical and financial support and the learning resources, physical facilities and support services needed to accomplish its goals. Programs offering tracks (such as distance, part-time/full-time, graduate degree/no degree) must document the financial support and learning resources provided to each track.</td>
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</table>
a. The program must provide a description of the budgeting process for the program that demonstrates financial resources are sufficient to produce the desired short- and long-term program and student outcomes.

b. The program must report its maximum enrollment to ensure quality, viability and appropriate use of resources.

**Evidence to support the review team’s findings:**

The self-study report describes a process for evaluating budget needs and reports that the program is self-funded through tuition and student application fees to cover the expenses associated with the program. The program has increased its maximum enrollment over the past 10 years in order to keep tuition costs down. On site, through meetings with the program director and administrators the review team determined that there is adequate financial support for the internship program.

The self-study report did not fully address the variety and extent of resources provided by the university to support the program. On site, the program director explained that because of the way the internship is funded, there currently are limited resources available to the interns. The program director is hopeful that this may change in the future due to a re-structuring of the program, allowing it to be supported by the state-funded arm of the university. If this happens, interns would have access to more resources and a lower tuition rate. During the meeting with student support services (including Disability Programs, Library Services, Health Center Services and the Campus Academic Resource Program), the review team learned that interns do have access to services of which the program director was previously unaware, including individual tutoring, group tutorial sessions and workshops for improving writing skills, and assistance with resumes and cover letters, job interviews, scholarship applications and writing business plans. They also have access to the library subject liaison, who can assist with database searches for research projects. Additionally, the program supports interns academically by providing them with access to the eNCP and the Nutrition Care Manual.

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**Required Element 1.4**

The internship must be a post baccalaureate degree program that admits only individuals who have a verification statement from a Nutrition and Dietetics Didactic Program (DPD) or Foreign Dietitian Education program (FDE) and have earned at least a bachelor’s degree granted by a U.S. regionally accredited college/university or foreign equivalent. The program must award a verification statement upon completing program requirements.

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**Evidence to support the review team’s findings:**

The web site links provided give a clear description of the requirements for admission to the SFSU DI program, as well as the completion requirements to receive the DI Verification Statement and a Graduate Certificate in Dietetics issued by the university.

As part of the requirements for obtaining the Graduate Certificate in Dietetics, interns must complete four graduate courses (with a minimum grade of C or higher) during the internship. This graduate credit can be applied toward a future Master’s degree.

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**Required Element 1.5**

The program director must have the authority, responsibility and sufficient time allocated to manage the program. The program director may have other responsibilities that do not compromise the ability to manage the program. Responsibilities and time allocation for program management are reflected in a formal position description for the program director and approved by an administrator or external entity.

a. Institutional policies related to faculty roles and workload are applied to the program in a manner that recognizes and supports the academic and practice aspects of the nutrition and dietetics program, including allocating time and/or reducing teaching load for administrative functions provided by the director.

b. The program director must:

1. Have earned at least a master’s degree.
2. Be credentialed as a registered dietitian nutritionist by the Commission on Dietetic Registration.
3. Have a minimum of three years professional experience post credentialing.
4. Be a full-time employee of the sponsoring institution as defined by the institution, or a full-time employee of another organization that has been contracted by the sponsoring institution.
5. Not direct another ACEND-accredited nutrition and dietetics education program.

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c. The program director responsibilities must include, but are not limited to:
1. Provision or delegation of responsibilities to assure year-round coverage of director responsibilities in the absence of the director or in cases where the director’s full-time appointment does not cover all 12 months. In programs where the program director assigns some responsibilities to other individuals, the director must ensure that all program director responsibilities are accomplished throughout the year.

2. Development of policies and procedures for effectively managing all components of the program and to ensure fair, equitable and considerate treatment of prospective and enrolled students (such as program admission, retention and completion policies).

3. Student recruitment, advisement, evaluation and counseling.

4. Maintenance of program accreditation, including:
   a. Timely submission of fees, reports and requests for major program changes;
   b. Maintenance of the program’s student records, including student advising plans and verification statements;
   c. Maintenance of complaints about the program received from students or others, including disposition of the complaint;
   d. On-going review of program’s curriculum to meet the accreditation standards;
   e. Communication and coordination with program faculty, preceptors and others involved with the program;
   f. Facilitation of processes for continuous program evaluation and student learning outcomes assessment and
   g. Timely submission of required documentation supporting the graduate's eligibility for a Commission on Dietetic Registration (CDR) credentialing exam.

 evidence to support the review team’s findings:
The self-study report provides the following documents:
-Appendix 1.5 a: Program director job description (meets all required components of Required Element 1.5)
-Appendix 1.5 b: Photocopy of program director’s CDR credentials (shows current RDN registration status)
-Appendix 1.5 c: Curriculum vitae for program director (meets specifications as outlined in Required Element 1.5)

The program director job description indicates that the position is a full time, .7 work load, illustrating a reduction in teaching load for administrative tasks related to the DI program. The job description notes that the program director is available year round and delegates tasks to department faculty and staff when absent. On site, the review team verified through interviews with stakeholders and the program director that this results in sufficient time for effective management of the program.

required element 1.6
The program must determine its length (in months) after taking into consideration competencies and learning activities that interns must accomplish, required hours of supervised practice and mandates from the program’s administration or state legislation. Programs offering tracks must document any differences that exist in program length among the tracks.

   a. The program must specify the program length (in months). The program must document that students complete at least 1200 hours of supervised practice experiences with a minimum of 900 hours in professional work settings; a maximum of 300 hours can be in alternate supervised experiences such as simulation, case studies and role playing. The program must document the planned hours in professional work settings, simulation, case studies and role playing.
   b. At least 900 of the supervised practice hours must be conducted in a work setting in the United States or its territories, possessions (including the District of Columbia, Guam, Puerto Rico and U.S. Virgin Islands) or military bases.
   c. The program must schedule supervised practice experiences full-time, part-time, or both, to be completed generally within a two-year period.
Evidence to support the review team’s findings:
The SFSU DI program has one track which is full time and 11 months in length. The program provided the “Planned Supervised Practice Hours” template that outlines 1216 planned hours in supervised practice (SP) and alternative experiences, which successfully meets the ACEND specified 1200 hour minimum criteria. The narrative is not consistent with the information on the template, citing 1212 supervised practice hours. On site, the review team suggested that the program director count the four alternative hours of simulation as part of the total SP hours which would then equal a total of 1216 hours, and to update the narrative to reflect this number.

The self-study report narrative notes that in 2014, the length of the program was increased by two months and some of the graduate coursework was shifted to the summer months prior to the supervised practice portion of the program. This change was based on feedback from graduates of the program. On site, the review team conducted interviews with current interns and graduates and received feedback that this was a positive change, leading to better preparation for clinical rotations and fewer major projects being due at the end of the internship.

Required Element 1.7
A free-standing program certified by the U.S. Department of Education (USDE) for eligibility for Title IV student financial aid, which is not included in the Title IV (student aid) eligibility of a sponsoring college or university, 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 (25 percent over a three-year period or 40% in one year), the program must provide a default reduction plan, as specified by USDE.

