

February 27, 2017

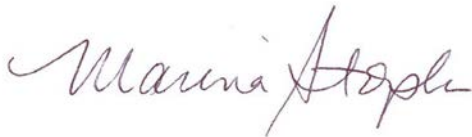
Cheryl Williams, MS, RDN, LDN, CDE
Accreditation Council for Education in Nutrition and Dietetics
120 South Riverside Plaza, Suite 2000
Chicago, IL 60606

Dear Ms. Williams:

Please find attached the Self-Study Report (SSR) Template, Dietetic Internship Program, ACEND 2012 Accreditation Standards and supporting Appendices for the Lehman College, Department of Health Sciences, Dietetics Internship. Each PDF includes bookmarks and navigation links for the Table of Contents.

If there is any further information we can provide in support of this self-study please do not hesitate to contact me.

Sincerely,



Marina Stopler, MS, RD, IBCLC
Program Director, Dietetic Internship Program



William Latimer, Ph.D., MPH
Dean, School of Health Sciences, Human Services and Nursing



Harriet Fayne, Ph.D.
Interim Provost and Senior VP for Academic Affairs,

Self-Study Report (SSR) Template Dietetic Internship Programs ACEND 2012 Accreditation Standards

IP Self-Study Report Template for Program Directors

Version 1.04

Revised March 24, 2015

Refer to the 2012 ACEND Standards document when completing the self-study report template.

The 2012 Standards document is available on the ACEND Program Director Portal under Library: Standards and Policies and it provides the following:

- Standards and guidelines
- Tips and comments to achieve the standard
- Suggested discussion to complete the narrative
- Exhibits to demonstrate achievement of the standard
- Other important accreditation information such as Accreditation Decision and Glossary of Terms

List of Revisions

General revisions made throughout the document:

- New terminology: next assessment period (Previous terminology: next five year period)
- Simplified directions for writing the narrative for all standards.
- Clarified use of templates provided in the appendices

Summary of Changes by Standard:

Appendices:	Added list of suggested appendices (page 5)
Program Summary:	Reformatted the Goals and Objectives (page 7)
Supervised Practice Matrix:	Revised Supervised Practice Hours matrix to reflect the minimum number of hours only (Removed "maximum" hours) (page 10)
Standard 1:	Sample budget template (page 45)
Standard 7:	Program Assessment Plan template – added examples to guide ACEND's expectation for reporting data (page 47)
Standard 8:	Revised guidelines 8.1 through 8.4 to clarify and consolidate the narrative section of the report for (page 23)
Standard 13:	Student Learning Outcomes Assessment Plan template with examples specific to the program type (page 49)
Standard 14:	Updated the guidelines 14.1.a thru 14.1.d to reflect the "must" versus "should" and to clarify and consolidate the narrative section of the report (page 31)
Standard 20:	Updated guidelines 20.1.b, 20.1.c and 20.1.d to reflect the "must" versus "should" (page 39)
Standard 22:	Updated Guideline 22.1.i. (page 41)

Herbert H. Lehman College, CUNY

Dietetic Internship Using the IP Standards

Self-Study Report (SSR) for New Program Application - Accreditation Standards (4-23)

for

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

February 27, 2017

Application for Accreditation Cover Pages -- ACEND 2012 Accreditation Standards
Dietetic internship

Report being submitted (check one):

<input type="checkbox"/>	Eligibility Application –Standards (1-3)	<input checked="" type="checkbox"/>	Self-Study Report for Continued Accreditation	<input type="checkbox"/>	Other _____
<input type="checkbox"/>	Self-Study Report for New Program Application –Standards (1-23)	<input type="checkbox"/>	Program Assessment Report for Continued Accreditation		

Date: February 27, 2017

Program name: Lehman College Dietetic Internship Program

Sponsoring institution: Herbert H. Lehman College of the City University of New York

City: Bronx **State:** NY

Substantive program changes included in report: No | Yes **List change:** _____

Concentration Areas — (list all using additional sheets if necessary):

Concentration Area name: _____

Concentration Area name: _____

Degree granted — (check all that apply):

Master's Required Master's Optional Some Graduate Credit Certificate Program

Distance Education — (check all that apply):

Coursework Supervised practice rotations

Other Program Options — (check all that apply):

Pre-Select Non-Degree ISPP Other: _____

Program Length (Years/Months) 12 months

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.

Dietetic Internship Using the IP Accreditation Standards					
	Degree		Non-Degree		Interns enrolled in Individualized Supervised Practice Pathway (ISPP)
	Full-time	Part-time	Full-time	Part-time	
Maximum enrollment			14		
Current enrollment			14		

Program Director:


<u>Marina Stopler, MS, RD, IBCLC</u>	
Name	Business Address:
<u>Dietetic Internship Director, Lecturer</u>	<u>Lehman College, CUNY</u>
Title	<u>Department of Health Sciences</u>
<u>806000</u>	<u>250 Bedford Park Blvd. West</u>
CDR Registration Number:	<u>Bronx, NY 10468</u>

Marina Stopler

Signature		E-mail Address: marina.stopler@lehman.cuny.edu
718-960-6713	718-960-8908	http://www.lehman.edu/dietetic-internship-program/index.php
Telephone	Fax Number	Website Address

The program is aware of and agrees to abide by the accreditation standards and policies and procedures established and published for accreditation by the Accreditation Council for Education in Nutrition and Dietetics.

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


William Latimer, PhD, MPH		Lehman College, CUNY
Name		
Dean		Schuster 302A
Health Sciences, Human Services and Nursing		
Title		
718-960-7306	william.latimer@lehman.cuny.edu	250 Bedford Park Blvd. West
Telephone	E-mail	
		Bronx, NY 10468
Signature		<i>Business Address</i>

Name		Business Address
Title		
Telephone	E-mail	
Signature		

Name		Business Address
Title		
Telephone	E-mail	
Signature		

Chief Executive Officer:**

Dr. Harriet Fayne		Lehman College, CUNY
Name		

Interim Provost and Senior VP for Academic Affairs		Schuster 381
Title		
718-960-8222	harriet.fayne@lehman.cuny.edu	250 Bedford Park Blvd. West
Telephone	E-mail	
		Bronx, NY 10468
Signature		<i>Business Address</i>

**This form must be submitted with the application packet documenting compliance with ACEND's 2012 Accreditation Standards.
 **The Accreditation Council for Education in Nutrition and Dietetics will not process an application without the signature of the sponsoring institution's CEO or designated officer.*

If you used a consultant to prepare your report (paid or unpaid), please describe the nature of the services provided and include the name and contact information of the consultant. Indicate "N/A" if not applicable:

Not applicable

Consultant Name		Business Address	
Title			
Telephone	E-mail		

**Self-Study Report on the ACEND 2012 Accreditation Standards
Lehman College Dietetic Internship Program**

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APPENDICES

List of recommended supporting documents that programs include in the self-study report appendices for each 2012 standard.

Standard 1:

- Copy of most recent regional accreditation letter (Standard 1.1)
- Organizational Chart(s) that includes program location to highest organization level (Standard 1.2)
- Program Budget (Guideline 1.3)
- Copy of catalog information or website listing course requirements and prerequisite (Guideline 1.5)
- Program Director's Curriculum Vitae and copy of CDR registration card (Guideline 1.7)

Standard 6 and 8:

- Pass Rate Improvement Plan

Standard 7:

- Program Assessment Plan
- Samples of Surveys sent to stakeholders for data collection

Standard 10:

- Curriculum Mapping Matrix include Concentration Competencies
- Summary of facilities used for supervised practice by setting or practice area.

Standard 10 and 11:

- Rotation Schedule for the Maximum Number of Students
- Course Syllabi (at least three that show curriculum progression and content areas)
- Course Description from the catalog
- Learning activity summary of diseases, populations and diverse cultures, encountered in the program and use of NCP process

Standard 13:

- Student Learning Outcomes Assessment Plan include Concentration Competencies
- Summary of aggregate data supporting data included in the Student Learning Outcomes Assessment Plan
- Examples of assessment tools and rubrics including sample rotation evaluation forms

Standard 15:

- Program Director Position Description with allotted time for program management

Standard 16:

- List of preceptors with credentials aligned with supervised practice facility and rotation
- Summary of student feedback and preceptor evaluations faculty involved in the program
- Sample orientation outline – ongoing training agenda

Standard 17:

- Summary of professional achievements of faculty and preceptors

Standard 19:

- Sample Affiliation Agreements
- Copy of policy and procedure for selecting and maintaining supervised practice facilities

Standard 22:

- Copy of Website pages, catalog, brochures and program information to the public

Standard 23:

- Copy of Student Handbook

Program Summary Information

Directions: The summary information on the following pages is used by the review team and the ACEND board for conducting your program's review. This information must be consistent with the detailed information in the self-study report, so be as accurate as possible. Please note that ACEND reserves the right to request additional information while conducting its review of the program.

Program Name:	Lehman College Dietetic Internship Program
Sponsoring Organization:	Herbert H. Lehman College of the City University of New York
Sponsor's Accreditor or Recognition Body	

Executive Summary of the Program

Briefly describe the program, its history, environment and its characteristics, including a description of the educational philosophy or primary methods used to teach the curriculum (problem based, blocks, lecture-discussion, etc.) and a summary of the program's strengths, challenges and weaknesses

The Dietetic Internship Program in the Department of Health Sciences at Lehman College of the City University of New York is part of the MS in Nutrition program. The DI Program's requirements include a bachelor's degree and completion of a Didactic Program in Dietetics as verified by a signed DPD Verification Statement. The Program requires 12 credits of co-requisite graduate courses, nine credits of the weekly DI seminar, and 9 credits of supervised practice over three semesters. The program has a Medical Nutrition Therapy concentration. The Program participates in the spring DI computer match and admits up to 14 interns per year to start at the end of August and finish in approximately 12 months. Completion of the MS in Nutrition program is not required for the DI Verification statement.

The Program has been planned to allow interns who are employed to complete the Dietetic Internship on a part-time basis. The Lehman College DI Program is designed to be completed in 12 months, over three semesters, with not less than 30 hours per week spent in supervised practice. The program is designed to prepare interns to pass the registration examination and work as RDN in a variety of health care, community, public health, and food service settings.

The program offers instruction in both traditional face-to-face classes and we offer co-requisite graduate courses as hybrid in fully online formats. Interns take online exams during the course of the year to help them assimilate to online testing-the RD exam is a computer based testing exam.

Dietary-influenced chronic disease are increasingly seen in those who are compromised economically. Lehman College, situated in the Bronx, is uniquely placed to assist in educating interns to develop approaches to support the community to move towards dietary change to optimize health and prevent and treat disease. In addition, the program strives to instill in our interns the desire for life-long learning and advanced education in nutrition and related fields.

Lehman's DI serves the Bronx and the greater New York City metropolitan area by providing the opportunity for interns from diverse cultural and ethnic groups to obtain the knowledge and competencies needed to help the members of the New York City community to improve their health and nutritional status.

In two or three sentences per bullet, summarize any changes in the areas below that have occurred in your program or sponsoring organization over the last five years and their impact on the program:

- **Changes in Administrative Support:** The changes in administration in the past 5 years include a new Chair for the Department of Health Sciences, Dr. Gul Sonmez, a new Dean in the recently formed School of Health Sciences, Human Services, and Nursing, Dr. William Latimer, a new Provost, Dr. Harriet Fayne, and a new College President, Dr. José Cruz. The DI, as well as the DPD, are the only accredited programs in the Department of Health Sciences. The administrators have been very supportive in all areas of the DI including research initiatives.
- **Changes in Financial Support:** The Dietetic Internship continues to collect \$50 per application during the spring match. This helps support programs to benefit the interns such as RD exam study guides and field trips as well as continuing education for the DI Director.
- **Curricular Changes:** The DI curriculum has remained unchanged in the past five years.

- Program Changes (e.g. new tracks, degrees, etc.): There have been no program changes between 2010 and 2016. (Going forward there will be a full-time track with the option of allowing students who need employment to work up to 15 hours per week; See Guideline 1.5, page 22)
- Changes in Learning Resources: Lehman College and CUNY continue to enrich and provide support for instructors to participate in distance learning. For the graduate co-requisite courses taken during the DI, instructors can now post syllabi, assignments, quizzes, tests, discussion boards, class notes, PowerPoint slides and videos. To improve the pass-rate for the RD exam, interns now have access to a department computer which contains software to reinforce practice testing of the four RD exam domains.
- Faculty/Preceptor Changes: Marina Stopler became DI Director in the fall of 2014. Three faculty members, Prof. Ilse DeVeer, Prof. Judith Porcari, and Dr. Katherine Burt, have joined the program to teach the co-requisite graduate courses including Clinical Nutrition, Concepts and Methods of Dietetics Practice, and Public Health and Community Nutrition, respectively. Dr. Burt is also a research preceptor. New Affiliation Agreements have been signed by facilities to help meet DI competencies in the areas of MNT (e.g. The Rogosin, NYP in Queens), community HIV (e.g. Montefiore-Mt. Vernon in Westchester), food service (e.g. Boulevard ALP in Queens) and research (e.g. Dr. Burt).
- Changes to Facilities: The new foods laboratory commissioned in 2012 for DFN majors is also used by the interns to conduct food or culinary-related research projects.
- Changes in Support Services: No changes in support services.

You may include any other relevant comments (optional). None.

Summary of the Self-Study Process

Explain how the self-study process took place, briefly describing who was involved (administrators, faculty, preceptors, students, graduates, employers, practitioners, other program directors, faculty/staff from other disciplines, etc.) and what they did.

This self-study is submitted as a partial fulfillment of the requirements for the application for continued accreditation for the DI at Lehman College.

During the execution of this self-study, the DI and DPD faculty were able to discuss and assess our current status, and continue our plans for program improvement. The process required a review of the didactic and supervised practice components with respect to the competencies based on the 2012 ACEND Standards, with an in-depth consideration of the program's strengths and weaknesses, and our work towards continued program improvement with the goal to improve first-time pass rate on the registration examination

To prepare for the current self-study, DI Director, Marina Stopler, MS, RD, IBCLC, attended a 2012 ACEND Accreditation Standards Workshop to better understand the accreditation process. The DI Director met with DI and DPD faculty, interns, and preceptors. Employers of graduated interns provided feedback. Syllabi for MNT, Food Service, Community and Counseling were collected and reviewed. Program faculty amended course syllabi to comply with the updated codes. The program faculty was asked to participate in discussions and submit Ongoing Assessment/Learning Outcome grades. Office managers collected survey data from graduated interns over the past five to six years who completed alumni, one-year exit, and one-year self-assessment surveys. An employer survey was conducted. Full-time faculty took part in providing feedback for the document. Current interns will participate in meetings with site visitors during the scheduled site visit.

The Lehman Budget Director and Chair of the Department of Health Sciences helped with budget data. Administrators such as the Dean, Associate Dean, Provost, and Chief of Staff to the Provost read the document, helped edit, and recommended style and formatting improvements.

Current Program Mission, Goals and Objectives (Standards 4, 5 and 6)

Mission of The Dietetic Internship: There is an increasing awareness that the diets people consume contribute to the quality of their lives. In addition, studies have shown that people's susceptibility to chronic disease is influenced by their diet.

As stated on our website, <http://www.lehman.edu/dietetic-internship-program/index.php>, "the mission of the dietetic internship at Lehman College is to provide interns with a comprehensive learning experience through which they can acquire the competencies, knowledge, skills, and hands-on training required to prepare interns for the dietetic profession, with an emphasis on medical nutrition therapy. Lehman College interns are ethnical and culturally diverse and the program welcomes all applicants with the appropriate qualifications."

The DI Program's mission statement is congruent with Lehman's mission in that the DI Program provides "experiential learning opportunities" with "numerous partnerships with schools, hospitals, social service and governmental agencies, small businesses, major corporations, and cultural and scientific institutions" whose interns will contribute to the economic development of the region. As Lehman is "committed to preparing students for graduate studies, professional careers, and lifelong learning," the internship opportunities in the DI "foster the engaged citizenship and commitment to public service embodied in its namesake, Herbert H. Lehman."

The DI's mission statement is congruent with the Department's mission by providing the opportunity for interns to obtain an education, and the competencies necessary to contribute to the community, as well as become credentialed in the dietetic profession. The program encourages career advancement by mandating graduate study as part of the DI curriculum and by providing the keys to life-long learning.

The program's mission is consistent with the preparation of registered dietitians according to the 2012 Standards of Professional Performance. The Standards for Professional Performance for Registered Dietitian Nutritionists include the following: quality in practice, competency and accountability, provisions of services, application of research, communication and application of knowledge, utilization and management of resources. Lehman's DI has as its mission to train interns to provide needed nutrition care, apply knowledge and research findings to practice, communicate to others based on knowledge gained through the didactic and experiential opportunities, utilize and manage resources, maintain quality in practice through the use of critical thinking, and to be competent nutrition care providers who are responsible for their patients, colleagues, and to the profession. The program is designed to prepare interns to pass the registration examination and work as RDN in a variety of health care, community, public health, and food service settings. In addition, the program strives to instill in our interns the desire for life-long learning and advanced education in nutrition and related fields.

Directions for Writing the Narrative:

Program Goals: State your current program goals.

Note: These the goals should be consistent with those stated in the in the program assessment plan for the next assessment period.

Upon completion of the DI, graduates will be able to demonstrate the knowledge, skills, and competencies acquired during the DI, based on the Competencies/Learning Outcomes specified by the Accreditation Council for Education in Nutrition and Dietetics (ACEND) for Dietetic Internship programs, with particular emphasis on Medical Nutrition Therapy by succeeding in the following program goals and objectives:

The Lehman DI has 2 goals:

Goal 1: For interns to find employment as an ethical and culturally sensitive entry-level Registered Dietitian.

Goal 2: To be successful in either a graduate program in nutrition and foods or in another health-related field.

The objectives, over a 5-year period, to support the goals are:

1. Program Completion: 80% of the intern class will complete the DI within 18 months.

2. Pass Rate of First-time Test Takers of the Registration Examination: 80% of DI graduates will pass the Registration Examination on the first attempt.
3. Graduate Employment: 70% or more of DI graduates who seek employment in dietetics are employed within six months of program completion, with the following additional objectives for employer satisfaction:
 - a. 75% of employers will rate DI graduates as performing well.
 - b. 75% of employers will rate DI graduates as ethical and culturally sensitive.
4. Enrollment in a Graduate Program: 70% of enrolled interns will enroll in a graduate program in nutrition and foods or another health-related field.

These goals and objectives are consistent with the mission of the Lehman DI to enable its interns to pass the registration examination (RD exam), find employment as entry-level dietitians in a culturally diverse urban or suburban population, and to pursue advanced nutrition education. The DI Director and faculty at Lehman are committed to meeting the needs of the Bronx and its surrounding areas by preparing the interns to gain knowledge, cultural competence, and a desire to help individuals and communities to change behaviors that support health and prevent disease.

Pass Rate Monitoring and Improvement Plan (Standard 6 and 8)

All programs must comprehensively determine factors influencing their pass rates and take steps to improve student performance using the findings.

- 1 Use the CDR Registration Examination Reports titled *ACEND - Summary of Candidate Testing* to complete the non-grey cells in the following table for the last five years or more. Then, select the entire table, and press the F9 key to automatically calculate the Pass Rate Percentages and column totals in grey.

List years sequentially from least recent to most recent (e.g., 2006, 2007...2010)	(A) # of Students Taking the Exam for the First Time	Students Passing the CDR Exam		Pass Rate Percentages	
		(B) # of Students Passing on Their First Try	(C) # of Students Passing within One Year of Their First Try (if available)	(B/A) First-Time Pass Rate	(C/A) One-Year Pass Rate (if available)
Optional: Previous Five Years 2004– 2009	59	34	0	57.63%	0.0%
Least Recent 2011	16	12	14	75%	87.5%
2012	8	5	5	62.5%	62.5%
2013	6	5	6	83.33%	100%
2014	25	21	25	84%	100%
Most Recent 2015 ¹	11	9	9	81.82%	81.82%
Current Five Years 2011 - 2015 ¹	66	52	59	78.79%	89.39%

1A: Based on latest Pearson VUE report Summary dated 2/4/2017

List years sequentially from least recent to most recent (e.g., 2006, 2007...2010)	(A) # of Students Taking the Exam for the First Time	Students Passing the CDR Exam		Pass Rate Percentages	
		(B) # of Students Passing on Their First Try	(C) # of Students Passing within One Year of Their First Try (if available)	(B/A) First-Time Pass Rate	(C/A) One-Year Pass Rate (if available)
Optional: Previous Five Years 2004– 2009	0	0	0	!Zero Divide%	!Zero Divide%
Least Recent 2012	8	5	5	62.5%	62.5%
2013	6	5	6	83.33%	100%
2014	25	21	25	84%	100%
2015	11	9	9	81.82%	81.82%
Most Recent 2016	17	16	16	94.12%	94.12%
Current Five Years 2012 - 2016	67	56	61	83.58%	91.04%

- 2 Describe the trend(s) in your program’s benchmarks over the last five years by placing an “X” in the appropriate boxes.

Annual Benchmarks	Constant	Declining	Increasing	Inconsistent	Missing Data
First Time Pass Rate			X		
One Year Pass Rate				X	

- 3 For each of the areas listed below, describe in detail the factors that either positively or negatively influence your program’s pass rate. For each factor, list the specific action steps that will be taken to improve the pass rate. For each step, include a timeline of implementation and steps taken to date. If data are available for some of the action steps, please list the resulting data. You are encouraged to include progress/results from your previous pass rate improvement plans. Provide a narrative to

address the areas below, and include in the appendices the completed Pass Rate Improvement Plan matrix. *Refer to Appendix for the template.*

Admission Requirements:

A 3.0 GPA is a minimum standard to apply for the Lehman DI. Applicants who have less than a 3.0 GPA are not ranked.

The GRE is not a requirement. These requirements are considered adequate to ensure the pass rate and will not be changed.

Program Curriculum:

Once accepted into the DI, each intern must complete four-co-requisite graduate courses:

- HEA 620: Health Counseling, 3 credits (DFN 630 – Nutrition Counseling acceptable alternative).
- DFN 641: Community and Public Health Nutrition, 3 credits
- DFN 651: Medical Nutrition Therapy, 3 credits
- DFN 661 Food Service Management, 3 credits

Students take 3 semesters of DFN 731: Concepts and Methods of Dietetic Practice, total 9 credits

Interns need to complete 1200 hours of Supervised Pre-Professional Practice, DFN 730 (3 semesters, total 9 credits) while on four main rotations:

- MNT (Clinical): minimum of 470 hours
- Food Service Management: 300 hours
- Research: 150 hours; interns are CITI certified before starting the rotation
- Community: minimum of 280 hours
 - Public Health: 100 hours
 - HIV/AIDS: 100 hours
 - WIC: 60 hours
 - Public School: 20 hours

Completion of the Nutrition Master's Program is not required for the completion of the DI.

In addition to the above, interns complete their ServSafe certification and CITI (Collaborative Institutional Training Initiation) Certification. Students are aware of the commitment of the program. DI Director and other faculty keep in touch both formally and informally from the time they begin the DI. All interns have an orientation prior to the start of the DI.

After the 2010 self-study, some changes were made to the curriculum that seem to have positively affected our program. In the Fall of 2010 the DFN 731 seminar was increased from a two-credit course of 30 hours per semester for three semesters (for a total of 90 hours), to a three-credit course of 45 hours per semester for three semesters (for a total of 135 hours). A variety of instructional modalities were implemented to help interns gain the knowledge and skills that are needed to become competent entry-level practitioners and to pass the RD examination on the first attempt. In the 2010 self-study, the first-time pass rate was 58%, significantly below the benchmark. Since 2013, we see a significant improvement in the first-time pass rate, all over 80%, with an average five-year first-time pass rate of 78.79%, 20 percentage points higher from the previous self-study.

In the most recent report, the 2016 first-time pass rate was 94% (100% between July 1 and Dec. 31, 2016). Changes in the curriculum have benefitted the program with the most significant results in 2016.

Teaching & Learning Methods:

Interns are taught by professors in HEA 620, DFN 641, DFN 651, and DFN 661 face-2-face (f2f), hybrid, or via online teaching methods on a weekly basis. Interns complete cases studies, write papers, give presentations, practice counseling skills, take exams, and practice skills necessary to become competent entry-level dietitians and pass the RD examination.

After the 2010 self-study, a computerized, timed, multiple choice, end-of-the semester examination was implemented in which the interns were required to take and receive a grade of 80% or better. Those who did earn the 80% needed to repeat the examination until they passed. If they were unsuccessful after two tries, their status in the program would be reviewed with the possibility of termination from the program. When the former DI Director, Sue Tree, left the program, computerized testing continued in the seminar for all three semesters. However, the expectation was that if the intern did not pass with an 80% or greater, intern and professor(s), would review the exam and discuss strengths, weaknesses, and focus on improvement. The rationale to have interns take these exams to become more accustomed to taking high-stake tests prior to the registration examination has been a positive influence overall.

Another policy that was instituted after the 2010 self-study was the DI Exit Exam. Before the DI Verification

Statement could be issued, interns take a computerized, timed, multiple choice final exit exam. A grade of 80% or greater is required. Please see Appendix F for instructions about the DI Exit Exam, which is provided to the student and is included in the DI Handbook. Taking the Exit Exam and receiving a grade of 80% or greater demonstrates that the intern can also demonstrate success under the similar conditions of the registration examination.

Since the summer of 2015, the utilization of RD examination preparation software on a departmental laptop has been incorporated as a teaching method for additional practice on computerized-based-testing.

The computerized testing in three semesters of seminar, the Exit Exam, and the RD Examination software all provide opportunities for graduating interns to become more accustomed to taking high-stakes, multiple choice, computerized questions prior to taking the actual registration examination.

As of 2015, for seminar (DFN 731) a series of guest speakers -- RDs and experts in specific areas of the field -- speak to the interns about "Career Paths." This provides a venue to learn about careers, to motivate the interns, and to network. Field trips were also added in the spring of 2015 to enhance learning opportunities.

With a visible improvement in first-time pass rate, these changes in teaching methods have positively improved the first-time pass rate.

Faculty and Preceptors:

The DI program faculty and preceptors provide a wide variety of professional experiences and credentials to help meet the learning activities required in the curriculum.

Faculty members consist of full-time or adjunct professors. Professors hold a minimum of a Master's Degree. All the professors with the exception of one are Registered Dietitians. Professor Marina Stopler, MS, RD, CDN, IBCLC is the DI Director and coordinates the supervised practice (DFN 730). Her CV and CDR can be found in Appendix E. Adjunct Professor Ilse DeVeer, MS, RD, has been teaching Clinical Nutrition (DFN 651) for the past two years. Professor Katherine Burt, PhD, RD has been teaching Community and Public Health (DFN 641) since 2015. Adjunct Lecturer, Judith Porcari, MS, RD teaches the DI seminar, Concepts and Methods in Dietetics (DFN 731). She has been with Lehman since the fall of 2014. She has extensive clinical experience with her 30 years at North Shore Hospital on Long island.

Professor Craig Demmer, PhD, EdD, CHES, full-time tenured professor in the Department and teaches Health Counseling (HEA 620). Adjunct Professor Martine Scannavino, DHSc, RD, LDN, FAND, teaches the online course Food Service Management (DFN 661) and Professor Andrea Boyar, PhD, RD, CDN is the DPD Director and was a former DI Director. She assists the DI Director with administrative leadership in the DI.

The faculty are well qualified to teach the didactic courses. In 2014 Prof. Ilse DeVeer, MS, RD replaced Alice Tobias, EdD, RD who retired after several decades at Lehman College. Dr. Katherine Burt, PhD, RD replaced Adjunct Instructor Maggie Meehan, MA, MPH, RD, CDN.

Intern course work includes case studies, presentation, projects and papers which are graded and used to assess learning outcomes. Faculty members are also evaluated by the interns which help determine if the needs and learning outcomes are being met from the interns' perspective.

Preceptors are administrative dietitians, chief dietitians, clinical managers, directors/managers of nutrition services, entrepreneurs/self-employed dietitians, food service directors, nutritionists, nutrition educators, outpatient dietitians, senior nutritionists, and WIC directors/coordinators, and full-time faculty at Lehman College. Preceptors complete evaluation forms which help the DI program assess learning outcomes and to see if any changes need to be made in the DI program.

In the Pass Rate Monitoring Improvement Plan in 2014, the DI Director indicated that preceptors who were highly rated (4 or 5 on the evaluation form) in areas of preceptor expertise, feedback, instruction, guidance, and experience would be the preferred preceptors. Maintaining strong affiliations with preceptors and facilities that are rated "above average" or "excellent" positively affect our program.

Preceptors who are rated strongly by our interns positively affect the program. Effort has been made the since fall 2015 to increase the number of Affiliation Agreements. Additional preceptors allow for greater flexibility in rotation schedules, help

better meet the needs of the interns, and provide a buffer when a long-standing and well-regarded preceptor leaves or retires from a post.

Site visits were re-implemented in 2014 for the DI Director to meet preceptors at their place of employment and tour the facility. This has a positive impact on our program.

The first-time pass rate has been steady since 2013, with the highest first-time pass rate, 84%, in 2014. In 2013 and 2014 we had 100% one-year pass rates which had never been achieved in prior years. It is unclear what the main reason has been for this improvement, but faculty and preceptors have been positive influences in our program. More notably this can be seen in the 2016 first-time pass rate of 94%. Please refer to Appendix F,

Academic Counseling:

All interns meet with the DI Director formally and informally on a regular basis. The DI Director has an open-door policy for interns to discuss matters that relate to the DI program. Other than visiting the DI Director at Lehman, the interns can email, call, or text when needed.

The DI Director keeps in regular contact, formally and informally, with graduate faculty. If there are any concerns or “red flags” with intern’s academic and/or performance abilities, appropriate action is taken to provide academic counseling and assistance.

On occasion, interns may need services outside of the scope of the DI Director and faculty. If there is such a need, interns are referred to The Counseling Center. “The Counseling Center at Lehman College is a safe place for students to talk about any concerns they may have. The Lehman College Counseling Center works towards creating inclusive spaces and fostering open dialogue with students, faculty and staff by providing Counseling, Consultation and Psycho-Educational services. [Their] goal is to ensure that all Lehman students persist toward graduation in order to achieve academic success and personal well-being for themselves, their families and communities.

Lehman College Counseling Center offers free and confidential Therapy and Coaching which is provided in a safe environment where students can address issues that may be keeping them from attaining their academic goals. All students are treated with respect and are seen as individuals with unique strengths.” <http://www.lehman.edu/counseling-center/index.php>

These services positively affect our program.

Student Support Services:

If interns need assistance to improve grades or understand course material. Lehman College has instructional support services.

“Lehman College’s Instructional Support Services Program (ISSP) is home of the Academic Center for Excellence (ACE) and Science Learning Center (SLC). The ISSP provides Lehman students with the opportunity to achieve academic success through the guidance and encouragement of peer tutors and professional staff members. We invite students and faculty to utilize the services offered through the ISSP, which include workshops and tutoring for undergraduate and graduate students seeking to improve their skills in writing and content knowledge in specific courses. At the ISSP, all of our tutors have received grades of A or A- in the classes they tutor and most are certified by the College Reading and Learning Association (CRLA).”

<http://www.lehman.edu/academics/instructional-support-services/index.php>

Educational Resources:

Interns are expected to acquire a user name and password in order to access the Blackboard course management system through the CUNY portal (<http://www.cuny.edu>). Each co-requisite graduate course and seminar, and supervised practice courses include resources that will be useful to the intern during the DI.

Textbooks that have been recommended in the past include:

1. Escott-Stump, S. (2011). Nutrition and Diagnosis-Related Care. (7th Ed.). Lippincott, Williams & Wilkins: Philadelphia, PA
2. Pronsky, Z.M. (2012). Food & Medication Interactions. (17th Ed.).
3. Nelms, N.M., Long, S. & Lacey, K. (2013). Medical Nutrition Therapy: A Case Study Approach. (4th Ed.) Thomson Wadsworth: Belmont, CA
4. International Dietetics & Nutrition Terminology (IDNT) Reference Handbook. (Latest Ed.). Academy of Nutrition & Dietetics, Chicago, IL

The following are optional, but useful.

5. Stedman's Medical Dictionary for the Health Professions & Nursing. (7th Ed.). Lippincott, Williams & Wilkins: Philadelphia, PA
6. Basic Carbohydrate Counting. Chicago: Academy of Nutrition & Dietetics.
7. Choose Your Foods: Exchange Lists for Diabetes. Chicago: Academy of Nutrition & Dietetics.
8. A Healthy Food Guide to Kidney Disease, Chicago: Academy of Nutrition & Dietetics.
9. National Renal Diet, Chicago: Academy of Nutrition & Dietetics.
10. Additional textbooks from MNT, Food Service and Community classes are optional, but very useful.

The Lehman College Library, known as the Leonard Lief Library, provides many educational resources for the interns. <http://www.lehman.edu/library/>. Resources databases, e-journals, research guides, digital collections and services such as interlibrary loan, information literacy and tutorials are available.

Periodic review of new textbooks and other learning material are discussed informally among the DI Director and faculty prior to adoption.

Some preceptors provide educational material (readings, PowerPoint demonstrations) or modules for interns to complete before or during a rotation to enhance their learning and prepare them for the rotation.

Program Assessment Process:

The program mission, goals, and objectives of the 2016-2017 Self-Study were implemented from the 2010 Self-Study. Graduate records, six-month surveys, exit surveys, and 5-year graduate surveys, faculty evaluation forms, preceptor evaluation forms, and pass rate monitoring data provide important information to review the program, assess strengths and weakness, and make appropriate changes.

There has been continuous improvement in the first-time pass rate (above 80% in 2013, 2014, 2015, and the most recent 2016 report was 94%). The one-year pass-rate has been above 80% in 2013, 2014, 2015 and 2016 with a range between 81.82% and 100%. In 2012 the one-year pass-rate was 62.5%; the outcome of Lehman interns has improved much since then. Lehman DI fell below the 80% benchmark in the 5-year average first-time pass rate (78.79%) between 2011 and 2015. But, for the first time in 10 years, the Lehman DI met the 80% benchmark between 2012 and 2016. The most recent first-time pass rate of 94% was integral in meeting this very important assessment criteria for the Lehman DI.

It is worthy to note that only 8 interns took the registration examination in 2012 considering that 13 interns completed the program that year. Even fewer took the registration examination in 2013 (6 interns out of the 14 who completed the program). In 2014, 25 interns took the registration examination, with the majority passing. It is unclear why many interns from 2012 and 2013 waited until 2014 to take the RD exam. In the 2010 Self-Study, the previous DI Director indicated that the low pass rate was potentially due to (1) English not being the native language of many of the interns who have trouble navigating the language and the logic of the multiple-choice questions of the examination, (2) interns who are parents, employed, and taking graduate courses at the same time they are enrolled in the DI, and (3) interns might need additional didactic opportunities to learn and apply the material that is expected to be mastered by entry-level dietitians. A combination of these three factors may have delayed the graduated interns from 2012 and 2013 taking the registration examination; they may have chosen to wait the one to two years to gain practical work experience and take practice exams on their own to gain confidence needed to take the exam.

Lehman continues to educate interns from diverse backgrounds, representative of our multi-cultural city, many of whom speak more than one language or where English may not be their native language.

Overall, changes to the curriculum, ongoing reviews, surveys, evaluation forms, and pass-rate monitoring are an important part of the program assessment process and will continue to be utilized. Outcome measures are available in Appendix F.

Other Factors: None.

If you have more than one CDR RD exam pass rate code, make sure to comment on pass rates for different tracks.

Lehman College does not have more than one CDR RD pass rate code.

4. Describe any processes used for screening students who are applying to your program to assure that they have the knowledge, skills and values to successfully complete it and how you know whether they are effective. (e.g., GPA, GRE Scores, essays, interviews, letters of recommendation, work experience, etc.)

The Lehman College Dietetic Internship Program uses the spring match (mid-February) using the Dietetic Internship Centralized Application System (DICAS) and D and D Digital application system. Annually, in February, graduate faculty take part in reviewing applicants as part of the DI Applicant review committee. Committee members include, DI Director Marina Stopler, MS, RD, CDN, IBCLC, Andrea Boyar, PhD, RD, CDN, Katherine Burt, PhD, RD, Lalitha Samuel, PhD, RD, the Graduate Advisor for the MS Nutrition program, Mary-Ellen Dorfman, MS, RD, adjunct lecturer for the undergraduate clinical nutrition courses in DFN, and Mary Opfer, MS, RDA, CDN, adjunct lecturer and culinary nutritionist for undergraduate DFN majors. As the Lehman DI has a Medical Nutrition Therapy concentration, the process is designed to find students who meet the academic standards to become future clinical nutritionists. The DI Application Review Committee meets once per week from the third week in February to the last week in March.

Information for prospective interns can be found on the Lehman DI website: <http://www.lehman.edu/dietetic-internship-program/prospective-interns.php>

A 3.0 GPA is a minimum standard to apply for the Lehman DI. Applicants who have less than a 3.0 GPA are not ranked.

Applicants who are ranked need a strong DPD Science and DPD Professional GPA. Course grades in organic chemistry, biochemistry, anatomy and physiology, and medical nutrition therapy I and II are viewed to assess strength in the sciences and evaluations from their professors, especially from professors who can assess the student's clinical strength are reviewed. In the personal statement, we search for students who can express themselves in writing, and explain why Lehman would be a good match for them. We look for students who stand out in some way in terms of personal experiences, level of maturity, and work ethic. This is where work, fieldwork, and volunteer experiences are reviewed. We look for applicants who can work independently and have leadership skills.

Students who have a Master's Degree in Nutrition are looked upon favorably (provided they have strong academic grades). Speaking a second language (e.g. Spanish, French, Russian, Urdu) is also looked upon favorably, but is not an admission requirement. Lehman College is located in the Bronx, NY and the diversity of NYC provides an excellent backdrop for students to utilize their second language and connect with clients in different settings.

The GRE is not a requirement for the application.

Letters of recommendation are reviewed. The DI Application Committee then reviews the personal statement and letters of recommendation searching for applicants who have "outstanding" and "more than satisfactory" ratings.

In 2015, applicants who met the requirements deemed important by the DI Director and the DI Application Review Committee, were contacted by the DI Director and interviewed either in person or by telephone. The DI Director completes the final ranking of up to 45 applicants on D and D Digital.

In 2016, 131 students from all over the U.S. applied to the Lehman College Dietetic Internship Program. (In 2015, 114 applied and in 2014, approximately 93 applied). The increase in the number of applicants over the past two years has been a positive one as it has allowed us to be more selective in our screening process. The average GPA of the interns matched with the Lehman DI program in the last two years has been approximately 3.6. Please refer to Intern Data, Appendix P.

The DI application process is explained on our website: <http://www.lehman.edu/dietetic-internship-program/application-procedure.php>

5. Summarize the criteria and process used to identify students who are having difficulty in the program and what is done to improve their learning. (e.g., performance on assignments, evaluation by preceptors, etc.)

Interns are graded in their co-requisite graduate courses – DFN 651 (Clinical Nutrition), HEA 620 (Health Counseling), DFN 641 (Public Health/Community Nutrition), and DFN 661 (Food Service Management). The co-requisite graduate courses are usually taken in the above order.

Grades are also obtained in:

DFN 730 – Supervised Practice (3 semesters). Grades in the course reflect the grades provided by the preceptors via evaluation forms completed at the end of the rotation – MNT, Food Service Management, Community (Public Health, HIV/AIDS, WIC, and Public School), and Research.

DFN 731 – Concepts and Methods in Dietetics. Grades are based on assignments, case studies, presentations, and exams.

Any grade in any course that is less than a B (C range or lower) would be considered a red-flag and would require some attention for improvement over the course of the semester.

There is continuous feedback and open communication between the DI Director and faculty, between the DI Director and preceptors, and between the DI Director and interns. The DI Director emails, calls, or meets, formally or informally, with Lehman DI faculty and inquiries about the performance of the interns throughout the semester. The DI Director emails, calls, or meets, informally or formally, with preceptors to discuss each intern and his/her performance at the supervised site at some time during the mid-point of the rotation. In DFN 731, the DI Director has an open discussion with the interns and asks about their rotations. Interns can access the DI Director via phone, text, email, or on campus via the DI Director's open-door policy to discuss coursework, grades, and rotations.

Outcomes are improved when issues are caught early-on which is why it is important to follow-up with faculty and preceptors. In some cases, faculty and preceptors identify a problem and reach out to the DI Director, by phone or email.

Therefore, interns who are not performing up to standard are identified by faculty, preceptors, and the DI director.

If an intern is having difficulty in any one of the co-requisite graduate courses, the intern is expected to work with the professor to improve performance on assignments. Interns can be referred to tutors or given extra material or coursework to improve in areas of weakness.

If an intern is having difficulty at a supervised practice site, the intern is expected to work with the preceptor to improve his/her knowledge base and/or professional performance. Preceptors may provide interns with additional work or modules to help improve his/her knowledge base. In the majority of cases, guidance by the instructor or preceptor improves learning.

Many of our interns are not native speakers of English and have trouble with writing, oral expression, and online examinations. Some are not skillful in taking exams in high-pressure situations. Our interns are parents, employed, and taking graduate courses at the same time they are enrolled in the DI. This may create barriers to absorbing and retaining didactic material.

Interns may be referred to student support services such as the Academic Center for Excellence (ACE) and Science Learning Center (SLC), mentioned previously.

If personal issues arise during the dietetic internship, interns are referred to the Division of Student Affairs' Counseling Center or Student Health Services.

We are fortunate to have faculty and preceptors who are vested in having interns succeed during the dietetic internship.

6. Describe how students are advised when they are not meeting program expectations or options offered as a last resort?

In regards to coursework, if interns are challenged by taking co-requisite graduate courses along-side supervised practice, it is suggested that interns delay taking HEA 620 in the spring semester and wait until the following fall.

In regards to supervised practice, if an intern is underperforming, the intern may be pulled from the rotation site and repeat the rotation at another site. If a student's evaluation form reflects a grade lower than a B, the intern may need to repeat the rotation, repeat a portion of the rotation, or be provided additional work to improve the outcome. Also, if deemed necessary, interns are given extra time between rotations to depressurize.

As a final resort, interns will be asked to leave the program.

7. Describe your plans for improving your program's first-time pass rate or maintaining it if it is at 100%.

Since the 2010 Self-Study, the following policies were instituted:

The interns must pass a computerized, timed multiple-choice end-of-the-semester examination with a grade of 80% or better. Those who do not earn 80% must repeat the examination until they do. If they are unsuccessful after two tries, they may be asked to leave the program. The examination questions are taken from a pool of online questions; therefore, the examination can differ each time it is given. Interns taking these exams are forced to become more accustomed to high-stakes multiple choice computerized testing prior to taking the registration examination.

In 2014, the DI Program purchased software that was uploaded in the departmental laptop, giving interns greater opportunities to take practice registration examination questions, be provided with feedback, and given the ability to focus on any of the four domains to improve performance.

Part of DFN 731 (Seminar) during the summer semester is devoted to studying for the registration examination. Interns are encouraged to take advantage of other resources provided by The Academy, Jean Inman, or RD in a Flash, to help prepare them for the RD exam.

The Lehman DI has improved greatly since the 2010 Self-Study when it had a 58% first-time pass rate. We met the 80% first-time pass rate (2012-2016) with an 83.54% first-time pass rate. We plan to continue with the current measures that have been put in place and with the academically stronger pool of interns applying to Lehman, we plan to maintain a minimum 80% first-time pass rate.

Required Program Timeframes (Standards 1, 6 and 12)

Please provide the information requested in the section below. Spreadsheets are available to assist you in performing the calculations. If your program has multiple pathways (e.g. distance, graduate, ISPP) with different timeframes, submit a separate sheet for each pathway.

Program Pathway Name: Lehman College Dietetic Internship

Calculate the maximum program completion time in weeks or years 1 year x 1.5 = 1 year 6 months
 Normal Program Length Max. Program Completion

Directions: Submit the minimum number of supervised-practice hours that your program requires in each rotation. Then, select the row labeled Total Supervised Practice Hours, and press the F9 key to automatically calculate the totals for the table.

Rotation Area	Supervised practice hours <u>within</u> the U.S. and Territories (Minimum Hours)	Supervised practice hours <u>outside</u> the US and Territories (Minimum Hours)
Medical Nutrition Therapy	470	0
Food Service Management	300	0
Research	150	0
Community – Public Health	100	0
Community – HIV/AIDS	100	0
Community – WIC	60	0
Community – Public School	20	0
	0	0
	0	0
	0	0
Total Supervised Practice Hours (F9)	1200	0

Sum: Minimum hours within U.S. and territories + outside US and Territories 1200 + 0 = 1200

Rubric to Evaluate the Overall Organization and Clarity of the Self-Study Report

Please place an 'X' in the appropriate row and column to evaluate your program's completed self-study report.

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

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

Summary of the Evaluation of ACEND Accreditation Standards for U.S. Programs

After you have finished writing your self-study report, copy the evaluations at the end of the discussion of each standard to complete this summary table. (Place an X in the appropriate row and column.)

Accreditation Standards for U.S. Programs	Meets		Partially Meets	Does Not Meet	Not Applicable
	1	2			
Eligibility for ACEND Accreditation					
1. Program Characteristics and Finances	X				
2. Title IV Compliance for Free-Standing Programs					X
3. Consortia					X
Program Planning and Outcomes Assessment					
4. Program Mission	X				
5. Program Goals	X				
6. Program Objectives	X				
7. Program Assessment	X				
8. On-going Program Improvement	X				
Curriculum & Student Learning Objectives					
9. Program Concentrations	X				
10. Curricular Mapping	X				
11. Learning Activities	X				
12. Curriculum Length	X				
13. Learning Assessment	X	X			
14. On-going Curricular Improvement	X				
Program Staff and Resources					
15. Responsibilities of the Program Director	X				
16. Faculty and Preceptors	X				
17. Continuing Professional Development	X				
18. Program Resources	X				
19. Supervised-Practice Facilities	X				
Students					
20. Student Progression and Professionalism	X				
21. Student Complaints	X				
22. Information to Prospective Students and the Public	X				
23. Policies and Procedures	X				

KEY **Meets** 1. No compliance problems are present.

2. Compliance problems exist, but all are being resolved successfully.

Partially Meets Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet Plans to address compliance problems are not viable or have not been developed.

Program Eligibility for ACEND Accreditation

Standard 1: Program Characteristics & Finances

All programs applying for accreditation by ACEND must meet requirements not limited to quality-assurance or oversight by other agencies, organizational structure, financial stability, the awarding of degrees or certificates, program length, and program management.