Recommendations: The program must provide a narrative of the supervised practice hours that are consistent with those indicated on the “Planned Supervised Practice Hours” template to address Required Element 1.6.
Standard 2: Consortia

Two or more independent institutions or organizations combining to sponsor a single program are termed a program consortium and must meet additional organizational structure criteria.

<table>
<thead>
<tr>
<th>Consortia</th>
<th>All Req Ev Provided</th>
<th>Addl Ev Needed</th>
<th>N/A</th>
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</thead>
<tbody>
<tr>
<td><strong>Required Element 2.1</strong> The consortium must consider itself a single education program.</td>
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<tr>
<td><strong>Required Element 2.2</strong> A formal agreement must exist between the two or more organizations that jointly sponsor the program. The formal agreement among members of the consortium must clearly define financial and other resource contributions of each member to the total program.</td>
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<tr>
<td><strong>Required Element 2.3</strong> One individual must serve as the consortium program director and have primary responsibility for the program and communications with ACEND.</td>
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<tr>
<td><strong>Required Element 2.4</strong> Each member organization in the consortium must designate a coordinator (who may be the program director) for the program within that organization who is employed by the organization.</td>
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<tr>
<td><strong>Required Element 2.5</strong> An organization chart must clearly show the relationship of each member of the consortium to the total program.</td>
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</tbody>
</table>

**Recommendations:**
This Standard does not apply to this program.
Standard 3: Program Mission, Goals and Objectives

The program must have a clearly formulated and publicly stated mission with supporting goals and objectives by which it intends to prepare students for practice as a registered dietitian nutritionist. The mission, goals and objectives must be congruent and support the program.

<table>
<thead>
<tr>
<th>Program Mission, Goals and Objectives</th>
<th>All Req Ev Provided</th>
<th>Addl Ev Needed</th>
<th>N/A</th>
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</thead>
</table>

**Required Element 3.1**
The program must have a mission that distinguishes it from other programs in the sponsoring organization, is compatible with the mission statement or philosophy of the sponsoring organization and states its preparation of entry-level registered dietitian nutritionists.

<table>
<thead>
<tr>
<th>Evidence to support the review team’s findings:</th>
</tr>
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<tbody>
<tr>
<td>The mission of the San Francisco State University Dietetic Internship “is to provide a high-quality program that prepares interns in the areas of medical nutrition therapy (concentration), community nutrition, and management. Upon completion of the program, interns will be prepared for entry-level work as dietitians to provide services to individuals, families, consumers and the institutions, industries and businesses serving them in the Greater San Francisco Bay Area.” The program must include “registered dietitian nutritionists” in its mission statement.</td>
</tr>
</tbody>
</table>

Although the mission of the sponsoring organization is not included verbatim in the self-study report, the narrative describes SFSU’s mission as being renowned for community engagement, social justice and diversity. The self-study report gives examples of how these values are aligned with the dietetic internship by the interns who are selected for admission, as well as the sites that are chosen for supervised practice.

<table>
<thead>
<tr>
<th>Additional mission statement from the institution were copied from the institutional website. They include:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• The mission of San Francisco State University is to create and maintain an environment for learning that promotes respect for and appreciation of scholarship, freedom, human diversity, and the cultural mosaic of the City of San Francisco and the Bay Area; to promote excellence in instruction and intellectual accomplishment; and to provide broadly accessible higher education for residents of the region and state, as well as the nation and world.</td>
</tr>
<tr>
<td>• The College of Health &amp; Social Sciences prepares students to help solve the most pressing and enduring issues confronting the well-being of individuals, families, communities and society.</td>
</tr>
<tr>
<td>• The Family Interiors Nutrition &amp; Apparel (FINA) Department provides experiential programs focused on empowering individuals and strengthening families, communities and the institutions which serve them. With a commitment to social justice and a goal of improving the quality of life within a dynamic and diverse environment, curricula include programs in apparel design and merchandising, nutrition, dietetics, child and family studies and interior design.</td>
</tr>
</tbody>
</table>

**Required Element 3.2**
The program must have at least two goals focused on program outcomes that are consistent with the program’s mission.

<table>
<thead>
<tr>
<th>Evidence to support the review team’s findings:</th>
</tr>
</thead>
<tbody>
<tr>
<td>The program has established the following goals:</td>
</tr>
<tr>
<td><strong>Goal 1:</strong> The DI Program will provide a positive learning experience for its interns.</td>
</tr>
<tr>
<td><strong>Goal 2:</strong> The DI Program will successfully prepare interns for entry-level practice as Registered Dietitians.</td>
</tr>
<tr>
<td><strong>Goal 3:</strong> The DI Program will prepare interns for dietetics employment in the Greater San Francisco Bay Area.</td>
</tr>
</tbody>
</table>

Program goal #1 is a program management plan and should either be revised or eliminated. Program goals #2 and #3 are consistent with the program’s mission and specify the preparation of interns for entry-level work. However, the program must revise goals #2 and #3 to focus on graduates, and their contributions to the nutrition and dietetics profession. For example, goal #2 could be reworded as “Graduates will practice as successful entry-level Registered Dietitian Nutritionists.” If it chooses, the program could make the goal more specific by including “in the areas of medical nutrition therapy, community nutrition and management.”
Required Element 3.3
The program also must set the following required program objectives, align them with their program goals and demonstrate that the program is operating in the interest of students and the public:

a. Program Specific: The program must establish one or more program specific objectives for each of the program’s goals.

b. Graduate Employment: The program must develop an objective that states the percent of program graduates who are expected to be employed in nutrition and dietetics or related fields within 12 months of graduation.

1. Program Completion: The program must develop an objective that states “At least 80% of program interns complete program/degree requirements within ___ months (150% of the program length)”.

2. Graduate Employment: The program must develop an objective that states “Of graduates who seek employment, ___ percent are employed in nutrition and dietetics or related fields within 12 months of graduation”.

3. Graduate Performance on Registration Exam:
   a. The program must develop an objective that states “___percent of program graduates take the CDR credentialing exam for dietitian nutritionists within 12 months of program completion”.
   b. The program must develop an objective that states “The program’s one-year pass rate (graduates who pass the registration exam within one year of first attempt) on the CDR credentialing exam for dietitian nutritionists is at least 80%”.

4. Employer Satisfaction: The program must develop an objective for employer satisfaction with graduate’s preparation for entry-level practice.

Evidence to support the review team’s findings:

List program goals and aligned objectives:

**Goal 1: The DI Program will provide a positive learning experience for its interns.**

- **Objective 1:** Over a 5-year period, 80% of interns will rate preceptors and rotations as excellent or very good.
- **Objective 2:** Over a 5-year period, at least 90% of interns for each internship class will rate the program as excellent or very good.

**Goal 2: The DI Program will successfully prepare interns for entry-level practice as Registered Dietitians.**

- **Objective 1:** Over a 5-year period, 90% of enrolled interns will complete the internship and all its requirements within 15 months of starting the program (standard completion time is 11 months).
- **Objective 2:** Over a 5-year period, the pass rate of first-time test takers on the RD registration examination will be at least 80%, and 95% of interns will pass the exam within 1-year of program completion.
- **Objective 3:** 95% of program graduates will take the RD/RDN CDR credentialing exam for dietitian nutritionists within 12 months of program completion.
- **Objective 4:** Over a 5-year period, of graduates who sought employment, 50% will be employed within 3 months of program completion (and after starting job search) in nutrition and dietetics or related fields, and 95% within 1 year
- **Objective 5:** Over a 5-year period, 80% of employers of DI graduates will consider them to be prepared for employment.

**Goal 3: The DI Program will prepare interns for dietetics employment in the Greater San Francisco Bay Area.**

- **Objective 1:** Over a 5-year period, at least 80% of graduates will be employed in nutrition and dietetics located in the greater San Francisco Bay Area one year after program completion.

On site the review team discussed with the program director that goal #2 is missing a program specific objective (Required Element 3.3.a). Also the program must include the ACEND required objectives listed in Required Element 3.3.b verbatim (all language contained within the quotation marks, including the words within the parentheses). The team also suggested that the term “graduates” be substituted in place of “interns” to indicate a graduate focus to the objectives.

Moving forward all ACEND required objectives must be reported as three-year rolling averages. Also, because the accreditation term is now seven years, the program must remove the language “over a 5-year period” from its program objectives.
Recommendations:
The program must provide:
- a revised mission statement in which “dietitian” is expanded to read “registered dietitian nutritionist” to address Required Element 3.1.
- revised goals that include the revision or removal of program goal #1 (a program management plan) to address Required Element 3.2. The program must rewrite goals #2 and #3 to make them graduate-focused rather than intern-focused.
- a program specific objective for goal #2, the ACEND required objectives written verbatim (as indicated within the quotation marks) and remove the language “over a 5-year period” from its objectives to address Required Element 3.3.
### Standard 4: Program Evaluation and Improvement

The program must continuously evaluate the achievement of its mission, goals and objectives. The program must have an evaluation plan, use the plan to collect data, improve the program based on the findings and update the plan accordingly.

<table>
<thead>
<tr>
<th>Program Evaluation and Improvement</th>
<th>All Req Ev Provided</th>
<th>Addl Ev Needed</th>
<th>N/A</th>
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</table>

**Required Element 4.1**

A program evaluation plan must be written, reviewed at least annually, updated as needed with changes documented and must include the following components:

- Each program goal.
- Objective(s) that will be used to evaluate achievement of each program goal.
- Qualitative and/or quantitative data needed to determine whether goals and objectives have been achieved.
- Groups from which data will be obtained; both internal and external stakeholders must be represented (such as graduates, administrators, faculty, preceptors, employers, practitioners, nutrition and dietetics education program directors, faculty from other disciplines and advisory committees).
- Evaluation methods that will be used to collect the data.
- Individuals responsible for ensuring that data are collected.
- Timeline for collecting the necessary data. Data on ACEND-required objectives are to be collected annually.

**Evidence to support the review team’s findings:**

The Program Evaluation Plan was provided which contained all of the required ACEND components. The self-study report clearly identifies the groups that were involved in providing information, including preceptors, faculty, dietetic students (during exit interviews), graduates and employers. On site during the document review, the review team verified that appropriate systems are in place to collect data on the program objectives, such as intern and employer surveys. The program provides data for each year since their PAR was completed, and notes the timeline for collecting the data. However, since the program will need to revise its mission, goals and objectives as identified in Standard 3, a revised Program Evaluation Plan will need to be submitted.

**Required Element 4.2**

The program must evaluate itself based on its program evaluation plan and provide evidence that:

- Data on actual program outcomes for each pathway or track are collected separately according to the program evaluation plan, summarized and analyzed by comparing actual achievements with objectives.
- Data analysis is used to evaluate the extent to which goals and objectives are being achieved.
- The targets set for program-specified and ACEND-required objectives are met.
- Program changes have been made to improve outcomes for any objective(s) not meeting the program-specified or ACEND-required target.
- Programmatic planning and outcomes evaluation are integrated with institutional planning and assessment, as appropriate.

**Evidence to support the review team’s findings:**

**Goal 1:** The DI Program will provide a positive learning experience for its interns.

- **Objective 1:** Over a 5-year period, 80% of interns will rate preceptors and rotations as excellent or very good. 90% Met
- **Objective 2:** Over a 5-year period, at least 90% of interns for each internship class will rate the program as excellent or very good. 97% Met

**Goal 2:** The DI Program will successfully prepare interns for entry-level practice as Registered Dietitians.

- **Objective 1:** Over a 5-year period, 90% of enrolled interns will complete the internship and all its requirements within 15 months of starting

San Francisco State University Dietetic Internship
the program (standard completion time is 11 months). 100% Met

Objective 2: Over a 5-year period, the pass rate of first-time test takers on the RD registration examination will be at least 80%, and 95% of interns will pass the exam within 1-year of program completion. 95% Met

Objective 3: 95% of program graduates will take the RD/RDN CDR credentialing exam for dietitian nutritionists within 12 months of program completion. 100% Met

Objective 4: Over a 5-year period, of graduates who sought employment, 50% will be employed within 3 months of program completion (and after starting job search) in nutrition and dietetics or related fields, and 95% within 1 year. 82% Met

Objective 5: Over a 5-year period, 80% of employers of DI graduates will consider them to be prepared for employment. Inadequate data due to poor response

Goal 3: The DI Program will prepare interns for dietetics employment in the Greater San Francisco Bay Area.

Objective 1: Over a 5-year period, at least 80% of graduates will be employed in nutrition and dietetics located in the greater San Francisco Bay Area one year after program completion. 84% Met

In the objectives stated above, the self-study report narrative and Program Evaluation Plan indicated that all of them were met over a 4-year or 5-year period. The program reports that for Objective 5 under goal #2, there were insufficient data to report that it was met. However, it should be noted that based on the number of surveys received from employers, the satisfaction with graduate preparedness was assessed at 86%, which exceeded the target measure of 80%.

Required Element 4.3

Results of the program evaluation process must be used to identify strengths and areas for improvement relative to components of the program (policies, procedures, curriculum, teaching methods, program length, faculty, preceptors and resources). Short- and long-term strategies must be developed and actions must be taken to maintain program strengths and address areas for improvement identified through the evaluation process.

Evidence to support the review team’s findings:

The program provided its Continuous Program Improvement Plan. Many program strengths were noted, and appear to be associated with the program’s ability to meet its objectives. For example, numerous stakeholders pointed out the program director’s ability to be flexible and change curriculum as needed based on student feedback. On site, the review team also saw evidence of well prepared, satisfied students and engaged preceptors, and a correlation with excellent RDN exam pass scores and job placement rates.

The program also identified some areas in need of improvement and appropriate short- and long-term strategies to rectify them, as well as ways to maintain current strengths. A specific area identified by the program includes the lack of a Master’s degree option. On site, the review team heard from faculty and students that a Master of Science degree option is highly desired as part of the program in the future. During the exit conference with administration, the review team reported feedback from graduates and current interns who would prefer that the DI program be combined with a Masters in Nutrition as a way to obtain an advanced degree with the RDN credential. They indicated that this would also have the dual advantage of providing a program structure to support more student services and a lower tuition.