Guideline 1.1

The program must be housed in a college or university, health care facility, federal or state agency, business or corporation.

- 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.
- Hospitals must be accredited by The Joint Commission, Det Norske Veritas (DNV) or Healthcare Facilities Accreditation Program (HFAP).
- 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 or HFAP.
- 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 or HFAP.
- Business entities or publicly- or privately-held corporations without oversight by one of the regulatory bodies listed above must meet all the requirements below:
 - a. be legally organized and authorized to conduct business by the appropriate state agency for a minimum of five years,
 - b. be in compliance with all local, state, and federal laws and regulations, and
 - c. provide an annual financial statement audited by a licensed public accountant that indicates no irregularities and a positive net worth.

Guideline 1.2

The program must be integrated within the administrative structure of the sponsoring organization, as evidenced by an organization chart showing the relationship of the program to other programs/services.

Guideline 1.3

The program must have a budget to support itself.¹

Guideline 1.4

The internship must be a post-baccalaureate program that admits only individuals who have completed Didactic Program in Dietetics requirements and at least a bachelor's degree.

Guideline 1.5

The internship must schedule supervised practice experiences full-time, part-time, or both, to be completed generally within a two-year period.

Guideline 1.6

The program must provide at least 1200 hours of supervised practice experiences, at least 900 of which must be conducted in the United States or its territories, possessions (including the District of Columbia, Guam, Puerto Rico, and U.S. Virgin Islands) or military bases to meet the competencies for entry-level practice as a registered dietitian.

Guideline 1.7

The program must have a designated director who

- a. has earned at least a master's degree,
- b. is credentialed as a registered dietitian by the Commission on Dietetic Registration,

¹ The U.S. Department of Education requires that ACEND review a program-specific budget. A line-item budget that documents specific revenues and expenses for the program is preferred; however, if the program's budget is integrated into a departmental budget, the program may provide the dollar amount of the departmental budget, the percent of the departmental budget allocated to the program, and a narrative explaining revenue sources and expenses used by the program.

- c. has a minimum of three-years professional experience post credentialing,
- d. is 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 and
- e. does not direct another ACEND-accredited dietetics education program

Directions for Writing the Narrative: Describe how your program currently meets or plans to meet standard and guidelines (1.1-1.6) for *Program Characteristics & Finances*. Be sure to address relevant tips and support to assist you in preparing your responses that are provided in the 2012 Standards document for your specific program type.

Standard 1: Program Characteristics & Finances

(Guideline 1.1)

Lehman's Dietetic Internship (DI) Program is housed at the Herbert H. Lehman College (Lehman College), a unit of the City University of New York (CUNY). Lehman College is located at 250 Bedford Park Boulevard West, in the borough of the Bronx, New York City, in the State of New York, in the U.S.

The City University of NY is a twenty-college university, with branches located throughout the five boroughs of New York City. The University's governing body, the Board of Trustees of the City University of New York, formulates the by-laws and policies providing direction for the operation of the University and its constituent colleges. In addition, the Board passes on the policy recommendations submitted by each of the autonomous colleges. The University consists of ten senior (four-year) colleges, six community colleges, a four-year technical college, a doctoral granting graduate school, a law school, a graduate school of journalism, an accelerated medical program, and a medical school.

Lehman College, one of the ten senior colleges in CUNY and is a public, comprehensive, coeducational liberal arts college with more than 90 undergraduate and graduate degree programs and specializations. Lehman College is the only public senior college in the Bronx, and the only senior CUNY College in the Bronx, with more than 300 full-time faculty members and approximately 400 adjunct faculty members serving more than 8,000 undergraduate and 2,000 graduate students. Lehman is a federally-designed Minority Serving and Hispanic Serving Institution.

Lehman College is accredited by the Commission on Higher Education of the Middle States Association on Higher Education. Lehman was last reaffirmed by the Middle States Commission on Higher Education (MSCHE) on November 20, 2014. Link to the fact form: http://www.lehman.edu/institutional-research/documents/Lehman_College_Accreditation_000.pdf. Link to the accreditation letter from MSCHE: <http://www.lehman.edu/provost/documents/Accreditation-Nov-2014.pdf>.

Department Overview:

(Guideline 1.2)

The Dietetic Internship Program at the Herbert H. Lehman College (Lehman College) in the City University of New York (CUNY) is located in the Department of Health Sciences in The School of Health Sciences, Human Services, and Nursing at Lehman College.

Academic Organization:

(Guideline 1.2)

The newly appointed President of the College, José Luis Cruz, is responsible for all aspects of running the College, and is responsible to the CUNY Chancellor, James B. Milliken, and the CUNY Board of Trustees. The Provost of the College and Senior Vice President for Academic Affairs, Dr. Harriet Fayne, is the College's chief academic officer and senior member of the Cabinet. The Provost is responsible for all educational programs, as well as for academic issues that relate to the faculty, including appointments, promotions, and evaluations. She also is responsible for preparing accreditation reviews, strategic planning, and the review of division and departmental budgets.

The College's academic departments and programs are divided into five schools, each headed by a Dean who reports to the Provost: School of Arts and Humanities, School of Education, School of Health Sciences, Human Services, and Nursing, School of Natural and Social Sciences and, School of Continuing and Professional Studies.

The School of Arts and Humanities includes the following *Departments*: Africana Studies, Art, English, History, Journalism, Communication, Theater & Dance, Languages and Literatures, Latin American, Latino, and Puerto Rican Studies, Music, and Philosophy, and these *Interdisciplinary Programs*: Classical Civilization and Classical Tradition, Comparative Literature, Computer

Graphics Imaging, Disability Studies, Humanities, Linguistics, Middle Eastern Studies, Program for Professional Communications, and Women's Studies.

The School of Education includes the following *Institutes and Centers*: Institute for Literacy Studies -- ILS News & Notes Blog, The Bronx Institute, Lehman Center for School/College Collaboratives, and *Programs*: Early Childhood and Childhood Education, Middle School and High School Education, and Counseling, Leadership, Literacy and Special Education, plus *Certification Programs*.

Lehman College's new **School of Health Sciences, Human Services, and Nursing** consolidates under one academic roof several departments – **Health Sciences**; Nursing; Social Work; and Speech, Language, and Hearing Sciences. The Department of Health Sciences offers Undergraduate programs in Dietetics, Foods, and Nutrition, Exercise Science, Health Education and Promotion, Health Sciences (Departmental Courses), Health Services Administration, Recreation Education and Therapy, and Rehabilitation and Graduate Courses in Exercise Science, Health Education, Nutrition, and Recreation. The School also houses the CUNY Institute for Health Equity.

School of Natural and Social Sciences is home to eleven departments: Anthropology; Biological Sciences; Chemistry; Economics and Business; Earth, Environmental, and Geospatial Sciences; Mathematics and Computer Science; Physics and Astronomy; Political Science; Psychology; and Sociology. It is the largest School at Lehman College.

School of Continuing and Professional Studies offers Adult Degree Program, Continuing Education, and the Bronx Small Business Development Center.

Please refer to Appendix B for Organizational Chart.

(Guideline 1.3)

The DI is supported financially by the College through a variety of mechanisms. The College employs both full-time and adjunct faculty members to direct and teach the program. The College's budget supports several full-time faculty members who have primary teaching and administrative responsibility in the DI Program. Marina Stopler, MS, RD, CDN, IBCLC has been the DI Director and Lecturer since August 2014. Two other full-time faculty members include Craig Demmer, EdD, CHES who teaches the required co-requisite graduate course in Health Counseling (HEA 620) and Katherine Gardner Burt, PhD, RD who teaches the required co-requisite graduate course Public Health and Community Nutrition (DFN 641). We have three adjunct faculty members; Martine Scannovino, RD, who teaches the co-requisite graduate course Food Service Management (DFN 661), Ilse DeVeer, RD, CDN, who teaches Medical Nutrition Therapy (DFN 651) and Judith Porcari, MS, RD, CDN, who teaches Concepts and Methods in Dietetics (DFN 731) in the fall and spring. Marina Stopler, the DI Director, teaches this course during the summer semester.

Also, employed through the College are IT and library staff, administrative/secretarial personnel, buildings, grounds, and maintenance staff and Public Safety officers. The College supported the cost of the new foods laboratory in 2012 and continues to support the cost of the laboratory's food and equipment. It also supports the library, facilities, and equipment.

The College budget supports the CUNY Office Assistant, Ms. Julissa Cruz, who is a full-time employee at the Departmental office and assists in adjunct payroll, maintaining files, ordering supplies, supervising the work-study students, and other administrative tasks. The College Budget also supports the full-time position for the Academic Program Specialist, Donna Covington-Hargrove. They are both supervised by the Chair of the Department, Dr. Gul Tyriaki-Sonmez.

The process by which faculty positions that support the DI and other Departmental programs are added starts with the request of the Department Chair to the School Dean. The Dean, meeting with the Provost, decide approximately how many new faculty lines the college can afford based on budgetary constraints governed by the allocations within CUNY, which receives the bulk of its funding from tax levies of New York State residents, and by receipt of tuition and fees, grant indirect costs, and private donations through fund-raising. These academic positions are in competition with other personnel needs across the college including, but not limited to, security, administrative staff, and facilities staff. The Dean's Council will then decide how the academic lines will be allocated across the Schools of the College depending on student enrollment, numbers of declared majors, and faculty retirements. When permission to search is granted to the program within the Department, a Budget Approval Form is submitted and must be signed by the Department Chair, the Dean, Provost, and Chief Financial Officer of the College. Once signed, a position description is submitted and a Personnel Vacancy Notice is initiated and advertised. A Search Committee Director is appointed for each position by the department Chair, and applicants are selected to be interviewed

based on their qualifications. As part of CUNY, the College is an Equal Opportunity Employer and seeks diversity in the pool of all candidates in the faculty position.

A budget for the department that enables the purchase of non-personnel items or OTPS, Other Than Personnel Services, such as food and kitchen supplies for the DPD Food Laboratories (DFN 20, 220, and 330), is assigned to the department each academic year. The departmental OTPS budget also pays for paper, stationary, printer ink, copy machine consumables and other office supplies. The School Budget covers the cost of copy machine maintenance and repairs. The Office of the Provost pays for ACEND membership costs of the DPD and the DI as well as the listing fee for the MS program in Nutrition. Offices, furniture, telephones, computers, and printers are supplied to each faculty member out of the College or Dean’s budget or purchased through grant funding. Each full-time faculty member in the DI has a separate office on the 3rd or 4th floor of Gillet Hall. Classrooms on the 4th floor of Gillet Hall are supplied with educational technology improvements such as computers, screens and projections through the College Information Technology (IT) budget.

Program Budget as a Percent of Annual Budget – Fiscal Year 2015-2016

Faculty Salaries and Benefits (50% of salary)	Contracted hours		Fall 15 hours	Spring 16 hours	FY16 FTE(based on actual hours/contracted hours)	FY 2016 cost			Total
Marina Stopler, DI Director	27 credits	DFN 730 (3 credits) +DI	3	3	0.26	14,913.33			14,913.33
Craig Demmer	21 credits	HEA 620, fall 2015, spring 2016 (6 credits)	3	3	0.57	16,484.14			16,484.14
Katherine Burt	21 credits	DFN 641, spring 2016 (3 credits)		3	0.57	8,644.14			8,644.14
									40,041.61
								Fringe benefits	20,020.80
								Subtotal1	60,062.24
Adjunct					Fall and Spring Amount		Summer 2016	FY 2016 Summer amount	
Marina Stopler	3 credits	DFN 730, DFN 731					6	8,352.45	8,352.45
Martine Scannavino	3 credits	DFN 661, summer 2015					3	11,285.80	11,285.80
Judith Porcari	6 credits	DFN 731, fall 2015, spring 2016	3	3	7,263.00	7,263.00			7,263.00
Ilse DeVeer	3 credits	DFN 651, fall	3		5,511.33	5,511.33			5,511.33

		2015							
						12,774.33		19,638.25	32,412.58
					Fringe benefits	1,660.66	Fringe benefits	2,552.97	4,213.63
								Subtotal2	36,626.21
Administrative support	FY 2016 FTE	FY16 Salary							
Gul Sonmez, Chair	0.09		8,171.30						
Julissa Cruz, Office manager	1.00	33,026	2,972.34		14 interns 1500 students = 0.09%				
Donna Covington-Hargrove, Office manager	1.00	64,956	5,846.04						
		97,992	16,989.68						16,989.68
	Fringe benefits	48,016	8,324.94						8,324.94
		146,008	25,314.62						25,314.62
ACEND fee									1,900.00
OTPS									200.00
									124,102
Revenue									
Students x fees	14 x (30 credits/\$425 per credit)								178,500
DI Lehman Application fee	131 x 50								6,550
Activity fee	14 x \$74.60 per semester (x 3)								3,133
Technology fee	14 x \$125 per semester (x 3)								5,250
								Total	193,433

(Guideline 1.4)

The Lehman College Dietetic Internship is a part-time program which has allowed interns to maintain employed work at no more than 15 hours per week. Lehman's DI is part of Lehman's MS Program in Nutrition. Requirements for admission into Lehman's DI include a Bachelor's degree and completion of the Didactic Program in Dietetics as verified by a signed DPD Verification Statement. All interns in Lehman's DI are enrolled in Lehman's MS in Nutrition program. However, interns are not required to complete the Master's degree at Lehman in order to obtain the DI Verification Statement.

The four required co-requisite graduate courses are Community and Public Health Nutrition (DFN 641), Medical Nutrition Therapy (DFN 661), Food Service Management (DFN 661) and Health Counseling (HEA 620). In the process of completing this Self-Study and reviewing the curriculum, the decision was made to create a separate course for the dietetic interns in Nutrition Counseling (DFN 630 – Special Topics in Nutrition: Nutrition Counseling) as an alternative to HEA 620 - Health Counseling. The DFN course will focus more on counseling methods for nutrition professionals and be more in line with the DI Competencies and Learning Outcomes. The current description of the courses, along with the description of the didactic seminar (DFN 731) which is taken each of the three semesters of the DI and accompanies the supervised practice (DFN 730), is taken from the 2015-2017

DFN 641 Public Health and Community Nutrition

The relationship of diet to health promotion and disease prevention. The role of public, private, and voluntary organizations in providing nutrition-care services for ambulatory populations. Techniques for developing, funding, implementing, and evaluating projects in the community.

Credits: 3. **Prerequisite:** DFN 620 or their equivalents. **Offered** Fall-Spring.

DFN 651 Medical Nutrition Therapy

Nutrition assessment, diagnosis, intervention, monitoring and evaluation used to improve health and quality of life in patients with a variety of nutritionally-related conditions. Includes an exploration of evidence-based medical nutrition therapy in today's clinical practice. Case studies related to the pathophysiology and treatment of nutritionally relevant acute and chronic disease will be emphasized.

Credits: 3. **Prerequisite** DFN 448. **Offered** Fall-Spring.

DFN 661 Food Service Management

Management theory with application to the food service industry. Emphasis on the management of human and financial resources, the practice of optimal standards of safety, sanitation, and nutrition, and the role of the computer as a management tool.

Credits: 3. **Offered:** Fall-Spring

DFN 730 Supervised Professional Practice

(Course open only to those accepted into the Dietetic Internship. May be reelected for a maximum of 9 credits.) A minimum of 400 hours of supervised professional practice at approved health care and community sites.

Credits: 3. **Prerequisite** DFN 731. **Offered** Fall-Spring

DFN 731 Concepts and Methods of Dietetics Practice

(Course open only to those accepted into Dietetic Internship.) Examination of current concepts and methods of dietetics practice to prepare students for entry-level professional practice. Includes on-campus didactic activities, group discussions, and the use of case studies to analyze and expand upon the fieldwork experience. Completion of the Dietetic Internship requires participation in the seminar for three semesters.

Credits: 3. **Prerequisite** DFN 730. **Offered.** Fall-Spring

HEA 620 Health Counseling

Health problems of the school child, remedial procedures, and health-counseling techniques.

Credits: 3. **Prerequisite** Either a personal health, public health, or physical-inspection course (or equivalents), or Departmental permission. **Offered** Fall-Spring

NOTE: Students (in consultation with the instructor) will be expected to enter into a specific health-counseling situation in depth and follow it to fruition at the end of the semester.

DFN 630 Special Topics in Nutrition

(May be re-elected, as topics change, for a maximum of 6 credits). Consideration of recent developments in the field of nutrition.

Credits: 1. **Prerequisite** 9 credits of core nutrition courses, or permission of adviser. **Offered** Fall-Spring

Notes 1-3 hours, 1-3 credits (may be re-elected, as topics change, for a maximum of 6 credits).

The DI program comprises 30 credits. The entire program includes a minimum of 1200 hours supervised practice (3 semesters of DFN 730), three semesters of didactic seminar (DFN 731), and four co-requisite graduate courses, is expected to be completed in three academic semesters. The DI program, semester by semester, is shown in the following table.

Courses	Credits
DFN 641 Community and Public Health	3
DFN 651 Medical Nutrition Therapy	3
DFN 661 Food Service Management	3
HEA 620 or DFN 630 – Health Counseling	3
DFN 730 Supervised Professional Practice	9
DFN 731 Concepts and Methods in Dietetics (Didactic Seminar)	9
Total	30

These 30 credits will fulfill 9 of the 26 required credits in the MS in Nutrition program, plus all of the elective credits (≥ 12). In order to complete the MS in Nutrition program at Lehman, an additional 17 credits of coursework would be required.

It should be noted that some interns may have enrolled in and successfully completed one or more of the co-requisite course requirements prior to entrance in the DI. For example, after being informed of their acceptance into the DI for the fall semester, a prospective intern may choose to enroll in DFN 661 in the summer prior to the start of the DI in the upcoming fall semester. In that case, the requirement to complete the DFN 661 in the summer of the DI would be waived. Similar policies would be followed for prior completion of any of the four required co-requisite courses or their equivalents taken at other institutions.

(Guideline 1.5)

The supervised practice portion of the program, which is changing its status from a part-time to a full-time graduate level option within Lehman’s MS in Nutrition program, is designed to meet many of the Competencies and Learning Outcomes defined in DI Program. The Lehman DI program is a 12-month program, with the expectation that 80% will complete the program within 18 months.

According to our 5-year Lehman DI Alumni Survey, <https://docs.google.com/forms/d/1C6GMrX4V5-5y-vmWPGXAFpeRaBjx2h8mR7c0j9qLJ04/edit#responses> most of our alumni were unable to hold a part-time job while on the internship; out of 41 responses, 58% were unable to work vs. 27.6% who were able to work. Information collected from the Exit Survey (2010-2015), for the question, “Please rate the ease with which you could organize part-time employment while you were completing the supervised practice.” Out of 73 responses, 41% of interns did not have a part-time job (N/A), and 22% responded “poor.” 37% of interns responded between satisfactory and excellent. Therefore, we plan to call the Lehman DI full time, but still permit the option of having interns work up to 15 hours per week during the internship. Please refer to Appendix T for Exit Survey Chart 2010-2015).

(Guideline 1.6)

The Lehman Dietetic Internship program provides a minimum of 1200 hours of supervised practice experiences, all of which are in the boroughs of New York City and surrounding counties in New York State (such as Westchester, Rockland, and Nassau Counties).

The 1200 hours of supervised practice are divided as follows:

Rotation	Minimum Hours
Medical Nutrition Therapy	470
Food Service Management	300
Research	150
Community	280
1. Public Health (100 hrs.) 2. HIV/AIDS (100 hrs.) 3. WIC (60 hrs.) 4. Public School (20 hrs.)	
Total hours	1200

Lehman’s DI offers only one concentration, a concentration in Medical Nutrition Therapy. This concentration is reflected in the requirement of the 3-credit graduate level course in Medical Nutrition Therapy (DFN 651) and the minimum 470 hours of supervised practice devoted to MNT, which fulfills the competencies specific to the MNT concentration. The competencies for the concentration in Medical Nutrition Therapy build upon the Competencies and are designed to help the interns to:

1. Perform a nutrition assessment, formulate a nutrition diagnosis, and plan intervention strategies for patients with complex medical conditions, included but not limited to diabetes, multi-organ failure, trauma, and renal disease.
2. Select, monitor and evaluate complex enteral and parenteral nutrition regimens for patients with complex medical conditions.
3. Develop and implement transitional feeding from enteral and parenteral nutrition support to oral intake.
4. Undertake nutrition counseling and education with patients with complex medical conditions.
5. Observe nasogastric and percutaneous endoscopic patient gastrostomy placement and care.
6. Participate in the care of patients requiring adaptive feeding devices.
7. Manage clinical nutritional services

Program information about this concentration appears in the DI Brochure (Appendix Y) and in the printed pages from the website <http://www.lehman.edu/dietetic-internship-program/index.php> which is currently in the process of revision to reflect the changes from a part-time to a full-time program and the changes in the curriculum from HEA 620 Health Counseling to the temporary DFN 630 Special Topics in Nutrition, Nutrition Counseling.

(Guideline 1.7)

Marina Stopler, MS, RD, CDN, IBCLC has been a Registered Dietitian since 1992. She earned her BS degree in Biology from SUNY at Binghamton and her MS degree in Applied Physiology and Nutrition at Teachers College, Columbia University. She completed her AP4 at Teachers College before taking the RD exam. Her CDR registration number is 806000. In addition to being a Registered Dietitian, Marina Stopler has been a Board Certified Lactation Consultant since 1994 (recertified in 2004 and 2014).

She has worked at Lehman College, CUNY for 20 years as an adjunct professor, as the DI Director and Lecturer. Prior to working at Lehman, Marina Stopler was a full-time employee for six years the Montefiore WIC program, Comprehensive Family Care Center (CFCC) in the Bronx. She also conducted research at the Bronx VA Medical Center under the supervision of Victor Herbert, MD, JD.

Since 1997, Marina Stopler has taught the following courses: Introduction to Nutrition (HSD 240), Nutrition throughout the Life Cycle (DFN 341) and, Fieldwork in Clinical Nutrition (DFN 471). She presently co-teaches Concepts and Methods in Dietetics (DFN 731) with Prof. Judith Porcari. She is a full-time employee of the sponsoring institution, Lehman College, and does not direct another ACEND-accredited dietetics education program. Please refer to Appendix E for Prof. Stopler’s current resume/CV, and a copy of her CDR registration card.

2. Directions: Include supporting documents with your narrative or in the appendices.

Alumni Survey and Employer Survey – blank forms and results are in Appendix H.

3. Directions: Use the checklist below to evaluate how well your program meets the overall standard and guidelines for *Program Characteristics & Finances* (check only one):

Meets

- | | |
|---|--|
| X | 1. No compliance problems are present. |
| | 2. Compliance problems exist, but all are being resolved successfully. |

Partially Meets

- | | |
|--|--|
| | Viable plans (awaiting results or to be enacted) have been developed to address compliance issues. |
|--|--|

Does Not Meet

- | | |
|--|---|
| | Plans to address compliance problems are not viable or have not been developed. |
|--|---|

Program Eligibility for ACEND Accreditation

Standard 2: Title IV Compliance for Free-Standing Programs

A free-standing program certified by the U.S. Department of Education (USDE) for eligibility for Title IV student financial aid that 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, the program must provide a default reduction plan, as specified by USDE.

Guideline 2.1

Standard 2 and its guidelines are not applicable to programs housed in a U.S. college or university and accredited in good standing by a U.S. regional institutional accrediting body for higher education; therefore, college- or university-based and international programs are not required to demonstrate compliance with Standard 2.

Guideline 2.2

The program's default rate exceeds the federal threshold if it is 25 percent over a three-year period or 40% in one year.

1. Directions for Writing the Narrative: Describe how your program currently meets or plans to meet standard and guidelines (2.1-2.2) for *Title IV Compliance for Free-Standing Programs*. Be sure to address relevant tips and support to assist you in preparing your responses that are provided in the 2012 Standards document for your specific program type.

Does not apply

2. Directions: Include supporting documents with your narrative or in the appendices.

3. Directions: Use the checklist below to evaluate how well your program meets the overall standard and guidelines for *Title IV Compliance for Free-Standing Programs* (check only one):

Meets

1. No compliance problems are present.
2. Compliance problems exist, but all are being resolved successfully.

Partially Meets

Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet

Plans to address compliance problems are not viable or have not been developed.

Program Eligibility for ACEND Accreditation

Standard 3: Consortia

A program consortium is two or more independent institutions or organizations combining to sponsor a program. In addition to the eligibility criteria stated above, a program consortium must meet the following criteria:

Guideline 3.1

The consortium must consider itself a single education program.

Guideline 3.2

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.

Guideline 3.3

One individual must serve as Consortium Program Director and have primary responsibility for the program and communications with ACEND.

Guideline 3.4

Each member organization in the consortium must designate a Coordinator for the program within that organization who is employed by the organization.

Guideline 3.5

The organization chart must clearly show the relationship of each member of the consortium to the total program and the relationship of each Coordinator to the Consortium Program Director.

- a. Membership of committees must reflect representation of each member institution or organization.
- b. Coordinators must share responsibility for planning and assessment with the Consortium Program Director.

1. Directions for Writing the Narrative: Describe how your program currently meets or plans to meet standard and guidelines (3.1-3.5) for *Consortia*. Be sure to address relevant tips and support to assist you in preparing your responses that are provided in the 2012 Standards document for your specific program type.

Does Not Apply.

2. Directions: Include supporting documents with your narrative or in the appendices.

3. Directions: Use the checklist below to evaluate how well your program meets the overall standard and guidelines for *Consortia* (check only one):

Meets

1. No compliance problems are present.
2. Compliance problems exist, but all are being resolved successfully.

Partially Meets

Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet

Plans to address compliance problems are not viable or have not been developed.

Program Planning and Outcomes Assessment

Standard 4: Program Mission

The program must have a mission that distinguishes it from every other program in the college/university, must be compatible with the mission statement or philosophy of the sponsoring college/university and must be consistent with the preparation of entry-level registered dietitians.

- 1. Directions for Writing the Narrative:** Describe how your program currently meets or plans to meet standard for *Program Mission*. Be sure to address relevant tips and support to assist you in preparing your responses that are provided in the 2012 Standards document for your specific program type.

Mission of Lehman College:

According to the Lehman website, <http://www.lehman.edu/about/mission.php>, "Lehman College serves the Bronx and surrounding region as an intellectual, economic, and cultural center. Lehman College provides undergraduate and graduate studies in the liberal arts and sciences and professional education within a dynamic research environment, while embracing diversity and actively engaging students in their academic, personal, and professional development."

Vision Statement of Lehman College: Following the Mission Statement, "Lehman College has entered a new era in its history as an institution of higher education. Already known for its outstanding faculty, dedicated staff, superb library, art gallery, theaters, speech and hearing clinic, and athletic facilities, the College will now build a new state of the art, environmentally "green" science facility that will invigorate faculty and student research as well as prepare Lehman students for science-based careers.

Supported by the University's expanding technological resources, the College will promote creative teaching strategies, greater access to courses through online learning, off campus access to library resources and enhanced student services. The new Multi-Media Center will stimulate technological innovation in all areas of communications and the arts for both the College and the region.

Lehman has always been a commuter campus that prides itself on its diversity and commitment to multicultural understanding. Now, the College looks forward to providing a residential experience to attract a wider range of students and lead to the development of new learning communities to enhance student success.

Lehman College will prepare students to live and work in the global community through new interdisciplinary programs, such as environmental studies and international business, along with study abroad and experiential learning opportunities. The College's geographic information systems and numerous partnerships with schools, hospitals, social service and governmental agencies, small businesses, major corporations, and cultural and scientific institutions will contribute to the economic development of the region. Service learning and internship opportunities will be further developed to foster the engaged citizenship and commitment to public service embodied in its namesake, Herbert H. Lehman.

Recognized for small classes, close interaction between students and faculty, a successful Teacher Academy and Honors College, and a caring and supportive environment, Lehman College will celebrate its fiftieth anniversary in 2018 as the college of choice in the region, committed to preparing students for graduate studies, professional careers, and lifelong learning."

Values of Lehman College: "Lehman College is committed to providing the highest quality education in a caring and supportive environment where respect, integrity, inquiry, creativity, and diversity contribute to individual achievement and the transformation of lives and communities."

Mission of The School of Health Sciences, Human Services, and Nursing at Lehman College: With a new Dean, the mission of The School of Health Sciences, Human Services, and Nursing, <http://lehman.edu/academics/health-human-services-nursing/mission-statement.php>, continues in keeping with the College's mission. "The School offers undergraduate and graduate education across a range of health and human services professions. Our mission is to educate our students and promote and improve the health and well-being of individuals, families, groups, and communities in a diverse global community, with special emphasis on urban populations.

The school promotes sensitivity and respect for multi-linguistic and multicultural differences. We value critical thinking, problem solving, evidence-based practice and ethical judgment and behavior.

To realize our mission, the School of Health Sciences, Human Services, and Nursing promotes community partnerships in research, education, and service across the health and human services professions. Faculty and students engage in collaborative clinical and research initiatives, advocate for underserved populations, and provide education, programs and services based on best practices and the highest standards of integrity."

Mission of the Department of Health Sciences: The Mission of the Department of Health Sciences is to create a rigorous intellectual environment in which students are prepared to become caring, ethical, competent and progressive professionals in the diverse, challenging, and technologically advanced world of the 21st century health. We are dedicated to offering a sound educational foundation, in both our undergraduate and graduate programs, that meet the highest academic and professional standards, builds upon and enhances previously learned skills, and utilizes scientific and critical thinking, effective communication, research, adaptability, and personal flexibility. Consistent with the missions of Lehman College, the Department builds upon liberal education as its core, with a sequence of interdisciplinary and discipline-specific courses. Students are prepared and encouraged to apply their newly acquired knowledge and skills to pass relevant professional certification examinations, obtain employment as qualified professionals, with respect for needs of their clients and constituents in the varied arena of health-related fields represented in the Department. The mission is consistent with the College's mission of "offering a liberal arts education and preparation for careers and advanced study" as the Department's programs prepare students for careers in health-related fields as well as providing an opportunity for advanced study in a variety of disciplines.

In order to carry out its mission, the Department has identified the following goals:

1. Provide students with the education necessary to acquire the knowledge, skills, and abilities needed for meaningful employment within the broad disciplines of the department.
2. To provide students with the necessary technical competence and social awareness to make professional contributions to the care of the community.
3. To prepare students to pursue or continue graduate study and other life-long educational opportunities.
4. To prepare students to obtain the competencies necessary for credentialing according to the criteria established by the profession.
5. To enable students to advance in their career and upgrade their knowledge and skills.
6. To support professional development of faculty including research, scholarship, publications, presentations at professional meetings and advanced practice within the discipline.
7. To keep abreast of new developments in the health field and to reflect this in the curriculum.

Mission of The Dietetic Internship: There is an increasing awareness that the diets people consume contribute to the quality of their lives. In addition, studies have shown that people's susceptibility to chronic disease is influenced by their diet.

As stated on our website, <http://www.lehman.edu/dietetic-internship-program/index.php>, "the mission of the dietetic internship at Lehman College is to provide interns with a comprehensive learning experience through which they can acquire the competencies, knowledge, skills, and hands-on training required of entry-level nutrition care professionals, with an emphasis on medical nutrition therapy. Lehman College interns are ethnical and culturally diverse and the program welcomes all applicants with the appropriate qualifications."

The DI Program's mission statement is congruent with Lehman's mission in that the DI Program provides an "experiential learning opportunities" with "numerous partnerships with schools, hospitals, social service and governmental agencies, small businesses, major corporations, and cultural and scientific institutions" whose interns will contribute to the economic development of the region. As Lehman is "committed to preparing students for graduate studies, professional careers, and lifelong learning," the internship opportunities in the DI "foster the engaged citizenship and commitment to public service embodied in its namesake, Herbert H. Lehman."

Lehman's DI serves the Bronx and the greater metropolitan area by providing the opportunity for interns from diverse cultural and ethnic groups to obtain the knowledge and competencies needed to help the members of the New York City community improve their health and nutritional status.

The DI's mission statement is congruent with the Department's mission by providing the opportunity for interns to obtain an education, and the competencies necessary to contribute to the community, as well as become credentialed in the dietetic profession. The program encourages career advancement by mandating graduate study as part of the DI curriculum and by providing the keys to life-long learning.

The program's mission is consistent with the preparation of registered dietitians according to the 2012 Standards of Professional Performance. The Standards for Professional Performance for Registered Dietitian Nutritionists include the following: quality in

practice, competency and accountability, provisions of services, application of research, communication and application of knowledge, utilization and management of resources. Lehman's DI has as its mission to train interns to provide needed nutrition care, apply knowledge and research findings to practice, communicate to others based on knowledge gained through didactic and experiential opportunities, utilize and manage resources, maintain quality in practice through the use of critical thinking, and to be competent nutrition care providers who are responsible for their patients, colleagues, and to the profession.

2. Directions: Include supporting documents with your narrative or in the appendices. Be sure to specifically include the Program Mission, Goals, and Objectives.

3. Directions: Use the checklist below to evaluate how well your program meets the overall standard and guidelines for *Program Mission* (check only one):

Meets

<input checked="" type="checkbox"/>
<input type="checkbox"/>

1. No compliance problems are present.
2. Compliance problems exist, but all are being resolved successfully.

Partially Meets

<input type="checkbox"/>

Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet

<input type="checkbox"/>

Plans to address compliance problems are not viable or have not been developed.

Program Planning and Outcomes Assessment

Standard 5: Program Goals

The program must have goals that reflect its mission and are accomplished through activities conducted by the faculty, preceptors and graduates.

1. Directions for Writing the Narrative: Describe how your program currently meets or plans to meet standard for *Program Goals*. Be sure to address relevant tips and support to assist you in preparing your responses that are provided in the 2012 Standards document for your specific program type.

Program Goals: State your current program goals.

Note: These the goals should be consistent with those stated in the in the program assessment plan for the next assessment period.

The goals of the Lehman DI are:

Goal 1: To prepare interns to be competent, ethical, and culturally sensitive entry-level registered dietitians.

Outcome Measures over a 5-year period: As interns enter the DI program, the combination of co-requisite coursework, supervised practice sites, and seminars provide opportunities for interns to practice their performance and professional skills, network, and grow in the field to become qualified entry-level dietitians. Interns are provided with information in ethical and culturally-sensitive practices through seminars and during rotations. Feedback is provided by the preceptors to evaluate the intern's strength in cultural sensitivity and while in the rotation if they abided by the Code of Ethics as defined by the Academy of Nutrition and Dietetics. The goal is consistent with our mission for the interns "Lehman's DI has its mission to train interns to provide needed nutrition care, apply knowledge and research findings to practice, communicate to others based on knowledge gained through the didactic and experiential opportunities, utilize and manage resources, maintain quality in practice through the use of critical thinking, and to be competent nutrition care providers who are responsible for their patients, colleagues, and to the profession."

Goal 2: To encourage interns to continue their professional growth by completing a graduate program in nutrition and foods or another health-related field. Success in either a graduate program in nutrition and foods or in another health-related field is consistent with the mission of the Lehman College Dietetic Internship as "the program encourages career advancement by mandating graduate study as part of the DI curriculum and by providing the keys to life-long learning."

The goals were determined as part of the 2010 Self-Study and therefore delineated by the DPD Director, Dr. Andrea Boyar and the former DI Director, Dr. Sue Tree. At the time the CADE Competencies/Learning Objectives were used to arrive at the goals. The goals continue to reflect the mission, which includes the desire for our interns to succeed in what they need to pass the registration examination (RD exam) and for entry-level professional practice. Our goals indicate that we would like our interns to become MS-level RD's, who choose to continually enhance what they have learned in our program by taking advantage of continuing education activities and information that is accessible in professional journals and online.

These goals are accomplished through the activities of the DI and MS in Nutrition faculty who supervise the didactic curricula of the DI and the MS in Nutrition program, our preceptors who supervise professional practice opportunities, and our graduates who go on to pass the RD exam and join and renew the profession as responsible, caring individuals who value the diversity of the population they serve.

2. Directions: Include supporting documents with your narrative or in the appendices.

3. Directions: Use the checklist below to evaluate how well your program meets the overall standard and guidelines for *Program Goals* (check only one):

Meets

X

1. No compliance problems are present.
2. Compliance problems exist, but all are being resolved successfully.

Partially Meets

--

Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet

--

Plans to address compliance problems are not viable or have not been developed.

Program Planning and Outcomes Assessment

Standard 6: Program Objectives

The program must establish program objectives with appropriate measures to assess achievement of each of the program's goals. Measures for each objective must be aligned to one or more of the program goals. ACEND-required objectives such as for program completion, graduate employment and other measures of graduate and program performance must be appropriate to assess the full intent of the program mission and goals, and to demonstrate that programs are operating in the interest of students and the public.

Guideline 6.1

National Pass Rate: The program must demonstrate that it is selecting and preparing students appropriately for practice, as measured by performance on national, standardized examinations such as the RD registration exam:

- If the program's first time pass rate¹ is 80% or above, it meets ACEND requirements with no further monitoring;
- If the program's first time pass rate is 79% or below and the one year pass rate² is 80% or above³, it meets ACEND requirements with monitoring;
- If the program's one year pass rate is 51 – 79% the program must make improvements within the timeframe specified by the U.S. Department of Education or face possible probation and withdrawal of accreditation; or
- If the program's one year pass rate is below 50%, steps will be taken to withdraw accreditation.

First-Time Pass Rate	One-Year Pass Rate	Accreditation Action
90% or above		Meets ACEND requirements with commendation
80% or above		Meets ACEND requirements
79% or below	80% or above	Monitor program stability
	79 – 51%	Improvement must be made within federally-designated timeframe or face withdrawal of accreditation
	50% or below	Initiate withdrawal of accreditation

Guideline 6.2

Program Completion: The program must develop an objective that states the percent of program students/interns who are expected to complete program/degree requirements within 150% of the program length.

Guideline 6.3

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

Guideline 6.4

Other Measures: The program must develop one or more objectives to measure other graduate and program performance outcomes such as employer satisfaction, graduate school acceptance rates, contributions to the community, professional leadership and so on.

Guideline 6.5

Outcome data measuring achievement of program objectives must be provided for ACEND reviews and must be available to students/interns, prospective students/interns, and the public upon request.

¹ The first-time pass rate on the registration exam is calculated by dividing the number of candidates who pass the exam on the first attempt, by all candidates taking the exam for the first time over a five-year period.

² The one-year pass rate on the registration exam is the sum of the number of candidates who passed the exam within one year of their first attempt, aggregated over a five-year period and divided by the sum of all individuals who took the exam within that same period.

³ An 80%, one-year pass rate will be used until national benchmarks are established.

1. Directions for Writing the Narrative: Describe how your program currently meets or plans to meet standard and guidelines (6.1-6.5) for *Program Objectives*. Be sure to address relevant tips and support to assist you in preparing your responses that are provided in the 2012 Standards document for your specific program type.

Upon completion of the DI, graduates will be able to demonstrate the knowledge, skills, and competencies acquired during the DI, according to the Competencies/Learning Outcomes by the Accreditation Council for Education in Nutrition and Dietetics (ACEND) for Dietetic Internship programs with particular emphasis on Medical Nutrition Therapy by succeeding in the following:

Program Goal 1: For interns to find employment as an ethical and culturally sensitive entry-level Registered Dietitian.

Outcome Measures over a 5-year period;

First Program Objectives for Goal 1: (Guideline 6.2)

Program Completion: 80% of the intern class will complete the DI within 18 months.

Program Completion:

The time planned for completion of required courses and supervised rotations is three semesters or 12 months. 150% of that time is therefore 18 months. We propose that our program goal completion is that 80% of our interns will complete the DI within 18 months (based on using historical data and characteristics of the student population).

Second Program Objective for Goal 1: (Guideline 6.1)

Pass Rate of First-time Test Takers of the Registration Examination: 80% of DI graduates will pass the Registration Examination on the first attempt.

Pass Rate of First-time Test Takers on the Registration Examination:

As stated in Standard 6 to meet the national pass rate, the pass rate of first-time test takers needs to be 80% or greater and therefore meet ACEND requirements.

Third Program Objective for Goal 1: (Guideline 6.3)

Graduate Employment: 70% or more of DI graduates who sought employment in dietetics are employed within six months of program completion.

Graduate Employment:

The DI Graduate Survey, called the *Lehman Dietetic Internship Alumni Survey*, <https://docs.google.com/forms/d/1C0Y18KoLio7xQatYT1T8mA9rTHJ18nCvSBcJ4WRtkWg/edit>, was constructed on Google Forms and was sent to all the DI program graduates from 2010 to 2015. The incoming class of 2010 was included in this survey as they were not captured in the data in the 2010 self-study. The survey results are used to determine whether over a 6-year period, 70% or more of our DI graduates who sought employment in dietetics were employed within six months of the program.

Additional Objectives for Goal 1: (Guideline 6.4)

Employer Satisfaction

1. 75% of employers will rate DI graduates as performing well.
2. 75% of employers will rate DI graduates as ethical and culturally sensitive.

Employer Satisfaction:

The *Dietetic Internship Employer Survey* was constructed on Google Forms, <https://docs.google.com/forms/d/1C6GMrX4V5-5y-vmWPGXAFpeRaBjx2h8mR7c0j9qLJ04/edit>. Before sending out the survey, a search was done to update the employer list; this was achieved by reaching out to former interns and via LinkedIn. The survey was used to determine whether interns who completed the DI program met the objectives for employer satisfaction based on their performance, and ethical and cultural sensitivity. Performing well equates to excellent and very good ratings. Rating well on ethical and cultural sensitivity also equate to excellent and very good on the rating scale.

Program Goal 2: Success in either a graduate program in nutrition and foods or in another health-related field.

Program Objective for Goal 2: (Guideline 6.4) Outcome Measure over a 5-year period:

Enrollment in a Graduate Program: 70% of enrolled interns will succeed in a graduate program in nutrition and foods or another health-related field.

Enrollment in a Graduate Program:

The responses from the *Lehman Dietetic Internship Alumni Survey*,

<https://docs.google.com/forms/d/1C0Y18KoLio7xQatYT1T8mA9rTHJ18nCvSBcJ4WRtkWg/edit>, (2010-2016) were used to determine whether 70% of students enrolled or successfully completed a graduate program.

Outcome Data: (Guideline 6.5): Outcome data measuring achievement of program objectives are available for ACEND reviews and are available to interns, prospective interns, and, and the public upon request. The surveys, *Lehman Dietetic Internship Alumni Survey*, the *Dietetic Internship Employer Survey*, and the Intern/Employer spreadsheet were used to measure if goals and objectives were met.

The objectives were determined as part of the 2010 Self-Study. The objectives were reviewed by the current DI Director, Marina Stopler, DPD and DI faculty. The objectives guide the program towards meeting the ACEND requirements for first-time pass rate, pursuing employment, and provide encouragement to become MS-level RD's. The objectives are accomplished through the activities of the DI, including the pre-professional supervised practice experience and the preceptors, the MS Nutrition program, the interns, and the DPD/DI Advisory Board.

2. Directions: Include supporting documents with your narrative or in the appendices.

Data and supporting documents can be found in Appendices H and P.

Exhibit for goals to demonstrate achievement of Standard 6: Minutes from planning meetings or other documentation that shows how individuals are involved in goal development for goals to demonstrate achievement of Standard 6 is in Appendix F.

3. Directions: Use the checklist below to evaluate how well your program meets the overall standard and guidelines for *Program Objectives* (check only one):

Meets

<input checked="" type="checkbox"/>
<input type="checkbox"/>

1. No compliance problems are present.

2. Compliance problems exist, but all are being resolved successfully.

Partially Meets

<input type="checkbox"/>

Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet

<input type="checkbox"/>

Plans to address compliance problems are not viable or have not been developed.

Program Planning and Outcomes Assessment

Note on Expectations for Demonstrating Compliance with Standard 7 -- Program Assessment: ACEND's accreditation process typically involves two types of reports, Self-Study Reports (SSRs) and Program Assessment Reports (PARs). The relationship between the two types of reports may have been unclear in the past, resulting in some programs having difficulty in providing information that met the expectations of ACEND reviewers.

At the most fundamental level, the Self-Study Report is designed to provide answers to two questions: First, how well is the program meeting the accreditation standards, and second what kinds of outcomes is the program actually producing that demonstrate that it is effective? In contrast, the PAR is primarily focused on the kinds of outcomes that the program actually produces to demonstrate that it is effective. Both the SSR and the PAR processes must include both a narrative that describes and explains the outcomes data resulting from your program's assessment process, along with a summarized version of information about objectives and outcomes that gives a five-year overview of the program's expectations and progress.

Please note that when you address Standard 8 later in your report, you should use the results of your assessment process to document your program's strengths and areas for improvement which, in turn justify your action plans and short- and long-term strategies for program improvement and maintenance.

Standard 7: Program Assessment

The program must have a written plan for on-going assessment of the achievement of its mission, goals and objectives.

Guideline 7.1

The written assessment plan must include the following components

- a. Each program goal and the objectives that will be used to assess achievement of the goal
- b. Qualitative and/or quantitative data needed to determine if objectives have been achieved
- c. Groups from which data will be obtained; internal stakeholders (such as students/interns, 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
- d. Assessment methods that will be used to collect the data
- e. Individuals responsible for ensuring that data are collected
- f. Timeline for collecting the necessary data

Guideline 7.2

The program must continually assess itself and provide evidence of the following:

- a. That data on actual program outcomes for each pathway or option are collected, summarized and analyzed by comparing actual outcomes with objectives according to the timeline in the assessment plan.
- b. That data analysis is used to assess the extent to which goals and objectives are being achieved.

1. Directions for Writing the Narrative: Describe how your program currently meets or plans to meet standard and guidelines (7.1-7.2) for *Program Assessment*. Be sure to address relevant tips and support to assist you in preparing your responses that are provided in the 2012 Standards document for your specific program type.

- In your narrative, indicate who is involved and describe the process used to develop the assessment plan for the program.
- In your narrative, explain how the assessment process has been implemented over the past five years, including how, when and which groups were contacted for feedback or data.
- Do the following steps for each goal and report the results in your narrative:
 1. Discuss how the objectives (expected outcomes) for the goal compare with the actual outcomes, and describe all relevant findings. For programs with different degrees, tracks, options, distance education pathways, etc., be sure to summarize the findings for each pathway separately, and provide an analysis of comparability across pathways.
 2. Based on your program assessment data, state if your program is meeting the goal, and if "no", please explain why.

Program Assessment (Standard 7):

The formal methods by which Lehman’s DI is assessed are described in the written plan for ongoing assessment of the program’s mission, goals, and expected outcomes (objectives). This assessment plan is outlined in the Program and Outcome Assessment Matrix (Appendix G). The outcome measures of program completion, graduate employment rates, graduate pass rates on the registration examination, employer ratings of graduate performance, and graduates completion of MS programs will be used as a means to assess the achievement of our program goals initially set by the former DI Director, Sue Tree, and continued by the present DI Director, Marina Stopler and overall based on mandated assessment measures and those appropriate to assess the mission and goals of the program.