Recommendations:

Because the program’s mission, goals and objectives need to be changed to come into compliance with Standard 3, the program must modify the Program Evaluation Plan to reflect these changes to address Required Element 4.1.
**Standard 5: Curriculum and Learning Activities**

The Core Knowledge and Competencies must be the basis on which the program curriculum and learning activities are built and at least one concentration must be identified, all within the context of the mission and goals of the program.

<table>
<thead>
<tr>
<th>Curriculum and Learning Activities</th>
<th>All Req Ev Provided</th>
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### Required Element 5.1

The program’s curriculum must be designed to ensure the breadth and depth of requisite knowledge and skills needed for entry-level practice as a registered dietitian nutritionist. *(Refer to Standards document for complete list of core competencies.)*

- a. The program’s curriculum must prepare interns with the core competencies.
- b. The curriculum must include at least one program-defined concentration that builds on the core competencies and develops additional depth necessary for future proficiency in a particular area. The concentration must include at least two program specific competencies with associated learning activities.

#### Evidence to support the review team’s findings:

The program’s curriculum map shows that all CRDNs are aligned with a rotation or course. The dietetic internship’s concentration is medical nutrition therapy (MNT), and two additional competencies for this concentration are noted in the curriculum map (MNT 1 and MNT 2). However, these competencies are not robust enough to differentiate them from the ACEND core competencies. For example, competency MNT 1 indicates “Provides appropriate MNT and accurately documents care in the medical record for non-complex patients” while CRDN 3.1 states “Perform the Nutrition Care Process and use standardized nutrition language for individuals, groups and populations of differing ages and health status, in a variety of settings.”

In addition, the narrative notes that there are three MNT concentration competencies and they are named differently (MNT 5.1, MNT 5.2 and MNT 5.3), which is not consistent with the curriculum map. On site, the review team discussed the discrepancy and advised the program director to update the curriculum map to reflect MNT competencies with consistent numbering and that these numbers should also be consistent with the numbering on the Student Learning Outcomes Assessment Plan required for Standard 6. The program must provide a minimum of two concentration competencies that build on the core competencies and develop additional depth necessary for future proficiency in its chosen area of MNT.

The program indicated that MNT was chosen as the area of concentration because historically at least 50% of the supervised practice hours have been completed in clinical rotations and that many of the interns are interested in obtaining clinical positions as their first job.

### Required Element 5.2

A curriculum map must be developed that:

- a. Identifies supervised practice experiences, which occur in various settings or practice areas that interns will complete to meet the core competencies and program-defined concentration competencies.
- b. Sequentially and logically organizes the progression of didactic courses and supervised practice experiences from introductory to more advanced learning activities and builds on previous knowledge or experience to achieve the expected depth and breadth of knowledge and competency by completion of the program.
- c. Culminates in experiences to demonstrate entry-level competence.

#### Evidence to support the review team’s findings:

The self-study report describes how the learning activities in rotations and courses build sequentially, so that the interns are prepared for more rigorous experiences as they progress. Interns have multiple opportunities to present case studies and conduct literature reviews.

The program provided a rotation calendar for all 14 interns, showing that the internship culminates in two weeks of staff relief for all students, which is their final step to achieve entry-level competence in medical nutrition therapy.
## Required Element 5.3

The program’s curriculum must provide learning activities to attain the breadth and depth of the core competencies and program-defined concentration competencies. Syllabi for courses taught within the academic unit and supervised practice rotation descriptions must include these learning activities with the associated CRDN.

- **a.** Learning activities must prepare interns for professional practice with patients/clients with various conditions, including, but not limited to overweight and obesity; endocrine disorders; cancer; malnutrition and cardiovascular, gastrointestinal and renal diseases.
- **b.** Learning activities must prepare interns to implement the Nutrition Care Process with various populations and diverse cultures, including infants, children, adolescents, adults, pregnant/lactating females and older adults.
- **c.** Learning activities must use a variety of educational approaches necessary for delivery of curriculum content, to meet learner needs and to facilitate learning objectives.

### Evidence to support the review team’s findings:

The self-study report lists a large variety of teaching methods used in the internship, including simulation, case studies, and interprofessional collaboration. For example, all dietetic students are paired with students in other disciplines through a collaborative interprofessional education (IPE) program with California State University.

The RDN Summary of Learning Activities shows supervised practice experiences covering all of the categories for ACEND-identified population groups, as well as the most common disease states. The self-study report states that the preference is for these learning activities to take place during supervised practice rotations, but due to inconsistencies in site placement opportunities, classroom instruction is used as well. The self-study report notes that all interns are exposed to diverse populations in and around the San Francisco area. This was verified on site through document review and tours of supervised practice sites.

### Recommendations:

The program must provide a minimum of two concentration competencies that build on the core competencies and develop additional depth necessary for future proficiency in its chosen area of MNT to address Required Element 5.1. In addition the revised curriculum map with updated concentration competencies must be provided.
Standard 6: Student Learning Outcomes Assessment and Curriculum Improvement

The program must continuously assess achievement of student learning outcomes (SLO). The program must have a written SLO assessment plan, use the plan to collect and analyze data, improve the program based on the findings and update the plan accordingly. The results of the SLO assessment must be used to evaluate and improve the curriculum to enhance the quality of education provided.

<table>
<thead>
<tr>
<th>Student Learning Outcomes Assessment and Curriculum Improvement</th>
<th>All Req Ev Provided</th>
<th>Addl Ev Needed</th>
<th>N/A</th>
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</thead>
<tbody>
<tr>
<td>Required Element 6.1: An SLO assessment plan must be written, reviewed at least annually, updated as needed and include the following components:</td>
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<tr>
<td>a. Core competency and program-defined concentration competency statements.</td>
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<tr>
<td>b. Learning objectives that state specific activities and qualitative or quantitative target measures that will be used to assess overall student achievement of core competencies and program-defined concentration competencies.</td>
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<tr>
<td>c. Supervised practice rotation(s) in which assessment will occur.</td>
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<tr>
<td>d. Individuals responsible for ensuring that assessment occurs.</td>
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<tr>
<td>e. Timeline for collecting formative and summative assessment data. Programs are expected to assess at least one SLO from each domain annually. Within the accreditation cycle, all SLOs must be assessed at least once. SLOs that are not met must be assessed annually until resolved.</td>
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Evidence to support the review team’s findings:
The self-study report outlines a comprehensive process for creating and modifying the Student Learning Outcomes (SLO) Assessment Plan, including the individuals involved. All required components of the plan are in place. However some of the learning objectives do not set a minimum target measure that 100% of interns must demonstrate competency. For example CRDN 2.5 indicates that only 75% of interns will receive a minimum score of “3” satisfactory, which indicates that the remaining 25% of interns do not have to demonstrate competence. The learning activity for CRDN 2.4 states that 90% of interns will participate in the interprofessional Standardized Patient Exercise followed by self-assessment which indicates that 10% of the interns are not required to participate.

The measuring tool for CRDN 2.2 “Demonstrate professional writing skills in preparing professional communications” is the grade on the entire Critical Analysis Research Paper which may be too broad and not accurately measure an intern’s professional writing skills. The program may wish to review the rubric used to measure this project and use the score that reflects only those sections of the research paper that pertain to professional writing skills.

For CRDN 2.13 “Prepare a plan for professional development according to Commission on Dietetic Registration guidelines,” updating a resume does not appear to be an appropriate learning activity for that competency.

While the program has chosen to measure CRDNs 2.1, 2.3, 2.11 and 3.3 in all supervised practice rotations, the review team discussed with the program director on site that this is not required in the Standards. Although the program may wish to continue to evaluate the achievement of competence in all of these rotations, the program may choose to only report data from one of the rotations on the SLO Assessment Plan.

The program must submit a revised SLO Assessment Plan that ensures that 100% of interns meet all competencies at a satisfactory level, at minimum.

Required Element 6.2
The program must document that data on achievement of learning outcomes are collected, summarized and analyzed according to the program’s SLO assessment plan.
Evidence to support the review team’s findings:
The SLO Assessment plan contains data on achievement of learning outcomes. The self-study report narrative explains that the program director monitors whether each intern meets the competencies and if not, works with the intern and the preceptor for improvement.

The self-study report indicates that three of the competencies were either not met, or were not met consistently (CRDN 2.5, 4.1, 4.9, 5.1, 5.2, and 5.3). For CRDN 4.1 and 4.9, the narrative explains that a second didactic learning activity was added for experiences that were not routinely consistently available in supervised practice settings. For 5.1, 5.2 and 5.3, the program assessed that the interns completed the work, were felt to be entry-level ready and were able to complete their staff relief.

Required Element 6.3
Formal curriculum review must routinely occur and:

a. Use results of program evaluation and student learning assessment to determine strengths and areas for improvement.

b. Include input from students and other stakeholders as appropriate.

c. Include assessment of comparability of educational experiences and consistency of learning outcomes when different courses, delivery methods (such as distance education), tracks, or supervised practice sites are used to accomplish the same educational objectives.

d. Result in actions to maintain or improve intern learning.

Evidence to support the review team’s findings:
The self-study report describes the process used to review the strengths and areas needed for improvement within the curriculum. Examples given for changes made to improve the curriculum based on feedback from interns, preceptors and faculty included how modifications were made to didactic research projects to better align with supervised practice experiences. This example was verified on site at the meeting with faculty. During meetings with current interns and graduates, the review team heard how student feedback was used by the program director to modify the scheduling of major assignments to spread out the workload and improve student performance and satisfaction.

Recommendations:
The program must provide a modified Student Learning Outcomes (SLO) Assessment plan that ensures that 100% of interns meet a minimum level of competence (target measure) for each CRDN, the activities used to measure the competency are appropriate for that competency, and includes the revised concentration competencies to address Required Element 6.1.
Standard 7: Faculty and Preceptors

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

### Faculty and Preceptors

<table>
<thead>
<tr>
<th>Required Element 7.1</th>
<th>All Req Ev Provided</th>
<th>Addl Ev Needed</th>
<th>N/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>The program must provide evidence that qualified and appropriately credentialed faculty and preceptors are sufficient to ensure implementation of the program’s curriculum and the achievement of the program objectives and student learning outcomes.</td>
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</table>

**Evidence to support the review team’s findings:**
Faculty and preceptor rosters are included in the self-study report. The program uses more than 50 preceptors in a variety of settings (clinical, community and management). The procedure for selecting preceptors based on their qualifications and experience was explained. The narrative indicates the minimum standards for preceptor qualifications based on the area of practice. On site, the review team saw evidence of regular communication with preceptors, and heard examples from interns about the vetting process for selecting preceptors.

<table>
<thead>
<tr>
<th>Required Element 7.2</th>
<th>All Req Ev Provided</th>
<th>Addl Ev Needed</th>
<th>N/A</th>
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</thead>
<tbody>
<tr>
<td>The requirements for program faculty and preceptors must include:</td>
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<tr>
<td>a. Program faculty (faculty within the academic unit), including the program director, must meet the sponsoring organization’s criteria for appointment and have sufficient education in a field related to the subject in which they teach or must meet the institution’s policy for education and/or equivalent experience.</td>
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</tr>
<tr>
<td>b. Preceptors must have the education and experience needed to provide appropriate guidance for supervised practice experiences. Preceptors must be licensed, as appropriate, to meet state and federal regulations, or credentialed, as needed, for the area in which they are supervising students.</td>
<td>☐</td>
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</tr>
<tr>
<td>c. Program faculty, including the program director, and preceptors must show evidence of continued competence appropriate to their teaching or precepting responsibilities through professional work, graduate education, continuing education, scholarship/research or other activities leading to professional growth in the advancement of their profession.</td>
<td>☐</td>
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<tr>
<td>d. The program must have a process for the periodic review, including input from students, of the effectiveness of faculty and preceptors.</td>
<td>☐</td>
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</tr>
</tbody>
</table>

**Evidence to support the review team’s findings:**
Program faculty must meet the qualifications set by SFSU. They have an annual review by the FINA Chair and are also evaluated by students via the SFSU Student Evaluation of Teaching Effectiveness survey given at the end of each course. On site, the review team saw evidence of these surveys during document review.

On site, the review team saw evidence of documentation for preceptor qualifications (resumes). However, there was no evidence of continuing competence for preceptors appropriate to their responsibilities in their area of practice. The review team suggested strategies for the program director to use as this information is collected moving forward, such as using the ACEND Preceptor Qualifications form.

The self-study report outlines the process for assessing continued competence in precepting and how the program director decides if preceptors will be used again based on regular intern feedback. On site, the review team saw evidence of preceptor evaluations by interns that uses a rating system and a final recommendation as to whether the site should continue to be used. A discussion with the program director on site revealed that preceptors are provided with feedback if the program director decides that constructive criticism will improve the experience. During the preceptor meeting, it was verified that they are satisfied with the informal communication they receive from the program director.
**Required Element 7.3**
The orientation and training requirements for program faculty and preceptors must include:

a. New program faculty members, instructors, teaching assistants, and preceptors must be provided orientation to the mission, goals, objectives and educational philosophy of the nutrition and dietetics program.

b. Program faculty members, instructors, teaching assistants and preceptors must receive feedback, and training as needed, based on program evaluation and input from students.

c. Program faculty members, instructors, teaching assistants and preceptors must receive training on the ACEND Standards and required knowledge and competencies.

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**Evidence to support the review team’s findings:**
The self-study report states that the program director is in close communication with faculty on a regular basis to provide feedback from surveys about the curriculum and any changes to the SLOs. On site, the review team saw evidence of regular communication via emails between the program director and the faculty, and this regular communication pattern was verified with faculty.