Many stakeholders contribute to the assessment of Lehman’s DI. These include internal stakeholders such as interns, graduates, administrators, preceptors (as potential employers of DI graduates), and program faculty. External stakeholders include employers of our students, and faculty from other institutions, and members of our Advisory Board.

Program Completion: Our current program completion rate is seen in the following table:

Year of enrollment	# interns enrolled at the start of the DI (end of August)	# interns dropped from the program	# interns graduated after 18 months of the start of the program (end of February)	% program completion rate	Satisfies 80% target
2011-2012	14	2	12	86%	yes
2012-2013	13	0	13	100%	yes
2013-2014	14	0	14	100%	yes
2014-2015	14	1	12	86%	yes
2015-2016	14	0	14	100%	yes
Totals	70	4	65		
Average				94.4%	yes

Since 2011, the percentage of students or interns completing the program within 150% of the time is 94.4%. This meets the 80% target goal set by the program. One intern in 2014 completed the program one month after the 150% goal due to a delay in a rotation when a principle preceptor left her position. Between 2011 and 2014, three interns who started the program did not complete it; one intern dropped the program to pursue a medical degree (2014), one intern left the program for unknown reasons (2011), one intern was terminated from the program (2011). For 2012, 14 interns were matched with Lehman, but according to the records, only 13 attended the orientation and started the program in August. Please see Appendix P for 2014-2015 Intern Data.

According to the 5-year *Lehman DI Alumni Survey*, <https://docs.google.com/forms/d/1C6GMrX4V5-5y-vmWPGXAFpeRaBjx2h8mR7c0j9qLJ04/edit#responses>, out of 41 respondents (2010-2015), 40 alumni replied that they completed the program within 18 months, or 97.6%. This is consistent with the data collected from the exit interview files.

Graduate Employment: 41 out of 60 interns (68.3%) with current email addresses from 2011-2015 returned surveys. 85.3% (35/41) are employed in the field of dietetics, either full-time or part-time. Based on the table below, 73.17% were employed within 6 months of completing the DI. The link to the *Lehman DI Alumni Survey* is: <https://docs.google.com/forms/d/1C6GMrX4V5-5y-vmWPGXAFpeRaBjx2h8mR7c0j9qLJ04/edit#responses>

Employed	0-3 months	0-6 months	0-12 months
Full-time = 29	10/29 = 34.5%	19/29 = 65.5%	27/29 = 93%
Part-time = 12	9/12 = 75%	11/12 = 91.2%	12/12 = 100%
Total = 41	19/41 = 46%	30/41 = 73.1%	39/41 = 95%

The minimum required rate that 70% of DI graduates who sought employment in dietetics were employed was achieved by those who responded to the question. It is worthwhile to note that within a year of program completion, 95% of graduates were employed. The program target of 70% was met.

Data were also collected for the classes of 2014 and 2015 six months after completion. For the two years that Marina Stopler was DI Director, 84.6% of 2014 interns and 78.6 of 2015 interns completed or are presently enrolled in a graduate program. Based on data collected from those years, 11/13 interns or 84.6% in 2014, and 11/14 interns in 2015 or 78.5% completed or are enrolled in a graduate program. There was no data available for interns in the years 2011, 2012, and 2013 from the former DI Director. Please refer to Intern Data in Appendix P.

Pass rate of first-time test takers on the registration examination:

The pass rate for first-time test takers on the RD Exam for those taking the exam between 2011 and 2015 is seen in the following table.

DI RD Exam first-time pass rate - data from 5 year summary report 2011-2015

Year	First-timers	# passing RD exam first-time	Annual pass rate in %
2012	8	5	62.5%
2013	6	5	83.33%
2014	25	21	84%
2015	11	9	81.82%
2016	17	16	94.1%
	67	56	83.5%

The overall pass rate of first-time test takers on the RD Exam over the last five years is 83.5%. Sixty-seven interns took the RD exam between 2012 through 2016. Of the 67, 56 passed the examination on the first try. The pass rate has been consistently over 80% since 2013. The target goal of 80% first-time pass rate was met.

In 2014 and 2015, additional study guides for the RD Exam were implemented, DI Director met with interns and spoke with preceptors and faculty to identify interns who were having difficulty. The 2016 first-time pass rate of 94.1% exceeded the benchmark of 80%. Future planning will incorporate maintaining a first-time pass rate of 80% or over.

Employer Satisfaction:

The *Dietetic Employer Survey* was emailed to those who employed Lehman College DI graduates over the past five years. The survey was sent to 40 administrative dietitians, chief dietitians, clinical managers, directors/managers of nutrition services, entrepreneurs/self-employed dietitians, food service directors, nutritionists, nutrition educators, outpatient dietitians, senior nutritionists, and WIC directors/coordinators with active emails. Twenty-one employers responded (21/40 = 52.5%).

Out of 19 responses, for on-the-job performance, 68.4% of interns (n=13) were evaluated as excellent, and 31.6 (n=6) as very good. 100% of the employers rated the interns above average, and therefore above the 75% objective criteria. Target goal was met.

Out of 17 responses, for ethically and culturally sensitive, 47.4% (n=9) were evaluated as excellent, and 52.6% (n=10) as very good. 100% of the employers rated the interns above average for ethical and cultural sensitivity, and therefore above the 75% objective criteria. Target goal was met.

It is worthwhile to note that, out of 20 responses for employer satisfaction, 70% (n=14) of employers were very satisfied and 30% (n=6) satisfied for a total of 100% positive satisfaction rating. Also, according to employers, Lehman DI graduates were particularly well-prepared in the areas of Medical Nutrition Therapy (n=17, 94.4%) and Nutrition Education (n= 14, 77.8%).

During this time period, preceptors and the advisory board provided suggestions for ways to improve job performance.

Link to the *Employer Survey*:

<https://docs.google.com/forms/d/1C0Y18KoLio7xQatYT1T8mA9rTHJ18nCVSBcJ4WRtkWg/edit#responses>

Graduate School Acceptance/Completion rate:

According to the *Lehman Dietetic Internship Alumni Survey*, out of 41 respondents, 23 have a graduate degree (56%) and 11 are pursuing a graduate degree (26.8%), amounting to 82.9% (34/41) of Lehman DI graduates having pursued or pursuing higher education. 65.8% of the respondents to the survey agreed or strongly agreed that they were prepared and encouraged to complete a graduate degree in nutrition or related field while enrolled in Lehman's DI Program. Link to Alumni Survey:

<https://docs.google.com/forms/d/1C6GMrX4V5-5y-vmWPGXAFpeRaBix2h8mR7c0i9qLJ04/edit#responses>

Data were collected for the classes of 2014 and 2015 based on transcript records and the Lehman graduate advisor (information incomplete from prior years) and in 2014 100% (13/13) of the interns either completed or are pursuing a graduate degree, and in 2014 92.8% (13/14) either completed or are pursuing a graduate degree.

Target goals were met. Intern Data (Appendix P)

The *DI Exit survey* (Chart Summary 2010-2015, Appendix P) revealed that 85.5% (68/73) of the interns felt prepared and encouraged while at Lehman College to continue to pursue higher education and work towards a graduate degree in Nutrition or another health-related field. The DI Exit Survey is given yearly at the completion of the internship and may reflect a more accurate reflection of the encouragement provided at the time. Target goals were met.

2. Directions: Include supporting documents with your narrative or in the appendices.

- In the appendices, attach your completed **Program Goals Assessment Planning Summary Matrices**. Your completed matrices should also include a summary of the feedback and data collected over past five years. Appendix G.
- Complete a new set of **Program Goals Assessment Planning Summary Matrices** for the next assessment period and place it in the appendices. (A blank matrix is available for your convenience. *Refer to Appendix for the template.*) Appendix G.
- Intern Data (2014-2015) Appendix P.
- Chart Summary (2010-2015) Appendix T.

3. Directions: Use the checklist below to evaluate how well your program meets the overall standard and guidelines for *Program Assessment* (check only one):

Meets

X

1. No compliance problems are present.
2. Compliance problems exist, but all are being resolved successfully.

Partially Meets

--

Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet

--

Plans to address compliance problems are not viable or have not been developed.

Standard 8: On-going Program Improvement

Results of the assessment process must be used to identify strengths and areas for improvement relative to components of the program, including policies, procedures, curriculum, faculty, preceptors and resources based on achievement of objectives and goals. Actions must be taken to maintain program strengths and address areas for improvement identified through the assessment process.

Guideline 8.1

The program must implement and monitor action plans to improve all aspects of the program not limited to the mission, goals and objectives and provide evidence of the improvements, including graduate performance on the registration exam.

Guideline 8.2

Short- and long-term strategies must be designed to maintain or improve future program effectiveness and achievement of goals and objectives.

Guideline 8.3

Costs to accomplish short- and long-term strategies should be included in the budgeting process.

Guideline 8.4

Programmatic planning and outcomes assessment should be integrated with institutional planning and assessment.

1. **Directions for Writing the Narrative:** Describe how your program currently meets or plans to meet standard and guidelines (8.1-8.4) for *On-going Program Improvement*. Be sure to address relevant tips and support to assist you in preparing your responses that are provided in the 2012 Standards document for your specific program type. Using information identified through student and program data collection and assessment of program components, describe (a) actions over the last five years to maintain or improve the program along with the resulting outcomes, and (b) the plans for improvements over the next assessment period. Be sure to elaborate on your responses relative to actual achievement of your program goals and objectives discussed under standard 7.

8.0 Describe the program's strengths and areas for improvement. These need to be identified through the outcomes of the program assessment process including policies, procedures, curriculum, faculty, preceptors and resources based on achievement of objectives and goals.

Strengths:

Results of the assessment process were used to identify strengths and areas for improvement relative to components of the program, including policies, procedures, curriculum, faculty, preceptors and resources based on achievement of objectives and goals. Actions to maintain program strengths and address areas for improvement were identified through the assessment process.

Cumulative assessment of all feedback described in Standard 7 is used to determine the overall strengths of the DI program and suggest areas for improvement. These analyses and discussions take place in formal and informal settings between the DI Director, faculty, former interns, and preceptors. This information is also conveyed to and discussed with other DPD program faculty who teach in the DPD and MS Nutrition program at Lehman and with members of the Advisory Board. Our interns complete our program, secure professional positions in the fields of dietetics, food, and nutrition in a timely manner, perform well on the job, and get accepted and complete graduate degrees. The first two years after the curriculum changes made in 2010, interns still struggled to pass the RD Exam on the first-attempt with a first-time pass rate of 75% and 62.5%, in 2011 and 2013 respectively. In the last four years (2013, 2014, 2015, and 2016), the interns did well in passing the registration examination on the first-attempt.

Our interns do well when it comes to completing the program, finding a job, performing well on the job, and being ethically and culturally sensitive, and in the last four years, improved in passing the registration examination on the first attempt. The Lehman DI will continue to monitor the program based on graduation records and surveys (completion exit survey, 6-month exit survey, and 5-year employer survey). Changing the status of the Lehman DI to full time may change the focus of some students who may be more time-committed to the program vs. employment during the internship.

The Lehman College Dietetic Internship will continue to improve the program to maintain the 80% first-time pass rate benchmark and its other goals and objectives.

Teaching and Learning Methods:

First introduced in 2015 to maintain the first-time pass rate, the DI program will increase the number of guest speakers and incorporate field trips for educational enhancement in teaching. In addition, the DI will provide sufficient in-class RD exam review during seminars and will include exit exams in each of the three semesters (fall, spring, and summer), an Exit exam (at the end of the summer session) and practice RD exams via computer software. Lastly, the Nutrition Counseling class (modification of HEA 620) is to be offered as a traditional face-to-face course. This will be implemented by the DI Director, Marina Stopler, and professor for DFN 731 (Seminar) beginning with the spring 2017 semester and will be ongoing.

Faculty and Preceptors:

The Lehman DI will continue to improve the review of present affiliations and maintain affiliations with preceptors who have strong evaluations and provide solid pre-professional practice experiences. The Lehman DI will continue to increase the number of sites/preceptor affiliations to have more sites suited to meet DI Competencies and Learning Outcomes of the program. Site visits will be performed on a more regular basis. Beginning in spring 2017, the Nutrition Counseling course will be taught by an RD with extensive counseling experience. Implementation of these improvements are ongoing beginning in spring 2017, and the addition of a new adjunct faculty member will also begin in spring 2017. The DI Director will implement the affiliations and site visits. The DI Director and full-time faculty have an integral role in adding a new faculty member to improve program first-time pass rate.

Educational Resources:

By increasing the availability of resources for exam review/study/reinforcement of material in department (on-campus) and by increasing the utilization of web-based learning material for exam review/study/reinforcement outside of class-time (off campus), the interns will be exposed to a greater number of opportunities to monitor and improve their competencies and learning outcomes. With material, fresh in the minds of the interns in the summer of the year of completion of the DI, interns will be encouraged to take the RD exam before the end of the year. This will be implemented by the DI Director during the summer DI Seminar (DFN 731).

Faculty meetings/DI Director meetings:

We do well with informal meetings, email and, phone calls, but a more coordinated approach to discussing intern's acclimation to the program, academic progress, and formative evaluations during supervised-practice, can be implemented. The DI also plans to improve collaboration with other DI Directors in NYS to discuss DI experiences and discuss ways to maintain the first-time pass rate of interns. This will be implemented by the DI Director in the spring 2017 semester and it will be ongoing every fall, spring and summer semester.

Student Support Services:

The DI Director has an open-door policy for interns to stop by and discuss any matter that is on the intern's mind regarding the internship. Student Services will be incorporated on the intern's Blackboard site every semester for DFN 731 and DFN 730. Improve communication regarding types of support services available to interns. This will be ongoing beginning the spring of 2017.

If interns need assistance to improve grades or understand course material, Lehman College has instructional support services.

<http://www.lehman.edu/academics/instructional-support-services/index.php>

For DFN 731 summer 2016, services were utilized through the Career Services Center now called the Career Exploration and Development Center, <http://www.lehman.edu/career-services/services.php>. CEDC helps student, via workshops and mock interviews, to be prepared when they enter the workforce. The CEDC presented to the interns how to prepare a resume. For a follow-up, the interns were required to stop by the CEDC with an updated resume, and each intern had their resume reviewed, suggestions were provided, and resumes finalized. This service was not utilized previously. The Lehman DI wants to maintain a goal of 70% of interns finding employment within 6 months of DI program completion.

Areas for Improvement:

The DI program needs to improve in providing opportunities for more formal meetings and improved documentation with faculty, preceptors and the Advisory Board to discuss the needs of the interns, identify areas where we can continue to provide interns with the coursework and pre-professional practice skills needed in the dietetic field. The Lehman DI wants to maintain a first-time pass rate of 80% and greater.

The Lehman DI has numerous affiliations with preceptors in areas of clinical, community, food service, and research who can help the Lehman DI continue to seek resources to keep interns on top of the latest trends in the health-care field including the latest technology and web-based resources.

The Lehman DI will continue to provide resources to help the interns study for the registration examination. A second Department computer will be available for interns with installed practice RD exam software.

8.1 Action to maintain or improve the program:

Describe the actions over the last five years to maintain or improve the program along with the resulting outcomes (“close the loop”), to make program changes over the last five years. Include exhibits where appropriate.

Based on Standard 7:

- (a) 94.4% of interns complete the DI Program within 18 months of their start. Keeping the objective at 80% is realistic as some interns encounter challenges in the coursework and need to spread the didactic course over 4 semesters instead of three, and in most cases, interns may experience other issues such as family or health concerns that may necessitate the additional 6 months to complete the DI. The DI Director will continue to assess this objective with annual graduation records. Also, changing the status of the Lehman DI to a full-time program may be advantageous in regard to the students who apply to our program.
- (b) With 73.2% of the interns finding employment in dietetics within 6 months, the objective of 70% is met. It is realistic to keep the objective at 70% as we can never predict the changes in the economy and the field of dietetics to substantiate an increase in this objective. Efforts are made through the supervised practice and job postings for interns to network and interview for entry-level positions in dietetics. The DI Director will continue to assess this objective with a six-month exit survey and 5-year graduate survey.
- (c) With an 80% and above first-time pass rate in 2013, 2014, and 2015, changes made in the curriculum will remain; this includes the 3 semesters of DFN 731, end-of semester exams, and the DI Exit Exam. In addition, DFN 731 during the summer semesters in 2015 and 2016 were largely devoted to exam preparation including computer software installed on a Department laptop to provide opportunities for the interns to test themselves for each domain on the registration examination and to practice/focus on individual domains. The opportunity to take practice RD Exams seems to be a positive addition to the DI.
- (d) Based on 5-year employer survey results, 100% of the Lehman DI graduates met the above 70% threshold for performance and of being ethically and culturally sensitive. The DI Director will continue to assess the DI graduate with a 5-year survey and will keep a continuous log of where interns are employed after they complete the DI.

It is worth noting that there was a shift in faculty from 2013 to 2014. In 2014, Marina Stopler became the new DI Director. That same year Prof. Judith Porcari began teaching DFN 731 – Concepts and Methods in Dietetics, and with that brought her many years of clinical experience to the interns. Prof. Ilse DeVeer began teaching DFN 651 – Clinical Nutrition and brought her expertise and practice to the curriculum for the interns. And Dr. Katherine Burt began teaching DFN 641 – Community and Public Health Nutrition to the interns. Dr. Craig Demmer and Dr. Martine Scannovino continued to bring their expertise in their respective fields to the interns – Dr. Demmer teaching HEA 620 – Health Counseling, and Dr. Scannovino teaching DFN 661 – Food Service Management. The changes in faculty resulted in new collaboration in working with the interns and helping them achieve. There were many informal discussions to make sure interns were receiving the coursework as outlined by the competencies and learning outcomes. Actions that were effective and resulting outcomes were positive.

8.2 Describe short- and long-term strategies: that are designed to improve the program over the next five years.

Note: Align the strategies to the above strengths and areas for improvement.

Short-Term strategies:

- (a) When reviewing applications, include an interview as necessary to find students who meet the standards of the Lehman DI and are most likely to complete the DI within 18 months. By calling the internship a full-time program, we may eliminate some candidates who would have a difficult time committing to the DI.
- (b) Utilizing CEDC helps students via workshops and mock interviews to be prepared when they enter the workforce. The Lehman DI program wants to maintain a goal of 70% of interns finding employment within 6 months of DI program completion and will monitor employment status in the short-term.

(c) DFN 630 (Special topics in Nutrition: Nutrition Counseling) will replace HEA 620 (Health Counseling) and will be taught by an RD. (Health Counseling was taught by a LCSW). The RD teaching the course starting spring 2017 has extensive counseling experience and will introduce in-class activities where students learn nutrition counseling techniques and behavioral change strategies from each other as part of face-to-face case studies instead of online. This will be implemented in the spring 2017. This change was made to improve the co-requisite coursework and improve the program and its first-time pass rate in the long term. The DI Director, the graduate advisor, and the DPD Director worked together to make these changes.

The DI program needs to improve in providing opportunities for more formal meetings and improved documentation with faculty, preceptors and the Advisory Board to discuss the needs of the interns, identify areas of weaknesses, and incorporate new strategies to maintain a first-time pass rate above 80% for the next two years and longer.

(d) Site visits will be used along with evaluation forms to assess pre-supervised practice experience and determine the extent to which competencies and learning outcomes are being met. A log of site visits will be maintained. Employment satisfaction will continue to be monitored.

Long-Term strategies:

In the long-term, a rotation schedule will be implemented to meet with preceptors and site supervisors, share resources and experiences, and maintain affiliations (old and new) with sites that provide a positive learning experience. The DI Director will be working with preceptors to have a rotation schedule in place by spring 2018.

In addition to Lehman College's Academic Center for Excellence (ACE) and Science Learning Center (SLC), there are many other ways for interns to achieve academic success. In the long-term, a collaboration will be developed with the CEDC to incorporate more ways to provide services to the students to meet future employment needs. One route is with a resume, another is via LinkedIn, Instagram, and other new and upcoming ways for interns to network with other professionals in the field. The DI Director will work with the staff a CEDC to incorporate these strategies.

8.3 Costs to accomplish short- and long-term strategies included in the budgeting process.

There are no additional faculty or curriculum costs to the program. Field trips and computer software are purchased through the Department of Health Sciences via money collected from intern applications every spring. There are no additional costs for the guest speakers. If deemed appropriate, interns may be asked to contribute to an event if it exceeds funds that are within the discretion of the DI program.

8.4 Programmatic planning and outcomes assessment integrated with institutional planning and assessment. (Optional)

Lehman College, has developed and implemented an assessment process that evaluates its overall effectiveness in achieving its mission and goals and its compliance with accreditation standards. This is part of "The Institutional Assessment Standard 7 of the Middle States Commission on Higher Education." According to the outline (<http://www.lehman.edu/research/assessment/documents/InstitutionalAssessmentDocument-Aug2010.pdf>) the assessment sets out to answer very important questions such as: "As an institutional community, how well are we collectively doing what we say we are doing?" and, in particular, "How do we support student learning, a fundamental aspect of institutional effectiveness. Sources of data include current or incoming students, alumni, faculty and staff, employers, other institutions, and professional associations or organizations. Data can be collected from in-house, system-wide, or national surveys, focus groups, or brainstorming."

As a cultural center in the Bronx, Lehman has played an important role in educating and providing opportunities for its diverse population of students for many decades. Based on a new study released by The National Bureau of Economic Research and The Equality of Opportunity Project, the *New York Times* reports, in the January 18, 2017 edition of "The Upshot" that Lehman College placed #4 in the top ten colleges nationwide with the highest "mobility rate." In a message sent to Lehman students and faculty by the President, José Luis Cruz, PhD, "this new statistic measures how well colleges do in "propelling" individual students from the bottom 40 percent to the top 40 percent economically. It is a measure of the intergenerational socioeconomic impact of higher education institutions." (https://www.nytimes.com/interactive/2017/01/18/upshot/some-colleges-have-more-students-from-the-top-1-percent-than-the-bottom-60.html?ref=collection%2Fsectioncollection%2Fus&action=click&contentCollection=us®ion=stream&module=stream_unit&version=latest&contentPlacement=2&pgtype=sectionfront&_r=0)

The Lehman DI uses graduate records, six-month surveys, exit surveys, and 5-year graduate surveys, faculty evaluation forms, preceptor evaluation forms, and pass rate monitoring data to provide important information for program review and to assess strengths and weakness, and then make appropriate changes.

These methods do not differ from the College's assessment methods for utilizing and collecting data. We gain important information to see if we are fulfilling not only the goals and objectives of the program, but the mission, vision, and goals of the College.

Modifications in policy, curriculum, ongoing reviews, surveys, evaluation forms, and pass-rate monitoring are an important part of the program assessment process and will continue to be utilized. In the short term, improvements can be made in the collection of data. Faculty and intern evaluation forms will be reviewed to make sure they are synchronous with competencies and learning objective. Once reviewed, evaluation forms will be provided online and information compiled more quickly and more timely for review. Similarly, the six-month surveys and exit surveys will be provided as on online tool for gathering data and assessment. The DI, faculty and IT support services will help streamline this process to be accomplished in the long term.

2. Directions: Include supporting documents with your narrative or in the appendices.

3. Directions: Use the checklist below to evaluate how well your program meets the overall standard and guidelines for *On-going Program Improvement* (check only one):

Meets

X

1. No compliance problems are present.
2. Compliance problems exist, but all are being resolved successfully.

Partially Meets

--

Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet

--

Plans to address compliance problems are not viable or have not been developed.

Curriculum and Student Learning Objectives

Standard 9: Program Concentrations

In addition to the Core Knowledge and Competencies in Appendix A, the program must include at least one concentration designed to begin development of the entry-level depth necessary for future proficiency in a particular area.

Guideline 9.1

Dietetic Technician Education Programs and Didactic Nutrition and Dietetics Education Programs are not required to provide program concentrations, and are not required to demonstrate compliance with Standard 9 or its guidelines.

Guideline 9.2

The concentration area(s) must be chosen on the basis of mission, goals, resources and learning objectives

Guideline 9.3

Competencies and learning activities that build on the Core Knowledge and Competencies defined in Appendix A must be developed by the program for the concentration.

- 1. Directions for Writing the Narrative:** Describe how your program currently meets or plans to meet standard and guidelines (9.1-9.3) for *Program Concentrations*. Be sure to address relevant tips and support to assist you in preparing your responses that are provided in the 2012 Standards document for your specific program type.

The concentration in Lehman's DI is Medical Nutrition Therapy. This concentration is designed to address the program's location in the borough of the Bronx in New York City. It is our mission to provide career opportunities for working students. Our goal is to encourage intern success as future dietitians. And we have expected outcomes of successful employment, job performance, and attainment of advanced degrees.

The MNT concentration gives interns a possibility to experience assessment, diagnosis, and interventions for increasingly complex medical conditions. These conditions are particularly prevalent in and relevant to the Bronx. The Bronx has a large racial/ethnic population, many recent immigrants, a high rate of poverty, a large portion of elderly residents, and a large number of hospitals and long-term care facilities. The healthcare sector is the leading employer in the Bronx. Lehman is situated in an urban location that continues to need well-educated and trained healthcare workers who can successfully navigate the critical health issues of this borough.

Recent statistics according to the Census Bureau:

- population is estimated to be 1,455,444 (July, 2015)
- 30.3% live in poverty
- The median household income (2011-2015) is \$34,299
- 58.3% speak a language other than English at home (2011-2015)
- 34.4% are foreign-born

According to the NYC Department of Community Development (Feb, 2016 report), among families where a female heads the household, 49.9% live in poverty.

Although the Bronx has made many strides in growth and development in the past few years, the continued socioeconomic problems correlate with acute and chronic medical conditions. For example, according to healthyny.gov, heart disease is the leading cause of death in Bronx County (2,743/100,000), followed by cancer (2,120/100,000) and diabetes coming in 5th (23/100,000). Rates of hypertension and renal disease are significantly higher in the Bronx as well.

The MNT concentration was selected in the 2003 Self Study Application for Accreditation. At that time, renal disease was to be an area of concentration within MNT. However, without enough dialysis centers, in 2004, when Sue Tree became the DI Director, a more generalized approach to the MNT was established.

Lehman's MNT concentration teaches students to:

1. Perform a nutrition assessment, formulate a nutrition diagnosis, and plan intervention strategies for patients with complex medical conditions, included but not limited to diabetes, multi-organ failure, trauma, and renal disease.

2. Select, monitor and evaluate complex enteral and parenteral nutrition regimens for patients with complex medical conditions.
3. Develop and implement transitional feeding from enteral and parenteral nutrition support to oral intake.
4. Undertake nutrition counseling and education with patients with complex medical conditions.
5. Observe nasogastric and percutaneous endoscopic patient gastrostomy placement and care.
6. Participate in the care of patients requiring adaptive feeding devices.
7. Manage clinical nutritional services.

The matrix of supervised practice rotations aligned with the concentration area competencies is shown in Appendix O.

2. **Directions:** Include supporting documents with your narrative or in the appendices.

3. **Directions:** Use the checklist below to evaluate how well your program meets the overall standard and guidelines for *Program Concentrations* (check only one):

Meets

X

1. No compliance problems are present.
2. Compliance problems exist, but all are being resolved successfully.

Partially Meets

--

Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet

--

Plans to address compliance problems are not viable or have not been developed.

Curriculum and Student Learning Objectives

Standard 10: Curricular Mapping

The program must map its curriculum around ACEND's Core Knowledge and Competencies using sound educational methodology to prepare graduates to enter dietetics practice in any setting and produce optimal client or patient outcomes.

Guideline 10.1

- a. The curriculum map must identify didactic and supervised practice course(s) that students/interns will complete to meet each of the Core Knowledge and Competencies, including the Support Knowledge and the Concentration Competencies defined in Standard 9, Program Concentrations.
- b. The curriculum map must include supervised practice experiences that occur in various settings or practice areas to achieve the competencies in a manner appropriate for implementing the curriculum. Programs should include such areas as acute care, extended care, public health/community, prevention and wellness, and food service, but may also include other areas such as education, research, informatics, genetics/genomics, management, consultation, and so on.
- c. The curriculum map must sequentially and logically organize the progression of didactic and supervised practice courses from introductory to more advanced learning activities and build on previous knowledge or experience to achieve the expected depth and breadth of knowledge and competency by completion of the program.
- d. The curriculum map must culminate in experiences (such as planned staff experience) to demonstrate entry-level competence.

1. Directions for Writing the Narrative: Describe how your program currently meets or plans to meet standard and guideline (10.1) for *Curricular Mapping*. Be sure to address relevant tips and support to assist you in preparing your responses that are provided in the 2012 Standards document for your specific program type.

Lehman's DI includes supervised practice rotations that interns complete in order to meet each of the Competencies defined in Appendix I and the program-defined competencies for the concentration area(s). The supervised practice rotation course at Lehman is DFN 730: Supervised Professional Practice. Interns are enrolled in this course three times, starting in the fall semester, and continuing into the spring and summer semesters. Each semester's course lasts 15 weeks. In the fall of 2010, DFN 730 became a 3-credit course, taken 3 times. Interns are expected to complete approximately 400 hours of supervised practice during each of the three semesters in DFN 730. The minimum assignment of 1200 hours of supervised practice is divided into rotations of 470 hours of Medical Nutrition Therapy, 300 hours of Food Service Management, 280 hours of Community and Public Health Nutrition, and 150 hours devoted to a research project that will include data collection, analysis and preparation of a report project.

During each of the three semesters of the DI, the interns are also enrolled in DFN 731: Concepts and Methods of Dietetics Practice. In 2010 this became a 3-credit course, meeting 2 hours and 40 minutes per week for 15 weeks per semester. DFN 731 is taken three times coinciding with the supervised practice. The didactic activities in DFN 731 are designed to supplement and reinforce experiences and concepts encountered during the supervised practice.

The program's other didactic courses are taken in the following order. In the fall semester, which is the first semester of the DI, the interns are expected to enroll in DFN 651 (Clinical Nutrition) while they are also enrolled in both of the above described courses (DFN 730: Supervised Practice and DFN 731: Supervised Practice Seminar). DFN 641 (Community and Public Health Nutrition) is the didactic course to be taken during the spring semester. HEA 620 (Health Counseling) is another required didactic course which can be taken either in the fall or spring semester, although it is recommended that interns who have not taken an intensive health counseling course during their DPD experience should take HEA 620 in the spring. Interns are expected to take DFN 661 (Food Service Management) during the last semester of the DI, which is the summer semester. Interns who have taken any of the four didactic courses prior to the start of the DI are not required to repeat these courses once enrolled in the DI. If they have already completed a course in MNT, they are the first interns selected for rotations in clinical care.

The curriculum sequence is as follows:

Courses/Supervised Practice	Fall	Spring	Summer
DFN 651: Clinical Nutrition (3 credits)	X		
DFN 641: Community and Public Health Nutrition (3 credits)		X	
HEA 620: Health Counseling (3 credits)	X	Or X	
DFN 661: Food Service Management			X
DFN 730: Supervised Practice (3 credits x 3 semesters), clinical, food service, community	X	X	X
DFN 731: Concepts and Methods in Dietetics Practice (3 credits x 3 semesters)	X	X	X

Since assignment to each rotation is not sequential, interns may begin in any one of the three supervised practice rotations. However, the curriculum for Lehman’s DI is designed so that individually, the food service and MNT rotations are an organized sequential experience that logically progresses from introductory learning activities and builds on previous experience to achieve the expected competency upon completion.

The Curriculum Planning Matrix of Supervised Practice Rotation aligned with the DI competencies is supplied in Appendix I. The supervised practice syllabus, is designed first to orient the intern to the facility, and then provide experiences that begin with fundamental knowledge and skills and then progress to requiring more advanced knowledge and skills. For example, during the 470 hours of the MNT rotation, which includes the concentrations for Lehman’s DI, the intern, after orientation begins experience on a general medical floor and proceeds to investigate increasingly complex conditions including critical care and nutrition support. Having experienced all required clinical competencies, they the can spend one week performing quality assurance and continuing quality improvement activities which may be undertaken on any unit that they have already experienced, as deemed appropriate by the primary preceptor. The MNT rotation concludes with a culminating experience. Interns are expected to take on the responsibilities of an entry-level dietitian to demonstrate that they have acquired entry-level competence.

Similarly, during the 300 hours in the food service management rotation, interns are introduced to the facility and then proceed to experience food procurement, production, distribution, and equipment and facilities sanitation. The interns progress to experience personnel and budgetary management issues and finally participate in taking on the responsibilities of a food service director/supervisor by performing quality assurance and continuing quality improvement activities and staff relief.

The community supervised practice experience cannot as clearly be described as a sequential experience. Instead the interns are provided with different experiences at multiple sites, a selection that might include WIC, Head Start, HIV/AIDS community centers, ambulatory care, etc. where they principally undertake nutrition education activities for these different populations. Within each site, however, an orientation takes place, and interns are given more challenging activities and assignments as the experience progresses.

Sequencing the MNT and Food Service Management Rotation may be seen in the DFN Curriculum and sample supervised rotation schedule in Appendix K.

In the didactic courses, the sequencing is also seen:

The syllabus for the first semester of the DFN 731 seminar course is designed to introduce the intern to the practice of dietetics. This includes topics such as orientation to the program, the professional code of ethics for dietetics practice, institutional accreditation, nutrition screening and the nutrition care process. Throughout the three semesters, interns are expected to complete coursework covering a variety of diseases, complete cultural competencies, participate in journal clubs and discussion board forums. Work submitted is expected to be answered using evidence-based research. Resources include textbooks, AND’s Evidence Analysis Library, journal articles and other well-respected resources on the internet such as Mayo Clinic and NIH. Throughout the fall and spring semesters complex medical conditions are discussed beginning with cardiovascular disease, nutrition education and counseling, and progresses to diabetes, renal disease, oncology, hepatic disease and enteral and parenteral nutrition. During the summer pediatrics, pregnancy and, lactation are discussed with review sessions on each of the domains of the registration examination. The syllabi for the three semesters are in Appendix M.

In the didactic course DFN 651 (Clinical Nutrition) interns are expected to progress through the examination of clinical situations through case studies of conditions with increasing complexity.

The order in which interns are assigned to a particular facility is random based on availability of sites given the issues considered below. Since interns spend different lengths of time in each facility, depending on the number of hours they spend there each week, interns are not necessarily ready to shift to a new site when a site becomes available. The rationale used to assign interns to a specific location is dependent on several factors. It is planned that whenever possible, interns who have completed an MNT didactic course prior to enrollment are the first to start the MNT rotation. If the course is not taken first, then the interns chosen to start the MNT are those believed to be more advanced experientially and academically in clinical care.

The primary determining factor for placement at a specific site is the number of interns already at a site and whenever the preceptors can accommodate an intern who needs placement. Other considerations for placement at a specific site include whether an intern has had prior professional experience, the geographic desirability of the site for the intern so as to avoid asking interns to travel more than 90 minutes in each direction, and whether the intern's personality and experience is considered to be a good fit for a particular preceptor and the institutional culture.

2. Directions: Include supporting documents with your narrative or in the appendices. Be sure to specifically include a Curriculum Map.

3. Directions: Use the checklist below to evaluate how well your program meets the overall standard and guidelines for *Curricular Mapping* (check only one):

Meets

<input checked="" type="checkbox"/>
<input type="checkbox"/>

1. No compliance problems are present.
2. Compliance problems exist, but all are being resolved successfully.

Partially Meets

<input type="checkbox"/>

Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet

<input type="checkbox"/>

Plans to address compliance problems are not viable or have not been developed.

Curriculum and Student Learning Objectives

Standard 11: Learning Activities

The program's curriculum must provide learning activities to attain all the Core Knowledge and Competencies (Appendix A) defined to enter practice as a registered dietitian.

Guideline 11.1

- a. Learning activities must prepare students/interns for professional practice with patients/clients with various conditions, including, but not limited to overweight and obesity, diabetes, cancer; cardiovascular, gastrointestinal and renal diseases.
- b. Learning activities must prepare students/interns to implement the nutrition care process with various populations and diverse cultures, including infants, children, adolescents, adults, pregnant/lactating females and the elderly.
- c. Learning activities for students/interns must develop collaboration, teamwork, problem-solving, critical- thinking and self-assessment skills; and personal and professional attitudes and values, cultural competence, leadership and decision-making skills.
- d. Learning activities must use a variety of educational approaches (such as field trips, role-playing, simulations, problem-based learning, classroom instruction, laboratory experiences) necessary for delivery of curriculum content, to meet learner needs and to facilitate learning objectives.
- e. Learning activities must include opportunities for students/interns to participate in interdisciplinary learning activities.
- f. Learning activities must be documented in course syllabi and supervised practice rotation descriptions with clearly defined objectives reflecting the breadth and depth of didactic and supervised practice course content and expected student performance.

1. Directions for Writing the Narrative: Describe how your program currently meets or plans to meet standard and guideline (11.1) for *Learning Activities*. Be sure to address relevant tips and support to assist you in preparing your responses that are provided in the 2012 Standards document for your specific program type.

A variety of educational approaches are used to deliver curriculum content, to meet learner needs, and to facilitate experiential learning outcomes. Interns experience courses in the classroom and online and through face-to-face interactions, blended learning environments, and through daily asynchronous course content. The availability of distance learning allows interns increased flexibility given their complicated schedules. Interns are expected to take individual responsibility for their own learning. Interns are expected to perform independent research to uncover the evidence-based information that would allow them to complete the various assignments. Those interns who perform the most research in completing assignments are found to perform better on subsequent tests of knowledge. Interns learn by simulations, role-playing, case studies, journal clubs, discussion board forums, research papers, and presentations. Online quizzes and tests are also used to provide the flexibility that allows interns to complete them at convenient times. Interns are required to attend one professional meeting of their choice during the year. Guest speakers with specific and important expertise are invited to speak to the interns.

Interns have opportunities to develop collaborative and critical thinking skills throughout the DI. Problem-based learning using a case study approach is part of the learning process in a number of courses in the DI, enabling interns to develop critical thinking and reasoning skills. Part of the syllabus of DFN 651 (Clinical Nutrition) requires an abstract review of a research article in which the students work in groups. Collaborative assignments are required in other didactic learning activities. In DFN 661 (Food Service Management) interns work on a team to plan and execute the creation of a food production facility. In DFN 641 (Community and Public Health Nutrition), interns choose a community and perform a community nutrition needs assessment.

The didactic course incorporates interviewing and counseling techniques and opportunities to share information via PowerPoint presentations.

Learning experiences requiring interdisciplinary interactions occur throughout the supervised practice rotations (DFN 730). Interns interact with other healthcare professionals in acute and long-term care facilities, food service operations and community sites. The interns provide in-service presentations to food service personnel, give presentations to physicians and nurses during grand rounds, and interact with case managers, social workers and speech language pathologists at community and long term-care facilities.

Interns have many opportunities to acquire cultural competence. They experience diversity at all rotation sites through interactions with both the facility's staff and patients or clients. In addition, the DI classes are composed of interns from diverse cultural and ethnic backgrounds, as are the students and faculty at Lehman College.

2. Directions: Include supporting documents with your narrative or in the appendices.

3. Directions: Use the checklist below to evaluate how well your program meets the overall standard and guidelines for *Learning Activities* (check only one):

Meets

<input checked="" type="checkbox"/>
<input type="checkbox"/>

1. No compliance problems are present.

2. Compliance problems exist, but all are being resolved successfully.

Partially Meets

<input type="checkbox"/>

Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet

<input type="checkbox"/>

Plans to address compliance problems are not viable or have not been developed.

Curriculum and Student Learning Objectives

Standard 12: Curriculum Length

Length of the program must be based on the institution's requirements and ability to implement the curriculum and must include a minimum of 1200 hours of supervised practice experience.

- 1. Directions for Writing the Narrative:** Describe how your program currently meets or plans to meet standard for *Curriculum Length*. Be sure to address relevant tips and support to assist you in preparing your responses that are provided in the 2012 Standards document for your specific program type.

The length of Lehman's DI is 3 semesters, starting in the fall semester, continuing in the spring semester, and concluding at the end of the summer semester. The alignment of the program with semesters, starting in the fall semester and finishing in the summer semester, is a commonly accepted practice in higher education. The curriculum's three-semester length enables the interns to divide the didactic component into manageable sets based on past experience in both undergraduate and graduate programs.

The goal of Lehman's DI has always been to enable working DPD graduates to pursue the DI. This has been the basis for our curriculum length of three semesters. Interns find that committing time to the DI is a financial burden because they must decrease their work schedule from full-time to part-time and therefore earn considerably less and also likely sacrifice benefits. A longer program would necessitate even greater financial sacrifice. This goal of three semesters was more realistic when Lehman's DI required a minimum of 900 hours of supervised practice prior to 2010. To keep the curriculum length to one year of three academic semesters, interns need to commit to a minimum of 30 hours of supervised practice per week.

- 2. Directions:** Include supporting documents with your narrative or in the appendices.

- 3. Directions:** Use the checklist below to evaluate how well your program meets the overall standard and guidelines for *Curriculum Length* (check only one):

Meets

X

1. No compliance problems are present.
2. Compliance problems exist, but all are being resolved successfully.

Partially Meets

--

- Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet

--

- Plans to address compliance problems are not viable or have not been developed.

Curriculum and Student Learning Objectives

Note on Expectations for Demonstrating Compliance with Standard 13 -- Learning Assessment: ACEND's 2012 accreditation standards removed the requirement for programs to provide aggregated student outcome data for every knowledge requirement or competency as part of the learning assessment process for ACEND accreditation reviews. Nevertheless, your program must still provide a written plan that illustrates how each competency is being assessed and all students must continue to be assessed within the program to assure that they are all able to achieve all knowledge requirements and competencies needed for entry-level practice. You must discuss in your report the approaches used in your program for assessing student knowledge, competencies and professional attitudes, and provide examples of those tools in the appendices and on site. Some of the tools for assessing learning are listed below:

- Portfolios
- Oral presentations
- Exams
- Problem sets
- Pretest-posttest
- Observations
- Focus groups
- Journals
- Journal clubs
- Structured & open-ended interviews
- Evaluation rubrics
- Surveys

Your report must include a discussion with examples and data of where students in your program were found to not be achieving knowledge or competencies to your satisfaction. To demonstrate what you, your faculty or preceptors are actually doing, explain what type of assessment tools were being used, which competencies were involved, and the levels of student performance that were desired versus those that were actually achieved. You will also need to describe what was done to improve student performance and provide data on whether or not improvements actually occurred either in this report or your next scheduled report to ACEND.

If your students are highly successful in achieving specific knowledge or competencies as demonstrated through outcomes such as outstanding pass rates, internship and job placements, employer feedback and professional activities, it is even more important for you to explain the type of assessment tools that you are using, which competencies are involved, the levels of student performance that are being achieved, and what your program is doing to consistently maintain those high levels of achievement.

Standard 13: Learning Assessment

The program must develop a process by which students/interns are regularly evaluated on their acquisition of the knowledge and abilities necessary to attain each competency specified in Appendix A.

Guideline 13.1

The learning-assessment plan must include:

- a. Learning activity that will be used to assure the achievement of competencies/learning objectives
- b. Assessment methods that will be used
- c. Didactic and/or supervised practice course(s) in which assessment will occur
- d. Individuals responsible for ensuring that assessment occurs
- e. Timeline for collecting formative and summative assessment data

Guideline 13.2

Programs must assess the achievement of learning objectives that support competencies by comparing and analyzing them against student outcomes data. Programs must be able to provide their assessment plans, explain their assessment process, and describe the extent to which students are achieving learning objectives that support competencies along with the potential impact on student success and pass rates.

Guideline 13.3

In addition to rating student levels of performance against competency statements and objectives or confirming the presence of professional attributes, programs should thoroughly evaluate student progress using quantitative and qualitative approaches that clearly document what they have done to demonstrate knowledge and competence.

1. Directions for Writing the Narrative: Describe how your program currently meets or plans to meet standard and guidelines (13.1-13.3) for *Learning Assessment*. Be sure to address relevant tips and support to assist you in preparing your responses that are provided in the 2012 Standards document for your specific program type.

- In your narrative, indicate who is involved and describe the process used to develop the plan for assessing competency/learning outcomes.
- Briefly describe how the assessment process has been implemented over the past five years, including how and when student learning was assessed.
- Choose a minimum of two competencies in each domain, and then report on the results in your narrative:
 1. Discuss how the learning objectives (expected learning outcomes) compare with the actual learning outcomes and discuss all relevant findings in your narrative. For programs with different degree, option, or distance education pathways, be sure to summarize the findings for each pathway separately, and provide an analysis of comparability across pathways.
 2. Are students achieving the learning objective (expected learning outcome)? Yes []/No []. If “no”, please explain why.

The Lehman DI program has a written plan for ongoing assessment that demonstrates the process by which students are regularly evaluated on their acquisition of the knowledge and abilities necessary to attain each competency/learning outcome specified in Appendix I.

Full-time professors and adjunct faculty members were asked to supply syllabi for the co-requisite graduate courses that are required for the dietetic internship; these include DFN 731 (Concepts and Methods in Dietetics Practice, fall, spring, summer), DFN 651 (Clinical Nutrition, fall), DFN 641 (Public Health and Community Nutrition, spring), DFN 661 (Food Service Management, summer), and HEA 620 (Health Counseling, fall). Competencies were also included for DFN 730 (Supervised Practice) for all four major rotations (MNT, Food Service Management, Community, and Research). Faculty were requested to complete the Learning Outcomes matrix that had been developed by the previous DI Director. In the 6 major courses, faculty outlined which outcomes are planned to be assessed. The syllabi contained the assessment methods that would be used to determine whether the Learning Outcomes assigned to each course had been accomplished by the students. The information collected from discussions with the faculty, and from the syllabi submitted formed the basis for the Student Outcomes Assessment Plan including Concentration Competencies in Appendix O and is an outline of the learning-assessment plan.

The Lehman Dietetic Internship incorporates and evaluates a variety of learning assessment methods in courses across the curriculum including exams and quizzes, case studies, written research assignments, lesson plans, oral presentations, field trips, newsletters, volunteer experience, conference attendance, website contributions and participation in online discussion boards. The DI Director uses a summative assessment of intern learning after the completion of the DI (1200 hours supervised practice, completion of graduate co-requisite course work, and seminar (3 semesters and the DI Exit exam), prior to distribution of Verification Statements and submission of required material to the Commission of Dietetic Registration. Assessment takes the form of evaluation forms and an online, multiple-choice, timed examination, available to students on Blackboard prior to completion of the internship. The expectation is that a minimum grade of 80% must be earned in order to award the Verification Statement and to conclude that students have been successful in acquiring the knowledge and competencies necessary for success in the profession and practice of dietetics.