The narrative states that because there are over 50 preceptors, there is no formal training for preceptors but the program director communicates with each preceptor individually as needed to review competencies, expectations and program requirements. Evidence of email communications between the program director and preceptors was viewed on site. The program director also conducts site visits to approximately 50% of the sites on an annual basis.

The self-study report does not contain examples of any orientation materials for faculty or preceptors, such as a handbook, orientation outline or checklist that includes orientation to the program’s mission, goals, objectives and educational philosophy. No examples of ongoing training materials such as agendas that include training on the ACEND Standards and required knowledge and competencies were provided. On site, the program director stated that she does not have any such materials at this time. The review team advised her to create materials and include them with the program’s response to ACEND.

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**Recommendations:**
The program must provide:

- evidence that the program has a process for assuring continued competence of preceptors appropriate to their teaching or precepting responsibilities to address Required Element 7.2c; and

- evidence that orientation for new faculty and preceptors includes orientation to the mission, goals, objectives and educational philosophy of the program and on-going training for faculty and preceptors includes training on the ACEND Standards and required knowledge and competencies to address Required Element 7.3.
**Standard 8: Supervised Practice/Experiential Learning Sites**

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

### Supervised Practice/Experiential Learning Sites

<table>
<thead>
<tr>
<th>Required Element 8.1</th>
<th>All Req Ev Provided</th>
<th>Addl Ev Needed</th>
<th>N/A</th>
</tr>
</thead>
</table>

**Supervised practice site requirements:**

- a. The institution/organization must establish policies that outline the issuance and maintenance of written affiliation agreements and the selection criteria, evaluation process and timeline for evaluation of adequacy and appropriateness of supervised practice facilities.

- b. Agreements must delineate the rights and responsibilities of both the sponsoring organization and affiliating institutions, organizations and/or agencies.

- c. Agreements must be signed by individuals with appropriate institutionally-assigned authority in advance of placing students.

- d. The institution/organization must clarify in its policies any situation where affiliation agreements are not required (such as a site being part of the program’s organization).

**Evidence to support the review team’s findings:**

The self-study report contains a policy for the selection of sites used for supervised practice, outlining the qualifications needed by preceptors, and the process for establishing a supervised practice arrangement. The SFSU program director is responsible for communicating with preceptors and obtaining the necessary affiliation agreements or memorandum of agreements (MOAs) for all sites.

A sample affiliation agreement is included which contains the appropriate provisions for both the sponsoring agency and SFSU. On site, the review team verified during document review that signed affiliation agreements and/or MOAs are in place for the numerous rotation sites utilized by the program.

**Recommendations:**

There are no recommendations at this time.
Standard 9: Information to Prospective Students and the Public

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

<table>
<thead>
<tr>
<th>Information to Prospective Students and the Public</th>
<th>All Req Ev Provided</th>
<th>Addl Ev Needed</th>
<th>N/A</th>
<th>Required: Describe the evidence used to support your findings.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Required Element 9.1</strong></td>
<td></td>
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<td></td>
<td>University link on nondiscrimination policy included in self-study report: <a href="http://bulletin.sfsu.edu/policies-procedures/regulations-procedures/nondiscrimination-policy/">http://bulletin.sfsu.edu/policies-procedures/regulations-procedures/nondiscrimination-policy/</a></td>
</tr>
<tr>
<td>Program policies, procedures, practices, and materials related to intern recruitment and admission must comply with state and federal laws and regulations.</td>
<td>✓</td>
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<tr>
<td><strong>Required Element 9.2</strong></td>
<td></td>
<td></td>
<td></td>
<td>All information regarding the program is found at this link and is updated annually: <a href="http://fina.sfsu.edu/Dietetic%20Internship">http://fina.sfsu.edu/Dietetic%20Internship</a></td>
</tr>
<tr>
<td>All sources of information for prospective interns and the public must provide current and consistent information and each information source must provide a reference to where complete program information can be found.</td>
<td>✓</td>
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</tr>
<tr>
<td><strong>Required Element 9.3</strong></td>
<td>All Req Ev Provided</td>
<td>Addl Ev Needed</td>
<td>N/A</td>
<td>Required: Describe the evidence used to support your findings.</td>
</tr>
<tr>
<td>Information about the program must be readily available to prospective interns and the public via a website and must include at least the following:</td>
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<tr>
<td>a. Accreditation status, including the full name, address, phone number and website of ACEND on the program’s website homepage.</td>
<td>✓</td>
<td></td>
<td></td>
<td>The accreditation status must be listed on the program’s website homepage. Instead it is found under the “Overview and General Information” link at: <a href="http://fina.sfsu.edu/Dietetic%20Internship">http://fina.sfsu.edu/Dietetic%20Internship</a>. On page 5 of the overview, the suite number listed for ACEND is incorrect.</td>
</tr>
<tr>
<td>b. Description of the program, including program’s mission, goals and objectives.</td>
<td>✓</td>
<td></td>
<td></td>
<td>Found under the “Overview and General Information” link at: <a href="http://fina.sfsu.edu/Dietetic%20Internship">http://fina.sfsu.edu/Dietetic%20Internship</a></td>
</tr>
<tr>
<td>c. A statement that program outcomes data are available upon request.</td>
<td>✓</td>
<td></td>
<td></td>
<td>Outcomes data are provided following each program objective on the website.</td>
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<td></td>
<td>Information about the requirements and process to become a Registered Dietitian Nutritionist (RDN), including education, supervised practice, passage on the CDR credentialing exam and state certification/licensure, if applicable; and how the program fits into the process.</td>
<td>Some information is found under the “Overview and General Information” link at: <a href="http://fina.sfsu.edu/Dietetic%20Internship">http://fina.sfsu.edu/Dietetic%20Internship</a> Although there is no state certification/licensure in California, program graduates may practice outside of the State and therefore would need to be knowledgeable that certification and/or licensure exists in other states. The program should include this information in the requirements and process to become a RDN.</td>
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<tr>
<td>d.</td>
<td>Cost to intern, such as estimated expenses for travel, housing, books, liability insurance, medical exams, drug testing, background checks, verification of student identity (such as for distance learning), uniforms and other program-specific costs/fees, in addition to any institutional fees and tuition.</td>
<td>Found under the “Estimated Costs and Financial Aid” link at: <a href="http://fina.sfsu.edu/Dietetic%20Internship">http://fina.sfsu.edu/Dietetic%20Internship</a></td>
<td></td>
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<tr>
<td>e.</td>
<td>Application and admission requirements for all pathways and tracks for which the program is accredited.</td>
<td>Found under “Admissions” and “How to Apply” at this link: <a href="http://fina.sfsu.edu/Dietetic%20Internship">http://fina.sfsu.edu/Dietetic%20Internship</a></td>
<td></td>
<td></td>
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<tr>
<td>f.</td>
<td>Academic and program calendar or schedule.</td>
<td>Found under the “Overview and General Information” link at: <a href="http://fina.sfsu.edu/Dietetic%20Internship">http://fina.sfsu.edu/Dietetic%20Internship</a></td>
<td></td>
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</tr>
<tr>
<td>g.</td>
<td>Graduation and program completion requirements for all pathways and tracks for which the program is accredited.</td>
<td>Found under the “Overview and General Information” link at: <a href="http://fina.sfsu.edu/Dietetic%20Internship">http://fina.sfsu.edu/Dietetic%20Internship</a></td>
<td></td>
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</tr>
<tr>
<td>h.</td>
<td>Availability of financial aid and loan deferments (federal or private), scholarships, stipends and other monetary support, if applicable.</td>
<td>Found under the “Estimated Costs and Financial Aid” link at: <a href="http://fina.sfsu.edu/Dietetic%20Internship">http://fina.sfsu.edu/Dietetic%20Internship</a></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i.</td>
<td>Computer matching information, if applicable.</td>
<td>Found under the “How to Apply” link at: <a href="http://fina.sfsu.edu/Dietetic%20Internship">http://fina.sfsu.edu/Dietetic%20Internship</a></td>
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<tr>
<td>j.</td>
<td>Guidance about distance education components, if applicable.</td>
<td></td>
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<tr>
<td>k.</td>
<td>If interns are required to locate their own supervised practice sites and/or preceptors, requirements for this must be described.</td>
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</tbody>
</table>