The learning-assessment plan includes the learning activities that will be used to assure the achievement of the competencies/learning objectives and the assessment method that will be used (column A), the course or the supervised practice rotation in which the assessment will occur (column B), the individual(s) responsible for ensuring that the assessment occurs (column C), and the timeline for collecting the formative and summative data (column D). Column E contains the student outcomes data.

Please note that for some objectives, information could only be collected for either 2015, or 2014 and 2015. The former DI Director did not leave any summative information for the intern classes of 2011, 2012, and 2013. In addition, with the loss of some professors in 2011, 2012, 2013, and 2014, there was no record of assessment information in the intern files. However, all of the intern records between 2011 and 2015 were reviewed by the present DI Director to collect 5-year summative information using data on all evaluation forms from all rotations by preceptors and by interns. Data is available for on-site review.

For the assessment of learning in **Domain 1: Scientific and Evidence Base of Practice: Integration of scientific information and research into practice**, the final grades in the course and the final exam in DFN 651 – Clinical Nutrition, which incorporates analytical data, research methods, and clinical case studies, is used for the assessment. The data suggest that in 2014 and 2015, the interns met the **CRD 1.1** (Select indicators of program quality and/or customer service and measure achievement of objectives) in that 83% of interns received a B or better on this exam (objective is 80%). It is worthwhile to note that the class averages (2014 and 2015) was 87% signifying that the majority of the interns did well on the challenging final exam. In addition, **CDR 1.4** (Evaluate emerging research for application in dietetics practice) was assessed using the grades of the high-stakes clinical case studies and presentation (oral/PowerPoint) by the interns in 2014 and 2015 in DFN 730/731 (supervised practice/seminar). The clinical case study paper and presentation are completed after the clinical rotation based on a patient in the clinical facility (hospital, nursing home, or rehabilitation center). 96.5% of interns received a grade of B or better on this required assignment (objective is 80%).

For the assessment of learning in **Domain 2: Professional Practice Expectations: beliefs, values, attitudes, and behaviors for the professional dietitian level of practice**, several assessment methods were used. For **CRD 2.3:** (Design, implement and evaluate presentations to a target audience), the attainment of a letter grade of B or better on the in-class presentation to school-age children, by at least 80% of the interns was assessed. Preparation for the presentation included a needs assessment of the population and target audience. Data collected in a 5-year summation reveal that 100% of the interns between 2011 and 2015 met this core knowledge requirement, and therefore met the assessment criteria. For **CRD 2.4** (Use effective education and counseling skills to facilitate behavior change), the attainment by at least 80% of students of a grade of B or better on the completion of the Behavior Change Project Awareness paper for HEA 620, Health Counseling) which contains specific questions about counseling techniques that facilitate behavior change, was achieved. 98.4% of the interns met that criterion (data collected between 2012 and 2015). **CDR 2.12** (Perform self-assessment, develop goals and objective, and develop draft portfolio for professional development as defined by the Commission on Dietetic Registration) was not met. Although students complete a self-assessment at the end of the dietetic internship, 66% of interns between 2010 and 2016 evaluated CRD 2.12 as being a strong or neutral. Although interns attend a professional conference as part of the DI, more emphasis needs to be placed on having interns understand and know how to prepare a draft portfolio for professional development. This will be added to the syllabus for DFN 731 beginning summer 2017.

For the assessment of learning in **Domain 3: Clinical and Customer Services: development and delivery of information, products and services to individuals, groups, and populations**, several assessment methods were used. To assess the students' ability to use the nutrition care process (**CRD 3.1**) the grades for the DFN 731 MNT rotation were collected and analyzed, according to the criterion that at least 80% of students will earn a grade of B or better. Between 2011 and 2015, 98.9% of interns achieved a grade of B or better; therefore, this criterion was met. To further evaluate CRD 3.1, MNT evaluation forms were reviewed to assess how many interns received a rating of "more than adequate" or "adequate" on "charts using the Nutrition Care Process and other methods and writes appropriate care plans." The criterion of 80% was used and based on the data, 95.9% of interns were evaluated as "more than adequate" and "adequate, meeting this objective. For the assessment of whether interns can coordinate procurement, production, distribution and service of goods and services, i.e. promote responsible use of resources, (**CRD3.5**) the grades of interns on the Simulations Product in DFN 661 (Food Service Management) were collected and reviewed between 2013 and 2015. 96% of the interns achieved a grade of B or better, which met the objective of 80% or above.

For the assessment of learning in **Domain 4: Practice Management and Use of Resources: strategic application of principles of management and systems in the provision of services to individuals and organizations**, several

assessment methods were used. For the attainment of **CRD 4.1** the overall letter grades in the DFN 730 Food Service rotation for Personnel Management were collected and analyzed. The criterion of 80% of students receiving a grade of B or better was met as 100% of students achieved this learning objective. To demonstrate achievement of **CRD 4.10** (Develop a plan to provide or develop a product, program, or service that includes a budget, staffing needs, equipment, and supplies), grades on the DESIGN Project in DFN 641 were collected in 2015. This 80% criterion of a grade of B or better was met as 85.7% of the interns achieved this objective.

In conclusion, using the assessment criteria described:

- **All the learning objectives for Domain 1 were met.**
- **Twelve out of Thirteen objective in Domain 2 were met.**
- **All the learning objectives in Domain 3 were met.**
- **All of the learning objectives on Domain 4 were met.**

The DI director will plan to meet program faculty twice per year (December and April) to review course syllabi and discuss learning assessment based on core competencies. In this faculty meeting, student acquisition of knowledge and abilities to attain each competency and learning outcome will be discussed and compared to expected competencies and outcomes according to the timeline in the assessment plan. Specific learning outcomes that are not being met, as measured by the identified assessment methods, particularly in Domain 2, will be evaluated as either: not a good measure of learning outcomes, or, as indicators that changes need to be made in order to ensure that interns are given the opportunities and assignments needed to show evidence of learning success. In additions, having at least one DI Advisory meeting per year will provide an opportunity for preceptors to give input on assessment in their respective dietary fields.

Other learning assessment methods are being considered such as online surveys by current interns for the purposes of self-assessment. These could be administered at the end of each rotation, co-requisite graduate course and seminar (DFN 731). The assessment methods are to be developed and piloted in the coming academic year (2017-2018). The surveys will be based on the core knowledge requirements and competencies expected of DI interns.

Concentration Summary: MNT

For “complex enteral and parenteral nutrition regimens: select, monitor and evaluate enteral and parenteral nutrition with complex medical conditions” in DFN 651 – Clinical Nutrition, interns completed a worksheet and 100% of interns in 2014 and 2015 achieved a letter grade of B or better. Also, the case study on GI disease and nutrition support was used to determine if the learning objective was met. 91.7% of interns achieved a grade of B or better. Therefore, the objective of 80% for both assessment methods was met.

For “nutrition counseling and education: undertake nutrition counseling and education for patients with complex medical conditions” during the MNT rotation, the objective criteria to assess learning outcomes were “80% of interns will receive an evaluation of “adequate” or “more than adequate” on the evaluation criteria of “effectively counsels patients and caregivers on diet and nutrition issues” and “understands and educates patients on specific food and medication interactions.” Based on accumulated data between 2011 and 2015, 97.9% of interns achieved the learning outcome related to effectively counseling patients, and 94% met the learning outcome correlated to understanding specific food and medication interactions.” Therefore, the learning objectives were met.

The DI Director will meet with faculty that teach clinical nutrition at least twice per year (December and April) to review curriculum and determine of learning outcomes are being assessed appropriately and that learning outcomes are being met. Also, the DI Director will meet with MNT preceptors to discuss assessment methods and learning outcomes through DPD/DI Advisory meetings and site visits at least once per year.

2. Directions: Include supporting documents with your narrative or in the appendices.

- In the appendices, attach your completed **Learning Assessment Summary Matrix** and **Program Concentration Summary Matrix for Learning Assessment**. Your completed matrices should also include a summary of the feedback and data collected (a minimum of two competencies in each domain) over past five years.
- Complete a new **Learning Assessment Summary Matrix** and new **Program Concentration Summary Matrices** for the next 5 years and place it in the appendices. Although all students must be prepared to meet every ACEND competency, you are only required to report aggregate data on a minimum of two competencies in each domain. (A blank matrix form is available for your convenience. *Refer to Appendix for the template.*)

3. Directions: Use the checklist below to evaluate how well your program meets the overall standard and guidelines for *Learning Assessment* (check only one):

Meets

X

1. No compliance problems are present.
2. Compliance problems exist, but all are being resolved successfully.

Partially Meets

--

Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet

--

Plans to address compliance problems are not viable or have not been developed.

Curriculum and Student Learning Objectives

Standard 14: On-going Curricular Improvement

On-going, formal review of the program's curriculum, including didactic and supervised practice course objectives and content, length and educational methods, must occur in order to maintain or improve educational quality.

Guideline 14.1

- a. Individuals conducting curriculum review should be aware of new knowledge and technology impacting dietetics practice and update the curriculum accordingly.
- b. Curriculum review must use results of the student learning and program outcomes assessment processes to determine strengths and areas for improvement.
- c. Curriculum review must include assessment of comparability of educational experiences and consistency of learning outcomes when different courses, delivery methods (such as distance education) or supervised practice sites are used to accomplish the same educational objectives.
- d. Curriculum review must result in actions to maintain or improve student learning.

1. Directions for Writing the Narrative: Describe how your program currently meets or plans to meet standard and guideline (14.1) for *On-going Curricular Improvement*. Be sure to address relevant the following tips.

- List overall curriculum strengths and areas for improvement based on cumulative assessment of student learning outcomes and program outcomes.

Curriculum Strengths:

The strength of the curriculum lies in its coverage of the critical areas of knowledge required by entry-level dietitians, the depth and breadth of didactic support, and the degree of integration of new information. In addition, the number of hours in the MNT rotation (minimum 470) reflects a greater degree of clinical experience and the Food Service Management rotation (300 hours) provides more exposure to management responsibilities of a registered dietitian/food service director.

The curriculum seems to have been integral in the improved pass rate, especially over the past 4 years. In 2013, 2014, 2015, and 2016, the first-time pass rate has been over 80%, with this past year reaching 91%

(Refer to the categories stated in the pass rate improvement plan for guidance)

Curriculum Areas for Improvement:

- Describe the process that was used to review the curriculum, including didactic and supervised practice (if applicable) course objectives and content, length and educational methods.

The DI faculty meets regularly to discuss the curriculum and suggest changes to reflect current practice, and these are implemented for the beginning of the fall semester when the new DI class starts.

The DI faculty reviews the curriculum during and at the end of each academic year. These reviews take place in periodic meetings of the program faculty at least once per semester. The program's curriculum is also discussed with members of the DI Advisory Board, which meets annually.

All needed curriculum changes are discussed first with the program and then sent to the Department's curriculum committee for review and discussion. If passed by the Departmental Committee, the changes are presented to the entire Department and discussed at a scheduled department meeting. If approved by this body, the changes are then forwarded to the Graduate Curriculum Committee of the Lehman College Senate. If approved by this body, the changes are sent to CUNY and if approved are published in the Chancellor's

report and then sent to the New York State Department of Education. The curriculum changes are then published in the Graduate College Bulletin and becomes effective at that point.

The strength of the curriculum lies in the coverage of critical areas of knowledge required by entry-level dietitians, depth and breadth of didactic support and degree of integration of new information. Areas of improvement include changes in the curriculum in the seminar in preparation for the MNT, research, and components of the Community supervised practice.

- Describe the schedule used and individuals involved in reviewing the curriculum.

The DI faculty formally reviews the curriculum during and at the end of each academic year. There are informal reviews that take place for each academic semester. The program's curriculum is also discussed with members of the DI Advisory Board, which meets annually.

Graduate interns, during their exit interview, are encouraged to critique the program and make suggestions for improvement in the supervised practice component based on their experiences. Interns receive a culminating Exit Exam at the end of their summer seminar (DFN 731) on which they are expected to gain a score of 80 or greater in order to graduate from the DI. This reflects the content of the supervised practice and covers the four domains of the registration examination. The DI Director reviews the results of the tests and analyzes the areas that are deficient and require additional attention.

In addition, primary preceptor evaluations are reviewed at the end of each semester by the DI Director.

Interns evaluate faculty members who teach the co-requisite graduate didactic courses and the seminar course through the use of online confidential evaluation forms known as **Student Evaluation of Teaching and Learning (SETL)** forms (Appendix T). SETL forms are completed at the end of each academic semester. The SETL evaluation forms replaced the Student Faculty and Course Evaluation Forms, which were distributed and collected in class, in 2012. A Lehman College Senate Committee meets to discuss the evaluation forms with the latest revisions occurring during the November 23, 2016 meeting, <http://www.lehman.edu/college-senate/documents/FinalSETLSurveyRevisionReportNov232016.pdf>.

SETL provides summary statistics used by individual faculty members, the DI Director, and the Chair of the Department to measure the intern's level of satisfaction with the courses to assess the need for course modification.

Graduates of Lehman's DI have several means of evaluating the program. At the completion of the internship, the graduate is individually interviewed by the DI Director to discuss the program. At the conclusion of the third semester of Seminar (DFN 731), interns complete the **Exit Survey** (Appendices Q and T) and the **Self-Assessment Survey** (Appendices Q and T). After six months, interns are contacted regarding employment status. (Appendix P), is sent out by the DI Director. The **Lehman College Dietetic Internship Alumni Survey** is sent out approximately every five years to maintain contact and get updates on the careers and graduate education of our DI graduates. In addition, the DI Director maintains an updated email address list of the graduates and periodically contacts them with updates, information requests, and employment opportunities.

The DI faculty meets regularly to discuss the curriculum and suggest changes to reflect the current practice, and these are implemented for the beginning of the fall semester when the new DI class starts. The faculty includes the DI Director, Dr. Andrea Boyar, the DPD Director, Dr. Lalitha Samuel, the Graduate Advisor, Professor Judith Porcari, Adjunct lecturer Mary-Ellen Dorfman, undergraduate professor for the clinical nutrition courses, and the four faculty members who teach the co-requisite graduate courses, Dr. Katherine Burt, Dr. Craig Demmer, Prof. Ilse DeVeer, and Dr. Martine Scannavino.

All needed curriculum changes are discussed first within the program and then sent to the Department's curriculum committee for review and discussion. If passed by the Departmental Committee, the changes are

presented to the entire Department and discussed at a scheduled Department meeting. If approved by the Department, the changes are then forwarded to the Graduate Curriculum Committee of the Lehman College Senate. If approved by this body, the changes are sent to CUNY and if approved are published in the Chancellor's report and then sent to the New York State Department of Education. The curriculum changes are then published in the Graduate College Bulletin and become effective at that point.

- Describe how the results of student learning and program outcomes assessment processes were used to determine strengths and areas for improvement for the program curriculum.

The results of student learning outcomes and program outcomes assessment were the basis for modifying the curriculum and changing Health Counseling (HEA 620) to Nutrition Counseling (temporarily DFN 630-Special Topics in Nutrition) and to modifying the curriculum in Concepts and Methods in Dietetics (DFN 731).

Health Counseling was offered as an online course. Interns felt that a face-to-face course would be more effective in learning counseling strategies. Health Counseling offered a broad scope of counseling in health fields but offered a somewhat narrow focus on nutrition counseling. Having an RD with extensive nutrition counseling experience teaching the course, instead of a licensed social worker, will be more beneficial for interns. For supervised practice rotation, education and counseling is an important component in the success of dietitians. Hence, meeting face-to-face on a weekly basis is deemed more beneficial for learning outcomes.

Concepts and Methods in Dietetics (DFN 731) was taught solely by Prof. Judith Porcari who has over 30-years' experience in clinical nutrition. Changes in the curriculum for the course will combine the knowledge and experience of both Prof. Porcari and the DI Director Marina Stopler as co-teachers of the course. Marina Stopler has more extensive experience in community nutrition through her experience supervising a WIC program in the Bronx, her expertise in the field of lactation, knowledge of sustainable food systems as a board member of a farmers market in Westchester County and 20 years teaching experience at Lehman College. The learning outcomes will be enhanced with emerging trends life cycle nutrition during pregnancy, lactation and infant/child growth, and sustainable food systems taught by the DI Director, and the continued strong clinical practices of Prof. Judith Porcari.

- Describe how information about new knowledge and technology impacting dietetics practice is obtained and integrated in the curriculum.

New information and technology is obtained through continuing education activities, access to the Evidence Based Library (EAL) and the Dietetic Practice-Based Research Network (DPBRN) via the AND website. This is integrated into the DI curriculum by informal discussions, incorporation into didactic activities, updating the course materials, and increasing the use of technology for teaching (hybrid and online classes) and research (internet). Interns prefer on-line activities as it gives them more flexibility to perform the required tasks and the ability to organize their schedules to deliver assignments based on their individual needs.

Lehman's Media Technology Services has improved technology in the classroom setting and enhanced online and hybrid learning experiences. "Technology has influenced the learning preferences of our students and has increased the range of options to enhance the classroom experience. Advances in both pedagogy and technology provide new ways to impact the student experience." <http://www.lehman.edu/itr/mts/>

Lehman now has technology enhanced classrooms (TECs) which enable instructors and students to access the equipment and tools that can provide a dynamic learning experience. As per the MTS link, "one of Lehman's priorities is to offer advanced services to students and faculty through the effective deployment of emerging technologies. As a result, we have proposed a focus within the 2016/17 Technology Fee process on accelerating the renewal of classroom technologies. Many of Lehman's TECs were outfitted several years ago and need a refresh to remain up-to-date with the learning requirements of students and faculty. The goal of

this effort is to enhance classroom technologies to minimize valuable class start-up time and create a more current and unified strategy to support teaching, learning, and student success.”

The classrooms used by the interns are equipped with a projector, screen, and a wall control panel connection and speaker system. Overall, Lehman has 146 classrooms that have this standard equipment.

The conference room in the Department now has two computers which can be utilized by faculty and interns for a variety of uses including research. Two Department laptops contain software for the interns to use and take practice registration exam questions. These upgrades in technology are used to improve the learning outcomes of the interns.

- Describe how is comparability of educational experiences and consistency of learning outcomes assessed and maintained.

It is important for evaluation forms by both interns and preceptors to be reviewed by not only the DI Director, but interns, faculty, and preceptors. They provide the information needed to assess the interns’ strength and weaknesses, but also the strengths and weaknesses of preceptors and sites. Feedback provides a start to agendas for DPD/DI Advisory meeting and discussions among faculty regarding the competencies and learning outcomes. Please refer to evaluation forms in Appendix T.

2. Directions: Include supporting documents with your narrative or in the appendices.

3. Directions: Use the checklist below to evaluate how well your program meets the overall standard and guidelines for *On-going Curricular Improvement* (check only one):

Meets

X

1. No compliance problems are present.
2. Compliance problems exist, but all are being resolved successfully.

Partially Meets

--

1. Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet

--

1. Plans to address compliance problems are not viable or have not been developed.

Program Staff and Resources

Standard 15: Responsibilities of the Program Director

The director of the program must have the authority, responsibility and sufficient time allocated to manage it. 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 administration.

Guideline 15.1

The program director must be responsible for assuring that all ACEND accreditation standards, policies and procedures are met; however, this can be achieved by managing or overseeing other individuals assigned to complete ACEND-related tasks. ACEND responsibilities should be included in the job description of the program director or the job description should state that the “program director is responsible for assuring that all ACEND accreditation standards, policies and procedures will be met.”

Guideline 15.2

Program director responsibilities must include, but are not limited to the following:

- a. 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/interns (such as program admission, retention and completion policies)
- b. Student recruitment, advisement, evaluation and counseling
- c. Maintenance of program accreditation, including timely submission of fees, reports and requests for major program changes
- d. Maintenance of the program’s student records, including student advising plans and verification statements; verification statements must be kept indefinitely
- e. Maintenance of complaints about the program received from students/interns or others, including disposition of the complaint
- f. On-going review of program’s curriculum to meet the accreditation standards
- g. Communication and coordination with program faculty, preceptors and others involved with the program
- h. Facilitation of processes for continuous assessment of program and student learning outcomes

1. Directions for Writing the Narrative: Describe how your program currently meets or plans to meet standard and guidelines (15.1-15.2) for *Responsibilities of the Program Director*. Be sure to address relevant tips and support to assist you in preparing your responses that are provided in the 2012 Standards document for your specific program type.

(Guideline 15.1) The program director is responsible for assuring that all ACEND accreditation standards, policies and procedures will be met.

(Guideline 15.2) Lehman’s DI Director:

1. Develops policies and procedures in consultation with the DI Program faculty and with the DI Advisory Board for effective management of the DI and to ensure, fair, equitable and considerate treatment of prospective and enrolled interns with regard to program admission, retention, and completion policies. The DI Policies and Procedures are described in the DI Handbook (Appendix Z);
2. Recruits new interns by attending open houses periodically at FNCE and at local and city-wide recruiting events. During weekly meetings with the interns she advises, evaluates and counsels.

3. Maintains DI accreditation by submission of (a) fee statements to the Provost's office for payment, (b) annual reports to ACEND, and (c) requests to the program faculty, department faculty, and college graduate curriculum committee and senate for major program changes;
4. Maintains DI intern records, including transcripts and DPD verification statements for admission, rotation schedules, all intern and preceptor evaluation documents, and verification statements of completion; and keeps verification statements indefinitely. The intern records and DI Verification Statements are kept in a designated file cabinet in the locked office of the DI Director.
5. Maintains complaints about the DI received from interns and others, including disposition of a complaint. The DI Handbook contains the policies and procedures which serve as the basis for handling of complaints;
6. Reviews the DI curriculum with other program faculty and the Advisory Board to meet accreditation standards as described in Standard 14;
7. Communicates and coordinates with DI faculty, preceptors, and others involved with the program;
8. Facilitates processes for continued assessment of the DI and intern learning outcomes as described in Standard 13.

The former DI Director, Dr. Sue Tree left the position in 2014. Marina Stopler, MS, RD, CDN, IBCLC, took over responsibilities in the fall of 2014. Marina Stopler is a full-time, adjunct lecturer and DI Director. She is required to teach 27 credits per academic year (fall and spring), which correlate to approximately 4-5 courses per semester including the supervised practice course (DFN 730 – 3 credits). Undergraduate courses taught during the academic year include: Nutrition and Health (HSD 240 – 3 credits), Nutrition throughout the Life Cycle (DFN 341 – 3 credits), and Clinical Fieldwork (DFN 471). The DI Director receives 1 credit per semester (fall and spring) for her position as director.

During the summer, the DI Director teaches Concepts and Methods in Dietetics (DFN 731 – 3 credits), Supervised Practice (DFN 730 – 3 credits) and Nutrition Throughout the Life Cycle (DFN 341). The summer courses are not part of the 27 credit-hour requirement for the DI Director position.

The DI Director devotes a minimum of 12 hours per week to run the Dietetic Internship to accomplish the responsibilities and program management responsibilities including maintaining accreditation standards.

The DI Director recruits prospective interns by attending dietetic internship fairs. The DI Director in the fall of 2014, 2015, and 2016 attended the GNYDA DI Fair in NYC. She attended the DI Fair hosted by Queens College CUNY, January of 2015 and 2016. The former DI Director, Dr. Sue Tree attended FNCE in the previous years to recruit prospective interns. The DI Director receives and responds to emails from prospective interns who have an interest in the Lehman Dietetic Internship program.

Annually in the fall semester, the DI Director along with graduate faculty and undergraduate DFN faculty host a Dietetic Internship Informational session. This helps undergraduate students in the DFN program to better understand the requirements of the Lehman Dietetic Internship and explains the application process. The majority of students who attend the DI Info session are juniors, with some sophomores and freshman attending as well.

From the time students are matched with the Lehman College Dietetic Internship Program, communication is conveyed by email, mail, telephone, and text, to make sure the process of transitioning to the role of intern and preparing for the supervised practice and graduate-level co-requisite courses runs efficiently. Over the summer, interns are expected to complete their ServSafe certification and CITI (Collaborative Institutional

Training Initiation) Certification. The DI Director and other faculty keep in touch both formally and informally from the time interns begin the DI. All interns have an orientation prior to the start of the DI. During the orientation, which lasts approximately 2.5 hours, the DI Director reviews the DI Handbook with the interns. At the completion of the orientation, a contract is completed between the interns and the DI Director.

As stated previously, prior to the start of the new intern class, curriculum is reviewed to update and strengthen the coursework for Concepts and Methods in Dietetics (DFN 731), and the four co-requisite graduate courses. During the summer the DI Director begins the process of contacting preceptors and setting up initial rotations that begin the last week of August.

Throughout the academic year, DI Director meets with the interns to discuss rotations, receive updates, and any other matters that pertain to the interns. With the DI Director co-teaching with Prof. Porcari the Concepts and Methods in Dietetics course (DFN 731), there will be a greater and more continuous opportunity for the DI Director to assess and address the needs of the interns to meet learning outcomes.

The DI Director reads weekly logs posted by the interns while they are on rotation to determine if learning outcomes are being met. Interns submit a binder or portfolio that includes the competencies for the rotation, hours completed (based on the submission of the weekly logs), and evaluation forms. The DI Director reviews the evaluation forms the interns complete for their preceptor and the forms the preceptor completes for the intern. If at any time the preceptor has an issue or concern about the intern, the preceptors know they can call or email the DI Director. Often during mid-rotation, the DI Director calls or emails the preceptor to check if the interns are meeting the standards of performance, practice, conduct, and proficiency expected of them. Therefore, the DI Director monitors interns' conduct and performance via personal observation and feedback from preceptors.

If a problem is identified with an intern's conduct or performance, the DI Director will first verbally counsel the intern in an attempt to correct the problem. If a problem continues, disciplinary action will follow. Disciplinary action is outlined in Policy 14 of the DI Handbook.

2. Directions: Include supporting documents with your narrative or in the appendices. Be sure to specifically include a formal job description of the program director listing responsibilities. Refer to Appendix R for DI Director Job Description.

3. Directions: Use the checklist below to evaluate how well your program meets the overall standard and guidelines for *Responsibilities of the Program Director* (check only one):

Meets

<input checked="" type="checkbox"/>
<input type="checkbox"/>

1. No compliance problems are present.
2. Compliance problems exist, but all are being resolved successfully.

Partially Meets

<input type="checkbox"/>

Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet

<input type="checkbox"/>

Plans to address compliance problems are not viable or have not been developed.

Program Staff and Resources

Standard 16: 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.

Guideline 16.1

In addition to the program director, other full-time or adjunct faculty (such as practitioners) must teach profession-specific courses in the program

Guideline 16.2

- a. Program faculty, including the program director, must meet the college/university's criteria for appointment.
- b. Preceptors must be credentialed or licensed as appropriate to meet state and federal regulations for the area in which they are supervising students/interns.
- c. The program must have a process for the periodic review of the effectiveness of faculty and preceptors.

Guideline 16.3

- a. New faculty members, instructors, and teaching assistants must be provided an orientation to the mission, goals, values, and educational philosophy of the dietetics program
- b. Preceptors must be provided orientation to the supervised practice objectives and professional competencies before assuming responsibilities

1. Directions for Writing the Narrative: Describe how your program currently meets or plans to meet standard and guidelines (16.1-16.3) for *Faculty and Preceptors*. Be sure to address relevant tips and support to assist you in preparing your responses that are provided in the 2012 Standards document for your specific program type.

(Guideline 16.1)

The DI program is privileged to have program faculty and preceptors with a wide variety of professional experiences and credentials to provide the depth and breadth of learning activities required in the curriculum.

Faculty members consist of full-time or adjunct professors. Professors hold a minimum of a Master's Degree. All the professors with the exception of one are Registered Dietitians. New faculty members, including full-time professors and adjunct professors are provided with an orientation to the mission, goals, values, and educational philosophy of the Lehman DI.

1. Professor Marina Stopler, MS, RD, CDN, IBCLC is the DI Director and coordinates the supervised practice (DFN 730). She has been teaching at Lehman College since 1998. Her CV, CDR card are in Appendix E.
2. Adjunct Professor Ilse DeVeer, MS, RD, CDN teaches Clinical Nutrition (DFN 651). She is a renal dietitian at Glen Falls Hospital and Renal Dialysis Center, was a Clinical Inpatient Dietitian at James J. Peters Affairs Medical Center and has been an adjunct Lecturer with Lehman College since June 2014.
3. Assistant Professor Katherine Burt, PhD, RD teaches Community and Public Health (DFN 641). She has been with Lehman since 2015.
4. Professor Craig Demmer, PhD, EdD, CHES, full-time tenured professor in the Department and teaches Health Counseling (HEA 620). He is a licensed social worker and is certified in Thanatology and he is also a Certified Grief Therapist.

5. Adjunct Instructor, Judith Porcari, MS, RD teaches the DI seminar, Concepts and Methods in Dietetics (DFN 731). She has been with Lehman since 2014. She has 30 years of hospital-based clinical experience with 24 years at North Shore University Hospital. She was voted Best Clinical Dietitian in Dietitian Today in 2014.
6. Adjunct Professor Martine Scannavino , DHSc, RD, LDN, FAND, teaches the online course Food Service Management (DFN 661). She is the Chair, Department of Nutrition, Associate Professor, and Director of the Didactic Program in Dietetics at Cedar Crest College in Allentown, PA. She has also had extensive experience as a restaurant chef.
7. Professor Andrea Boyar, PhD, RD, CDN is the DPD Director, Chair of the Department of Health Sciences from 119-2011, was a former DI Director. She assists the DI Director with administrative leadership in the DI.

CV and resumes will be available for on-site review.

Preceptors are selected by the DI Director who interviews in person or by telephone the primary preceptor of the facility that expresses interest in developing an affiliation agreement with Lehman's DI. During these interviews, the potential preceptors are questioned as to their dietetics education and degrees, the number of years since receiving the RD credential, their level of expertise, and the experience they are able to provide the interns. A CV is also requested. Based on the interview and the CV, the preceptor is evaluated as to whether he/she is able and likely to provide the depth and breadth of learning activities required in the curriculum and whether he/she can provide the interns the exposure to the diversity of practice needed. Once selected, the new preceptor is also sent the appropriate syllabus (competencies with objectives, suggested activities, and evaluation criteria) for the rotation that he/she is expected to supervise. These documents are discussed via email, telephone, or in-person to make sure the preceptor understands the responsibilities to be assumed. The DI Handbook is in Appendix Z.

The qualifications for the primary preceptors, including their credentials/licensure, and the number of years' experience post-credentialing is in Appendix S. Resumes are available for on-site review.

At the end of each rotation, interns are required to evaluate preceptors and practice sites and submit the evaluations in the form entitled: Intern Evaluation of Preceptor and Practice Site (Appendix Q). The intern's responses are reviewed by the DI Director soon after completion. These evaluations are used by the DI Director on an ongoing basis to determine if the preceptors and sites are providing the learning activities delineated in the syllabus, whether they are fulfilling their commitments to the interns and to the program and whether the intern felt welcome and valued. The evaluations, in consultation with the intern, are one method used to maintain quality control of the supervised practice experience. In addition, the interns are encouraged to share their placement experiences with the DI Director and the other interns in the DFN 731 seminar. Evaluation and training of the preceptors are also performed during annual or bi-annual visits performed by the DI Director.

Upon signing an affiliation agreement, communication between the DI Director and primary preceptor occurs on an ongoing basis with email, telephone calls, and site visits. During a site visit the DI Director will review preceptor responsibilities with the primary preceptor. Ongoing visits will be made every 12-24 months to clinical and food service facilities while the site is being used for the supervised practice by our DI Program.

2. Directions: Include supporting documents with your narrative or in the appendices. Be sure to specifically include information regarding faculty qualifications and faculty orientation materials.

3. Directions: Use the checklist below to evaluate how well your program meets the overall standard and guidelines for *Faculty and Preceptors* (check only one):

Meets

X

1. No compliance problems are present.

2. Compliance problems exist, but all are being resolved successfully.

Partially Meets

--

Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet

--

Plans to address compliance problems are not viable or have not been developed.

Program Staff and Resources

Standard 17: Continuing Professional Development

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, research or other activities leading to professional growth and the advancement of their profession.

Guideline 17.1

- a. All faculty members should receive on-going training to become proficient in the use of the program's technology and educational methodologies.
- b. All faculty members, including preceptors, instructors, and teaching assistants should receive on-going training based on evaluation by the program director and feedback from students/interns.
- c. All faculty members, including preceptors, should be familiar with the purpose of ACEND's accreditation process and intent of the standards.

1. Directions for Writing the Narrative: Describe how your program currently meets or plans to meet standard and guideline (17.1) for *Continuing Professional Development*. Be sure to address relevant tips and support to assist you in preparing your responses that are provided in the 2012 Standards document for your specific program type.

Marina Stopler, MS, RD, IBCLC is the Dietetic Internship Director and Lecturer. She is an AND member and a member of the International Board of Lactation Consultants. She has worked as a community dietitian for over 7 years and as an educator for over 20 years. She actively participates in professional work experiences, continuing education, and other activities leading to professional growth and the advancement of the profession. She completed her CDR PDP Portfolio in May 2012 with the next portfolio due May 2017. Marina Stopler's activities relative to professional growth and development and continued competency include attending the FNCE in 2012, 2014, and 2016. For the most recent FNCE conference seminars attended included ACEND Forum- Quality Nutrition and Dietetics Education: Planning for the Future, CDR Forum – New Certifications: Advance Practice in Clinical Nutrition Interdisciplinary Specialist Certification in Obesity and Weight Management, Aquaculture and Fish Technologies 101 for Food and Nutrition Educators and Supporting Successful Implementation of School Meal Requirements. She attended the NYSAND conference in 2016, and several lactation conferences including the WPR (Westchester/Putnam/Rockland) Lactation Consortium Conference 2013 in White Plains. She is a board member of the WPR (Westchester, Putnam, Rockland Lactation Consortium, Inc., the New York Milk Bank, Foodchester, Inc. (Pleasantville Farmers Market), and a member of Slow Food, USA. She completed the ACEND workshop in March 2015 to better understand the ACEND and accreditation process since becoming DI Director in August 2014. Information gained from seminars, conferences and lectures is applied and shared with students and interns. As a professor and DI Director, feedback, including evaluation forms, from students and interns is integral in improving standards related to the dietetic profession. With the DI program, there is regular follow-up with professors, preceptors, and interns regarding the meeting of competencies in the areas of clinical, food service, community, and research. Site visits are performed to see where improvements can be made for the supervised-practice experience. To improve RD-exam pass rates, the use of online practice exams has been implemented with intense review during the summer seminar. Courses are taught in traditional, hybrid, and fully-online with a greater inclusion of technology. As the DI Director, she is well aware of the accreditation process and the intent of the ACEND standards.

Judith M. Porcari MBA, MS, RD and AND member is an Adjunct Instructor at Lehman College and Queens College. Her most recent CDR Professional Development Portfolio, of more than 75 CPEUs, was completed in May of 2015. She is a current workgroup member of the AND's Nutrition Screening Adults Project (2016-

2017) which informs professional standards of practice for the Academy of Nutrition and Dietetics and therefore the profession. She completed the *Preparation for Teaching Online: A Foundational Workshop for CUNY Faculty* in June 2016. Her 35-year professional career spanned direct patient care, research, clinical nutrition management and post-secondary education. Relevant experiences are shared with students and dietetic interns as a means to bridge the classroom to work environment gap. During her tenure at North Shore University Hospital she oversaw the development and management of the NSLIJHS Dietetic Internship and is therefore keenly aware of ACEND guidelines. The classroom is a bidirectional environment and the course must meet student needs. Mrs. Porcari listens carefully to student concerns and course evaluation materials to make necessary changes in the class.

Adjunct faculty member Ilse de Veer MS, RD, CDN is a member of AND (Nutrition Support and Renal practice groups) and ASPEN. She is a second career dietitian with significant business experience and remains a practicing clinician along with her teaching. A proud Lehman alumna, she completed her Master's Degree in Clinical Nutrition at New York University in 2012, where her culminating research project was a secondary data analysis to assess the relationship between micronutrient intake and oral epithelial dysplasia. While an acute care Clinical Dietitian at the James J Peters VA Medical Center, she was a preceptor to 7 interns annually one-on-one for four weeks each. She received ongoing feedback from interns and other staff on her efforts. She was also a member of the JJPVA Dietetic Internship Advisory and Admission Committees, and is therefore familiar with the ACEND accreditation process and requirements. Ms. de Veer's professional development work has focused on her clinical skills, and believes this enhances her ability to teach medical nutrition therapy. She is in her first cycle of professional development, and has attended a number of courses including UMDM's training on nutrition focused physical assessment and ASPEN's Fluids, Electrolytes, and Acid-Base Series. Most recently she attended the National Kidney Foundation Conference. In 2014, she completed *Preparation for Teaching Online: A Foundational Workshop for CUNY Faculty* and is comfortable teaching in all modes: web-enhanced, hybrid, and fully online. She receives student feedback each semester to help improve her courses, and also gets input from department faculty through direct observation of teaching. She maintains her ServSafe certification.

Assistant Professor Katherine Gardner Burt PhD, RD is a member of Academy of Nutrition and Dietetics, the Society of Nutrition Education and Behavior, and the Agriculture, Food, and Human Values Society. She completed her most recent CDR Professional Development Portfolio in May 2016 with 112 CPE credits. Over the past 5 years, Katherine has obtained her doctoral degree from Teachers College in Food and Nutrition Policy, attended numerous education sessions at SNEB as well as local conferences, and has conducted poster, oral, and panel presentations at SNEB, Just Food, and City Growers conferences. She has attended trainings and workshops on integrated technology and active learning strategies into the classroom and improving online education. Currently, Katherine teaches classes on cultural and therapeutic foods, sports nutrition, community nutrition and public health and is in the process of developing a course in food justice. In addition to seminar-style classes, she teaches culinary food labs on cultural and ethnic foods. She is a published cookbook author, currently working on her second book, which has prepared her to provide culinary education. She conducts research about using urban agriculture to maximize benefits to individuals in both school garden and community garden settings. Her outcomes of interest include food justice and health and she regularly precepts dietetic interns for their research rotation. As she is at the beginning of her career, Katherine is interested in developing her teaching methodologies to incorporate more active learning strategies in the classroom and provide students with robust educational experiences that prepare students to be successful dietitians and dietetic technicians.

(Faculty for research)

The DPD Director, Andrea Boyar PhD, RD, CDN and AND member, completed her most recent CDR Professional Development Portfolio in May 2016 with over 142 hours of recorded continuing education activities. Over the past five years she has attended numerous continuing education sessions sponsored by FNCE, NYSAND, CUNY IT, NDEP, Just Food, and other nutrition-related organizations. She became a Master Composter with the NYC Compost Project at the New York Botanical Garden in 2014, and completed an 11-

month fellowship in nutrition and translational medicine at St Lukes-Roosevelt (Mt Sinai) Hospital in NYC during her sabbatical year 2011-2012. The insights gained from these experiences that are relevant to the students are shared both formally in class and informally during discussions. She also supervises research projects by the Dietetic Interns. She has received training in using videos in online courses through the Lehman IT department and participated in an e-portfolio workshop through the Lehman Teaching and Learning Commons. She pays attention to student evaluations to make changes in her courses to improve student learning opportunities. As the DPD director, she speaks with faculty regarding their student evaluations in order to suggest potential course improvements. As the major contributor to the DPD ACEND document she is well aware of the accreditation process and the intent of ACEND standards.

(Faculty for research)

Adjunct faculty member, Mary Opfer MS, RDN, CDN, AND member and Chef has completed over 200 hours of continuing education towards her CDR requirements to be submitted in 2018. Continuing education credits were earned through programs by the AND as well as through the Food and Culinary Professional Group, WRDA and DIFM professional groups and the CUNY IT program. Mary is currently signed up for required class for professors who will be teaching online. She was the webinar Chairperson for two years for the Food and Culinary Professional Group and hosted 24 webinars during her term while connecting to experienced members in the field. In addition, Mary created a culinary module for AND's Culinary Certificate Program which launched in early 2016. She has been a reviewer on a number of books and materials for other AND related publications including Cultural Food Practices and contributed to two cookbooks. Mary has attended culinary classes focusing on diet and nutrition both at the Culinary Institute and other venues such as the Natural Gourmet Institute. These experiences improve Mary's methodologies of disseminating education material to the students and their learning experiences. These classes allow Mary to bring in new and updated ideas, recipes and nutritional information both culturally and in the field of dietetics. She pays attention to student evaluations and makes changes to her classes as needed to improve the class and the student experience. She has been a preceptor for interns through Lehman and Hunter College and has received feedback from both the students and the internship directors with constructive criticism on ACEND requirements and how they are being met. Through staff meetings at Lehman Mary is familiar with ACEND's accreditation process and requirements.

(Faculty for research)

Lalitha Samuel, Ph.D. is a member of AND and SNEB. She has presented at annual conferences of SNEB and FNCE during 2014 and 2015. She attended two NIH-conducted practicums related to Dietary Supplement Research and Cancer Prevention Research. She has supervised research projects by both DPD students and dietetic interns, findings of which have been presented at national (FNCE, SNEB) and local conferences (Teachers College, Columbia University) as well as published in peer-reviewed journals. Published findings of collaborative research have also been presented at the New York Nutrition Obesity Research Center. She mentored an NYCLSAMP (New York City Louis Stokes Alliance for Minority Participation) undergraduate DPD scholar for a research project that was presented at the 2015 Annual SNEB Conference. Insights gained from conferences and research findings are integrated into classroom teaching. She has authored a chapter on Food Composition as well as been a journal reviewer. She has attended writing and IT workshops to improve online learning. She regularly improves her teaching delivery methods, taking into account her student teaching evaluations. She keeps abreast of ACEND's accreditation process and requirements through faculty meetings and communication.

Lehman faculty are included in the Summary of Preceptor's Continuing Education Activities (Appendix V).

Our preceptors are also actively participating in activities that promote continuous competency and lead to professional goals and advancement in the profession (Appendix V). Resumes of preceptor are available for onsite review.

2. Directions: Include supporting documents with your narrative or in the appendices. Be sure to specifically include a summary of continuing professional development of the faculty especially in relation to teaching responsibilities.

3. Directions: Use the checklist below to evaluate how well your program meets the overall standard and guidelines for *Continuing Professional Development* (check only one):

Meets

<input checked="" type="checkbox"/>
<input type="checkbox"/>

1. No compliance problems are present.
2. Compliance problems exist, but all are being resolved successfully.

Partially Meets

<input type="checkbox"/>

Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet

<input type="checkbox"/>

Plans to address compliance problems are not viable or have not been developed.

Program Staff and Resources

Standard 18: Program Resources

The program must have the administrative and financial support, learning resources, physical facilities and support services needed to accomplish its goals. The annual budget for the program or other financial information, such as percentage of department budget allocated to support the program, must be sufficient to produce the desired outcomes.

1. Directions for Writing the Narrative: Describe how your program currently meets or plans to meet standard for *Program Resources*. Be sure to address relevant tips and support to assist you in preparing your responses that are provided in the 2012 Standards document for your specific program type.

Lehman College employs IT and library staff, administrative/secretarial personnel, buildings, grounds, and maintenance staff, Public Safety Officers, etc. Lehman College supports the costs of the foods laboratory's food and equipment and supports the library, facilities and equipment.

The College budget supports the CUNY Office Assistant (Julissa Cruz) who is a full-time employee in the Department office and assists with adjunct payroll, maintaining files, ordering supplies, supervising the work-study students and other administrative tasks.

The budget of the Department which enables purchases of non-perishable items, OTPS (Other than Personnel Services) such as food and kitchen supplies for the Foods Laboratories (DFN 120, 220 and 330) is assigned to the Department each Academic Year. The Department OTPS budget also pays for paper, stationary, printer ink, copy machine maintenance and repairs. The Office of the Provost pays for fees for the DPD and DI as well as the listing fees for the MS Program in Nutrition. Offices, furniture, telephones, computers and printers are supplied for each faculty member out of the College's or Dean's budget or purchased through grant funding. Each full-time faculty member of the DI has a separate office on the 3rd or 4th floor of Gillet Hall. Educational technological improvements in classrooms, including projectors, speakers, etc., are available to the faculty members and to classrooms through the College through the Media Technology Services (MTS) budget.

2. Directions: Include supporting documents with your narrative or in the appendices.

3. Directions: Use the checklist below to evaluate how well your program meets the overall standard and guidelines for *Program Resources* (check only one):

Meets

<input checked="" type="checkbox"/>
<input type="checkbox"/>

1. No compliance problems are present.

2. Compliance problems exist, but all are being resolved successfully.

Partially Meets

<input type="checkbox"/>

Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet

<input type="checkbox"/>

Plans to address compliance problems are not viable or have not been developed.

Program Staff and Resources

Standard 19: Supervised-Practice Facilities

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 facilities are able to provide supervised practice learning experiences compatible with the competencies that students/interns are expected to achieve.

Guideline 19.1

- a. A program under the Didactic Nutrition and Dietetic Education Program standards is not required to demonstrate compliance with Standard 19 and its guidelines if it does not provide supervised practice to its students.
- b. Agreements must be signed by administrators with appropriate authority in advance of placing students/interns
- c. Agreements must delineate the rights and responsibilities of both the sponsoring organization and affiliating institutions, organizations and/or agencies

1. Directions for Writing the Narrative: Describe how your program currently meets or plans to meet standard and guideline (19.1) for *Supervised-Practice Facilities*. Be sure to address relevant tips and support to assist you in preparing your responses that are provided in the 2012 Standards document for your specific program type.

Facilities are chosen based on the following criteria:

Geographic location: Interns in the DI are not expected to travel more than 90 minutes to get to their supervised practice site. Therefore, we prefer to select sites that are in the five boroughs as well as in Westchester, Rockland, Putnam, southern Connecticut, and Nassau counties. Many of our interns live in the City and the surrounding counties and are placed so that they have a minimum amount of travel as possible.

Breadth of experience: The minimum requirements are Joint-Commission-accredited institutions (Medical Nutrition Therapy) that have facilities and sufficient departments to provide an adequate experience based on Competencies and Learning Outcomes. Sites that provide experiences in Medical Nutrition Therapy must have an RD clinical nutrition manager. Nursing homes with an RD clinical nutrition manager with long and short term residents qualify for the MNT rotation. Private Practice clinicians, dialysis centers, and pediatric centers, and outpatient clinics, and nursing homes that lack residents with diverse acute conditions can be combined with other MNT rotations to help meet the Competencies and Learning Outcomes.

For Foodservice sites, the institution must have sufficient resources for the intern to experience the full-breadth of management activities. It is important that interns not be used as extra employees. Community sites must provide a variety of experiences that reflect the mission of the agency and experiences necessary to meet the Competencies and Learning Outcomes. Although Community and Foodservice often lack an RD on site, we prefer to send interns to sites with a full-time or part-time RD.

Availability: Hospital sites are often difficult to find due to significant competition for the student placements from other undergraduate and DI programs in the NYC metropolitan area. (There are three other CUNY DI Programs – Brooklyn, Hunter, Queens, and others at NYU and Columbia University). In addition, staffing adequacy plays a significant role in determining whether a site can appropriately accommodate interns.

Intern evaluations: Interns are responsible at the conclusion of each rotation, to complete the Evaluation of Practice Site and Preceptor Evaluation. (Appendix Q). Based on these evaluations, sites may continue to be utilized, may be requested to modify experiences provided to the interns, or may be terminated from the

program due to irremediable inadequacies. This process is ongoing after each intern rotation is completed. These evaluations are kept in the interns' folders.

Director evaluation: Based on communication with the primary preceptor via email, phone and site visits, the DI Director evaluates the adequacy of the facility and determines the ongoing status of the site in the DI program.

Sites that approach us with an interest, or interns that recommend a site for supervised practice are evaluated based on the above criteria.

There is a CUNY Written Policy and Procedures for maintaining written affiliation agreements with institutions, organizations, and/or agencies where interns are placed in supervised practice. A Sample Affiliation Agreement is in Appendix W. Once the affiliation agreement is established between the agency and the DI, Cynthia Cessant, Legal Coordinator, Special Counsel (Legal Department at Lehman) is responsible for renewing agreements.

2. Directions: Include supporting documents with your narrative or in the appendices. Be sure to specifically

3. Directions: Use the checklist below to evaluate how well your program meets the overall standard and guidelines for *Supervised-Practice Facilities* (check only one):

Meets

X

1. No compliance problems are present.
2. Compliance problems exist, but all are being resolved successfully.

Partially Meets

--

Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet

--

Plans to address compliance problems are not viable or have not been developed.

Students

Standard 20: Student Progression & Professionalization

The program must have systems to maximize the likelihood that all students/interns who are accepted into the program will successfully complete it with the knowledge, skills and professional values required for practice.

Guideline 20.1

- a. Prospective students/interns must receive information about the requirements to become a practitioner, including education, viable routes to supervised practice and passage on the credentialing exam.
- b. Students/interns must be assessed for their ability to be successful in the program and dietetics profession.
- c. The program's system of monitoring student performance must provide for the early detection of academic difficulty.
- d. The program must have progression policies that take into consideration professional behavior and academic integrity.
- e. Students/interns must have access to remedial instruction such as through tutorial support.
- f. Students/interns must have opportunities to learn professional behaviors and expectations, including public service and the service to the profession as preceptors and mentors.
- g. Student input must be solicited and considered for programmatic and curricular improvement.
- h. Students/interns with minimal chances of success in the program should be counseled into career paths that are appropriate to their ability.
- i. Programs using distance instruction must employ strategies to verify the identity of a student who participates in distance classes or coursework such as secure logins and passcodes, proctored examinations, or other technologies and practices that are effective for verifying student identity.

1. Directions for Writing the Narrative: Describe how your program currently meets or plans to meet standard and guideline (20.1) for *Student Progression & Professionalization*. Be sure to address relevant tips and support to assist you in preparing your responses that are provided in the 2012 Standards document for your specific program type.

The following is taken from the Department of Health Sciences graduate bulletin 2015-2017 <http://lehman.smartcatalogiq.com/en/2015-2017/Graduate-Bulletin/Academic-Programs-and-Courses/Health-Sciences/Nutrition-M-S-Program> under the heading of the Nutrition MS Program within the Department of Health Sciences.

Admission Requirements to Dietetic Internship Program (DI)

Students who wish to enter the DI must submit an application to the DI via DICAS (Dietetic Internship Centralized Application System) and be accepted into Lehman's M.S. in Nutrition Program. Places in the DI are limited and therefore admission into the DI is competitive. Students must conform to the admissions policies of the DI as itemized on the web pages of the DI program (www.lehman.edu/lehman/dietetics), which includes the computerized matching program administered through "D & D Digital Systems."

Included in the DI application are the following:

- The DICAS internship application form.
- Three recommendations on DICAS forms.
- Original undergraduate and/or graduate transcripts.
- A DPD Verification Statement attesting to the completion of ACEND-approved coursework equivalent to the undergraduate program in Dietetics, Foods, and Nutrition.

- One-page personal statement.
- Application fee.

Applications must be submitted to the DI Director by **February 15** for entry into the DI class beginning in the fall semester.

Interns must complete the following four graduate courses: DFN 641, DFN 651, DFN 661, and HEA 620, concurrent with the DI.

Completion Requirements for Dietetic Internship Program

In order to sit for the RD examination, students must be admitted to the M.S. in Nutrition program; submit a DICAS application to the DI; participate in computer matching; be admitted into the DI; complete four co-requisite courses; and complete a minimum of 1200 hours of supervised pre-professional practice (DFN 730) for 3 semesters), and attend the Concepts and Methods of Dietetics Practice seminar (DFN 731) for 3 semesters or until the requirements are fulfilled. The DI is completed over a three-semester period (12 months)

A verification statement for completion of the DI will be granted following successful completion (with a mean GPA of at least 3.0) of:

		Credits
DFN 641	Public Health and Community Nutrition	I. 3
DFN 651	Medical Nutrition Therapy	II. 3
DFN 661	Food Service Management	III. 3
DFN 730	Supervised Professional Practice	IV. 3
HEA 620	Health Counseling	V. 3

Completion of the master's program is not required for completion of the Dietetic Internship.

All of the information about the DI is readily available on the DI website. <http://www.lehman.edu/dietetic-internship-program/index.php>. This includes program description, cost, accreditation status, and admission and graduate requirements and computer match information.

Information on financial aid is available at <http://www.lehman.edu/financial-aid/index.php> and in the Financial Aid Office (Shuster Hall, Room 136). Both full-time and part-time matriculated graduate students are eligible for a limited number of financial aid programs. Full-time graduate students are those registered for at least 12 credits (or the equivalent) per semester. Part-time students are those registered for at least 6 graduate credits per semester.

All financial aid assistance awards are subject to student compliance with federal, state, and or college regulations concerning satisfactory academic progress and academic standing.

The academic calendar is available at <http://www.lehman.edu/registrar/calendars.php> and the DI curriculum is available on the DI website and the schedule for each semester is posted on the DFN 731 course website on Blackboard at the beginning of each semester.

2. Directions: Include supporting documents with your narrative or in the appendices.

If approved by the Department, the changes are then forwarded to the Graduate Curriculum Committee of the Lehman College Senate. If approved by this body, the changes are sent to CUNY and if approved are published in the Chancellor's report and then sent to the New York State Department of Education.**3. Directions:** Use the checklist below to evaluate how well your program meets the overall standard and guidelines for *Student Progression & Professionalization* (check only one):

Meets

<input checked="" type="checkbox"/>
<input type="checkbox"/>

1. No compliance problems are present.
2. Compliance problems exist, but all are being resolved successfully.

Partially Meets

<input type="checkbox"/>

Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet

<input type="checkbox"/>

Plans to address compliance problems are not viable or have not been developed.

Students

Standard 21: Student Complaints

The program or sponsoring institution must produce and make available to students/interns a complaint policy that includes procedures to be followed in the event of a written complaint related to the ACEND accreditation standards, student rights to due process, and appeal mechanisms. Students must receive information on how to submit a complaint to ACEND for unresolved complaints related to the ACEND accreditation standards.

Guideline 21.1

- a. Students must be advised to submit complaints directly to ACEND only after all other options with the program and institution have been exhausted.
- b. The program or sponsoring institution must provide information about the complaint policy to students/interns upon entry into the program.
- c. The program or sponsoring institution must maintain a chronological record of student complaints related to the ACEND accreditation standards, including the resolution of complaints for a period of five years.
- d. The program or sponsoring institution must allow inspection of complaint records during on-site evaluation visits by ACEND.

1. Directions for Writing the Narrative: Describe how your program currently meets or plans to meet standard and guideline (21.1) for *Student Complaints*. Be sure to address relevant tips and support to assist you in preparing your responses that are provided in the 2012 Standards document for your specific program type.

The program has a complaint policy which is made available to the student in the DI Handbook (Appendix Z).

Policy 14:

All interns are expected to achieve and maintain the standards of performance, practice, conduct and proficiency as outlined by the Dietetic Internship Program, Lehman College, City University of New York and the Academy of Nutrition & Dietetics. When standards and policies are not being met, disciplinary action may be imposed. Disciplinary action is defined as a "corrective measure or penalty action taken against an intern for cause involving ineptitude, inefficiency, misconduct or failure to adhere to the Policies and Procedures of the DI at Lehman College."

Procedure:

The DI Director will monitor interns' conduct and performance via personal observation and feedback from preceptors. When a problem is identified with an intern's conduct or performance, the DI Director will first verbally counsel the intern in an attempt to correct the problem. If the problem persists, disciplinary action will follow. For first offenses that are severe infractions and result in probation, suspension or dismissal, disciplinary action will be administered by verbal counseling.

The DI Director will collect all facts leading to disciplinary infractions, including data and student/preceptor interviews. Disciplinary actions of admonishment and first probation do not require committee review. Second probation and dismissal penalties will be brought before the disciplinary committee.

The DI Director will present the intern with a disciplinary memo. The original signed copy of the memo will remain in the intern's folder. The copy with original signatures (DI Director and intern) will be handed to the intern. If the intern refuses to sign the notice, the DI Director will sign and date that line with notation "intern refusal to sign." If the intern refuses to accept the notice, it will be mailed to the intern's address on record "return receipt requested".

Definitions:

Admonishment/Warning: written notice of a single infraction with warning against repetition. Repetition may result in probation.

Probation: written notice of probation for repeated offenses of a similar nature. Based on seriousness and number of offenses can lead to suspension.

Suspension: written notice with enforced temporary absence from duty as a result of repeated offenses beyond probation. Time lost will have to be made up.

Dismissal: dismissal from the program for infractions beyond the suspension penalty is possible.

The practice site may request the college to terminate the supervised practice rotation of an intern when the health status of that intern is detrimental to services provided at the site, or when the conduct or behavior of the intern is detrimental to the operation of the site and/or patient care. The specific issues will be discussed with the DI Director and the DFN Graduate Faculty. The intern may continue in the Program at the discretion of the DI Director and the DFN Graduate Faculty. In which case, the intern will be requested to find their own rotation site.

An intern may appeal admonishments and probation decisions to the DI Director in writing. Disciplinary actions beyond probation may be appealed in writing to the DI Director, DFN Graduate Faculty and finally to the Department Chair.

Policy 15:

All dietetic interns have the opportunity to resolve Internship-related problems through a conflict resolution process. This process refers to the method by which the Dietetics, Foods, and Nutrition Program facilitates an acceptable relationship between dietetic interns and rotation site personnel.

Procedure:

Dietetic interns are encouraged to voice their concerns to the rotation preceptor. If the issue cannot be resolved with the preceptor, or, if the conflict involves the preceptor, the intern should discuss the issue with the site primary preceptor. If the issue is still unresolved, the intern is encouraged to discuss it with the DI Director.

If the issue is still unresolved, it will be brought to a meeting with the DI Director and DFN Graduate Faculty.

Interns have the right to file a written complaint related to ACEND accreditation standards. Students are advised to submit a complaint to ACEND only after other options have been exhausted.

To date, no student complaints related to ACEND accreditation standards have been made. However, if a complaint is made, a chronological record including resolution of complaints will be maintained for a period of five years. These complaints would be subject to inspection during on-site evaluation visits by ACEND.

2. Directions: Include supporting documents with your narrative or in the appendices. Be sure to specifically include the complaint policy.

3. Directions: Use the checklist below to evaluate how well your program meets the overall standard and guidelines for *Student Complaints* (check only one):

Meets

X

- 1. No compliance problems are present.
- 2. Compliance problems exist, but all are being resolved successfully.

Partially Meets

Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet

Plans to address compliance problems are not viable or have not been developed.

Students

Standard 22: Information to Prospective Students & the Public

The program must provide clear, consistent and accurate information about all program requirements to prospective students/interns and the public at large. All information about the program specified below must be readily available to prospective students/interns and the public. If various print and electronic methods are used, such as a catalog, program bulletin, brochure and Web site, all of the information must be in one place or each must provide references to where the remaining information can be found.

Guideline 22.1

Information about the program must include at least the following:

- a. Description of the program, including mission, goals and objectives that will be monitored for program effectiveness
- b. A statement that program outcomes data are available on request.
- c. Description of how the program fits into the credentialing process to be a registered dietitian and state certification/licensure for dietitians, if applicable
- d. Cost to student, 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, in addition to application fees and tuition
- e. Accreditation status, including the full name, address, and phone number of ACEND
- f. Admission requirements for all pathways and options for which the program is accredited
- g. Academic and program calendar or schedule
- h. Graduation and program completion requirements for all pathways and options for which the program is accredited
- i. Availability of financial aid and loan deferments (federal or private), scholarships, and other monetary support, if applicable.
- j. Computer matching information, if applicable

1. Directions for Writing the Narrative: Describe how your program currently meets or plans to meet standards and guideline (22.1) for *Information to Prospective Students & the Public*. Be sure to address relevant tips and support to assist you in preparing your responses that are provided in the 2012 Standards document for your specific program type.

Students who are interested in the Lehman Dietetic Internship have access to DI Program information on our website which is very easy to find and navigate. In addition to the website, the DI Program host a Dietetic Information session every fall for Lehman students, the DI Director attends DI Fairs such as the ones hosted by the Greater NY Dietetic Association. Brochures (Appendix Y) or handouts are distributed at these events which include the Lehman DI website. The website is updated periodically. The last major changes were made in 2014 when Marina Stopler replaced Sue Tree as the DI Director. If a change needs to be made, the IT Department or the Health Sciences Office Manager is contacted as to the changes and they accordingly update the information.

Home page on the Lehman DI website includes welcome message and mission statement.

<http://www.lehman.edu/dietetic-internship-program/index.php>

Welcome

“There is an increasing awareness that the diets people consume contribute to the quality of their life. Studies have shown that people’s susceptibility to chronic disease is influenced by their diet. Dietary-influenced chronic disease is not only observed in affluent communities, but is increasingly seen in those that are economically

compromised. Located in the Bronx, Lehman College is uniquely placed to assist in educating interns to become competent entry-level dietitians in order to develop approaches to support the community in moving toward dietary change to optimize health. The Dietetic Internship program would like to thank everyone who applied to the program this year. We are sorry we could only accept 14 interns.

Program Mission

The mission of the dietetic internship at Lehman College is to provide interns with a comprehensive learning experience through which they can acquire the competencies, knowledge, skills, and hands-on training required of entry-level nutrition care professionals, with an emphasis on medical nutrition therapy. Lehman College interns are ethnical and culturally diverse and the program welcomes all applicants with the appropriate qualifications.”

Program Goals: <http://www.lehman.edu/dietetic-internship-program/program-goals.php> includes goals, meeting ACEND competencies and learning outcomes, objectives (outcome measures), and statement on program outcome availability data

“Upon completion of the Dietetic Internship, interns will be able to demonstrate the knowledge, skills, and competencies as established by the Accreditation Council for Education in Nutrition and Dietetics in its competencies and learning outcomes for Dietetic Internship programs, with particular emphasis on Medical Nutrition Therapy. To do this, interns must succeed in the following areas:

Program Goal One: Employment as an ethical and culturally sensitive entry-level Registered Dietitian.

- **Outcome Measures over a 5-year period:**
- Program Completion: 80% of the intern class will complete the DI within 18 months.
- Pass Rate of First-Time Test Takers of the Registration Examination: 80% of DI graduates will pass the Registration Examination on the first attempt.
- Graduate Employment: 70% or more of DI graduates who sought employment in dietetics were employed within six months of program completion.
- Employer Satisfaction:
 - 75% of employers will rate DI graduates as performing well.
 - 75% of employers will rate DI graduates as ethical and culturally sensitive.

Program Goal Two: Success in either a graduate program in nutrition and foods or in another health-related field.

- **Outcome Measure over a 5-year period:**
- Enrollment in a Graduate Program: 70% of enrolled interns will succeed in a graduate program in nutrition and foods or another health-related field.

In addition, the intern will be able to:

- Integrate knowledge and critical thinking skills with practical experience.
- Acquire New York State Certification after passing the Registered Dietitian Examination.

Lehman College DI Program outcome data available upon request. Please contact DI Director, Marina Stopler, MS, RD, IBCLC “

Program Description:

“The Dietetic Internship Program at Lehman College is one of the few part-time internships in the country. The goal of the program is to provide access to a high-quality internship to those who need to undertake paid employment, proceeding through the internship over a three-semester period (12 months). The internship placements require a minimum of 1,200 hours of supervised practice to be completed over the course of three consecutive semesters for a minimum of 30 hours of supervised practice per week (Monday to Friday), for a total of 12 months. Interns are permitted to spend no more than 15 hours each week in paid employment.”

Interns are required to take twelve (12) graduate co-requisites and register for three (3) credits of the Seminar in Concepts and Methods of Dietetic Practice and three (3) credits of Supervised Pre-professional Practice for each of the three semesters of the Dietetic Internship. Interns undertaking paid employment may elect to take some of the co-requisite classes after the year of Supervised Practice, in which case graduation from the Program may take up to 24 months. DFN 651 must be taken in the fall semester of the Supervised Practice year.

The internship class enrolls a maximum of fourteen students each year. We accept applications every year in February for an end of August start date. We participate in [DICAS](#), the Centralized Application procedure and in the **spring** computer match program, administered by [D and D Digital Systems](#).

The Dietetic Internship Program has a Medical Nutrition Therapy emphasis, giving interns an opportunity to experience nutrition assessment, diagnosis, and interventions for increasingly complex medical conditions. The 1,200 hours of supervised practice are divided as follows:

- Medical Nutrition Therapy Rotation: 470 hours
- Food Service Management Rotation: 300 hours
- Community Rotation: 280 hours
- Research Project: 150 hours

The three supervised practice components take place in a health-care facility or community agency. The community rotation is usually divided into three sections to enable interns to experience several different agencies. Research projects are supervised by departmental faculty.

It is expected that interns will complete the supervised practice component of the Dietetic Internship in three semesters (12 months), registering for DFN 730 and DFN 731 each semester that they are enrolled in the program.

Accreditation

The Dietetic Internship Program has been granted continued Accreditation by the Accreditation Council for Education in Nutrition and Dietetics (ACEND), a specialized accrediting body recognized by the Council on Postsecondary Accreditation and the United States Department of Education. ACEND may be reached at 312-899-0400, ext. 5400, or by writing to the following address:

Academy of Nutrition and Dietetics
120 South Riverside Plaza
Suite 2000
Chicago, Illinois, 60606

Acceptance Policy:

In order to be accepted into the Internship Program, students must be eligible to enter Lehman's M.S. in Nutrition program. To be considered for matriculation, students must have earned a minimum Grade Point Average of 3.0 either in the DPD courses or overall as undergraduates or graduates and possess a baccalaureate degree. To apply to the M.S. in Nutrition graduate program, see the [Prospective Intern](#) page.

A Dietetic Internship selection committee evaluates each applicant's potential as a dietetic practitioner. Acceptance into the program is not influenced by gender, age, sexual orientation, marital status, race, creed, national origin, color, disabilities or handicap. Students will be judged competitively based on their undergraduate and graduate (if applicable) GPA, work experience, and recommendations by faculty and employers. Students who believe other factors should be considered may include them in their Personal Statement with their DICAS application

Evaluation of Dietetic Internship Applications

Follow the application instructions very carefully. Leave sufficient time to assemble the application package, as academic transcripts and recommendation requests are going through DICAS. **DO** send a check or money order for the correct amount of the application fee separately to the DI Director.

How important is the GPA?

The GPA is important. Internship programs are evaluated by ACEND in part based on the percentage of Dietetic Internship graduates passing the Registered Dietitian exam on the first attempt. A strong academic background is a positive indicator that a candidate might be able to achieve this. Candidates with GPA's lower than 3.0 will not be considered as they are not eligible to be accepted into the Graduate Program.

What about GRE scores?

GRE scores are not required for application to the M.S. in Nutrition or the Dietetic Internship programs.

Do errors in my application matter?

Proof-read, proof-read, proof-read before you submit your final application package to DICAS! Typographical errors, mistakes, and omissions show that you are careless in your work. This is your opportunity to collect all the information you are presenting to us to help us assess your ability to be part of our Dietetic Internship. We want to know if you can perform well in Lehman's program.

How important is work/volunteer experience?

It is important for two reasons:

- It addresses the question of whether you can perform successfully in certain settings.
- It can support what you are saying in your personal statement.

Can I apply to the Internship without applying to the Graduate Program?

Yes, you can, but if you are accepted into the Dietetic Internship, it is mandatory that you apply to the M.S. in Nutrition program if you are not already enrolled in the program.

What about reference letters?

These should provide support for your application. Therefore, it is better to obtain such letters from people who know you well and can speak of your unique qualifications for the Dietetic Internship, than a more general letter from a professor who taught you once in a large class.

In Addition:

Other candidates who apply at the same time that you do affect your chances of being offered a place in the Dietetic Internship. Selected candidates are ranked before being submitted to D and D Digital for the computer match, just as candidates rank their internship preferences. A difference of even one position on the match list can make the difference between a match or no match. A strong applicant who failed to match one year would be encouraged to re-apply for the following year."

Academic Requirements:

<http://www.lehman.edu/dietetic-internship-program/academic-requirements.php>

"Students who wish to apply to the Dietetic Internship Program must have a GPA of at least 3.0 in their DPD courses or overall. If accepted into the Dietetic Internship Program at Lehman College, prospective interns are required to take four co-requisite graduate courses during the Dietetic Internship, unless they have previously taken equivalent graduate courses. Each intern is required to take at least two of these courses at Lehman College. DFN 651 must be taken at Lehman College. Interns must gain a B or better in each course. The courses are as follows:

- DFN 651: Clinical Nutrition. 45 hours, 3 credits. The assessment and management of nutritional problems encountered in patients in acute and chronic care settings are discussed using the nutrition care process. Includes an exploration of the scientific basis for current techniques and approaches in clinical nutrition based on medical nutrition therapy.
- DFN 641: Community and Public Health Nutrition. 45 hours, 3 credits. The relationship of diet to health promotion and disease prevention. The role of public, private, and voluntary organizations in providing nutrition care services for ambulatory populations. Techniques for developing, funding, implementing, and evaluating projects in the community.

- DFN 661: Food Service Management. 45 hours, 3 credits. Management theory with application to the food service industry. Emphasis on the management of human and financial resources, the practice of optimal standards of safety, sanitation, and nutrition, and the role of the computer as a management tool.
- HEA 620: Health Counseling. 45 hours, 3 credits. An introduction to health counseling and behavior change is provided, with an overview of leading health problems of interest. Theoretical approaches to behavior change are examined. Basic counseling skills for helping people with behavior change will be acquired.
- DFN 730: Supervised Pre-Professional Practice. 45 hours, 3 credits per semester for a minimum of three semesters. A minimum of 400 hours per semester of supervised pre-professional practice at affiliated health care, management and community sites. COREQ: DFN 731.
- DFN 731: Concepts and Methods of Dietetic Practice. 45 hours, 3 credits per semester for a minimum of 3 semesters. This course comprises the theories, methods, and concepts of dietetic practice that will be required to master the competencies during the internship. Included are methods of community and individual assessment, theories, and practice of planning; theories and models of education and lesson plan development; outcomes analysis, evaluation methods and reimbursement practices in healthcare. COREQ: DFN 730.

Successful completion of didactic and supervised practice requirements of the Dietetic Internship enables interns to take the Registration Examination to become a Registered Dietitian (RD Test). After passing the RD test, registered dietitians may apply to the New York State Education Department, Office of the Professions, to become a Certified Dietitian/Nutritionist in the State of New York.”

Prospective Interns: <http://www.lehman.edu/dietetic-internship-program/prospective-interns.php> includes academic program/calendar, links to DICAS and D and D Digital, program costs including link to financial aid, graduation completion requirements.

Information for Prospective Interns

“Use this schedule to guide you in applying to the Lehman College Dietetic Internship Program.

Fall Semester Prior to Applying: Start preparing your application package for the Dietetic Internship. Collect transcripts to be sent to DICAS for scanning.

Mid-February: Submit the completed Dietetic Internship application package to the DICAS portal. Complete the application for the Computer Match on line at [D and D Digital Systems](#). The exact date for submission is posted on the D and D Digital website. Students who wish to transfer graduate credits from another institution must contact [Dr. Lalitha Samuel](#) for permission to substitute courses.

Acceptance is competitive and based on consideration of undergraduate Grade Point Average, and recommendations.

Early-April: Match results for each applicant are posted on the [D and D Digital Systems](#) Web site. This is the only notification source for applicants. Further instructions are available on the D and D Digital Systems site or from the Dietetic Internship Director, [Marina Stople](#), MS, RD, IBCLC. Within 24 hours, students must notify the DI Director that they will be joining the Internship Program. Lack of notification will result in loss of placement.

Post-Match: New interns are contacted by the Dietetic Internship Director with information relating to applying to the Graduate Program. It is recommended that interns should apply to the graduate program as a [non-matriculated student](#). This will enable interns to take DFN 661 in the summer. If interns wish to enter and complete the MS Program in Nutrition, they can apply as a [matriculated student](#) in the fall semester.

June 1 onwards: Supply an active e-mail address to the Dietetic Internship Director, if different from that on the application. Register for fall classes and download the Intern Manual in the DFN 731 section on Blackboard, the CUNY Internet course management system, available through the [CUNY portal](#). Read carefully and prepare to bring to DI Orientation. Liability insurance must be purchased prior to the start of the internship rotations.

Last week of August: Begin fall didactic class(es), internship rotations (DFN 730) and fall semester seminar (DFN 731).

Mid-November: Register for spring classes, and DFN 730 and 731 for spring semester.

Last week of January: Begin spring internship rotations (DFN 730) and spring semester seminar (DFN 731) and didactic class(es).

Mid-April: Register for summer class, and DFN 730 and 731 for spring semester.

End of May: Begin summer internship rotations (DFN 730) and summer session seminar (DFN 731) and didactic class(es). Note, although interns register for DFN 730 each semester, internship placements will continue through college vacations.

End of August: Complete Dietetic Internship Program.

Program Costs

As of fall, 2015, graduate tuition fees are \$425 per credit for interns who are New York State residents and \$745 per credit for out-of-state residents. All graduate interns must pay an activity fee of \$54.60-\$74.60 and a technology fee of \$62.50-\$125 per semester. These fees are all subject to change by the Board of Trustees of the City University of New York.

In addition to tuition and administrative fees paid by all graduate interns, interns should be prepared to pay the following:

- Transportation to and from Practice Sites: \$300+ per semester
- White laboratory coat (s) for Practice Sites: \$45+
- Calculator: \$4+
- Academy of Nutrition & Dietetics Student membership (required): \$50
- Individual Intern Professional Liability Insurance (required): \$20+
- Books: \$200+
- Criminal background checks and fingerprinting: about \$70 (Many sites will cover the costs, some will not)
- Estimated Total for NYS residents: \$12,400 +

Go to [Financial Aid website](#) for information on availability of financial aid and loan deferments (federal or private) scholarships and/or other monetary support.

Completion of the Internship

In order for interns to be certified to the Commission on Dietetic Registration as having completed the Dietetic Internship Program at Lehman College and to be eligible to take the R.D. examination, they must meet the following criteria:

- Complete a minimum of 1,200 hours of rotations in 12 months with passing grades from all preceptors.
- Complete three semesters of DFN 731: Concepts and Methods of Dietetic Practice seminars with grades of B or better.
 - Complete and submit all portfolios.
 - Complete and submit all evaluation forms. Minimum grades of B must be achieved.
 - Pass the Exit Examination (at the end of the summer semester).
 - Appear for an exit meeting with the Dietetic Internship Director at Lehman College.
- Provide all relevant information and complete all forms required by the Commission on Dietetic Registration and the Lehman Dietetic Internship program.
- A Verification Statement signed by the Dietetic Internship Director will be issued to the intern and details of completion will be transmitted to the CDR.”

Application Procedure: <http://www.lehman.edu/dietetic-internship-program/application-procedure.php>

Applying to the Dietetic Internship Program

“The program is using the on-line centralized internship application, DICAS. Please follow the instructions carefully.

Application to the Dietetic Internship Program:

- Access the [DICAS portal](#), e-mail DICASinfo@DICAS.org.
- Open an account through the [DICAS portal](#). Complete all parts of the Application, including work and volunteer experience. Please do not count any practical experience that was required for a class.
- The reasons why you want to become an RD and why you are choosing Lehman College DI should be included in the personal statement in the DICAS application.
- A Verification Statement from an ACEND-approved DP program in dietetics* or a Letter of Intent to provide one, if all requirements have not yet been fulfilled by the application deadline must be included.
- A minimum of three references (one should be from a faculty member who is knowledgeable about your academic ability and one from a professional colleague or supervisor). These will be uploaded to the DICAS site.
- You must submit one official copy of each transcript to the DICAS Online service, which will verify, scan, and attach them to the application. (Students who attended an undergraduate program abroad must present original transcripts evaluated by the World Education Service or equivalent).
- Please send separately a check for \$50 (non-refundable application fee), payable to Lehman College with a note including only your name, current school and the words "Dietetic Internship Application" to the Dietetic Internship Director at the address below to be postmarked no later than the application deadline in mid-February. Please do not send a resume or any other document supporting your application. All supporting documents MUST be sent through DICAS.
- You are required to participate in the Computer Match; go to [D and D Digital Systems](#) to register online. The fee for the computer match is \$50 and the deadline for the Spring Match is mid-February. We are listed as Herbert H. Lehman College.

Note: DICAS will be available after December 2016 for the spring 2017 Match. The on-line application must be completed on February 15, 2017. The fee to use DICAS is \$40 for the first application submitted and \$20 for each additional application.

*For those students without a DP Verification Statement, enrollment in Lehman's Undergraduate Program is necessary in order to fulfill ACEND's [DP requirements \(Lehman's Option 1\)](#). At Lehman, the following courses: DFN 341 (Life Cycle Nutrition), DFN 330 (Quantity Food Production) or ServSafe, DFN 348 (Nutrition and Disease I), DFN 430 (Food Services Management), DFN 437 (Nutrition Education & Counseling), DFN 445 (Advanced Nutrition), and DFN 448 (Nutrition and Disease II) are the minimum that must be taken. International students must take HSD 266 (US Health Care System).

All successful applicants who have not fulfilled the requirements for the DP Verification Statement by the deadline date but will be completing coursework in the spring semester will receive a provisional acceptance, depending on subsequent successful fulfillment of those requirements.

Students must be eligible to enter Lehman's M.S. in Nutrition Program as a matriculated student to apply to the Dietetic Internship Program. Eligibility is a minimum undergraduate GPA of 3.0 either in the DP courses or overall. Application to the Graduate Program may be made after acceptance into the Dietetic Internship Program.

For assistance with the Application Procedure, consult your DP Director and [the Academy's website](#), where you can download the resources and watch the videos.

Department of Health Sciences
Lehman College
250 Bedford Park Boulevard West
Bronx, NY 10468"

In addition:

Every page has support links to DI Centralized Application System and D and D Digital Systems.

The website provides a link to program faculty and contact information for the DI Director.

2. Directions: Include supporting documents with your narrative or in the appendices. Be sure to specifically include information provided to prospective students and the public.

3. Directions: Use the checklist below to evaluate how well your program meets the overall standard and guidelines for *Information to Prospective Students & the Public* (check only one):

Meets

X

1. No compliance problems are present.

2. Compliance problems exist, but all are being resolved successfully.

Partially Meets

--

Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet

--

Plans to address compliance problems are not viable or have not been developed.

Students

Standard 23: Policies & Procedures

Program policies, procedures and practices related to student recruitment and admission must comply with state and federal laws and regulations to ensure nondiscrimination and equal opportunity. The program must have written policies and procedures that protect the rights of enrolled students/interns and are consistent with current institutional practice. Additional policies and procedures specific to the program and supervised practice component must be provided to students/interns on a timely basis in a program handbook. The quality of services that are provided to students must be adequate to address their needs.

Guideline 23.1

The following policies and procedures required by institutional/regional accreditation and ordinarily published in the university/college catalog or program handbook must be provided to students/interns:

- a. Withdrawal and refund of tuition and fees
- b. Scheduling and program calendar, including vacation and holidays
- c. Protection of privacy of student information, including identifying information used for distance learning
- d. Access to personal files
- e. Access to student support services, including health services, counseling and testing and financial aid resources

Guideline 23.2

The following policies and procedures specific to dietetics programs must be provided to students/interns, such as in a program handbook:

- a. Insurance requirements, including those for professional liability
- b. Liability for safety in travel to or from assigned areas
- c. Injury or illness while in a facility for supervised practice
- d. Drug testing and criminal background checks if required by the supervised practice facilities
- e. Educational purpose of supervised practice to prevent the use of students/interns to replace employees
- f. Filing and handling complaints from students/interns and preceptors that includes recourse to an administrator other than the program director and prevents retaliation
- g. If the program grants credit or supervised practice hours based on an assessment of prior learning or competence, 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. Otherwise, the program must indicate that it has no policy for assessing prior learning or competence.
- h. 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
- i. Program retention and remediation procedures when student performance does not meet criteria for progressing in the program
- j. Disciplinary/termination procedures
- k. Graduation and/or program completion requirements for all options including maximum amount of time allowed for completing program requirements in place at the time student enrolls

- I. Verification statement procedures ensuring that all students/interns completing requirements as established by the program receive verification statements and are submitted to CDR for eligibility for the RD examination

1. Directions for Writing the Narrative: Describe how your program currently meets or plans to meet standard and guidelines (23.1-23.2) for *Policies & Procedures*. Be sure to address relevant tips and support to assist you in preparing your responses that are provided in the 2012 Standards document for your specific program type.

(Guideline 23.1)

The policies and procedures for recruitment and admission into Lehman's DI is found on the DI Website and the recruitment brochure (Appendix Y).

The DI program complies with CUNY Policy on Equal Opportunity and Nondiscrimination which appears on the Lehman website <http://www.lehman.edu/lehman/public-safety/cuny-policies.php>.

"The City University of New York ("University" or "CUNY"), located in a historically diverse municipality, is committed to a policy of equal employment and equal access in its educational programs and activities. Diversity, inclusion, and an environment free from discrimination are central to the mission of the University.

It is the policy of the University – applicable to all colleges and units – to recruit, employ, retain, promote, and provide benefits to employees (including paid and unpaid interns) and to admit and provide services for students without regard to race, color, creed, national origin, ethnicity, ancestry, religion, age, sex, (including pregnancy, childbirth, and related conditions), sexual orientation, gender, gender identity, marital status, partnership status, disability, genetic information, alienage, citizenship, military or veteran status, status as a victim of domestic violence/stalking/sex offenses, unemployment status, or any other legally prohibited basis in accordance with federal, state and city laws (1).

It is also the University's policy to provide reasonable accommodations when appropriate to individuals with disabilities, individuals observing religious practices, employees who have pregnancy or childbirth related medical conditions, or employees who are victims of domestic violence/stalking/sex offenses.

This policy also prohibits retaliation for reporting or opposing discrimination, or cooperating with an investigation of a discrimination complaint."

Discrimination in the policy is defined as "treating an individual differently or less favorably because of his or her protected characteristics – such as race, color, religion, sex, gender, national origin, or any of the other basis prohibited by this Policy."

"(1) As a public university system, CUNY adheres to federal, state and city laws and regulations regarding non-discrimination an affirmative action. Should any federal, state or city law or regulation be adopted that prohibits discrimination based on grounds or characteristics not included in this Policy, discrimination or on those additional bases will also be prohibited by this Policy. "

Withdrawal and Refund of Tuition and Fees can be accessed via the Bursar's office.

<http://www.lehman.edu/administration/business-office/bursar-office/refund-policy.php>. This is the refund policy for the fall and spring semesters.

"Tuition refunds are calculated in accordance with the Tuition Refund Policy for those students who officially drop a class or classes during the first three weeks of the semester. **Fees are not refundable.**

Refund Schedule for Fall and Spring Semesters	Tuition Refund	Tuition Obligations
Drop course(s) before 1 st Official Day of the Semester	100%	-0-
Drop course(s) within 6 calendar days of opening date	75%	25%
Drop course(s) between 7 & 12 calendar days of opening date	50%	50%
Drop course(s) between 13 & 17 calendar days of opening date	25%	75%
Drop course(s) beyond 17 th calendar days after opening date	None	100%

Academic Calendar:

Available at <http://www.lehman.edu/registrar/calendars.php>. The Academic Calendar includes class start dates, withdrawal dates/refund policy, holidays, reading days, and final exam week.

CUNY has a very detailed Privacy Policy which can be accessed through the Lehman website at <http://www.lehman.edu/academics/policies.php>

“CUNY Security / Privacy Policy

The CUNY Information Security Office has provided a [resource](#) for CUNY Information Security policies, advisories and awareness information.

The following policy applies to users of cuny.edu and is intended to explain what types of information is gathered from users and how that information is used. CUNY employees should also refer to the CUNY Computer User Policy which outlines CUNY's internal policy for the use and protection of CUNY computer resources.”

With the extensive use of technology via CUNY First, Blackboard, and Lehman Connect to name a few, there is increased importance in the protection of personal files. CUNY resource link provides the extensive procedure put into place to protect the institution, faculty, employees, and students.

The Division of Student Affairs provides a number of services to students including the Student Health Center, Counseling Center, Financial Aid, and Wellness Education and Promotion Program.

<http://www.lehman.edu/student-affairs/divisional-services.php>

(Guideline 23.2)

The DI Program Handbook (Intern Handbook), contains policies and procedures specific to the program. It is (Appendix Z). The Handbook is mailed to the interns in June or July and reviewed during the August orientation prior to the start of rotations. The interns complete a Program Contract which is kept in their files. The Program Contract details what is needed to receive a Verification Certificate of Completion of the Dietetic Internship.

The Intern Handbook contains policies and procedures regarding: equal opportunity (Policy 1, page 9) insurance requirements, including those for professional liability and injury or illness while in a facility for supervised practice (Policy 5, page 10), liability for safety in travel to or from assigned areas (Policy 13, page 15), drug testing and criminal background checks if required by the supervised practice facilities (Policy 24, page 21), educational purpose of the supervised practice to prevent the use of interns to replace employees (Policy 16, page 17), filing and handling complaints from interns and preceptors that includes resource to an administrator other than the director and prevents retaliation (Policy 15, page 17); assessment and prior learning and credit toward program requirements (coursework and/or experiential), (Policy 20, page 20), program retention and remediation procedures when student performance does not meet criteria for progressing in the program (Policy 14, page 16), disciplinary procedures (Policy 14, page 16), and graduation and/or completion requirements for all options including maximum amount of time allowed to complete program requirements in place at the time the student enrolls (Policy 25, page 22).

Assessment of prior learning and credit towards program requirements:

Interns who have taken any of the required graduate courses prior to entrance into the DI may make a written request that the requirement of the course(s) be taken during the DI be waived. For example, the DI requires that the interns complete DFN 641 (Community/Public Health Nutrition), DFN 651, (Clinical Nutrition), DFN 661 (Food Service Management), and HEA 620 (Health Counseling) during the three semesters of the DI. Interns who have completed these courses within two years of entrance into the DI with a grade of B or better may request that these co-requisite graduate courses be waived. Interns who have experience working in WIC do not have to repeat these hours. In the 2010 Self-Study and subsequent revised curriculum, the 60 hour WIC requirement could be waived.

Formal assessment of intern learning and regular reports of performance and progress, via assignments, course grades are available to the interns throughout the co-requisite didactic courses, at the conclusion of these courses, and at the conclusion of each supervised practice rotation and seminar.

All interns completing requirements as established by the program are scheduled for an Exit Interview. Interns are asked to complete several forms either prior to or at the interview including and Exit Survey, the CDR Address Verification Form, a Transcript Degree/Confirmation Release form, a form verifying that the student has read and understood the Code of Ethics, and the RDE misuse form. At the completion of the Exit Interview, graduates are given several copies of their DI Verification Statements, their names are submitted to CDR electronically for eligibility to sit for the RD examination.

2. Directions: Include supporting documents with your narrative or in the appendices. Be sure to specifically include general and program-specific policies and procedures.

3. Directions: Use the checklist below to evaluate how well your program meets the overall standard and guidelines for *Policies & Procedures* (check only one):

Meets

X

1. No compliance problems are present.
2. Compliance problems exist, but all are being resolved successfully.

Partially Meets

--

Viable plans (awaiting results or to be enacted) have been developed to address compliance issues.

Does Not Meet

--

Plans to address compliance problems are not viable or have not been developed.

**SELF-STUDY REPORT
APPENDICES**

**Lehman College Dietetic Internship Program
Dietetic Internship Using the IP Standards**

APPENDICES

List of recommended supporting documents that programs include in the self-study report appendices for each 2012 standard.

Standard 1:

- Appendix A: Copy of most recent regional accreditation letter (Standard 1.1)
- Appendix B: Organizational Chart(s) that includes program location to highest organization level (Standard 1.2)
- Appendix C: Program Budget (Guideline 1.3)
- Appendix D: Copy of catalog information or website listing course requirements and prerequisite (Guideline 1.5)
- Appendix E: Program Director's Curriculum Vitae and copy of CDR registration card (Guideline 1.7)

Standard 6 and 8:

- Appendix F: Pass Rate Improvement Plan and DI Exit Exam (Policy 17)

Standard 7:

- Appendix G: Program Assessment Plan and GOOGLE Survey results
- Appendix H: Samples of Surveys sent to stakeholders for data collection

Standard 10:

- Appendix I: Curriculum Mapping Matrix include Concentration Competencies
- Appendix J: Summary of facilities used for supervised practice by setting or practice area.

Standard 10 and 11:

- Appendix K: Rotation Schedule for the Maximum Number of Students
- Appendix L: Course Description from the catalog
- Appendix M: Course Syllabi
- Appendix N: Learning activity summary of diseases, populations and diverse cultures, encountered in the program and use of NCP process

Standard 13:

- Appendix O: Student Learning Outcomes Assessment Plan include Concentration Competencies
- Appendix P: Intern Data and Summary of aggregate data supporting data included in the Student Learning Outcomes Assessment Plan
- Appendix Q: Examples of assessment tools and rubrics including sample rotation evaluation forms

Standard 15:

- Appendix R: Program Director Position Description with allotted time for program management

Standard 16:

- Appendix S: List of preceptors with credentials aligned with supervised practice facility and rotation
- Appendix T: Summary of student feedback and preceptor evaluations faculty involved in the program
- Appendix U: Sample orientation outline – ongoing training agenda

Standard 17:

- Appendix V: Summary of professional achievements of faculty and preceptors

Standard 19:

- Appendix W: Sample Affiliation Agreements
- Appendix X: Copy of policy and procedure for selecting and maintaining supervised practice facilities

Standard 22:

- Appendix Y: Copy of Website pages, catalog, brochures and program information to the public

Standard 23:

- Appendix Z: Copy of Student Handbook

APPENDIX A

Copy of most recent regional accreditation letter
Middle States accreditation letter
(Standard 1.1)

Accreditation Council for Education in Nutrition and Dietetics

the accrediting agency for the
 Academy of Nutrition
and Dietetics

120 South Riverside Plaza
Suite 2000
Chicago, Illinois 60606-6995
312.899.0040 ext. 5400
www.eatright.org/acend

ACEND® Board of Directors 2015-2016

October 1, 2015

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Director, Dietetic Internship
Herbert H. Lehman College
The City University of New York
Department of Health Sciences
250 Bedford Park Boulevard West
Bronx, NY 10468-1589

Dear Ms. Stopler:

The pass rate report submitted July 29, 2015 in response to the May 29, 2015 letter from the Accreditation Council for Education in Nutrition and Dietetics (ACEND) board has been reviewed and accepted. Thank you for providing ACEND with documentation regarding Standard 6: Program Objectives and Standard 8: On-Going Program Improvement. The program continues to be accredited for a non-degree Dietetic Internship enrolling 14 part-time interns annually with a Medical Nutrition Therapy concentration.

Your program meets ACEND standards with monitoring and must continue to take steps to improve its first time pass rate. The ACEND board will monitor your program's pass rate annually and you may be required to provide future reports if your program's pass rate remains below ACEND's pass rate benchmark.

If you wish to propose major changes for your program you must submit the changes in writing to ACEND for review and approval prior to implementation. ACEND maintains the right to require an interim report, self-study, and/or site visit as a result of these changes. Guidelines for reporting major changes are on the Program Director Portal at www.eatright.org/acend.


Marina Stopler, MS, RD, IBCLC

October 1, 2015

Page 2 of 2

Thank you for your support of dietetics education and students. If you have any questions, please call the ACEND staff at 800-877-1600 ext. 5400.

Sincerely,

A handwritten signature in blue ink that reads "Maxine McElligott MA, RDN, LMNT, CDE". The signature is written in a cursive style and is enclosed in a light blue rectangular box.

Maxine McElligott, MA, RD, LMNT, CDE

Chair, Accreditation Council for Education in Nutrition and Dietetics

MM/jj

cc: Anny Morrobel-Sosa, PhD

William W. Latimer, PhD

Gul Tiryaki Sonmez



MIDDLE STATES COMMISSION ON HIGHER EDUCATION
3624 Market Street, Philadelphia, PA 19104-2680. Tel: 267-284-5000. Fax: 215-662-5501
www.msche.org

STATEMENT OF ACCREDITATION STATUS

LEHMAN COLLEGE OF THE CITY UNIVERSITY OF NEW YORK
250 Bedford Park Boulevard West
Bronx, NY 10468
Phone: (718) 960-8000; Fax: (718) 584-1765
www.lehman.cuny.edu

Chief Executive Officer: Dr. Ricardo R. Fernandez, President
System: City University of New York Central Administration
Mr. James B. Milliken, J.D., Chancellor
205 East 42nd Street
New York, NY 10017
Phone: (212) 794-5555; Fax: (212) 794-5590

INSTITUTIONAL INFORMATION

Enrollment (Headcount): 9886 Undergraduate; 2199 Graduate
Control: Public
Affiliation: Government-State Systems- None
Carnegie Classification: Master's - Larger Programs
Approved Degree Levels: Postsecondary Certificate (≥ 2 years, < 4 years), Bachelor's, Postbaccalaureate Certificate, Master's;
Distance Education Programs: Approved (Online RN to BS in Nursing)
Accreditors Recognized by U.S. Secretary of Education: n/a

Instructional Locations

Branch Campuses: None
Additional Locations: None
Other Instructional Sites: CUNY on the Concourse, Bronx, NY.