**Recommendations:**
The program must provide:
- evidence that the accreditation status is on the program’s website home page and documentation that the suite number for ACEND has been corrected in its written materials and on the website to address Required Element 9.3.a; and
- information about state certification and licensure requirements for RDNs to address Required Element 9.3.d.
**Standard 10: Policies and Procedures**

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

<table>
<thead>
<tr>
<th>Policies and Procedures (Required Element 10.1)</th>
<th>All Req Ev Provided</th>
<th>Addl Ev Needed</th>
<th>Required: Describe the evidence used to support your findings.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Programs are required to have policies and procedures for program operations including:</td>
<td></td>
<td></td>
<td>Admissions criteria is provided on the DI program's web page under Admission Criteria: <a href="http://fina.sfsu.edu/Dietetic%20Internship">http://fina.sfsu.edu/Dietetic%20Internship</a>. Appendix 10.1a also includes a scoring rubric used for intern selection.</td>
</tr>
<tr>
<td>a. Admission Requirements: Programs must establish criteria to determine intern potential for success in the program</td>
<td>✗</td>
<td>☐</td>
<td></td>
</tr>
<tr>
<td>b. Intern Performance Monitoring: The program’s system of monitoring student performance must provide for the early detection of academic difficulty and must take into consideration professional and ethical behavior and academic integrity of the intern</td>
<td>✗</td>
<td>☐</td>
<td>The narrative describes the procedure for remediation for interns not performing to program standards. The program’s DI Program Student Manual (located in Appendix 10.1) includes this information on pages 2, 3, 12, 13 and 14.</td>
</tr>
<tr>
<td>c. Intern Retention: Interns with a minimal chance of success in the program must be counseled into career paths that are appropriate to their ability</td>
<td>✗</td>
<td>☐</td>
<td>Page 12 of the DI Program Student Manual.</td>
</tr>
<tr>
<td>d. Supervised Practice Documentation: The program must establish procedures for tracking individual student’s supervised practice hours in professional work settings, simulations, case studies and role playing. Hours granted for prior learning, if given, also must be documented</td>
<td>✗</td>
<td>☐</td>
<td>Appendix 10.1a includes the program's form used to track supervised practice hours. Only 4 hours of simulation from the IPE experience is counted as acceptable alternate SP hours. Hours are not granted for prior learning.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Policies and Procedures (Required Element 10.2)</th>
<th>All Req Ev Provided</th>
<th>Addl Ev Needed</th>
<th>Required: Describe the evidence used to support your findings.</th>
</tr>
</thead>
<tbody>
<tr>
<td>The following policies and procedures specific to nutrition and dietetics programs must be provided to interns, such as in a program handbook or on a program website. Programs offering tracks must document policies that differ between each track:</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>a. Insurance requirements, including those for professional liability</td>
<td>✗</td>
<td>☐</td>
<td>pages 9 and 10 of the DI Program Student Manual.</td>
</tr>
<tr>
<td>b. Liability for safety in travel to or from assigned areas</td>
<td>✗</td>
<td>☐</td>
<td>page 9 of the DI Program Student Manual.</td>
</tr>
<tr>
<td>c. Injury or illness while in a facility for supervised practice</td>
<td>✗</td>
<td>☐</td>
<td>page 10 of the DI Program Student Manual.</td>
</tr>
<tr>
<td>d. Drug testing and criminal background checks if required by the supervised practice facilities</td>
<td>✗</td>
<td>☐</td>
<td>page 7 of the DI Program Student Manual.</td>
</tr>
<tr>
<td>e. Requirement that interns doing supervised practice must not be used to replace employees</td>
<td>✗</td>
<td>☐</td>
<td>page 9 of the DI Program Student Manual.</td>
</tr>
<tr>
<td></td>
<td>When interns are paid compensation as part of the program, policies must be in place to define the compensation practices</td>
<td>page 9 of the DI Program Student Manual; states compensation is allowed in some circumstances and would be stipulated in the affiliation agreement.</td>
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<td>g.</td>
<td>The process for filing and handling complaints about the program from interns and preceptors that includes recourse to administrator other than the program director and prevents retaliation. The program must maintain a record of intern complaints for a period of seven years, including the resolution of complaints</td>
<td>page 14 of the DI Program Student Manual; discusses the process for submission of complaints. The narrative states that there have been no formal complaints filed in the past 7 years.</td>
<td></td>
</tr>
<tr>
<td>h.</td>
<td>Process for submission of written complaints to ACEND related to program noncompliance with ACEND accreditation standards after all other options with the program and institution have been exhausted</td>
<td>page 14 of DI Program Student Manual; The procedure about the process of filing written complaints to ACEND needs to include additional detail about the types of complaints that can be submitted to ACEND as well as the ACEND contact information. This information is available on the ACEND website.</td>
<td></td>
</tr>
<tr>
<td>i.</td>
<td>If the program grants credit, supervised practice hours or direct assessment for interns’ prior learning, it must define procedures for evaluating equivalence of prior education or experience. Otherwise, the program must indicate that it has no policy for assessing prior learning or competence</td>
<td>The narrative and DI Program Student Manual (page 3) explain that if an intern has significant experience in an area of dietetics (foodservice management is the example provided), the intern may be exempt from the foodservice management rotation but would spend the exempted rotation hours in another area of dietetics. Interns must still complete the 1200 hours of supervised practice. “Competency will be evaluated based on the intern’s former job responsibilities and job description.” Additional information regarding this process of evaluation is needed.</td>
<td></td>
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<tr>
<td>j.</td>
<td>Formal assessment of intern learning and regular reports of performance and progress</td>
<td>pages 2, 12, 13 and 14 of the DI Program Student Manual</td>
<td></td>
</tr>
<tr>
<td>k.</td>
<td>Program retention and remediation procedures; interns must have access to remedial instruction, such as tutorial support</td>
<td>page 13 of the DI Program Student Manual; on site the program director indicated to the review team that she was unaware that interns had access to tutorial support; the policies must include tutorial support</td>
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<tr>
<td>l. Disciplinary/termination procedures</td>
<td></td>
<td></td>
<td>page 13 of the DI Program Student Manual</td>
</tr>
<tr>
<td>m. Graduation and/or program completion requirements for all tracks and pathways including maximum amount of time allowed for completing program requirements applicable at the time intern enrolls</td>
<td></td>
<td></td>
<td>pages 2-3 of the DI Program Student Manual</td>
</tr>
<tr>
<td>n. Verification statement requirements and procedures ensuring that all interns completing requirements established by the program receive verification statements</td>
<td></td>
<td></td>
<td>page 2 of the DI Program Student Manual</td>
</tr>
<tr>
<td>o. Programs using distance instruction and/or online testing must employ strategies to verify the identity of an intern</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>p. Withdrawal and refund of tuition and fees, if applicable</td>
<td></td>
<td></td>
<td>page 8 of the DI Program Student Manual; provides a link to the SFSU College of Extended Learning website with the university policy</td>
</tr>
<tr>
<td>q. Program schedule, vacations, holidays and leave of absence</td>
<td></td>
<td></td>
<td>pages 4-5 and 13 of the DI Program Student Manual; Page 13 discusses personal days off requirements, but does not address a policy for an extended leave of absence.</td>
</tr>
<tr>
<td>r. Protection of privacy of intern information, including information used for identifying interns in distance learning</td>
<td></td>
<td></td>
<td>page 11 of the DI Program Student Manual</td>
</tr>
<tr>
<td>s. Intern access to their own intern file</td>
<td></td>
<td></td>
<td>page 11 of the DI Program Student Manual</td>
</tr>
<tr>
<td>t. Access to intern support services, including health services, counseling and testing and financial aid resources</td>
<td></td>
<td></td>
<td>page 6 of the DI Program Student Manual; on site the program director indicated to the review team that she was unaware that interns had access to certain support services; the policies must include all support services to which the interns have access</td>
</tr>
</tbody>
</table>