ACCREDITATION INFORMATION

Status: Member since 1968
Last Reaffirmed: November 20, 2014

Most Recent Commission Action:

November 20, 2014: To accept the Periodic Review Report and to reaffirm accreditation. The next evaluation visit is scheduled for 2018-2019.

Brief History Since Last Comprehensive Evaluation:

- June 25, 2009: To reaffirm accreditation. To request a monitoring report due by April 1, 2011, documenting evidence of the development and implementation of an organized and sustained assessment process to evaluate and improve student learning and institutional effectiveness, including evidence that (1) assessment results are used to improve planning, teaching, and learning (Standards 7 and 14), and (2) establishment of measurable goals at the program and course levels (Standard 14). The Periodic Review Report is due June 1, 2014.
- June 23, 2011: To accept the monitoring report. To request a progress report due April 1, 2013 documenting evidence that assessment results are used to improve teaching and learning. The Periodic Review Report is due June 1, 2014.
- May 1, 2012: To acknowledge receipt of the substantive change request and to include the online option for the RN to BS in Nursing degree within the scope of the institution's accreditation. The Periodic Review Report is due June 1, 2014.
- June 27, 2013: To accept the progress report. The Periodic Review Report is due June 1, 2014.

Next Self-Study Evaluation: 2018 - 2019

Next Periodic Review Report: 2024

Date Printed: November 21, 2014

DEFINITIONS

Branch Campus - A location of an institution that is geographically apart and independent of the main campus of the institution. The location is independent if the location: offers courses in educational programs leading to a degree, certificate, or other recognized educational credential; has its own faculty and administrative or supervisory organization; and has its own budgetary and hiring authority.

Additional Location - A location, other than a branch campus, that is geographically apart from the main campus and at which the institution offers at least 50 percent of an educational program. ANYA ("Approved but Not Yet Active") indicates that the location is included within the scope of accreditation but has not yet begun to offer courses. This designation is removed after the Commission receives notification that courses have begun at this location.

Other Instructional Sites - A location, other than a branch campus or additional location, at which the institution offers one or more courses for credit.

Distance Education Programs - Fully Approved, Approved (one program approved) or Not Approved indicates

whether or not the institution has been approved to offer diploma/certificate/degree programs via distance education (programs for which students could meet 50% or more of the requirements of the program by taking distance education courses). Per the Commission's Substantive Change policy, Commission approval of the first two Distance Education programs is required to be "Fully Approved." If only one program is approved by the Commission, the specific name of the program will be listed in parentheses after "Approved."

EXPLANATION OF COMMISSION ACTIONS

An institution's accreditation continues unless it is explicitly withdrawn or the institution voluntarily allows its accreditation to lapse. In addition to reviewing the institution's accreditation status at least every 5 years, the Commission takes actions to approve substantive changes (such as a new degree or certificate level, opening or closing of a geographical site, or a change of ownership) or when other events occur that require review for continued compliance.

Any type of report or visit required by the Commission is reviewed and voted on by the Commission. Reports submitted for candidacy, self-study evaluation, periodic review or follow-up may be accepted, acknowledged, or rejected.

The Commission "Accepts" a report when its quality, thoroughness, and clarity are sufficient to respond to all of the Commission's concerns, without requiring additional information in order to assess the institution's status.

The Commission "Documents receipt of" a letter or report when it addresses the Commission's concerns only partially because the letter or report had limited institutional responses to requested information, did not present evidence and analysis conducive to Commission review, were of insufficient quality, or necessitated extraordinary effort by the Commission's representatives and staff performing the review. Relevant reasons for not accepting the letter or report are noted in the action. The Commission may or may not require additional information in order to assess the institution's status.

The Commission "Rejects" a letter or report when its quality or substance are insufficient to respond appropriately to the Commission's concerns. The Commission requires the institution to resubmit the report and may request a visit at its discretion. These terms may be used for any action (reaffirm, postpone, warn, etc.).

Types of Follow-Up Reports:

Accreditation Readiness Report (ARR): The institution prepares an initial Accreditation Readiness Report during the application phase and continually updates it throughout the candidacy process. It is for use both by the institution and the Commission to present and summarize documented evidence and analysis of the institution's current or potential compliance with the Commission's accreditation standards.

Progress Report: The Commission needs assurance that the institution is carrying out activities that were planned or were being implemented at the time of a report or on-site visit.

Monitoring Report: There is a potential for the institution to become non-compliant with MSCHE standards; issues are more complex or more numerous; or issues require a substantive, detailed report. A visit may or may not be required. Monitoring reports are required for non-compliance actions.

Supplemental Information Report: This report is intended only to allow the institution to provide further information, not to give the institution time to formulate plans or initiate remedial action. This report is required when a decision is postponed. The Commission may request a supplemental information report at any time during the accreditation cycle.

Commendations:

Periodically, the Commission may include commendations to the institution within the action language. There are three commendations. More than one commendation may be given at the same time:

To commend the institution for the quality of the [Self-Study or PRR] report. The document itself was notably well-written, honest, insightful, and/or useful.

To commend the institution for the quality of its [Self-Study or PRR] process. The Self-Study process was notably inclusive.

To recognize the institution's progress to date. This is recognition for institutions that had serious challenges or problems but have made significant progress.

Affirming Actions

Grant Candidate for Accreditation Status: This is a pre-accreditation status following a specified process for application and institutional self-study. For details about the application process, see the MSCHE publication, *Becoming Accredited*. The U.S. Department of Education labels Candidacy as "Pre-accreditation" and defines it as the status of public recognition that an accrediting agency grants to an institution or program for a limited period of time that signifies the agency has determined that the institution or program is progressing toward accreditation but is not assured of accreditation) before the expiration of that limited period of time. Upon a grant of candidate for accreditation status, the institution may be asked to submit additional Accreditation Readiness Reports until it is ready to initiate self study.

Grant Accreditation: The Commission has acted to grant accreditation to a Candidate institution and does not require the submission of a written report prior to the next scheduled accreditation review in five years.

Grant Accreditation and request a Progress Report or Monitoring Report: The Commission has acted to grant accreditation to a Candidate institution but requires the submission of a written report prior to the next scheduled accreditation review to ensure that the institution is carrying out activities that were planned or were being implemented at the time of the report or on-site visit.

Reaffirm Accreditation via Self Study or Periodic Review Report: The Commission has acted to reaffirm accreditation and does not require the submission of a written report prior to the next scheduled accreditation review in five years. The action language may include recommendations to be addressed in the next Periodic Review Report or Self Study. Suggestions for improvement are given, but no written follow-up reporting is needed for compliance.

Reaffirm Accreditation via Self Study or Periodic Review Report and request a Progress Report or Monitoring Report: The Commission has acted to reaffirm accreditation but requires the submission of a written report prior to the next scheduled accreditation review to ensure that the institution is carrying out activities that were planned or were being implemented at the time of the report or on-site visit.

Administrative Actions

Continue Accreditation: A delay of up to one year may be granted to ensure a current and accurate representation of the institution or in the event of circumstances beyond the institution's control (natural disaster, U.S. State Department travel warnings, etc.). The institution maintains its status with the Commission during this period.

Procedural Actions

Defer a decision on initial accreditation: The Candidate institution shows promise but the evaluation team has identified issues of concern and recommends that the institution be given a specified time period to address those

concerns. Institutions may not stay in candidacy more than 5 years.

Postpone a decision on (reaffirmation of) accreditation: The Commission has determined that there is insufficient information to substantiate institutional compliance with one or more standards. The Commission requests a supplemental information report.

Voluntary Lapse of Accreditation: The institution has allowed its accreditation to lapse by not completing required obligations. The institution is no longer a member of the Commission upon the determined date that accreditation will cease.

Non-Compliance Actions

Warning: A Warning indicates that an institution has been determined by the Commission not to meet one or more standards for accreditation. A follow-up report, called a monitoring report, is required to demonstrate that the institution has made appropriate improvements to bring itself into compliance.

Probation: Probation indicates that an institution has been determined by the Commission not to meet one or more standards for accreditation and is an indication of a serious concern on the part of the Commission regarding the level and/or scope of non-compliance issues related to the standards. The Commission will place an institution on Probation if the Commission is concerned about one or more of the following:

1. the adequacy of the education provided by the institution;
2. the institution's capacity to make appropriate improvements in a timely fashion; or
3. the institution's capacity to sustain itself in the long term.

Probation is often, but need not always be, preceded by an action of Warning or Postponement. If the Commission had previously postponed a decision or placed the institution on Warning, the Commission may place the institution on Probation if it determines that the institution has failed to address satisfactorily the Commission's concerns in the prior action of postponement or warning regarding compliance with Commission standards. This action is accompanied by a request for a monitoring report, and a special visit follows. Probation may, but need not always, precede an action of Show Cause.

By federal regulation, the Commission must take immediate action to withdraw accreditation if an institution is out of compliance with accreditation standards for two years, unless the time is extended for good cause.

Show Cause: An institution is asked to demonstrate why its accreditation should not be withdrawn. A written report from the institution (including a teach out plan) and a follow-up team visit are required. The institution has the opportunity to appear before the Commission when the Commission meets to consider the institution's Show Cause status. Show Cause may occur during or at the end of the two-year Probation period, or at any time the Commission determines that an institution must demonstrate why its accreditation should not be withdrawn (i.e. Probation is not a necessary precursor to Show Cause).

Adverse Actions

Withdrawal of Accreditation: An institution's candidate or accredited status is withdrawn and with it, membership in the association. If the institution appeals this action, its accreditation remains in effect until the appeal is completed.

Denial of Accreditation: An institution is denied initial accreditation because it does not meet the Commission's requirements of affiliation or accreditation standards during the period allowed for candidacy. If the institution appeals this action, its candidacy remains in effect until the appeal is completed.

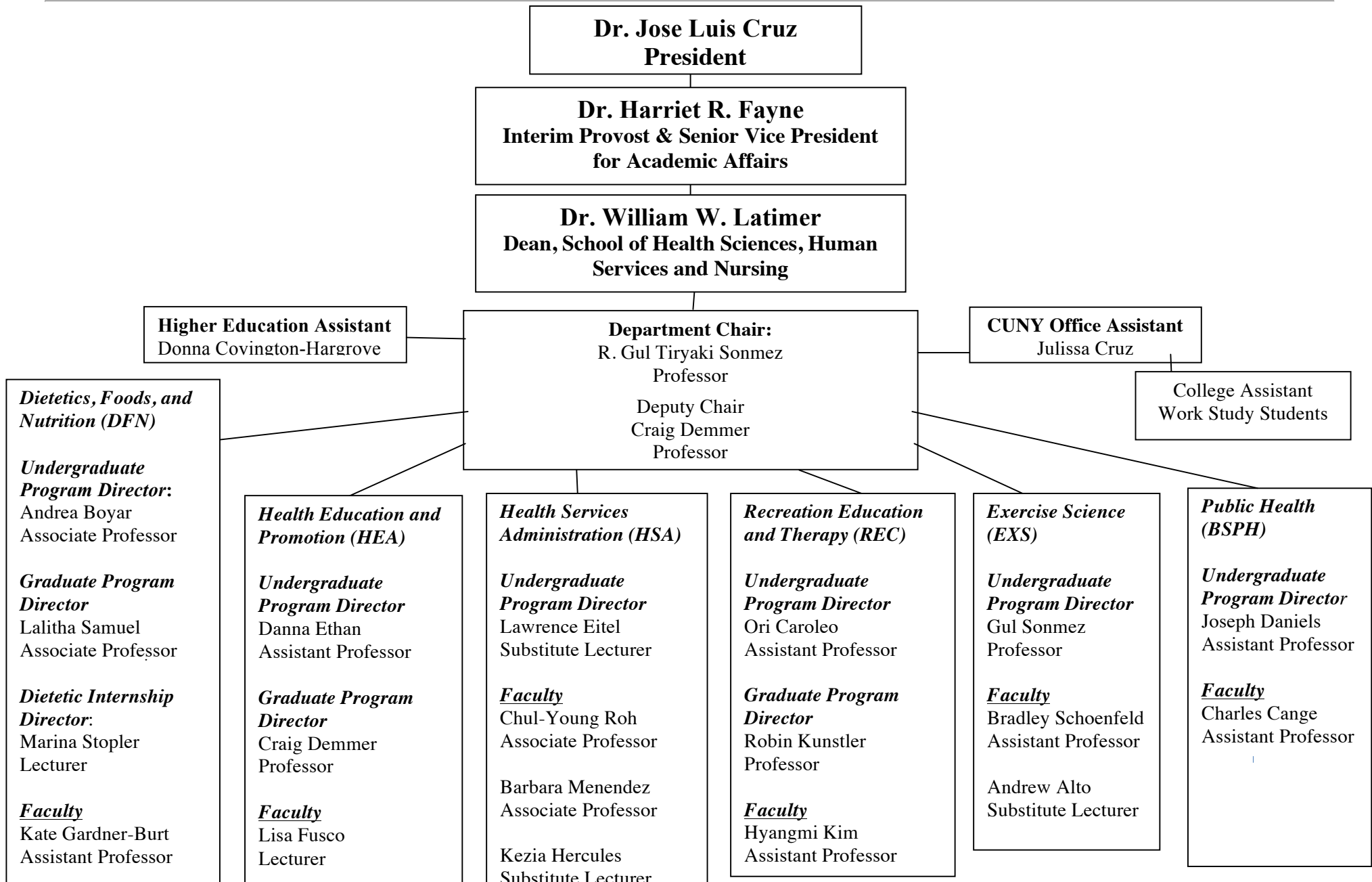
Appeal: The withdrawal or denial of candidacy or accreditation may be appealed. Institutions remain accredited (or candidates for accreditation) during the period of the appeal.

Other actions are described in the Commission policy, "Range of Commission Actions on Accreditation."

APPENDIX B

Organizational Chart that includes program location to highest organization level (Standard 1.2)

LEHMAN COLLEGE
DEPARTMENT OF HEALTH SCIENCES
ORGANIZATIONAL CHART (7/2016 - Present)



APPENDIX C

Program Budget (Guideline 1.3)

Lehman College Dietetic Internship Program Dietetic Internship Using the IP Standards

The U.S. Department of Education requires that ACEND review a program-specific budget. A line-item budget that documents specific revenues and expenses for the program is preferred; however, if the program's budget is integrated into a departmental budget, the program may provide the dollar amount of the departmental budget, the percent of the departmental budget allocated to the program, and a narrative explaining revenue sources and expenses used by the program. Below are template options to document specific revenues and expenses for the program, modify as needed.

Notes: Not all categories listed in templates will be relevant to all programs. Delete lines or add categories as necessary. Provide narrative to further explain funding and expenditures.

Option 1: Program Budget as a Percent of Departmental Budget

State the percentage of department funding available to the program and how it was determined.

Fourteen interns were matched with the Lehman Dietetic Internship in 2015. Interns are required to take a total of 30 credits during the one year internship (9 credits DFN 730, 9 credits DFN 731, 3 credits each of DFN 641, DFN 651, DFN 661, and HEA 620). Each graduate credit in year 2015 was \$425 (in state). All students who register for fall, spring, summer classes are required to pay an activity fee (max.\$74.60 per semester, and a technology fee (max. \$125 per semester). In 2015, 131 students applied to the Lehman DI; each applicant pays a \$50 fee. Therefore, the revenue is \$193,429.

With the support of salaries of professors who teach the co-requisite graduated course is determined by credit hours taught in the fall, spring, and/or summer; fringe benefits are salary multiplied by 50%. Similarly, salaries for adjunct professors was determined based on credits taught per semester, plus fringe benefits at 50%. Administrative staff which included the Chair of the Department and two office managers is based on the number of interns (14 in 2015-2016). ACEND annual fee and OTPS are additional costs. The total expenses amount to 124,103.24

Time Period: 2015-2016

Department Funding/Revenue:

Tuition	\$ 178,500
Application Fees	\$ 6,550
Activity Fee	\$ 3,133
Technology Fee	\$ 5,250
Total	\$ 193,433

Current Dietetics Program Budget and Expenditures/Expenses

	Budget
Faculty Salaries or FTEs	\$ 40,041.61
FTE benefits	\$ 20,020.80
Adjunct Salaries	\$ 32,412.58
Adjunct benefits	\$ 4,213.63
Administrative staff	\$ 16,989.68
Administrative benefits	\$ 8,324.94
ACEND Annual Fee	\$ 1,900.00
OTPS	\$ 200.00
Total	\$ 124,103.24

Option 2: Actual Program Budget: Option 1 utilized

Time Period: 20xx-20xx

Funding/Revenue Sources	
Students/Interns First Year (Tuition & Fees x Number of Students)	\$
Students/Interns Second Year (Tuition & Fees x Number of Students)	\$
Other (explain)	\$
Total	\$
Expenses	
ACEND Annual Fee	\$
Faculty, TA and Administrative Salaries and Benefits	\$
Other (i.e. office/teaching supplies, lab materials)	\$
Total	\$

APPENDIX D

Copy of catalog information or website listing course requirements and prerequisite (Guideline 1.5)

Guideline 1.5 – Academic Requirements Lehman College Dietetic Internship

<http://www.lehman.edu/dietetic-internship-program/academic-requirements.php>

Academic Requirements

Students who wish to apply to the Dietetic Internship Program must have a GPA of at least 3.0 in their DPD courses or overall. If accepted into the Dietetic Internship Program at Lehman College, prospective interns are required to take four corequisite graduate courses during the Dietetic Internship, unless they have previously taken equivalent graduate courses. Each intern is required to take at least two of these courses at Lehman College. DFN 651 must be taken at Lehman College. Interns must gain a B or better in each course. The courses are as follows:

- DFN 651: Clinical Nutrition. 45 hours, 3 credits. The assessment and management of nutritional problems encountered in patients in acute and chronic care settings are discussed using the nutrition care process. Includes an exploration of the scientific basis for current techniques and approaches in clinical nutrition based on medical nutrition therapy.
- DFN 641: Community and Public Health Nutrition. 45 hours, 3 credits. The relationship of diet to health promotion and disease prevention. The role of public, private, and voluntary organizations in providing nutrition care services for ambulatory populations. Techniques for developing, funding, implementing, and evaluating projects in the community.
- DFN 661: Food Service Management. 45 hours, 3 credits. Management theory with application to the food service industry. Emphasis on the management of human and financial resources, the practice of optimal standards of safety, sanitation, and nutrition, and the role of the computer as a management tool.
- HEA 620: Health Counseling. 45 hours, 3 credits. An introduction to health counseling and behavior change is provided, with an overview of leading health problems of interest. Theoretical approaches to behavior change are examined. Basic counseling skills for helping people with behavior change will be acquired.
- DFN 730: Supervised Preprofessional Practice. 45 hours, 3 credits per semester for a minimum of three semesters. A minimum of 400 hours per semester of supervised preprofessional practice at affiliated health care, management and community sites. COREQ: DFN 731.
- DFN 731: Concepts and Methods of Dietetic Practice. 45 hours, 3 credits per semester for a minimum of 3 semesters. This course comprises the theories, methods, and concepts of dietetic practice that will be required to master the competencies during the internship. Included are methods of community and individual assessment, theories, and practice of planning; theories and models of education and lesson plan development; outcomes analysis, evaluation methods and reimbursement practices in healthcare. COREQ: DFN 730.

Successful completion of didactic and supervised practice requirements of the Dietetic Internship enables interns to take the Registration Examination to become a Registered Dietitian (RD Test).

After passing the RD test, registered dietitians may apply to the New York State Education Department, Office of the Professions, to become a Certified Dietitian/Nutritionist in the State of New York.

Last modified: Oct 13, 2011

APPENDIX E

Program Director's Curriculum Vitae and copy of CDR
registration card (Guideline 1.7)

MARINA STOPLER, MS. RDN, CDN, IBCLC

83 Summit Place, Pleasantville, NY 10570, Home (914)769-4064, Cell (914)523-2806, marina.stopler@lehman.cuny.edu

EDUCATION

Teachers College, Columbia University, New York, N.Y.

- M.S. Degree (Applied Physiology and Nutrition), October 1988
- Honors: Clara M. Taylor Scholarship

Harpur College, SUNY at Binghamton, Binghamton, N.Y.

- B.S. Degree (Biological Sciences), May 1986
- Honors: Outstanding Academic Performance

EXPERIENCE

Dietetics Internship Director and Lecturer, Department of Health Sciences, Lehman College, CUNY, Bronx, N.Y.

- Supervise and oversee 14 Dietetic Interns in compliance with the ACEND-approved DI Program. Teach courses on Dietetics Food and Nutrition which include *Supervised Professional Practice (DFN 730)*, *Concepts and Methods of Dietetics Practice (DFN 731)*, *Fieldwork – Clinical (DFN 471)*, *Life Cycle Nutrition, (DFN 341)* and *Nutrition and Health (HSD 240)*.

August 2014 --present

Adjunct Lecturer, Department of Health Sciences, Lehman College, CUNY, Bronx, N.Y.

- Taught courses in traditional, web enhanced, hybrid and online formats including *Nutrition and Health (HSD 240)* and *Nutrition throughout the Life Cycle (DFN 341)*

Fall 2015, January 1998-August 2014

Adjunct Instructor, Biological Sciences Department, Pace University, Pleasantville, N.Y.

- Taught undergraduate online course: *Biological Aspect of Nutrition (BIO 152)*

Fall 2013

Researcher, American Health Foundation, Valhalla, N.Y.

- Called parents whose children were enrolled in Head Start Programs throughout Westchester and Putnam counties and conducted 24-hour recalls. Information was recorded through a special software program (training provided through AHF) and submitted on a regular basis.

1995

Senior Nutritionist, Comprehensive Family Care Center, Bronx, N.Y.

- Awarded: 1993 Director's Award

December 1989-January 1991, January 1992-September 1995

Fordham Family Practice, Bronx, N.Y. Affiliates of Montefiore Medical Center

- Provided nutritional counseling for clinic outpatients. Conditions included: AIDS, diabetes, hyperlipidemia, hypertension, and obesity. Counseling provided for all age groups including prenatal and lactating women. Assessed and documented nutritional needs of patients and planned dietary intervention strategies. Monitored patient compliance and evaluated patient progress towards achieving specified goals. Conducted in-services and nutrition education classes. Conducted yearly lectures in a community health care center.

June 1994-September 1995

WIC Senior Nutritionist/Site Supervisor, Comprehensive Family Care Center, Bronx, N.Y.

- Supervised a staff of 20 for the Special Supplemental Food Program for Women, Infants, and Children (WIC) Program. Assess nutritional needs of prenatal, postpartum, and nursing women. Provided consults on infant and child nutrition. Prepared lesson plans and conducted nutrition education classes. Trained and supervised interns from graduate nutrition programs from Hunter College and N.Y.U. in community nutrition.

November 1988-August 1994

Guest Lecturer, Teachers College, Columbia University, New York, N.Y.

- Conducted a yearly two-hour lecture entitled, "Nutrition during Pregnancy and Lactation" for graduate students.

April 1990-1994

AP4 Intern, Teachers College, Columbia University, New York, NY

- Gained professional practice experience in the areas of clinical nutrition at Columbia Presbyterian Medical Center, community nutrition at St. Luke's/Roosevelt Hospital, and food service management at Columbia University's Dining Services.
January 1991-December 1991

Researcher, Bronx, VA Hospital Center, Bronx, N.Y.

- Conducted research on cyanocobalamin (vitamin B12) under the direction of Victor Herbert, M.D., J.D. 1988-1989

Certifications

- International Board Certified Lactation Consultant, Certified through the International Board of Lactation Consultant Examiners, certified 1994, 2004, 2014
- Certified Dietitian Nutritionist, New York State

Memberships

- Academy of Nutrition and Dietetics, Commission on Dietetic Registration, 1992
- Westchester Rockland Dietetic Association
- International Lactation Consultants Association
- Westchester/Putnam/Rockland Lactation Consortium
- Slow Food Westchester

Board Member/Committee Chair

- Search Committee, Lehman College, CUNY, Recreation, Department of Health Sciences, Spring 2016
- Lehman Health Promoters Club Professor Liaison, Lehman College, CUNY Spring 2016, Fall 2016, Spring 2017
- Foodchester, Inc. (Pleasantville Farmers Market), Pleasantville, NY, 2013 to present
 - Farmers Market Nutritionist
 - Chair: Health and Sustainability -- Let's Talk Series
 - Chair: Culinary – Annual Apple Pie Contest
- Westchester/Putnam/Rockland Lactation Consortium,
 - Corresponding Secretary, 2006-present; Secretary, 2000-2006
 - Committees: World Breastfeeding Week, 2004-present
- Pleasantville Union Free School District, District Wellness Committee, 2005, 2007-2010
- Pleasantville Middle School PTA, Pleasantville, N.Y.
 - Corresponding Secretary, 2007-2009
 - PMS PTA Health and Safety Committee, 2008-2010
 - PMS PTA Committee Co-chair: Book Fair, 2007-2008; Eastern Hemisphere Day, 2007, 2009
- Bedford Road School PTA, Pleasantville, N.Y.
 - BRS PTA Past-president, 2006-2007
 - BRS Principal Search Committee, 2006
 - BRS PTA Co-president, 2004-2006
 - BRS Committee Co-chair: Book Fair 2002-2004



CURRICULUM VITAE

NAME Marina Tsougranis Stopler, MS, RD, IBCLC

COLLEGE

LEHMAN COLLEGE

RECOMMENDATION FOR

APPOINTMENT

PROMOTION

REAPPOINTMENT

REAPPOINTMENT WITH TENURE

OTHER (Designation as Vice President, Dean, etc.)

TITLE Lecturer

DEPARTMENT Health Sciences

EFFECTIVE DATE 2017

SALARY RATE 73,354

(Subject to financial ability)

HIGHER EDUCATION

A. DEGREES

Institution	Dates Attended	Degree & Major	Date Conferred
Teachers College, Columbia University	1986-1988	MS Applied Physiology and Nutrition	October 1988
Harpur College, SUNY Binghamton	1982-1986	BS Biology	May 1986
			Certifications

B. Additional Higher Education and/or Education in Progress

Certifications/Registrations:

International Board Certified Lactation Consultant, certified through the International Board of Lactation Consultant Examiners, since 1994

Registered Dietitian, since 1992 (exam taken after DI internship, AP4 Intern, at Teachers College, CU, 1990-91)

Certified Dietitian Nutritionist CDN #8176673

EXPERIENCE

A. Teaching

Institution	Dates	Rank	Department
Dietetic Internship Director	2014-present	Director	Health Sciences
CUNY Lehman	1996-present	Adjunct Lecturer	Health Sciences
Pace University	2013	Adjunct Instructor	Biology, Dyson School of Arts and Sciences

CURRICULUM VITAE

-1a-

NAME Marina Tsougranis Stopler

COLLEGE **LEHMAN****EXPERIENCE****B. Other (continued)**

Institution	Dates	Rank	Department
American Health Foundation, Valhalla, NY	1995-1996	Researcher	AHF
Comprehensive Family Care Center, Morris Park Ave., Bronx, NY	1988-1995	Senior Nutritionist Site Supervisor	WIC Program
Fordham Family Practice, Bronx, NY	1994-1995	Nutrition Counselor	Outpatient Clinic
Teachers College, Columbia University, New York, NY	1990-1994	Guest Lecturer	Nutrition Education
Bronx VA Hospital, Bronx, NY	1988-1989	Researcher	Hematology



CURRICULUM VITAE

-2-

NAME Marina Tsougranis Stopler

COLLEGE

LEHMAN COLLEGE

ACADEMIC AND PROFESSIONAL HONORS

Director's Award, Comprehensive Family Care Center, 1993

Clara M. Taylor Scholarship, Teachers College, Columbia, 1988

Outstanding Academic Performance, SUNY Binghamton, 1986

PUBLICATIONS (last five years only)



CURRICULUM VITAE

-2D-

SERVICE TO THE COLLEGE

Spring 2016 Service to the Health Sciences Department - Faculty Search Committee for Recreation; interviewed and observed candidates for open faculty position

SERVICE TO THE UNIVERSITY



CURRICULUM VITAE

2E

NAME Marina Tsougranis Stopler

COLLEGE LEHMAN

COMMUNITY SERVICE

Board Member, Foodchester, Inc. of the Pleasantville Farmers Marke, Pleasantville, NY, 2012-present
Westchester/Putnam/Rockland Association, Inc., , Chair, World Breastfeeding Week, 2004-present
Pleasantville Union Free School District, District Wellness Committee, 2005, 2007-2010

Public Speaking:

"Let's Talk" Series -- Various topics related to nutrition, health, wellness, and sustainability; Pleasantville Farmers Market, Foodchester, Inc., Pleasantville NY, 2012-present

"Breastfeeding and Nutrition," Westchester/Putnam Rockland Lactation Consortium, June 2014

"King Corn" -- Parent University, Pleasantville Middle School PTA, Pleasantville, NY, March 2011

"I'm Hungry, What Can I Eat?" -- Parent University, Pleasantville Middle School, Pleasantville, NY, November 2010

"What Foods Maximize Middle Schooler's Health and Brain Power?" -- Parent University, Pleasantville Middle School PTA, Pleasantville, NY, 2008

Eating and Moving: Simplifying the Challenges, Sound Shore Medical enter WIC Conference, New Rochelle, NY, July 2006



CURRICULUM VITAE

-3-

NAME Marina Tsougranis Stopler

COLLEGE LEHMAN

MEMBERSHIP IN PROFESSIONAL SOCIETIES (last five years only)

Academy of Nutrition and Dietetics, Commission of Dietetic Registration

Westchester Rockland Dietetic Association

International Lactation Consultants Association

Westchester/Putnam/Rockland Lactation Consortium, Inc.

REFERENCES (List name, title and affiliation only. Excerpts from letters may be attached as a separate document.)

Iris Rosario, WIC Director, Sound Shore Medical Center (now part of Montefiore Health System)

Jack Horne, Chair and Associate Professor of the Dyson School of Arts and Sciences, Pace University

CHAIRMAN'S REPORT (For reappointment, promotion or continued reappointment with tenure)

RDN Registered Dietitian Nutritionist™

RD Registered Dietitian™

Commission on Dietetic Registration

the credentialing agency for the Academy of Nutrition and Dietetics

CDR certifies that

Marina Stopler

has successfully completed requirements for dietetic registration.

Marina Stopler

Signature

Registration I.D. Number **000000**

Registered Dietitian Nutritionist™ (RDN™)

Registered Dietitian™ (RD™)

Registration Payment Period
8/31/16 - 8/31/17

Kevin Lee PHD, RDN, LD
Chair, Commission on Dietetic Registration

COMMISSION ON DIETETIC REGISTRATION (CDR)

120 South Riverside Plaza, Suite 2000
Chicago, Illinois 60606-6995

Telephone: 800/877-1600, ext 5500

Email: cdr@eatright.org

Website: www.cdrnet.org

APPENDIX F

Standard 6 and 8:

DPD/DI Advisory Meeting Minutes

Pass Rate Improvement Plan

DI Exit Exam Instructions

DPD/DI Advisory Meeting Minutes
June 14, 2016, 4pm

Present (12): Marina Stopler, Andrea Boyar, Beatrice Dykes, Judy Porcari, Mary Opfer, Mary-Ellen Dorfman, Roswanna Ippolito (LaGuardia CC), Anna-Carina Spori (St. Albans VA), Jessica Alvarez (Silvercrest Nursing Home), Teresa Schlanger (Westchester CC), Kristi Barth (present Lehman intern), Elshardi Edwin (present Lehman intern).

DPD Director: Andrea Boyar

DPD = DFN Major Option I (Option II is not ACEND-approved)

DTR must be in Option I (DTR review classes)

Option I students limited to 190 per year including second degree students and those earning VS statements with only 12 credits (Teacher's College Students)

61.5 credits, 3.0 minimum GPA for Verification Statement

Other requirements: Plagiarism Tutorial, ServSafe, DPD Examination

Application procedures and Admission Requirements (minimum 3.0 for Option I)

Site Visit: April or May 2017 and Self-Study Report due 12 weeks prior

Pass Rate as of April 8, 2016 – First Time (72%) and One Year (81%)

Dietetic Internship; DI Director, Marina Stopler

Requirements for DI (12-month program)

- Includes 4 co-requisite graduate courses plus 3 semesters of supervised practice and seminar. Total of 30 credits.
- 14 slots
- Clinically focused program; 15 weeks or a total of 470+ hours are focused on MNT. Facilities include hospitals, rehabilitation centers, nursing homes, and a kidney disease center. Food service comprises of 10 weeks or 300 hours, community is 280 hours or about 9 weeks (WIC, Public School, Public Health and HIV/AIDS). Locations are throughout NYC, Westchester, Rockland, and Nassau counties.
- DICAS – increases in # of applicants from about 95 to 130.
- Minimum GPA to apply is 3.0,
- (DPD Sci, Prof, Overall) GPA --2015 (3.62, 3.79, 3.72), 2016 (3.43, 3.77, 3.6)
- Two interns discussed their experiences in the Lehman DI

Pass rates

- First attempt - one year - consecutive improvements: 62.5% (2012), 83.33% (2013), 84% (2014), and of interns of class (total 13) of 2014, 11 passed on first attempt, one passed on second attempt, and one did not pass and will retake this summer, representing a self-reported first attempt pass rate of 84.6%.
- One year: 62.5% (2012), 100% (2013), 100% (2014), 81.82% (2015)
- Current Five years – consecutive improvements: 82.35% (2009-2013), 86.96 (2010-2014), and this year is expected to be over 90%
- 2014-2015 DI class - Over 75% employed in clinical positions; Note -- there were 13 interns that year. 14 were accepted, but one dropped out to take MCATs and go to medical school.

Looking forward

- Up for reaccreditation. Site visit April or May 2017
- Incoming class 2016: 14 interns: 10 from Lehman, 1 from JWU, 1 from Queens College, 1 from Hunter, 1 from Montclair State; 8 from Westchester/Rockland, 6 from NYC area; 5 male/7 female.
- Suggestions for improvement
 - Discussed strategies to keep pass rate 80% and better.
 - Study guides, e.g. Visual Veggies
 - Practice exams as part of seminar for all three semesters

New Topics:

- Advocacy: NYSAND and diet orders
- Licensure
- DTRs

Pass Rate Monitoring and Improvement Plan (Standards 6 and 8)

Directions: Using the table below, for each of the possible factors influencing your program having a pass rate less than 80% (70% for DT programs) for first-time test takers over an assessment period, list the specific action steps that will be taken to improve the pass rate. For each step, include a timeline of implementation and steps taken to date. If data are available for some of the action steps, please list the resulting data. You are encouraged to include progress/results from your previous pass rate improvement plans. **Data tables may be attached separately.**

Possible factor(s) influencing the pass rate.	Actions steps that will be taken for improvement.	Rationale for factor and action steps	Specific timeframe for implementation of the action steps.	Resulting data based on steps taken to date.
<p>Note: Complete each category listed in the matrix Example: 2.0 GPA required for admission into the program</p>	1) Propose to advisory council that GPA requirement for admission be increased to 2.8 2) Update university catalog, program information to public when approved	Higher GPA may lead to better qualified students	Fall 2014	Collect data on first class under new GPA requirements (2014-2015 academic year) to assess whether or not they are performing at a higher level
<p>Admission Requirements: A 3.0 GPA is a minimum standard to apply for the Lehman DI.</p>	No changes will be made regarding the GPA.			
<p>Program Curriculum: Change Health Counseling (HEA 620) to Nutrition Counseling (DFN 630)</p>	Modify course to provide more hand-on and real life experiences that will be encountered in the field of dietetics	Greater focus on counseling skills for dietitians and nutritionists to improve level of skills need for the profession	Spring 2017	Monitor faculty evaluation form and RD exam pass rate.
<p>Teaching & Learning Methods: Increase number of guest speakers and incorporate field trips for educational enhancement in teaching Provide sufficient in-class RD exam review during seminar which is to include exit exam each of the three semesters (fall, spring, summer), an Exit exam (at the end of the summer session) and practice RD exams via computer software.</p>	1) Invite professional guest speakers to discuss their areas of expertise 2) Include review for RD exam as part of seminar class 3) Modify present Health Counseling course to a more focused Nutrition Counseling course to be taught by an RD. 4) Choose locations for field trips for interns to attend.	1) Incorporating in-class discussions from RD professionals in various areas of practice (e.g. private practice, CDE, exercise physiology, lactation) may enhance student education and performance. May provide opportunities for future preceptor/site affiliations. 2) Greater preparation for RD exam to improve pass rates 3) Greater focus on	1) Spring 2017 2) Spring 2017 3) Spring 2017 4) Spring 2017	1) Include guest speakers and field trips in DFN 731 in the Spring semester course. Students and professor evaluate speaker based on content and discussion of material covered and determine added value to course. 2) Collect and assess grades; determine strengths and weaknesses. Address weakness and provide additional educational resources. See if pass rate improves on RD exam. Keep data for future comparisons.

<p>Nutrition Counseling class to be instructed as a traditional face-to-face course.</p>		<p>counseling and education with more student-to-student hands-on projects for improvement on pass-rate for RD Exam 4) Field trips may provide experiential learning based on topics covered in graduate coursework and seminar.</p>		
<p>Faculty and Preceptors: Improve review of present affiliations and learning outcomes Increase number of sites/preceptor affiliations Hire RD to teach Nutrition Counseling course</p>	<p>1) Maintain affiliations with preceptors that have strong evaluations and provide solid pre-professional practice experiences 2) Perform site visits/meet with preceptors 3) Increase number of affiliations 4) Modify present Health Counseling course to a more focused Nutrition Counseling course to be taught by an RD.</p>	<p>1) Strong preceptors to provide better pre-professional experiences to enhance pass rate 2) Will facilitate better communication between DI Director and preceptor 3) More affiliations will allow greater flexibility when the sites experienced staff changes or if preceptor evaluated as "fair" or "poor." 4) Greater focus on counseling and education and improvement on pass-rate for RD Exam if course is taught by an RD with extensive counseling experience.</p>	<p>1) Spring 2017 2) Summer 2017 3) Summer 2017 4) Spring 2017</p>	<p>1) Collect and review preceptor evaluations over the past two years. Determine which preceptors/sites are highly rated (4 or 5 on the evaluation form) in the areas such as preceptor expertise, feedback, instruction, guidance, and experience. Preference is to maintain an overall evaluation of "above average" or "excellent" at the level of the preceptor and site. 2) Maintain affiliations with those that provide an "above average" or "excellent" experience. Collect and review evaluations of preceptors at new sites 3) Review number of additional affiliations and assess if improvement in intern experiences is related to improved exam pass rate.</p>
<p>Academic Counseling: All interns meet with the DI Director formally and informally on a regular basis. The DI Director has an open-door policy for interns to discuss matters that relate to the DI program. Other than visiting the DI Director at Lehman, the interns can email, call, or text when needed.</p>	<p>Improve communication between DI Director and interns. The DI Director keeps in regular contact, formally and informally, with graduate faculty.</p>	<p>Improve ability to prevent or intercede when issues arise that may affect academic coursework, supervised practice or professional performance.</p>	<p>Spring 2017</p>	<p>Document interns who have needed support or academic counseling and monitor outcome based on DI completion rate.</p>

<p>Student Support Services: Improve communication regarding types of support services available to students</p>	<p>Interns receiving less than a B any co-requisite class or preceptor evaluation may need: Referral to Lehman's Instructional support service program – Academic Center for Excellence (ACE) and Science Learning Center (SCL). Faculty is available for advisement and support. Assess the use of the educational resources (stated above)</p>	<p>Early identification of difficulties to offset problems in the latter part of the program.</p>	<p>Spring 2017</p>	<p>Determine improvement over the academic year and correlate to pass rate; collect data for future evaluations.</p>
<p>Educational Resources: Increase availability of resources for exam review/study/reinforcement of material in department (on-campus) Increase utilization of web-based learning material for exam review/study/reinforcement outside of class-time (off campus)</p>	<p>1) Purchase second department computer for interns to take practice RD exams on a regular basis/include as part of curriculum 2) Introduce other web-based resources to further enhance knowledge base 3) Encourage students to take RD review course prior to taking exam, and provide students with information needed for seamless registration 4) Plan for students to take RD exam within 3 months after completion of the DI Program, provide information needed for seamless registration.</p>	<p>1) On site practice exams to reinforce material 2) To reinforce material off-campus 3 and 4) Reduce time gaps between DI program and RD exam</p>	<p>1) Summer 2017 2) Summer 2017 3) Summer-Fall 2017 4) Summer-Fall 2017</p>	<p>1) Interns to log in whenever practice exam is taken; collect data 2) Provide discussion board forum for student feedback when using internet resources; correlate to pass rate 3) Collect data and focus on areas where interns need additional support; correlate to pass rate 4) Collect data on number of interns who registered to take RD exam within 3 months after the completion of the DI Program; correlate to pass rate</p>
<p>Program Assessment Process: Will remain the same with the addition of closer follow-up with interns after completion of</p>	<p>Increase the number of interns and employees who participate in the 5-year graduate survey and employee satisfaction</p>	<p>Assessment methods have shown improvement over the past 5 years, but data collection can be improved.</p>	<p>Continuous</p>	<p>Graduate records, six-month surveys, exit surveys, and 5-year graduate surveys, 5-year employee satisfaction survey, faculty evaluation forms, preceptor</p>

program. Also, plan to streamline data collection using computer technology (e.g. Google forms, Google docs)	survey.			evaluation forms, and pass rate monitoring data provide important information to review the program, assess strengths and weakness. Used to make appropriate changes.
Other Factors: None				

Data table:

	2015	2016	
Teaching and Learning Methods – Guest speakers	2 guest speakers	6 guest speakers	improvement
Teaching and Learning Methods – Field trips	1 field trip	2 field trips	improvement
Faculty evaluations			
Preceptor evaluations			
Academic Counseling	0 interns	1 intern	
Support Services	0 interns	2 interns	
Educational Resources – Visual Veggies	100% of students used Visual Veggies	100% of interns used Visual Veggies	
Educational Resources – other RD study guides	50% of interns used another educational resource (Jean Inman, RD in a Flash)	50% of interns used another educational resource (Jean Inman)	
Affiliations			Improvement
RD first-time pass rate	81%	94%	Improvement

DI Exit Exam

Policy 17:

All dietetic interns are required to take a test at the end of each semester and a cumulative test at the conclusion of the program and attain a passing score of 80 and above for each test. No intern receiving a score of less than 80 on the final test will be allowed to graduate from the program.

Procedure:

At the end of the fall, spring and summer semesters, interns are required to take an on- line multiple-choice test. A score of 80 or more is expected on all three tests. In the fall, if a score of less than 80 is obtained on the first test, the intern will be required to take another test, in order to proceed into the next semester. The intern will receive an “Incomplete” for DFN 731 until a score of 80 or above is achieved. If a score of 80 or more is not achieved on the second test, the intern may take a third test. If a score of 80 or more is not achieved on the third test, the intern will be asked to withdraw from the program. Interns will only be permitted to take one retest at the end of the spring semester. If a score of a score of less than 80 is obtained on the second test, the intern will be asked to withdraw from the program.

If the intern fails to obtain a score of 80 or above on the summer DI exit exam, the intern will be required to take another test after a time period of not less than three weeks in order to graduate from the program. The intern will be given an opportunity to review the first exam, to ascertain the incorrect responses to the questions. If a score of 80 or more is not achieved on the second summer test, the intern must submit a written application (Appendix 8) to the Dietetic Internship Committee, to justify their performance, the remedial activities that they have undertaken and how these activities will enable them to pass the Registered Dietitian Test. If the appeal is accepted, the intern may take one further test. If a score of 80 or above is not achieved on the third test, the intern will not graduate from the DI program. If the appeal is not accepted, the intern will not be allowed to graduate from the program.

APPENDIX G

Standard 7:
Program Assessment Plan
GOOGLE Survey results

Dietetic Internship Using the IP Standards

Program Assessment Summary Matrices (Standard 7) Assessment Period from 2011 to 2015

Background: Program Assessment Planning Summary Matrices are used to document both whether the program has met its goals over the past five-years (columns A-G), and to document future plans for the next five years (columns A-F). At the end of the assessment period, a fully-completed form is submitted to summarize how well the program has achieved objectives that support program goals, and a new form is completed to reflect any updates to the mission, goals and objectives over the next assessment period.

Directions: When submitting completed plans for the past five years, you may attach your original forms (from five years ago), and do not have to retype information into this document as long as the information requested in columns A-G is provided: List the objectives (desired outcomes) that accompanied each program goal. Describe the data assessed and the source for each outcome measure. Specify the assessment methods, identify the individuals or groups responsible for ensuring that assessments took place along with the timeframe for collecting the data, and the actual outcomes achieved over the past five-year lifetime of the plan.

When submitting plans for the next assessment period, complete new summary matrices or copy your past five-year matrices, and update them to reflect your mission, goals and objectives for the next five years (columns A-F). Leave column G blank.

**Lehman College Dietetic Internship
Dietetic Internship Using the IP Standards
Program Assessment Summary Matrices (Standard 7)
Assessment Period from 2011 to 2015**

Mission of the Dietetics Program (Standard 4)

The mission of the DI at Lehman College is to provide interns with a comprehensive learning experience through which they can acquire competencies, knowledge, skills, and hands-on training required of entry-level nutrition care professionals, with an emphasis on Medical Nutrition Therapy. Lehman’s DI has been designed to allow interns who are employed to complete the program on a part-time basis. The program is designed to prepare interns to pass the registration examination and work as Registered Dietitians in a variety of health care, community, public health, and food service settings. Located in the Bronx, Lehman College is uniquely placed to assist in educating interns to develop approaches to support the community to move toward dietary change to optimize health and prevent and treat disease. In addition, the program strives to instill in our interns, the desire for lifelong learning and advanced education in nutrition and related health fields.

Program Goal, Objectives and Assessment (Standards 5, 6, 7 and 8)

Goal #1 – To prepare interns to be competent, ethical, and culturally-sensitive entry-level dietitians.

A) Objectives (Guideline 7.1a)	B) Data Assessed and the Data Source (Guideline 7.1b & c)	C) Data Assessment Method(s) (Guideline 7.1d)	D) Assessed by: (Guideline 7.1e)	E) Actions to Assure that the Outcome Is or Will Be Met (Guideline 8.2)	F) Timeframe (Finished?) (Guideline 7.1f)	G) Actual Outcome (Guideline 7.2 b)
<p>Example: 90% of enrolled students will complete program requirements within 15 months of program completion. (150% of a 10-month program length).</p>	<p>Graduation records from the Office of Student Records</p>	<p>Review graduation records annually.</p>	<p>Program Directors & Committee on Student Retention</p>	<ul style="list-style-type: none"> • Identify students at risk • Advisor meets with students to make sure they are on track. • Etc.... 	<p>Annually each June (on-going)</p>	<p>Example: 2010: 16/20 = 80% 2011: 17/20 = 85% 2012: 16/20 = 80% 2013: 18/20 = 90% 2014: 17/20 = 85% Met: 84/ 100 = 84% over past five years</p>
<p>Over a 5-year period, 80% or more of enrolled interns will complete the DI within 18 months</p>	<p>Graduation records from exit interview files and 5-year Lehman DI Alumni Survey</p>	<p>Review graduation records annually</p>	<p>DI Director</p>	<p>Identify interns at risk. DI Director meets with interns to make sure they are on track</p>	<p>Ongoing annually each February</p>	<p>Annually: 2011: 12/14 = 86% 2012: 13/13 = 100% 2013: 14/14 = 100% 2014: 12/14 = 86% 2015: 14/14 = 100%</p> <p>5-year Survey: 40/41 = 97.6%</p> <p>Met: Annually: 65/69 = 94% 5-Year Survey (2015)</p>

						40/41 = 97.6%
Over a 5-year period, 70% of graduates who sought employment in dietetics were employed within six months of completion	Six-month exit survey; 5-year Lehman DI Alumni Survey	Review survey data at 6-months post-graduation and 5-year interviews	DI Director	Identify barriers to employment; inform graduated interns about website job listings	Ongoing annually and every 5 years.	<p>Annually: 2014: 11/13 = 84.6% 2015: 11/14 = 78.6%</p> <p>5-year survey: 73.2%</p> <p>Met: Annually: 22/27 = 91.7%</p> <p>5-year survey (2010-2015) Full time 19/29 =65.5% Part-time 11/12 =91.7 Employment: 30/41 = 73.1%</p>
Over a 5-year period 80% of DI graduate will pass the Registration Examination on the first attempt	Data from CDR biannual reports	Review 12-month pass rate data from CDR	DI Director with Chair of Department and Advisory Board	Identify interns at risk who fail to pass the DI Exit Exams; DI Director meets with interns to identify areas of weaknesses and to recommend further learning and test-taking strategies	Annually and every 5 years	<p>2012: 5/8 = 62.5% 2013: 5/6 = 83.3% 2014: 21/25 = 84% 2015: 9/11 = 81.82% 2016: 16/17 = 94.1%</p> <p>Met: 56/ 67 = 83.5% over past five years</p>
Over a 5-yr period, 75% of employers will rate DI graduates as performing well	5-year Employer Satisfaction Survey	Review employer survey results	DI Director	Elicit suggestions from preceptors, and advisory board for ways to improve job performance	Ongoing and every 5 years	<p>5-year Survey: 19/19 = 100%</p> <p>Met: 19/19 = 100%</p>
Over a 5-year period, 75% of employers will rate DI graduates being ethically and culturally sensitive	5-year Employer Satisfaction Survey	Review employer survey results	DI Director	Elicit suggestions from professors, preceptors, and advisory board for ways to improve cultural sensitivity	Ongoing and every 5 years	<p>5-year Survey: 19/19 = 100%</p> <p>Met: 19/19 = 100%</p>

Program Goal, Objectives and Assessment (Standards 5, 6, 7 and 8)

Goal #2 - To encourage interns to continue their professional growth by completing a graduate program in nutrition and foods or another health-related field.

A) Objectives (Guideline 7.1a)	B) Data Assessed and the Data Source (Guideline 7.1b & c)	C) Data Assessment Method(s) (Guideline 7.1d)	D) Assessed by: (Guideline 7.1e)	E) Actions to Assure that the Outcome Is or Will Be Met (Guideline 8.2)	F) Timeframe (finished?) (Guideline 7.1f)	G) Actual Outcome (Guideline 7.2 b)
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<p>Example: 80% of enrolled graduates will be employed in the dietetic field within 12 months of program completion</p>	<p>Data from graduate surveys</p>	<p>Review data annually.</p>	<p>Program Director</p>	<ul style="list-style-type: none"> • Send survey reminders and follow up to increase number of graduate responses • Create incentive opportunities for graduates to stay connected via Facebook and LinkedIn. • Link students with University's career center. 	<p>Yearly, June '10 – May '14 (on-going)</p>	<p>2010: 16/20 = 80% 2011: 17/20 = 85% 2012: 16/20 = 80% 2013: 18/20 = 90% 2014: 17/20 = 85% Met: 84/ 100 = 84% over past five years</p>
<p>Over a 5-year period, 70% of enrolled interns will succeed in a graduate program</p>	<p>Data from transcripts, Lehman graduate advisor, and 5-year Lehman DI Alumni Survey</p>	<p>Review of data and 5-year Lehman Alumni Survey</p>	<p>Di Director</p>	<p>Encourage and recommend interns to complete graduate school</p>	<p>Ongoing and every 5 years</p>	<p>Annually: 2014: 13/13 = 100% 2015 = 13/14 = 92.8%</p> <p>DI Exit Survey (5-year summary) 68/73 = 93.2%</p> <p>5-year Survey: 34/41 = 82.9%</p> <p>Met: Annually: 26/27 = 96.3%</p> <p>5-year: 34/41 = 82.9%</p>

**Lehman College Dietetic Internship
Dietetic Internship Using the IP Standards
Program Assessment Summary Matrices (Standard 7)
Assessment Period from 2016 to 2020**

Mission of the Dietetics Program (Standard 4)

The mission of the DI at Lehman College is to provide interns with a comprehensive learning experience through which they can acquire competencies, knowledge, skills, and hands-on training required of entry-level nutrition care professionals, with an emphasis on Medical Nutrition Therapy. Lehman’s DI has been designed to allow interns who are employed to complete the program on a part-time basis. The program is designed to prepare interns to pass the registration examination and work as Registered Dietitians in a variety of health care, community, public health, and food service settings. Located in the Bronx, Lehman College is uniquely placed to assist in educating interns to develop approaches to support the community to move toward dietary change to optimize health and prevent and treat disease. In addition, the program strives to instill in our interns, the desire for lifelong learning and advanced education in nutrition and related health fields.

Program Goal, Objectives and Assessment (Standards 5, 6, 7 and 8)

Goal #1 – To prepare interns to be competent, ethical, and culturally-sensitive entry-level dietitians.

A) Objectives (Guideline 7.1a)	B) Data Assessed and the Data Source (Guideline 7.1b & c)	C) Data Assessment Method(s) (Guideline 7.1d)	D) Assessed by: (Guideline 7.1e)	E) Actions to Assure that the Outcome Is or Will Be Met (Guideline 8.2)	F) Timeframe (Finished?) (Guideline 7.1f)	G) Actual Outcome (Guideline 7.2 b)
Example: 90% of enrolled students will complete program requirements within 15 months of program completion. (150% of a 10-month program length).	Graduation records from the Office of Student Records	Review graduation records annually.	Program Directors & Committee on Student Retention	<ul style="list-style-type: none"> Identify students at risk Advisor meets with students to make sure they are on track. Etc.... 	Annually each June (on-going)	Example: 2010: 16/20 = 80% 2011: 17/20 = 85% 2012: 16/20 = 80% 2013: 18/20 = 90% 2014: 17/20 = 85% Met: 84/ 100 = 84% over past five years
Over a 5-year period, 80% or more of enrolled interns will complete the DI within 18 months	Graduation records from exit interview files	Review graduation records annually	DI Director	Identify interns at risk. DI Director meets with interns to make sure they are on track	Ongoing annually each February	
Over a 5-year period, 70% of graduates who sought employment in dietetics were employed within six months of completion	Six-month exit survey; 5-year Lehman DI Alumni survey	Review survey data at 6-months post-graduation and 5-year interviews	DI Director	Identify barriers to employment; inform graduated interns about website job listings	Ongoing annually and every 5 years.	
Over a 5-year period 80% of DI graduate will pass the Registration Examination on the first attempt	Data from CDR biannual reports	Review 12-month pass rate data from CDR	DI Director with Chair of Department and Advisory Board	Identify interns at risk who fail to pass the DI Exit Exams; DI Director meets with interns to identify areas of weaknesses and to recommend further learning and test-taking strategies	Annually and every 5 years	

Over a 5-yr period, 75% of employers will rate DI graduates as performing well	5-year Employer Survey	Review employer survey results	DI Director	Elicit suggestions from preceptors, and advisory board for ways to improve job performance	Ongoing and every 5 years	
Over a 5-yr period, 75% of employers will rate DI graduates being ethically and culturally sensitive	5-year Employer Survey	Review employer survey results	DI Director	Elicit suggestions from professors, preceptors, and advisory board for ways to improve cultural sensitivity	Ongoing and every 5 years	

Program Goal, Objectives and Assessment (Standards 5, 6, 7 and 8)

Goal #2 - To encourage interns to continue their professional growth by completing a graduate program in nutrition and foods or another health-related field.

A) Objectives (Guideline 7.1a)	B) Data Assessed and the Data Source (Guideline 7.1b & c)	C) Data Assessment Method(s) (Guideline 7.1d)	D) Assessed by: (Guideline 7.1e)	E) Actions to Assure that the Outcome Is or Will Be Met (Guideline 8.2)	F) Timeframe (finished?) (Guideline 7.1f)	G) Actual Outcome (Guideline 7.2 b)
Example: 80% of enrolled graduates will be employed in the dietetic field within 12 months of program completion	Data from graduate surveys	Review data annually.	Program Director	<ul style="list-style-type: none"> Send survey reminders and follow up to increase number of graduate responses Create incentive opportunities for graduates to stay connected via Facebook and LinkedIn. Link students with University's career center. 	Yearly, June '10 – May '14 (on-going)	2010: 16/20 = 80% 2011: 17/20 = 85% 2012: 16/20 = 80% 2013: 18/20 = 90% 2014: 17/20 = 85% Met: 84/ 100 = 84% over past five years
Over a 5-year period, 70% of enrolled interns will succeed in a graduate program	Data from transcripts, Lehman graduate advisor, and 5-year Lehman DI Alumni Survey	Review data from surveys	Di Director	Encourage and recommend interns to complete graduate school	Ongoing and every 5 years	

APPENDIX H

Standard 7:

Samples of Surveys sent to stakeholders for data collection

Lehman Dietetic Internship Alumni Survey

Please complete the following survey by Monday, October 31, 2016. The survey will take approximately 5 minutes. Your responses are very important for our program and our continuing efforts to make improvements.

Thank you, Marina Stopler, MS, RD, IBCLC, DI Director, Department of Health Sciences, Lehman College CUNY, 250 Bedford Park Blvd. West, Bronx, NY 10468.

* Required

1. What year did you start the Lehman DI Program? *

Mark only one oval.

- 2010
- 2011
- 2012
- 2013
- 2014
- 2015

2. How long did it take you to complete the Lehman DI Program? *

Mark only one oval.

- 12 months
- 12-18 months
- 18-24 months
- Did not complete the DI Program *Skip to question 25.*

Skip to question 25.

The Lehman DI Program

3. You were able to maintain part-time work (15 hours per week) while completing Lehman's DI Program. Leave blank if not applicable.

Mark only one oval.

	1	2	3	4	5	
strongly disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	strongly agree

4. Did you take the RD exam? *

Mark only one oval.

- Yes
- No

5. How soon after completing the Lehman DI program did you take the RD exam? **Mark only one oval.*

- 0-3 months
- 3-6 months
- 6-12 months
- after 12 months
- N/A

6. Did you pass the RD exam? **Mark only one oval.*

- Yes
- No
- N/A

7. Did you pass the RD exam on the first try? **Mark only one oval.*

- Yes
- No
- N/A

8. You were prepared for the RD exam by the co-requisite coursework (DFN 641, DFN 651, DFN 661, HEA 620) in Lehman's DI Program. Leave blank if not applicable.*Mark only one oval.*

	1	2	3	4	5	
strongly disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	strongly agree

9. You were prepared for the RD exam by the supervised practice (DFN 730) in Lehman's DI Program. Leave blank if not applicable.*Mark only one oval.*

	1	2	3	4	5	
strongly disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	strongly agree

10. You were prepared for the RD exam by the seminars (DFN 731 - Concepts and Methods in Dietetic Practice) in Lehman's DI Program. Leave blank if not applicable.*Mark only one oval.*

	1	2	3	4	5	
strongly disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	strongly agree

11. Are you currently a Certified/Dietitian Nutritionist (CDN) with the NYS Department of Education? *

Mark only one oval.

- Yes
- No

12. How long did it take to find full-time employment after completing the Lehman DI Program? *

Mark only one oval.

- 0-3 months
- 3-6 months
- 6-12 months
- over one year
- N/A

13. How long did it take to find part-time employment after completing the Lehman DI Program?

Mark only one oval.

- 0-3 months
- 3-6 months
- 6-12 months
- over one year
- N/A

14. What was your FIRST place of employment after completing the Lehman DI program? Please include city and state.

15. What is your current employment status? *

Mark only one oval.

- I am currently employed full-time in the field of dietetics.
- I am currently employed part-time in the field of dietetics.
- I am currently not employed in the field of dietetics.

16. You received encouragement, motivation, and support from the program's faculty while enrolled in Lehman's DI Program. *

Mark only one oval.

	1	2	3	4	5	
strongly disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	strongly agree

17. You received encouragement, motivation, and support from the program's preceptors while enrolled in Lehman's DI Program. *

Mark only one oval.

	1	2	3	4	5	
strongly disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	strongly agree

18. You were prepared and encouraged to complete a graduate degree in nutrition or related field while enrolled in Lehman's DI Program. *

Mark only one oval.

	1	2	3	4	5	
strongly disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	strongly agree

19. Lehman's program prepared you to become a competent entry-level dietitian. *

Mark only one oval.

	1	2	3	4	5	
strongly disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	strongly agree

20. Lehman's DI Program prepared you to integrate knowledge and critical thinking skills with practical experience. *

Mark only one oval.

	1	2	3	4	5	
strongly disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	strongly agree

21. Lehman's DI Program prepared and encouraged you to meet your professional goals. *

Mark only one oval.

	1	2	3	4	5	
strongly disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	strongly agree

22. Lehman's DI Program prepared you and encouraged you to advance in the field. *

Mark only one oval.

	1	2	3	4	5	
strongly disagree	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	strongly agree

23. Would you be willing to have your employer fill out a survey about your performance? *

Mark only one oval.

- Yes
- No
- N/A

24. If yes, please indicate the place of employment, your supervisor's name, email and telephone number. *

Final question and comments

25. What is your graduate degree status? *

Mark only one oval.

- I have earned a graduate degree in nutrition or other health-related field
- I am currently pursuing a graduate degree in nutrition or other health-related field
- I have earned a graduate degree in a field NOT related to nutrition or other health-related field
- I have not earned a graduate degree

26. Any comments, questions, suggestions, or criticisms would be greatly appreciated. Thank you for taking this survey.

27. Name (optional, but greatly appreciated)

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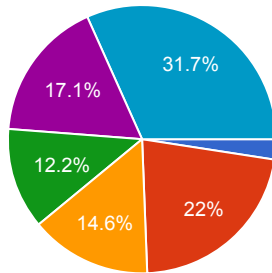


41 responses

[Publish analytics](#)

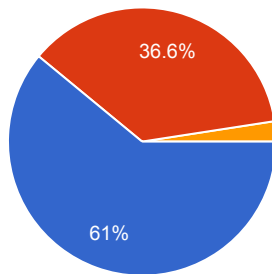
Summary

What year did you start the Lehman DI Program?



2010	1	2.4%
2011	9	22%
2012	6	14.6%
2013	5	12.2%
2014	7	17.1%
2015	13	31.7%

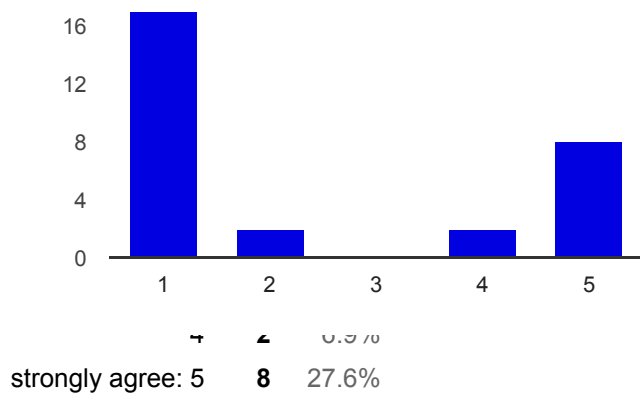
How long did it take you to complete the Lehman DI Program?



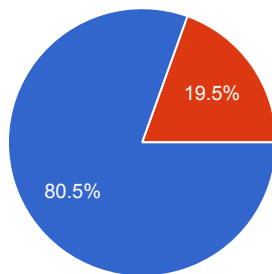
12 months	25	61%
12-18 months	15	36.6%
18-24 months	1	2.4%
Did not complete the DI Program	0	0%

The Lehman DI Program

You were able to maintain part-time work (15 hours per week) while completing Lehman's DI Program. Leave blank if not applicable.

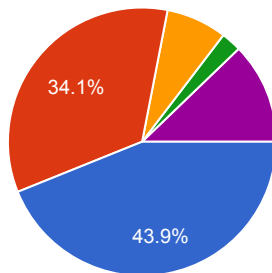


Did you take the RD exam?



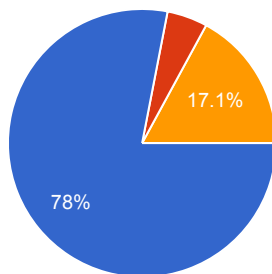
Yes	33	80.5%
No	8	19.5%

How soon after completing the Lehman DI program did you take the RD exam?



0-3 months	18	43.9%
3-6 months	14	34.1%
6-12 months	3	7.3%
after 12 months	1	2.4%
N/A	5	12.2%

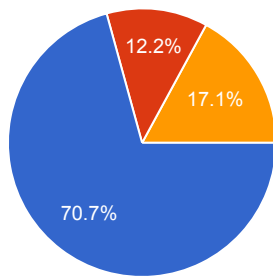
Did you pass the RD exam?



Yes	32	78%
No	2	4.9%
N/A	7	17.1%

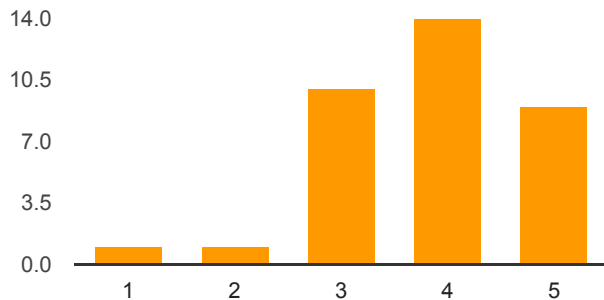
Did you pass the RD exam on the first try?

Yes	29	70.7%
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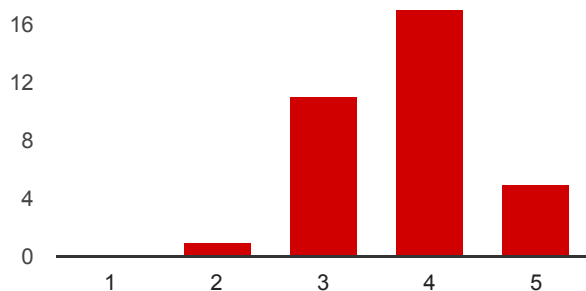
No 5 12.2%
 N/A 7 17.1%

You were prepared for the RD exam by the co-requisite coursework (DFN 641, DFN 651, DFN 661, HEA 620) in Lehman's DI Program. Leave blank if not applicable.



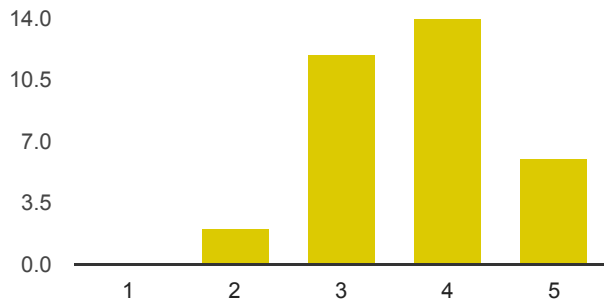
strongly disagree: 1 1 2.9%
 2 1 2.9%
 3 10 28.6%
 4 14 40%
 strongly agree: 5 9 25.7%

You were prepared for the RD exam by the supervised practice (DFN 730) in Lehman's DI Program. Leave blank if not applicable.



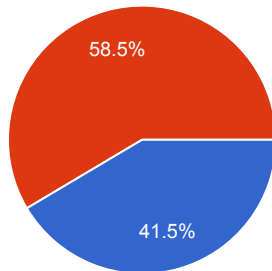
strongly disagree: 1 0 0%
 2 1 2.9%
 3 11 32.4%
 4 17 50%
 strongly agree: 5 5 14.7%

You were prepared for the RD exam by the seminars (DFN 731 - Concepts and Methods in Dietetic Practice) in Lehman's DI Program. Leave blank if not applicable.



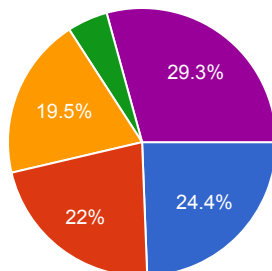
strongly disagree: 1	0	0%
2	2	5.9%
3	12	35.3%
4	14	41.2%
strongly agree: 5	6	17.6%

Are you currently a Certified/Dietitian Nutritionist (CDN) with the NYS Department of Education?



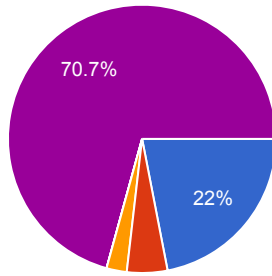
Yes	17	41.5%
No	24	58.5%

How long did it take to find full-time employment after completing the Lehman DI Program?



0-3 months	10	24.4%
3-6 months	9	22%
6-12 months	8	19.5%
over one year	2	4.9%
N/A	12	29.3%

How long did it take to find part-time employment after completing the Lehman DI Program?

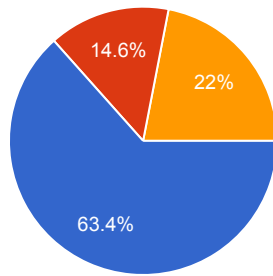


0-3 months	9	22%
3-6 months	2	4.9%
6-12 months	1	2.4%
over one year	0	0%
N/A	29	70.7%

What was your FIRST place of employment after completing the Lehman DI program? Please include city and state.

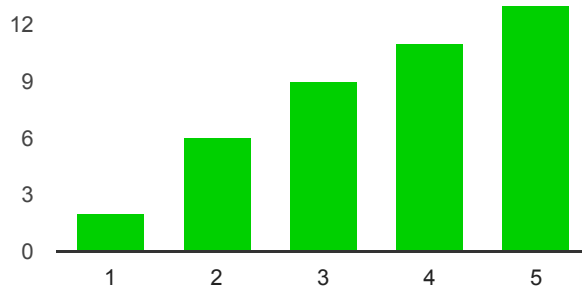
- Washington, DC
- Hudson Valley Hospital Center; Cortlandt Manor, NY
- CAMBA Brooklyn, NY
- The New Jewish Home, NY,NY
- Yonkers, NY
- Bronx, ny
- Veterans Home of California West Los Angeles, Los Angeles, CA
- Hong Kong, China
- Lehman College-CUNY
- Far rockaway ny
- Terence Cardinal nursing home new York new York
- NYS Vetens Home @ St. Albans Queens ,NY
- Rhode Island Hospital Providence,RI
- The Jewish Home, Mamaroneck, NY
- Margaret Tietz Nursing and Rehab Center
- Saint Joseph's Medical Center, Yonkers NU
- Far Rockaway Nursing Home, Far Rockaway, NY
- Far Rockaway, NY: Brookhaven rehabilitation health care center
- New York City, NY
- Nonprofit bronx ny
- Jacobi medical center. Bronx, NY
- Holliswood HCC
- Nursing home. Bronx, NY
- Kings harbor multicare center.Bronx, NY
- Urban Health Plan, Inc., Bronx, NY
- Bronx Lebanon Special Care Center, Bronx, NY
- Freehold, NJ
- Self-employed

What is your current employment status?



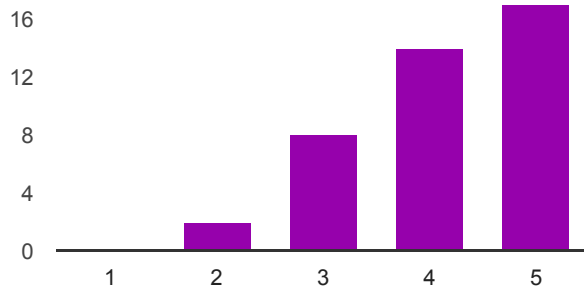
I am currently employed full-time in the field of dietetics.	26	63.4%
I am currently employed part-time in the field of dietetics.	6	14.6%
I am currently not employed in the field of dietetics.	9	22%

You received encouragement, motivation, and support from the program's faculty while enrolled in Lehman's DI Program.

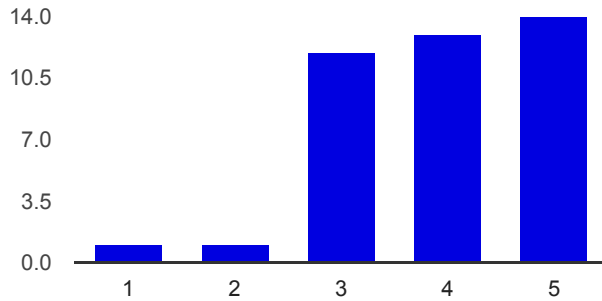


strongly disagree: 1	2	4.9%
2	6	14.6%
3	9	22%
4	11	26.8%
strongly agree: 5	13	31.7%

You received encouragement, motivation, and support from the program's preceptors while enrolled in Lehman's DI Program.

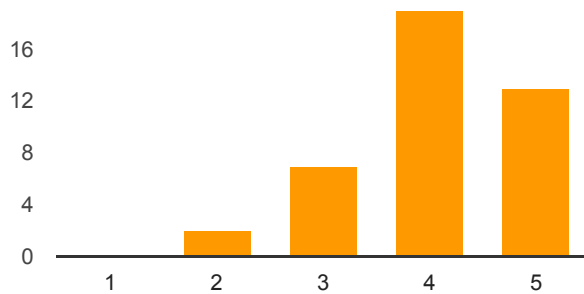


You were prepared and encouraged to complete a graduate degree in nutrition or related field while enrolled in Lehman's DI Program.



strongly disagree: 1	1	2.4%
	2	2.4%
	12	29.3%
	13	31.7%
strongly agree: 5	14	34.1%

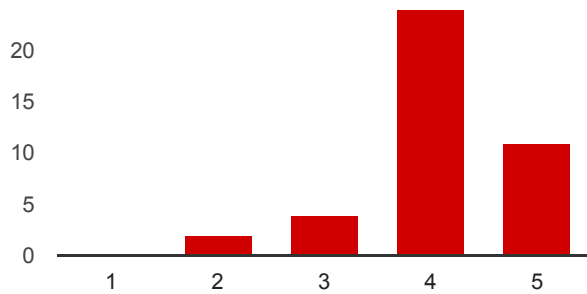
Lehman's program prepared you to become a competent entry-level dietitian.



strongly disagree: 1	0	0%
	2	4.9%
	7	17.1%
	19	46.3%

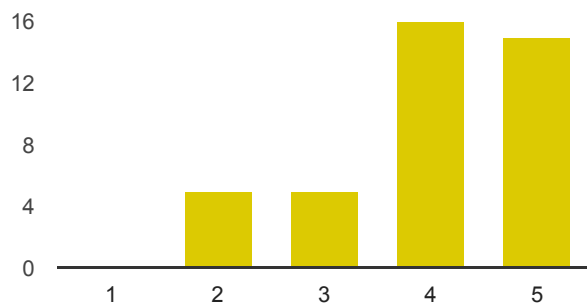
strongly agree: 5 **13** 31.7%

Lehman's DI Program prepared you to integrate knowledge and critical thinking skills with practical experience.



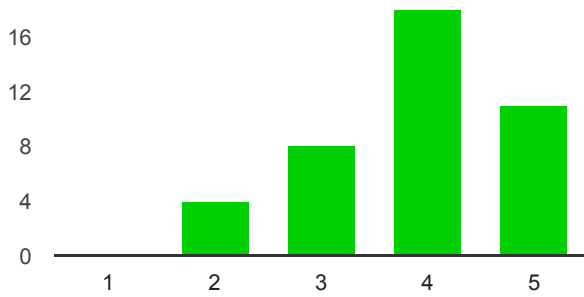
strongly disagree: 1 **0** 0%
 2 **2** 4.9%
 3 **4** 9.8%
 4 **24** 58.5%
 strongly agree: 5 **11** 26.8%

Lehman's DI Program prepared and encouraged you to meet your professional goals.



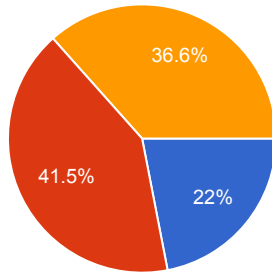
strongly disagree: 1 **0** 0%
 2 **5** 12.2%
 3 **5** 12.2%
 4 **16** 39%
 strongly agree: 5 **15** 36.6%

Lehman's DI Program prepared you and encouraged you to advance in the field.



strongly disagree: 1	0	0%
2	4	9.8%
3	8	19.5%
4	18	43.9%
strongly agree: 5	11	26.8%

Would you be willing to have your employer fill out a survey about your performance?



Yes	9	22%
No	17	41.5%
N/A	15	36.6%

If yes, please indicate the place of employment, your supervisor's name, email and telephone number.

N/A

Na

N/a

n/a

NA

None

.

No

Lehman College-CUNY Professor Gul Tiryaki Sonmez (GUL.SONMEZ@Lehman.cuny.edu

Gyorgyi Datz gdatz@archcare.org

NYS Veteran's Home at St. Albans, Kimberley Miller: 718-990-0481

New York Methodist Hospital ,karen - 718-780-3344

Blossom Hardy, bhardy@jewishhome.org (914) 698-6005

Margaret Tietz, 929-243-2010, Miriam Frucht, MFrucht@centerlight.org

Danielle Sevrain 347-837-0912

Aramark Healthcare at Richmond University Medical Center

No

No answer

NO

Not applicable

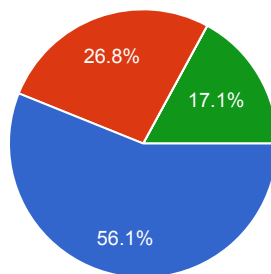
Pinnacle Dietary, Kelly Murray, kellym@pinnacledietary.com

Self-employed

Unity Health Care, Ms. Rufai, BRufai@UnityHealthCare.org, 202-549-2064

Final question and comments

What is your graduate degree status?



I have earned a graduate degree in nutrition or other health-related field	23	56.1%
I am currently pursuing a graduate degree in nutrition or other health-related field	11	26.8%
I have earned a graduate degree in a field NOT related to nutrition or other health-related field	0	0%
I have not earned a graduate degree	7	17.1%

Any comments, questions, suggestions, or criticisms would be greatly appreciated. Thank you for taking this survey.

N/A

Now that I'm studying for the RD exam, I feel like I did not learn enough through the program. I wish we had been gradually studying during 731 the whole time. There were also multiple situations where the staff at Lehman could have made my life easier or harder, and they made it harder.

I think that the director needs to visit the sites before sending students there. I also think there should be a little bit more guidelines as how to use the place of rotation as a practical guide for the future. Marina was so sweet and helpful throughout the process and I have highly recommended Lehman to other students.

Lehman DI program was tough and intense but it prepared us well to enter dietetics field. I feel like this program gave us stronger knowledge than any other DI programs in the area

Na

At the time, the director of the program did not provide support that I believe our graduating class needed. I hope moving forward that this will change for the sake of the students. Other than that, I thought the program was fairly flexible and provided a diverse experience for me.

The program is very clinical. I wish we were better prepared to work with the community or into private practice. The program was very dense in Medical Nutrition Therapy and lacked in Behavior Change principles and techniques.

Please provide the interns with support and dont expect them to know everything. Teach and show them but dont assume they should know. I learned the most at my first job out of school.

Name (optional, but greatly appreciated)

N/A

Ching Man Chow

Monica Hindmarch

Anna-Carina Sporri

Julie Houtchens

yorksee

Eydie Kahan

Kristi Barth

Gila (Glenn) Glassberg

Alena Zhakava, MS, RD, CDN

Juhy Ali

Na

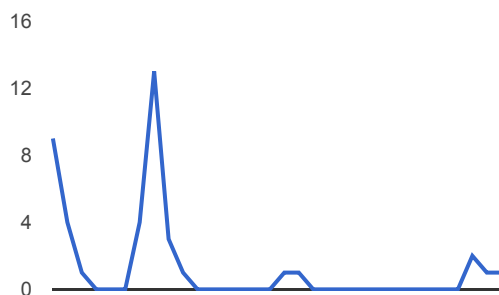
Sima hamraz

Kellie McLean

Anamaria Pontes

Stephanie Dunne

Number of daily responses



Dietetic Internship Employer Survey

This survey is being used to collect information from employers who hired graduates of the Lehman College Dietetic Internship Program between 2012 and 2016. This form is to assess employer satisfaction and improve the Lehman DI Program. Responses will be kept confidential. Your participation is important and appreciated. Thank you.

If you have any questions, please email the DI Director, Marina Stopler, MS, RD, IBCLC at marina.stopler@lehman.cuny.edu. Lehman College, CUNY is located at 250 Bedford Park Blvd. West, Bronx, NY 10468.

1. Please review the following list of interns who completed the Lehman College Dietetic Internship Program in the last 5 years. Optional: check which interns you have employed in your organization either full-time, part-time, or per diem.

Check all that apply.

- Rosanna Abraham
- Sarah Afzaal
- Shavon Alexander
- Juhy Z. Ali
- Jessica N. Alvarez
- Kent Anderson
- Kristi N. Barth
- Corinne Belloise
- Gitty Blackman
- Stephanie Boswell
- York see Chan
- Kayi H. Cheung
- Karalynn Chiazzese
- Yuen Ting (Karen) Cheung
- Ching Man (Macey) Chow
- Jennifer H. Chung
- Michele Cohnen
- Dina R. D'Alessandro
- Elizabeth Dalton
- Jillian Davis
- Jian Wen Deng
- Stephanie E. Dunne
- Elshardi Edwin
- Nicole Fioretti
- Erika J. Froshauier
- Marsha Sommerville
- William Gamonski
- Tiffany Geoffrey
- Hillary Getty
- Glenne (Gila) Glassberg
- Emily R. Grochowski
- Jessica Haas
- Sima Hamraz
- Susan Heim
- Monica Hindmarch
- Julie Houchens
- Nadia Hussain

- Ilana Wimmer Jacob
- Lauren Jannarone
- Eydie Kahan
- Oxana Kraynyak
- Elena Kochin
- Aviva Levitin
- Kelsey A. Lubeck
- Amy Lukin
- Jordan Lynch
- Kellie McLean
- Yanissa E. Marte
- Lizette Martinez
- Leddy Mezarina
- Sheri R. Morstein
- Ji Yoon (Jackie) Park
- Samantha Podob
- Susan Polgreen
- Sharon R. Puello
- Christine Quinn
- Jennifer Sall
- Jessica Shellenberger
- Genevieve Sanders
- Anna-Carina Sporri
- Emilie Stutz
- Victoria Vasos
- Christine Vega
- Chik Sum (Samantha) Wu
- Alena Zhakova

2. **Based on your review of question 1, how many of the above named Lehman DI graduates have you employed in the last five years (full-time, part-time, or per diem)?**

Mark only one oval.

- 1
- 2
- 3 or more
- None. Please click SUBMIT at the end of the survey to indicate that the survey is complete.

3. Overall, how would you rate the Lehman DI graduates' on-the-job performance?*Mark only one oval.*

- Excellent
- Very good
- Good
- Fair
- Poor

4. Overall, how do you rate the Lehman DI graduates' ethical and cultural sensitivity*Mark only one oval.*

- Excellent
- Very good
- Good
- Fair
- Poor

5. Overall, how satisfied are you with the Lehman DI graduates' on-the-job performance?*Mark only one oval.*

- Very Satisfied
- Satisfied
- Netural
- Dissatisfied
- Very Dissatisfied

6. Are there areas in which Lehman DI graduates seem to be particularly well-prepared? Check all that apply.*Check all that apply.*

- Awareness of the Community's Needs
- Knowledge of Food Preparation/Food Service/Food Science
- Medical Nutrition Therapy
- Nutrition Education and Counseling
- Research
- Other

7. Which of the following best describes the facility you work in?

Mark only one oval.

- Hospital
- Government Agency
- Group Home
- Community/Health Center or Outpatient Facility
- Long Term Care, Skilled Nursing Facility, or Rehabilitation Center
- Private Practice
- School Food
- WIC program
- Other

8. What best describes your job title?

Mark only one oval.

- Administrative Dietitian
- Chief Dietitian or Clinical Manager
- Director or Manager of Nutrition Services
- Entrepreneur/Self-Employed
- Food Service Director
- Food Service Dietitian
- Nutritionist
- Nutrition Educator
- Outpatient Dietitian
- Senior Nutritionist
- WIC Director or Coordinator
- Other

9. Any comments about the Lehman DI graduates or the Lehman DI Program would be greatly appreciated. Thank you for completing this survey!

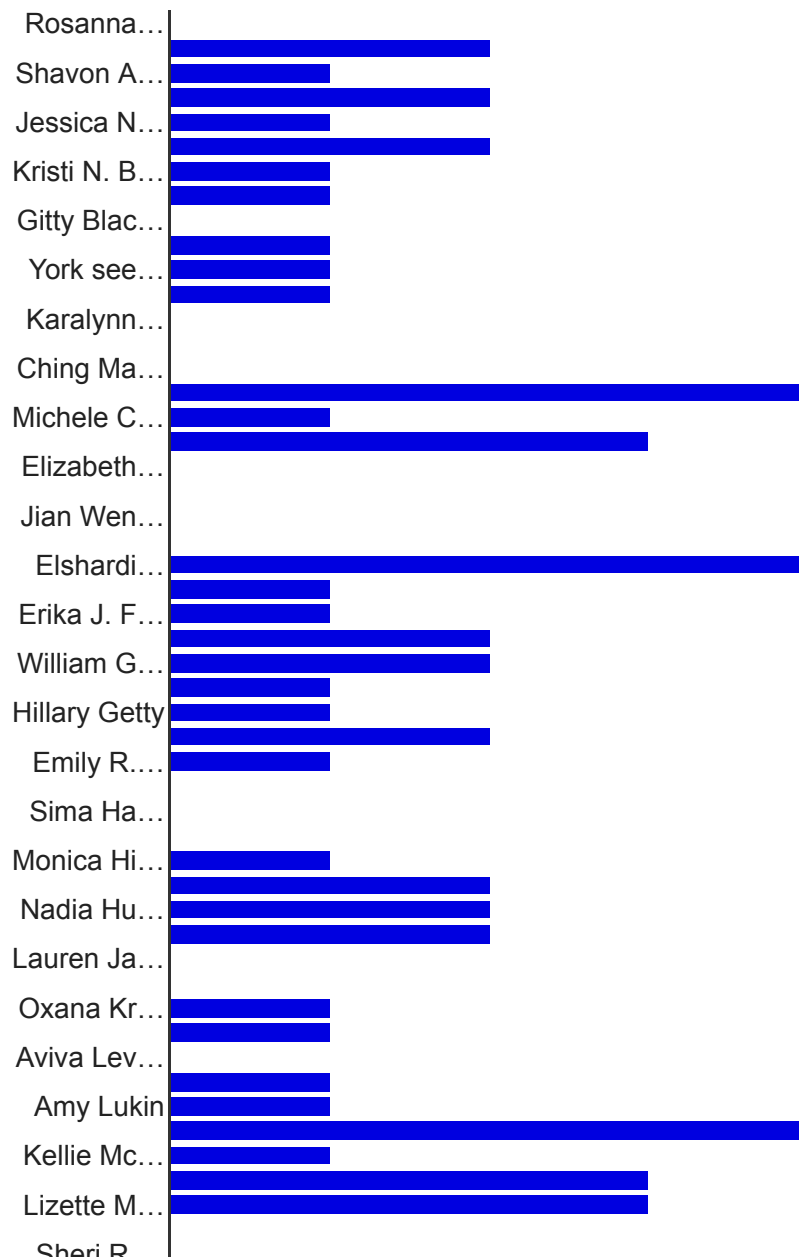
10. (Optional) Name and contact information.

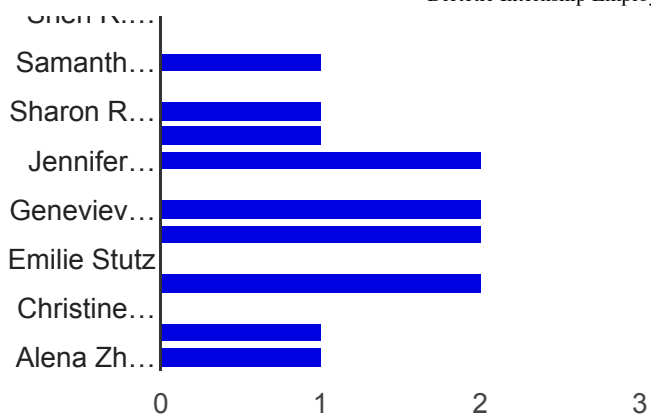
21 responses

[Publish analytics](#)

Summary

Please review the following list of interns who completed the Lehman College Dietetic Internship Program in the last 5 years. Optional: check which interns you have employed in your organization either full-time, part-time, or per diem.

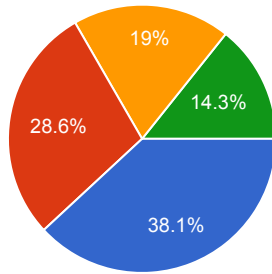




Rosanna Abraham	0	0%
Sarah Afzaal	2	10.5%
Shavon Alexander	1	5.3%
Juhy Z. Ali	2	10.5%
Jessica N. Alvarez	1	5.3%
Kent Anderson	2	10.5%
Kristi N. Barth	1	5.3%
Corinne Belloise	1	5.3%
Gitty Blackman	0	0%
Stephanie Boswell	1	5.3%
York see Chan	1	5.3%
Kayi H. Cheung	1	5.3%
Karalynn Chiazese	0	0%
Yuen Ting (Karen) Cheung	0	0%
Ching Man (Macey) Chow	0	0%
Jennifer H. Chung	4	21.1%
Michele Cohnen	1	5.3%
Dina R. D'Alessandro	3	15.8%
Elizabeth Dalton	0	0%
Jillian Davis	0	0%
Jian Wen Deng	0	0%
Stephanie E. Dunne	0	0%
Elshardi Edwin	4	21.1%
Nicole Fioretti	1	5.3%
Erika J. Froshauier	1	5.3%
Marsha Sommerville	2	10.5%
William Gamonski	2	10.5%
Tiffany Geoffrey	1	5.3%
Hillary Getty	1	5.3%
Glenne (Gila) Glassberg	2	10.5%

Emily R. Grochowski	1	5.3%
Jessica Haas	0	0%
Sima Hamraz	0	0%
Susan Heim	0	0%
Monica Hindmarch	1	5.3%
Julie Houchens	2	10.5%
Nadia Hussain	2	10.5%
Ilana Wimmer Jacob	2	10.5%
Lauren Jannarone	0	0%
Eydie Kahan	0	0%
Oxana Kraynyak	1	5.3%
Elena Kochin	1	5.3%
Aviva Levitin	0	0%
Kelsey A. Lubeck	1	5.3%
Amy Lukin	1	5.3%
Jordan Lynch	4	21.1%
Kellie McLean	1	5.3%
Yanissa E. Marte	3	15.8%
Lizette Martinez	3	15.8%
Leddy Mezarina	0	0%
Sheri R. Morstein	0	0%
Ji Yoon (Jackie) Park	0	0%
Samantha Podob	1	5.3%
Susan Polgreen	0	0%
Sharon R. Puello	1	5.3%
Christine Quinn	1	5.3%
Jennifer Sall	2	10.5%
Jessica Shellenberger	0	0%
Genevieve Sanders	2	10.5%
Anna-Carina Sporri	2	10.5%
Emilie Stutz	0	0%
Victoria Vasos	2	10.5%
Christine Vega	0	0%
Chik Sum (Samantha) Wu	1	5.3%
Alena Zhakova	1	5.3%

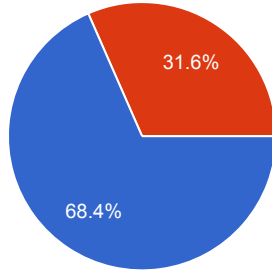
Based on your review of question 1, how many of the above named Lehman DI graduates have you employed in the last five years (full-time, part-time, or per diem)?



1	8	38.1%
2	6	28.6%
3 or more	4	19%
3	14.3%	

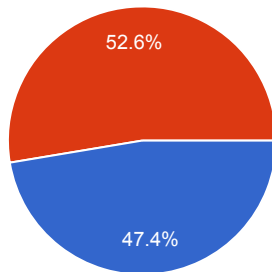
NOTE: PLEASE CLICK SUBMIT at the end of the survey to indicate that the survey is complete.

Overall, how would you rate the Lehman DI graduates' on-the-job performance?