**Recommendations:**
The program must provide the revised Student Manual that includes:
- additional details on the policy for written complaints to ACEND to address Required Element 10.2.h;
- additional documentation to explain the process for evaluating competencies met through prior learning to address Required Element 10.2.i;
- the policy addressing interns’ access to remedial instruction, such as tutorial support to address Required Element 10.2.k;
- the policy for an extended leave of absence to address Required Element 10.2.q; and
- the policy addressing all of the support services to which interns have access to address Required Element 10.2.t.
All Meetings will take place in Burk Hall unless otherwise noted.

**Sunday, November 4, 9:30AM-5:30PM**

9:30       Pick up from Hotel
10:00 - 10:30  Campus welcome tour
10:30 - 12:30  Meet with DI Director – Wanda Siu-Chan
12:30 - 1:15  Working Lunch
1:15 - 3:45  Document review
3:45-4:45  Meeting with SFSU DI alumni
5:30       Drop off at hotel

**Monday November 5, 8:15AM-6:00PM**

8:15       Pick up from Hotel
8:45 - 9:20  Laguna Honda Hospital and Rehabilitation Center – SNF clinical supervised practice site
10:00-10:35  Project Open Hand – community nutrition supervised practice site
10:30-12:00  Meeting with support services, Library Administration Office, 3rd floor, Rm 340J, Library services, Disability Programs and Resource Services - DPRC along with DPD Site Visitors, please note some services represented such as on-campus tutoring and student health are not available to our interns
12:00-12:45  Lunch with Department Chair, Connie Ulasewicz, PhD
12:45 - 1:15  Observe current DI DFM 785 class – intern clinical mini case study presentation
1:15 - 2:00  Meet with current DI Class
2:00 - 2:45  Meet with DI Faculty
3:00 - 4:00  Meet with SFSU Administration, Administration 447B - Provost and Deans (along with DPD Reviewers)
4:15 - 5:00  Meeting/Conference call with preceptors
5:00 - 5:30  Meeting as needed
6:00       Drop off at hotel

**Tuesday November 6, 7:30-10:30AM**

7:30AM       Pick up from hotel
8:00 - 9:30  Exit meeting (with DI Director (Wanda)
9:30 -10:30  Exit report with Administration and Faculty
10:45       Leave for airport as needed

See next page for list of expected attendees of meetings
Expected Attendees for Meetings

Sunday
3:45-4:45 Meeting with SFSU DI alumni – Masha Pavlova ’15, Rosavida Cruz ’15, Christina Platter ’16, Karla Moreno ’16, Tope Pedro ’17, Megan Kitagawa ’18, Mayble Jiang ’18.

Monday
8:45 - 9:20 Laguna Honda Hospital and Rehabilitation Center – SNF clinical supervised practice site, Loretta Cecconi, RD, Chief Clinical Dietitian, Judy Dantoc, RDN, Sheetal Kataria, MS, RDN
10:00 - 10:35 Project Open Hand – community nutrition supervised practice site, Kim Madsen, MEd, RD, Director of Nutrition Services, Kristi Friesen, RD and Mariana Carranza, RD (also alumni)
11:30 - 12:00 Meeting with support services, Library Administration Office, 3rd floor, Rm 340J, Library services, Disability Programs and Resource Services – DPRC along with DPD Site Visitors, please note some services represented such as on-campus tutoring and student health are not available to our interns
12:00 - 12:45 Lunch with Department Chair, Connie Ulasewicz, PhD
12:45 - 1:15 Observe current DI DFM 785 class – intern clinical mini case study presentation
1:15 - 2:00 Meet with current DI Class
2:00 - 2:45 Meet with DI Faculty – Jennifer Stimson, MS, RD, Gretchen George, PhD, RD, Scott Cahn, MA, RD, Wanda Siu-Chan, MS, RD
3:00 - 4:00 Meet with Provost and Deans – Admin 447B, Jennifer Summit, PhD, Provost and Vice President of Academic Affairs, Lori Beth Way, PhD, Dean, Undergraduate Education and Academic Planning, Sophie Clavier, PhD, Dean, Graduate Studies, Alvin Alvarez, PhD, Dean, College of Health and Social Services, Connie Ulasewicz, PhD, Department Chair, Family Interiors Nutrition & Apparel (also two site reviewers for Didactic Program in Dietetics/B.S. Degree)
4:15 - 5:00 Meeting/Conference call with preceptors – Sarah Koszyk, MA, RD – Private Practice/Family Food Fiesta, Clara Wu, RD – St. Mary’s Medical Center, Miguel Villarreal, MBA – Novato Unified School District, Erica Eilenberg, MPH, RD – Community Health Resource Center, Suzanne Hanson, RD – Marin General Hospital, Jenn McAlmond-Cruz, RD, CNSC Alta Bates Summit Medical Center.

Tuesday
9:30 - 10:30 Exit report with Administration and Faculty – John P. Elia, PhD, Associate Dean, College of Health and Social Services, Wanda Siu-Chan, MS, RD, DI Director, Jennifer Stimson, MS, RD, DPD Director, Gretchen George, PhD, RD, Assistant Professor, Zubaida Qamar, PhD, Assistant Professor