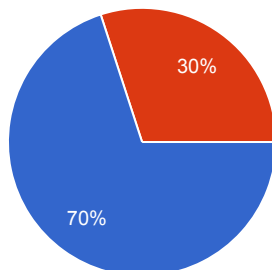
Excellent	13	68.4%
Very good	6	31.6%
Good	0	0%
Fair	0	0%
Poor	0	0%

Overall, how do you rate the Lehman DI graduates' ethical and cultural sensitivity



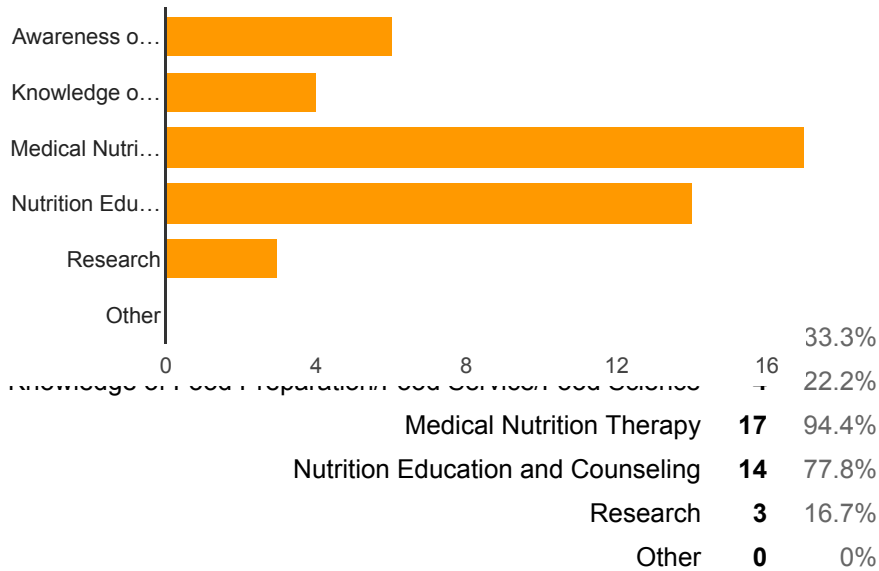
Excellent	9	47.4%
Very good	10	52.6%
Good	0	0%
Fair	0	0%
Poor	0	0%

Overall, how satisfied are you with the Lehman DI graduates' on-the-job performance?

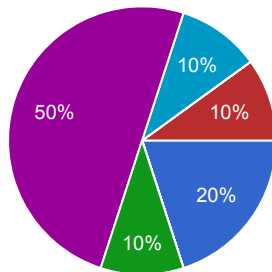


Very Satisfied	14	70%
Satisfied	6	30%
Netural	0	0%
Disatisfied	0	0%
Very Disatisfied	0	0%

Are there areas in which Lehman DI graduates seem to be particularly well-prepared? Check all that apply.

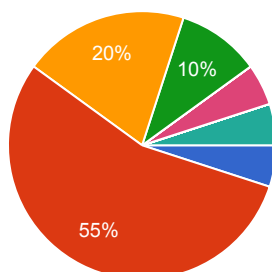


Which of the following best describes the facility you work in?



Hospital	4	20%
Government Agency	0	0%
Group Home	0	0%
Community/Health Center or Outpatient Facility	2	10%
Long Term Care, Skilled Nursing Facility, or Rehabilitation Center	10	50%
Private Practice	2	10%
School Food	0	0%
WIC program	0	0%
Other	2	10%

What best describes your job title?



Administrative Dietitian	1	5%
Chief Dietitian or Clinical Manager	11	55%
Director or Manager of Nutrition Services	4	20%
Entrepreneur/Self-Employed	2	10%
Food Service Director	0	0%
Food Service Dietitian	0	0%
Nutritionist	1	5%
Nutrition Educator	0	0%
Outpatient Dietitian	0	0%
Senior Nutritionist	0	0%
WIC Director or Coordinator	0	0%
Other	1	5%

Any comments about the Lehman DI graduates or the Lehman DI Program would be greatly appreciated. Thank you for completing this survey!

there was only one intern that was a problem otherwise they are all wonderful

Our intern came from your program very self assured and confident. Misses some details as can be expected from entry level but otherwise we are enjoying her very much.

Students in the Lehman DI program are dedicated and do excellent work. They are eager to learn and quickly learn the new concepts.

(Optional) Name and contact information.

Regina G. Trujillo, RD , Schervier Nursing Care Center

Vibhuti Singh RDN

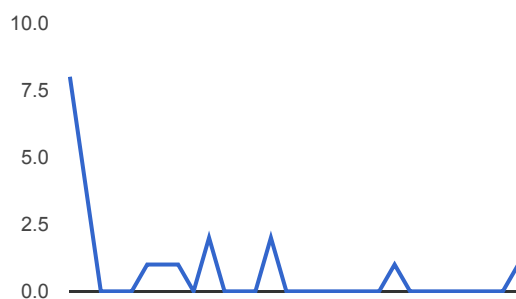
Niharika Jaiswal MS, RD CDN, Chief Clinical Dietitian Cabrini of Westchester

Stephanie Dunne (note the E at the end of my last name), stephanie@nutritionqed.com

Noreen Ferguson

A Boyar

Number of daily responses



Appendix I

Standard 10: Curriculum Mapping Matrix including Concentration Competencies

Curriculum Map (Standard 10)

Didactic & Supervised-practice Courses Aligned with Core Knowledge & Competencies for the RD

Background: The Curriculum Map is used to identify the courses or rotations in which students are being taught specific knowledge requirements and competencies.

Directions: List courses in chronological order organized by term, including course number, course title, and credit hours. Next, using course syllabi, textbooks, and assignments, identify which knowledge requirements and competencies occur in a course or rotation and place an 'X' in the appropriate column.

Courses & Rotations	CRD 1.1	CRD 1.2	CRD 1.3	CRD 1.4	CRD 1.5			CRD 2.1	CRD 2.2	CRD 2.3	CRD 2.4	CRD 2.5	CRD 2.6	CRD 2.7	CRD 2.8	CRD 2.9	CRD 2.10	CRD 2.11	CRD 2.12	CRD 2.13		
Fall																						
DFN 731: Concepts and Methods in Dietetic Practice (45 hrs)	X	X	X	X			X	X														
DFN 651: Clinical Nutrition (45 hrs)		X		X	X			X	X		X											
HEA 620: Health Counseling (45 hrs)								X		X	X		X				X	X				
DFN 730: Supervised Practice (400 hrs)	X			X	X		X	X	X	X	X	X	X	X	X	X	X	X		X		
Spring																						
DFN 731: Concepts and Methods in Dietetic Practice (45 hrs)			X					X														
HEA 620: Health Counseling (45 hrs)								X		X	X						X	X				
DFN 641: Public Health and Community Nutrition (45 hrs)				X				X	X		X		X									
DFN 730: Supervised Practice (400 hrs)				X	X		X	X	X	X	X	X			X	X				X		
Summer																						
DFN 731: Concepts and Methods in Dietetic Practice (45 hrs)			X	X				X											X			
DFN 661: Food Service Management (45 hours)			X				X	X	X		X											
DFN 730: Supervised Practice (400 hrs)				X	X		X	X	X	X	X	X	X	X	X	X	X	X	X	X		

Courses & Rotations	CRD 3.1	CRD 3.1.a	CRD 3.1.b	CRD 3.1.c	CRD 3.1.d	CRD 3.1.e	CRD 3.2	CRD 3.3	CRD 3.4	CRD 3.5	CRD 3.6									
Fall																				
DFN 731: Concepts and Methods in Dietetic Practice (45 hrs)	X	X	X	X	X	X	X													
DFN 651: Clinical Nutrition (45 hrs)	X	X	X	X	X	X	X	X			X									
HEA 620: Health Counseling (45 hrs)						X	X													
DFN 730: Supervised Practice (400 hrs)	X	X	X	X	X	X	X	X	X	X	X									
Spring																				
DFN 731: Concepts and Methods in Dietetic Practice (45 hrs)	X	X	X	X	X	X														
HEA 620: Health Counseling (45 hrs)						X	X													
DFN 641: Public Health and Community Nutrition (45 hrs)								X												
DFN 730: Supervised Practice (400 hrs)	X	X					X	X	X	X	X									
Summer																				
DFN 731: Concepts and Methods in Dietetic Practice (45 hrs)																				
DFN 661: Food Service Management (45 hours)									X	X	X									
DFN 730: Supervised Practice (400 hrs)	X	X					X	X	X	X	X									

Courses & Rotations	CRD 4.1	CRD 4.2	CRD 4.3	CRD 4.4	CRD 4.5	CRD 4.6	CRD 4.7	CRD 4.8	CRD 4.9	CRD 4.10	CRD 4.11										
Fall																					
DFN 731: Concepts and Methods in Dietetic Practice (45 hrs)			X		X						X										
DFN 651: Clinical Nutrition (45 hrs)																					
HEA 620: Health Counseling (45 hrs)																					
DFN 730: Supervised Practice (400 hrs)	X	X	X	X	X	X	X	X	X	X											
Spring																					
DFN 731: Concepts and Methods in Dietetic Practice (45 hrs)			X		X																
HEA 620: Health Counseling (45 hrs)																					
DFN 641: Public Health and Community Nutrition (45 hrs)																					
DFN 730: Supervised Practice (400 hrs)	X	X	X	X	X	X	X	X	X	X											
Summer																					
DFN 731: Concepts and Methods in Dietetic Practice (45 hrs)			X		X		X														
DFN 661: Food Service Management (45 hours)					X	X			X												
DFN 730: Supervised Practice (400 hrs)	X	X	X	X	X	X	X	X	X	X											

Curriculum Map (Standard 10)
Didactic & Supervised-practice Courses Aligned with Concentration-area Competencies for the RD

Courses & Rotations	Competency 1.1.1	Competency 1.1.2	Competency 1.1.3	Competency 1.2.1	Competency 1.2.2	Competency 2.2.3	Competency 3.1.1	Competency 3.1.2	Competency 1.4.1	Competency 1.5.1	Competency 1.5.2	Competency 1.6.1	Competency 1.7.1						
Fall																			
DFN 731: Concepts and Methods in Dietetic Practice (45 hrs)	X	X	X																
DFN 651: Clinical Nutrition (45 hrs)	X			X	X	X													
HEA 620: Health Counseling (45 hrs)									X										
Spring																			
DFN 731: Concepts and Methods in Dietetic Practice (45 hrs)	X							X	X										
HEA 620: Health Counseling (45 hrs)									X										
Summer																			
DFN 731: Concepts and Methods in Dietetic Practice (45 hrs)	X																		
MNT Rotations:																			
Renal Disease	X								X										
Critical Care	X	X	X	X	X	X	X	X	X	X	X	X							
Staff Relief													X						

Concentration Area Competencies

Medical Nutrition Therapy Emphasis Competencies

1. Nutrition Assessment of patients with complex medical conditions, including but not limited to multi-organ failure, respiratory failure, trauma and renal disease:
 1. Perform a nutrition assessment
 2. Formulate a nutrition diagnosis
 3. Plan intervention strategies
2. Complex enteral and parenteral nutrition regimens:
 1. Select enteral and parenteral nutrition regimens with complex medical conditions
 2. Monitor enteral and parenteral nutrition regimens with complex medical conditions
 3. Evaluate enteral and parenteral nutrition regimens with complex medical conditions
3. Transitional feeding:
 1. Develop transitional feeding from enteral and parenteral nutrition support to oral intake
 2. Implement transitional feeding from enteral and parenteral nutrition support for oral intake
4. Nutrition counseling and education:
 1. Undertake nutrition counseling and education with patients with complex medical conditions
5. Feeding tubes:
 1. Observe nasogastric and percutaneous endoscopic gastrostomy placement
 2. Observe nasogastric and percutaneous endoscopic gastrostomy care
6. Adaptive feeding devices:
 1. Participate in the care of patients requiring adaptive feeding devices
7. Management:
 1. Manage clinical nutrition services

Appendix J

Standard 10: Summary of facilities used for supervised practice by setting or practice area.

Summary of facilities used by supervised practice (Standard 10)

MEDICAL NUTRITION THERAPY – 470 HOURS

ACTIVE SITES

Betances Health Center, 280 Henry St, New York, NY 10002, (212) 227-8401.

Preceptor: Renata Shiloah, MS, RD, CDN, rshiloah@betances.org FOR OUTPATIENT MNT

Cabrini Eldercare, 115 Broadway, Dobbs Ferry, NY 10522, Preceptor: Niharika Jaiswal M.S., R.D., CDN, Chief Clinical Dietitian, Cabrini of Westchester, (914)-693-6800 ext: 424, njaiswal@cabrini-eldercare.org. The fax # 914-693-6569.

Coler-Goldwater Specialty Hospital and Nursing Facility, 900 Main Street, Roosevelt Island, NY 10044.

Preceptor: Arlene White-Tucker, MS, RD, CDN, MA, Clinical Nutrition Manager

Arlene.WhiteTucker@nychhc.org. (718)319-4470. (Lehman alum)

Triboro Center for Rehabilitation and Nursing (formerly Daughters of Jacob Nursing Home), 1160

Teller Avenue, Bronx, NY 10456, (718) 293-1500. Preceptor: Ms. Vihbuti Singh, RD,

CDN. VSingh@dojnh.com. (718)293-1500 ext. 1661.

Dry Harbor Nursing and Rehab Center, 61-35 Dry Harbor Road, Middle Village, NY 11379, Preceptor:

Ellen Lishansky, RN. (718)565-4207. elishansky@dryharborrehabcenter.com.

Greenwich Hospital, 5 Perryridge Road, Greenwich CT 08830, Preceptor: Jamie Restler, RD, CDN, CNSC,

Senior Dietitian, Jamie.Restler@greenwichhospital.org, phone (203)863-3645

Hebrew Home at Riverdale, 5901 Palisade Avenue, Riverdale, NY 10471. Preceptor: Shifra Aronoff, RD,

Nutrition Education Coordinator, shifra.aronoff@hebrewhome.org. (718)581-1795.

Henry J. Carter Hospital and Nursing Facility, 1752 Park Avenue, New York, NY 10035. Preceptor:

Arlene White-Tucker, , MS, RD, CDN, MA, Clinical Nutrition Manager.

Arlene.WhiteTucker@nychhc.org. (718)319-4470.

Hudson Valley Hospital Center, 1980 Crompond Road, Cortland Manor, NY 10567, (914)737-9000.

Primary contact: Anna Comiotes, RD, Acomiotes@hvhc.org.

Jodie Ferrari, RD, Jferrari@hvhc.org.

Jacobi Medical Center, 1400 Pelham Pkwy S, Bronx, NY 10461, (718) 918-

5000. Preceptor: Anuradha (Anu) Jara, RD, CDN, Clinical Nutrition Manager. anu.jara@nbhn.net

Lincoln Hospital, 234 E 149th St, New York, NY 10451, (718) 579-5000. Preceptor: Ying-Sheng (Grace)

Chen, MS, RD, CDN, Clinical Nutrition Manager, Office: 718-579-5839; Pager#: 27493, Work Mobile:

646-797-7681 Email: cheny20@nychhc.org

Supervisor: Michele Trifari, General Manager, Food and Nutrition, michele.trifari@sodexo.com; 718-579-5389.

Montefiore Medical Center, New Rochelle/Mount Vernon (formerly Sound Shore), 16 Guion Pl, New Rochelle, NY 10802, (914) 632-5000, Preceptor: Laura Sanford, MS, RD, CDN, CNSC, Clinical Nutrition Manager, (914)365-4022, lasanfor@montefiore.org (Volunteer Services Dept: Angela Turco - (914)365-3468.

Montefiore Medical Center, 111 E 210th St, New York, NY 10467, (718) 920-4321. Preceptor: Miriam Pappo MS, RD, CDN, CDE, CNSE, Clinical Nutrition Manager, mpappo@montefiore.org

Northern Manor Multicare Center, 199 North Middletown Road, Nanuet, NY 10954, Contact: Taylor D'Anna (RD exam pending), Chief Clinical Dietitian, 845-623-3904 x 228, and nutritionist, Kate Cardona, CDN (Jill Ficarotta was the previous dietitian). (NEW staff - to wait until Fall 2017 to place).

Northern Riverview, 87-89 S Rte 9W, Haverstraw, NY 10927, (845) 429-5381. Preceptor: Marianne Colucci, RDN, CDN, (845)598-9045, mcolucci@mow.org

North Central Bronx Hospital, 3424 Kossuth Ave, Bronx, NY 10467, (718) 519-5000. Preceptor: Cecilia Moy, MS, RD, CDN, moyc@nychhc.org

Rebekah Rehabilitation and Extended Care Center, 1070 Havemeyer Ave, Bronx, NY 10462, (718) 863-6200, Preceptors: Mary O'Connell, Caroline Caminski, RD. (no Pediatrics/ICU)
The Rogosin Institute, 66-22 Queens Blvd., Woodside, NY 11377, Preceptor: Therese Franzese MS, RD, CDE, , cell: 516-807-8787, thf9014@nyp.org

Woodhull Hospital, 760 Broadway, Brooklyn, NY 11206. Preceptor: Agnieszka Sowa MS, RD, CDN, Clinical Nutrition Manager, Agnieszka.Sowa@sodexo.com, (718) 963-5711

PRIVATE PRACTICE:

- Roberta Gershner, MS, RD, CDN, 42 Stonegate Rd #1, Ossining, NY 10562, (914) 762-6024, roberta@mynewdiet.com
- Zipporah Oksman, MS, RD, CDN, Clinical Nutritionist-Dietitian, on Staff Essen Medical Associates:2015 Grand Concourse, Bronx NY; 1550 University Street, Bronx; 2445 Arthur Avenue, Bronx New York, zoksam@namsko.com
- Mary Opfer, MS, RD, CDN, 378, RT 202, Somers, NY 10589, maryopfer@gmail.com
- Tracy Stopler, MS, RD, CDN, Nutrition, E.T.C., 19 Garynson Court, Plainview, NY, 11803, nutritionetc@aol.com

INACTIVE SITES: Have not taken Lehman interns in the past two years

ACACIA network, 308 East 175th Street Bronx, New York 10457. V: 718-960-7638/ F: 718-901-1118/C: 917-816-2170 Preceptor: Maria A. Toloza , MS, RD, RN, Director Nutritional Services mtoloza@promesa.org / www.acacianetwork.org (Lehman alum)

Bronx-Lebanon, Hospital Center, 1650 Grand Concourse, New York, NY 10457, (718) 590-1800. Preceptor: Karen Formato (ARAMARK PRIORITY) Formato-Karen@aramark.com

Burke Rehabilitation Hospital, 785 Mamaroneck Avenue, White Plains, NY, 10605. Preceptor: Patricia Coar CNM, (914) 597-2500. (SODEXO PRIORITY; takes other interns for specific rotation rounds)

Hudson Pointe at Riverdale Center for Nursing and Rehabilitation, 3220 Henry Hudson Pkwy, Bronx, NY 10463. Contact: Dhanwanti Panaram, RD, Director of Clinical Nutrition, (718) 514-2000, dpanaram@nathealthcare.com (Lehman alum) (limited)

Kingsbrook Jewish Medical Center, 585 Schenectady Ave, New York, NY 11203, (718) 604-5000.

Preceptor: Kirtee Agrawal, RD, CDN, Clinical Nutrition Manager, (718)604-5741, kagrawal@kingsbrook.org

New York Hospital - Queens, 56-45 Main St, Flushing, NY 1135. Contact: Mary Grace Webb, RD, Clinical Nutrition Manager, 718- 670-2550, MGS9002@NYP.org (contract has been sent/no approval as of yet)

St. Barnabas Hospital and Nursing Home, 4422 Third Avenue, Bronx, NY 10457. Preceptor: Amy S. Lesh, MS, RD, CDN, Clinical Nutrition Manager, 718-960-6223, 718-960-6224 (fax). Amy.Lesh@sodexo.com

St. John's Riverside Hospital, 42 Stonegate Rd #1, Ossining, NY 10562, (SODEXO PRIORITY) (914) 762-6024

Vassar Brothers Medical Center, 200 Westage Business Center Dr, Fishkill, NY, (845) 838-8100 (limited)

FOOD SERVICE MANAGEMENT – 300 HOURS

ACTIVE SITES:

Beth Abraham Medical Center, 612 Allerton Avenue, Bronx, NY 10467. Preceptor: Noreen Ferguson, RD, CDN, Clinical Nutrition Manager, (718)519-4299, nferguson@centerlight.org

Boulevard APL, 71-61 159th Street, Fresh Meadows, NY, 11365. Principle

Preceptor: Akiva Palmer, akiva@boulevardALP.com

Coler-Goldwater Specialty Hospital and Nursing Facility, 900 Main Street, Roosevelt Island, NY 10044.

Preceptor: Arlene White-Tucker, MS, RD, RDN, MA, Clinical Nutrition Manager.

Arlene.WhiteTucker@nychhc.org. (718)319-4470.

Cortlandt Health Care, 110 Oregon Road, Cortlandt manor, NY 10567.

Preceptor: Kathy Feld Berkowitz, MS, RD, CDE, CDN, Dietitian. kberkowitz@cortlandthealthcare.com
914-739-9150 ext. 3046

Heritage Health and Housing, 416 W 127th St, New York, NY 10027, (212) 866-2600. Preceptor: Sonia Grant, RD, CDN, sgrant@heritagenyc.org. (HIV rotation would be at same site)

Wartburg Senior Care, One Wartburg Plaza, Mount Vernon, NY 10552, 1855-927-8287. Principle Preceptor: Charlie Fox, Operations Manager, 914-513-5294, CFraser@wartburg.org under the supervision of Anthony Wright and Anna Frey.

Waveny LifeCare Network, 3 Farm Road · New Canaan, CT 06840, Anthony Pacchioni, RD, Director of Dining Services, , Tel 203.594.5322 Apacchioni@waveny.orgwww.waveny.org

White Plains School district (special circumstance): Ed Marra, Food Service Director, White Plains City Schools 550 North St. White Plains, NY 10605 Phone: (914) 422-2371 Fax: (914) 422-2394, edmarra@wpcsd.k12.ny.us

INACTIVE SITES:

Daughters of Jacob Nursing Home, 1160 Teller Avenue, Bronx, NY 10456, (718) 293-1500. Preceptor: Mr Fred Schoenefeld, Food Service Director, fschoenefeld@dojnh.com. Might need to see Elyse Allbee first, the recreation and volunteer director, eallbee@dojnh.com

Mary Manning Walsh Home, 1339 York Avenue, New York, NY 10021, 212-628-2800 ext. 2380. Preceptor: NEW: Nani Lepicard (formerly Joanne Gaffney, MS, RDN, Clinical Nutrition Manager).

COMMUNITY – 280 HOURS

PUBLIC HEALTH (100 HOURS)

Betances Health Center, 280 Henry St, New York, NY 10002, (212) 227-8401.

Preceptor: Renata Shiloah, MS, RD, CDN, rshiloah@betances.org

Head Start, Westchester, Ellen Pospishil, RD, Westchester Community Opportunity Program, Inc. 2 Westchester Plaza, Suite 137, Elmsford, NY 10523, 914-592-5600 Ext. 145, epospishil@westcop.org

Northern Riverview, 87-89 S Rte 9W, Haverstraw, NY 10927, (845) 429-5381. Preceptor:

Marianne Colucci, RDN, CDN, (845) 598-9045

Meals on Wheels, 121 W Nyack Rd, Nanuet, NY 10954, (845) 624-6325. Preceptor: Marianne Colucci, RDN, CDN, mcolucci@mowrockland.org

Mosholu Montefiore Community Center, 3450 Dekalb Avenue, Bronx, NY 10467. Preceptor:

Lisa Nicotra, LMSW, Senior Center Director, (718) 882-4000, ext. 364, lnicotra@mmcc.org

HIV/AIDS (100 HOURS)

Betances Health Center, 280 Henry St, New York, NY 10002, (212) 227-8401.

Preceptor: Renata Shiloah, MS, RD, CDN, rshiloah@betances.org

(INACTIVE) Bronx Lebanon Hospital: Center For Comprehensive Care: HIV-AIDS, 1650 Selwyn Ave, 9th floor, Bronx, NY 10457.

Triboro Health and Rehabilitation Center (formerly Daughters of Jacob Nursing Home, 1160 Teller Avenue, Bronx, NY 10456, (718) 293-1500. Preceptor: Ms. Vihbuti Singh, RD, CDN. Volunteer office: Elyse Allbee , recreation and volunteer director, eallbee@dojnh.com.

Gay Men's Health Center, 446 West 33rd Street, New York, NY 10001, Phone: (212) 367-1000. Leonore Caliolio, RD, CDN, lenorec@GMHC.org

God's Love We Deliver (GLWD), 166 Avenue of the Americas, New York, 10013, 212-294-8164. Preceptors: Ronnie Fortuna, MS, RDN, MBA, rfortuna@GLWD.org, Lisa Zullig, RD, lzullig@GLWD.org. Online volunteer application submission prior to scheduled start date www.glwd.org

Heritage Health and Housing, 416 W 127th St, New York, NY 10027, (212) 866-2600. Preceptor: Sonia Grant, RD, CDN, sgrant@heritagenyc.org.

(INACTIVE) Iris House 2348 Adam Clayton Powell Jr Boulevard (7th Avenue between 137th and 138th Streets) New York, NY 10030(646) 548-0100 ?? New Preceptor.

Montefiore HIV - Bronx, Preceptor: Claire Esson-Samuels, CESSONS@montefiore.org. For clearance: background check from the Montefiore volunteer office on 201th Street. The documents you need are: SS card (cannot be laminated), A Government issued ID, Recent physical including proof of PPD. Contact Velona Duncan, # 718-904-2934, for information on processing. The volunteer office is on Gun Hill Rd, at the Moses building, on the 1 st fl.

Montefiore HIV - Mt. Vernon. 12 North Seventh Ave, Mount Vernon, NY 10550, Laurie Orfe, LCSW-R, Administrator of Outpatient Behavioral Health and HIV Services. (914)361-7644 (office), (914)327-9850 (mobile), (914)361-7412 (fax), lorfe@montefiore.org

TOUCH - Together Our Unity Can Heal, 209 Rte 9W, Congers, NY. Contact: Rob Maher, Executive Director, (845) 268-8023, RMaher@TOUCH-NY.org. Preceptor: Alan Lee, RD.

WIC (60 HOURS)

Bronx Lebanon WIC., 21 E Mt. Eden Ave., Bronx, NY 10452. Preceptor: Neesha Singh, RD, NSingh@bronxleb.org

Catholic Charities WIC. 38 St. John's Place, Freeport, NY 11520. Lauren Sondey, RD. Sondey.Lauren@CatholicCharities.cc

Lincoln Hospital WIC, 234 East 149th Street, 4th floor, Bronx, NY 10451. Coordinator: Therese Vetone. Principle Preceptor: Kim (Siew) Teo, siew.teo@nychhc.org . Need to contact volunteer services to make an appointment (Mon.-Fri., 9-5, closed between 1 and 2) and fill out forms. Minimum of 2 visits to volunteer office. Need immunization record, proof of PPD, flu vaccine, 2 letters of recommendation on letterhead. Volunteer office contacts: Stacey Marrero, stacey.marrero@nychhc.org and/or Gisselle Torres, gisselle.torres@nychhc.org. (718)579-5111. Need 6-8 weeks for clearance.

(INACTIVE) Middletown, NY WIC. Contact: Mary Jackson, WIC Program Director, 33 Fulton Street. Middletown,N.Y. 10940, 845-346-1294. MJackson@orangecountygov.com

Montefiore- New Rochelle WIC. Contact WIC Coordinator: Iris Rosario, MS, RD (Lehman alumna). irrosari@montefiore.org

Montefiore-Bronx Westchester Square WIC. Westchester Ave. Bronx, NY 10468. Coordinastor: Carmen Winchester-Reed, RD (Lehman alumna), Carmen Winchester-Reid; cwinches@montefiore.org (718) 829 - 4401. For clearance: background check from the Montefiore volunteer office on 201th Street. The documents you need are: SS card (cannot be laminated), A Government issued ID, Recent physical including proof of PPD. Contact Velona Duncan, # 718-904-2934, for information on processing. The volunteer office is on Gun Hill Rd, at the Moses building, on the 1 st fl. email" Carmen Winchester-Reid; cwinches@montefiore.org

(UPDATE CONTRACT) Morrisania Diagnostic and Treatment Center, 1225 Gerard Ave., Bronx, NY 10452. Coordinator: Theresa Landau, MD, RD. Principle Preceptor: Diane Barrett, MS, RD, CDN, (718)960-2204. diane.barrett@nychhc.org

Neighborhood WIC. Various sites throughout NYC (mostly Queens and Brooklyn). Paulette Sinclair-Weir. psinclair-weir@healthsolutions.org

St. Barnabus WIC, 2021 Grand Concourse, 1st floor, Bronx, NY 10453. Coordinator: Maggie Dumont, mdumont@sbhny.org, (718)901-9512. Bernardo Gill, Assisand Director, Outreach Coordinator, SBH Health Systems WIC Program. (718)901-9510 bgill@sbhny.org. Forms need to be completed for clearance.

Rockland County DOH. Contact: Laura Duer Leach, RD, WIC Coordinator, 50 Sanatorium Rd. Bldg. J, Pomona, NY 10970, Phone: (845) 364-2507, Fax: (845) 364-383 leachl@co.rockland.ny.us

PUBLIC SCHOOLS (20 HOURS)

Bedford Road School, 289 Bedford Road, Pleasantville, NY 10570. John Morash, Assistant Principal. 914-741-1441

PS 2 QAlfred Zimberg School, 75-10 21st Avenue, East Elmhurst, NY 11370, Lydia Tsiforas, Assistant Principal. Itsiforas@schools.nyc.gov. (718)728-1459.

(NO LONGER TAKING INTERNS) PS 55 Bx Benjamin Franklin School, 450 St. Paul's Place, Bronx, NY 10458. Preceptors: Nina Colangelo (Veggiocation) ninacolang@gmail.com and Steven Ritz (Green Bronx Machine).. <http://www.greatschools.org/new-york/bronx/2214-Ps-55-Benjamin-Franklin/>

PS 134 Muscota New School, 4862 Broadway, New York NY 10034, Allison Maltz, Assistant Principal, (P) 212-544-0614 ext. 4 (F) 212-544-2678, amaltz@schools.nyc.gov

(LO LONGER TAKING INTERNS) PS 189 Bx Cornerstone Academy for Social Action (CASA), 3441 Steenwich Ave., Bronx, NY 10475. James Bellon, Principal. Andrea Tucci and Leslie Fiske, Assistant Principals. Contact person: Carol Whitton, Pre-K teacher. CWhitton@schools.nyc.gov<http://www.schoolfamily.com/find-a-school/school/95630-ps-189-the-cornerstone-academy-for-social-action>

RESEARCH – 150 HOURS

Lehman College, Health Sciences Department faculty, 250 Bedford Park Blvd. West, Bronx, NY 10468

Previous interns have worked with:

Dr. Marilyn Aguirre-Molina - CUNY Institute For Public Health

Dr. Katherine Gardner Burt – Dietetics, Food and Nutrition

Dr. Andrea Boyar, Dietetics, Food and Nutrition

Dr. Danna Ethan, Health Education Administration

Mary Opfer, RD, Dietetics, Food and Nutrition

Dean William Latimer, School of Health Sciences, Human Services and Nursing

Dr. Rho, Health Services Administration

Dr. Lalitha Samuel, Dietetics, Food and Nutrition

Appendix K

Standard 10 and 11: Rotation Schedule for the Maximum Number of Students

Rotation Schedule - 1200 hours									
Intern	Fall	Fall - Winter	Public School (20 hrs)	Spring	Spring	Spring	Spring - Summer	Spring - Summer	Summer
1	Betances + HIV (Community - 100 hrs + 100 hrs)		PS2 Q (fall)	Woodhull)/Rogosin (470 hrs)		Boulevard ALP (300 hrs)	PHS WIC (100 hrs)		
2	Beth Abraham (Food Service - 300 hours)	Res (150 hrs)	PS2 Q (fall)	Head Start (100 hours)		DOJ-HIV (100 hrs)	Lincoln (470 hrs)	Lincoln-WIC (100 hrs)	
3	Cabrini/Private Practice (MNT - 470 hours)	Res (150 hrs)	PS2 Queens (Dec)	The Wartburg (300 hrs)	Res (150 hrs)		Monte-WIC (60)	Monte-HIV- (100hrs)	Mosholu Monte (100hrs)
4	Woodhull + Betances (MNT - 470 hrs)	Res (150 hrs)	PS2 Q (fall)	Boulevard ALP (300 hrs)		GLWD (100 hrs)	PHS - WIC - Ocean Ave (60)		
5	The Wartburg (Food Service - 300 hrs)	Res (150 hrs)	BRS (spring)	Greenwich Hospital (470 hrs))		Prior Competencies in Community (100 hrs)	Monte-WIC (60)	Monte-HIV- (100 hrs)	Mosholu Monte (100hrs)
6	The Wartburg (Food Service - 300 hrs)		PS2 Q (fall)	MOW and Head Start/Rockland WIC/Monte HIV (100 + 60 + 100)	Res (150 hrs)	Monte - HIV (100 hrs)	Cabrini (380 hrs)		Elizabeth Seton MNT Pediatrics (90)
7	Triboro Heath/DOJ and Rehab (MNT 240 hrs)		PS2 Q (fall)	Betances + HIV (100 + 100)	Res (150 hrs)	Coler-FS (300 hrs)	PHS - WIC - Ocean Ave (Jan)	Kingsbrook Jewish Hospital (240 hrs)	
8	GMHC Food Service and HIV/AIDS (300 FS + 100 hrs HIV)		Jean (winter)	Mary Manning Walsh (240 hrs)	Res (150 hrs)	Hebrew Home or DOJ (240 hrs)	Montefiore-West. Square WIC (60 hrs)		
9	Private Practice/WIC-NR/Monte-HIV (Community 100 + 60 + 100)		BRS (Spring)	Jacobi Hospital (470 hrs))	Res (150 hrs)	The Wartburg (300 hrs)	Prior Competencies in MNT (100 hrs)		
10	Montefiore-BX (MNT - 470 hrs)		BRS (Spring)	Beth Abraham (300 hrs)	Res (150 hrs)	Monte HIV (100 hrs)	Prior Competencies in Community (100 hrs)	Monte-NR WIC (60 hrs)	
11	Monte NR - WIC /HIV and Community (100 + 60 + 100)		BRS (Spring)	The Wartburg (300 hrs))	Res (150 hrs)	North Central Bronx (380 hrs)/Private Practice (90 hrs)			
12	Boulevard ALP (Food Service - 300 hrs)	Res (150 hrs)	PS2 Q (fall)	Montefiore HIV + WIC (160 hrs)		Mosholu Monte (100hrs)	Rogosin (240 hrs) Jacobi Hospital (240 hrs)		
13	White Plains (Food Service - 300 hrs)		White Plains (fall)	HVHC (470 hrs)	Res (150 hrs)	Monte HIV (100 hrs)	Monte-WIC (60 hrs)	Mosholu Monte (100hrs)	
14	Cortlandt Health Care (Food Service - 300 hrs))	Res (150 hrs)	BRS (Spring)	Cabrini (380 hrs)/Private Pr (90 hrs)		Monte - Mt. Vernon HIV (100 hrs)	Monte-WIC (60 hrs)	Mosholu Monte (100hrs)	

Appendix L

Standard 10 and 11: Course Description from the catalog

Course Descriptions from Course Catalog

<http://www.lehman.edu/dietetic-internship-program/academic-requirements.php>

Academic Requirements

Students who wish to apply to the Dietetic Internship Program must have a GPA of at least 3.0 in their DPD courses or overall. If accepted into the Dietetic Internship Program at Lehman College, prospective interns are required to take four corequisite graduate courses during the Dietetic Internship, unless they have previously taken equivalent graduate courses. Each intern is required to take at least two of these courses at Lehman College. DFN 651 must be taken at Lehman College. Interns must gain a B or better in each course. The courses are as follows:

- DFN 651: Clinical Nutrition. 45 hours, 3 credits. The assessment and management of nutritional problems encountered in patients in acute and chronic care settings are discussed using the nutrition care process. Includes an exploration of the scientific basis for current techniques and approaches in clinical nutrition based on medical nutrition therapy.
- DFN 641: Community and Public Health Nutrition. 45 hours, 3 credits. The relationship of diet to health promotion and disease prevention. The role of public, private, and voluntary organizations in providing nutrition care services for ambulatory populations. Techniques for developing, funding, implementing, and evaluating projects in the community.
- DFN 661: Food Service Management. 45 hours, 3 credits. Management theory with application to the food service industry. Emphasis on the management of human and financial resources, the practice of optimal standards of safety, sanitation, and nutrition, and the role of the computer as a management tool.
- HEA 620: Health Counseling. 45 hours, 3 credits. An introduction to health counseling and behavior change is provided, with an overview of leading health problems of interest. Theoretical approaches to behavior change are examined. Basic counseling skills for helping people with behavior change will be acquired.
- DFN 730: Supervised Preprofessional Practice. 45 hours, 3 credits per semester for a minimum of three semesters. A minimum of 400 hours per semester of supervised preprofessional practice at affiliated health care, management and community sites. COREQ: DFN 731.
- DFN 731: Concepts and Methods of Dietetic Practice. 45 hours, 3 credits per semester for a minimum of 3 semesters. This course comprises the theories, methods, and concepts of dietetic practice that will be required to master the competencies during the internship. Included are methods of community and individual assessment, theories, and practice of planning; theories and models of education and lesson plan development; outcomes analysis, evaluation methods and reimbursement practices in healthcare. COREQ: DFN 730.

Successful completion of didactic and supervised practice requirements of the Dietetic Internship enables interns to take the Registration Examination to become a Registered Dietitian (RD Test).

After passing the RD test, registered dietitians may apply to the New York State Education Department, Office of the Professions, to become a Certified Dietitian/Nutritionist in the State of New York.

Appendix M

Standard 10: Course Syllabi (at least three that show curriculum progression and content areas)



LEHMAN COLLEGE
The City University of New York
250 Bedford Park Boulevard West
Bronx, New York 10468-1589

Course Information

Title: DFN 651 Medical Nutrition Therapy – Fall 2014
Class Hours: Monday 6:00pm-8:40pm in Science 3101
Credit Hours: 3.0
Prerequisites: DFN 448

Nutrition assessment, diagnosis, intervention, monitoring, and evaluation used to improve health and quality of life in patients with a variety of nutritionally-related conditions. Includes an exploration of evidence-based medical nutrition therapy in today's clinical practice. Case studies related to the pathophysiology and treatment of nutritionally relevant acute and chronic disease will be emphasized

Instructor Information

Instructor: Ilse de Veer MS, RD, CDN
Office Hours: Monday 5:00pm-6:00pm in Gillet (room TBA) or by appointment
E-mail: ilse.deveer@lehman.cuny.edu
Phone: 917-691-0906 (No calls after 8pm, please, and no text messages)

Materials

Required text: Nutrition and Diagnosis-Related Care, Sylvia Escott-Stump.
LWW; Seventh, North American Edition edition (January 21, 2011)

*International Dietetics & Nutrition Terminology (IDNT) Reference Manual – Standardized Language for the Nutrition Care Process Fourth Edition – Academy of Nutrition & Dietetics (AND) – \$20.00 for students

**this may become available on line through the Lehman library*

Recommend: Food Medication Interactions, 17 Edition edition (March 29, 2012)
Pronsky et al

You may find it helpful to have on hand your undergraduate MNT (e.g. Krause, Nelms) and anatomy/physiology texts for review

Access to AND's Evidence Analysis Library (EAL) through your AND membership

Course Objectives

The goal of this course is for the student to utilize critical thinking in assessing nutrition status, determining nutritional needs and developing medical nutrition therapy for patients with various medical conditions. The emphasis is on scientific concepts, including drug mechanisms, pharmacology and food-medication interactions used in calculating modified diets, and in planning menus that are consistent with the diet prescription

Grading and Evaluation Criteria:

- | | |
|--|-----|
| 1. 5 Case Studies | 50% |
| 2. 2 worksheets | 10% |
| 3. Abstract and review of research article | 10% |
| 4. Research brief presentation* | 5% |

- | | |
|---------------------------------|-----|
| 5. Final Exam | 20% |
| 6. Attendance and participation | 5% |

*This assignment will be done with a partner

Grades may be curved at the instructor's discussion. There are no extra credit assignments.

Attendance

Please make every effort to attend all classes. Each class is a significant portion of the course. Any unexcused absence will have a negative impact on your grade. Punctuality is expected. If you are late, you are responsible for checking with your classmates for information discussed. Please email the instructor if you expect to be significantly late or absent.

Class Policies:

1. Use of cell phones and other wireless devices are not permitted
2. Please have a calculator for class use that performs the following functions: +, -, \div , \times , $\sqrt{\quad}$, x^2 .
3. Class participation is an integral part of the learning process. It is encouraged and will contribute to the final grade.
4. You are expected to consult additional sources besides the class materials as needed to complete your assignments
5. Make-up final is only available in case of medical or other emergency. Appropriate documentation is required.
6. Deadlines for submission of case studies and worksheets are strictly enforced. Any assignments handed in late will be subject to a decrease in grade. Spelling, punctuation and grammar will constitute part of the grade for written assignments.
7. A high level of academic integrity is expected. Failure to comply will result in a course grade of "F". This includes the following:
 - a. Do not copy and paste paragraphs of information from the Internet.
 - b. Do not copy other student's work.
 - c. Do not use someone else's written work without citing the source.
 - d. Complete all assignments on your own. Case studies are not group assignments.
8. All homework must be sent via Blackboard. Email attachments and hard copies of assignments are not accepted. See Blackboard for further instructions. Failure to follow instructions for assignments will be subject to a decrease in grade.
9. **I want everyone to do well in this course and I am here to help you! Please do not hesitate to contact me or come see me if you have questions.** Questions can be posted on the discussion board, emailed to me, discussed during office hours.

Technology and Blackboard

The Blackboard site will be the hub for all assignments and course materials. Take some time in the first week to get familiar with the layout and contents, and ask any questions you might have.

You are responsible for making sure that:

- Your CUNY/Blackboard login is active
- Your computer is performing appropriately
- You have internet access
- You check email and Blackboard regularly

Technology problems are not an acceptable excuse for late assignments.

Email and Class Communications

All class communications will be sent from Blackboard to your Lehman email address. Please make sure:

- You check it regularly, OR
- Configure the account to forward your emails to an account that you do check regularly

There will be a test email sent at the start of the course; please respond so that I know you received it. If you do not receive it, check to make your Lehman email account is functioning and set up in Blackboard.

Blackboard Online Preventive Measures for Downtime and/or Information Loss

Blackboard is a large, integrated system, and all such systems do have unscheduled down time, however unusual and short-lived. There is no CUNY or Lehman College policy to restore courses in which all or part of the content is deleted, damaged or otherwise becomes inaccessible. Therefore, students are strongly urged to keep a print and electronic backup of all the class work that they have submitted.

For help with Portal/Blackboard Username or Password Problems:

If you have any questions about your Lehman email address or your password, or if you have any problems accessing the site please call the Lehman Help Desk – IT Center in Carman Hall (718) 960-1111

Lehman Online Academic Integrity and Plagiarism Policy:

The most common forms of academic dishonesty are cheating and plagiarism. Cheating is taking or giving help on a test: for example, using unauthorized books, papers or notes during an examination; or procuring, distributing, or using unauthorized copies of examinations. Plagiarism means the failure to give credit for the source of another's words or ideas, or-as in the use of borrowed or purchased papers-passing off another person's work as one's own. The full policy statement may be found in the Lehman Student Handbook. <http://www.lehman.cuny.edu/student-affairs/documents/student-handbook-02.pdf>.

The Academic Center for Excellence (ACE) and the Science Learning Center (SLC)

The Academic Center for Excellence (ACE) and the Science Learning Center (SLC) are two of the tutoring centers on campus. The ACE provides appointment based and drop-in tutoring in the humanities, social sciences, and writing, as well as general writing and academic skills workshops. The SLC provides drop-in tutoring for natural and computer science courses. To obtain more information about the ACE and the SLC, please visit their website at <http://www.lehman.edu/issp>, or please call the ACE at 718-960-8175, and the SLC at 718-960-7707.

Services for Students with Disabilities:

The college will make reasonable accommodations for persons with documented disabilities. Students can request services by contacting the Office of Student Disability Services located in Schuster Hall, Room 238. Students should be prepared to discuss the nature of the disability, the impact on learning, and the accommodations needed to help you meet your academic goals. Please contact (718) 960-8441 to schedule an appointment.

Course Outline:

1. NCP: Assessment
 - a. Review of ADIME Process

- b. Food & nutrition history
 - c. Biochemical tests
 - i. Hematology
 - ii. Blood glucose
 - iii. Lipid profile
 - iv. Electrolytes
 - v. Acute phase proteins
 - d. Medical tests & procedures
 - i. Common tests
 - e. Medications
 - i. The relationship between nutrition and drug action
 - ii. Nutrition therapy and drug interactions
 - f. Anthropometric measurements
 - i. Measures, methods and tools
 - ii. Reference standards
 - iii. Interpretation
 - g. Nutrition-focused physical findings
 - i. Nutrient deficiencies
 - ii. Malnutrition
 - h. Patient history
 - i. Estimating energy & protein needs
 - i. Direct measurement
 - ii. Estimation equations
2. NCP: Diagnosis, Intervention and Monitoring
- a. Diagnosis: PES statements
 - b. Interventions
 - i. Nutrition Prescription
 - ii. Oral Diet Delivery
 - iii. Counseling and education
 - c. Monitoring/Evaluation
 - d. Documentation: the ADIME note
3. Weight management and eating disorders
- a. Energy balance & regulation
 - b. Obesity & overweight
 - i. Epidemiology
 - ii. Adverse health consequences
 - iii. Treatment
 - 1. Pharmacology
 - 2. Surgery
 - 3. Nutrition therapy
 - c. Eating Disorders
 - i. Diagnostic criteria
 - ii. Medical management
 - iii. Nutrition therapy

4. Diabetes Mellitus
 - a. Diagnostic Criteria
 - i. Prediabetes
 - ii. Type 1
 - iii. Type 2
 - iv. Gestational Diabetes
 - b. Type 1 Diabetes Mellitus
 - i. Epidemiology, etiology, pathophysiology & medical treatment
 - ii. Acute complications
 - iii. Long term complications
 - iv. Insulin regimens
 - v. Nutrition therapy
 - c. Type 2 Diabetes Mellitus
 - i. Epidemiology, etiology, pathophysiology & medical treatment
 - ii. Acute complications
 - iii. Long term complications
 - iv. Nutrition therapy
 - d. Gestational Diabetes
 - i. Epidemiology, etiology, pathophysiology & medical treatment
 - ii. Acute complications
 - iii. Long term complications
 - iv. Nutrition therapy
 - e. PCOS
5. Other Endocrine Disorders: pathophysiology and nutrition therapy
 - a. Diabetes insipidus
 - b. Hypothyroidism
 - c. Hyperthyroidism
 - d. Pituitary disorders
 - e. Adrenal cortex disorders
6. Critical care and nutrition support
 - a. Metabolic response to stress
 - b. Nutrition requirements in hypermetabolic illness
 - i. Energy
 - ii. Protein
 - iii. Fluid & electrolytes
 - c. Nutrition Support
 - i. Goals
 - ii. Indications
 - d. Oral Supplementation
 - e. Enteral Feeding
 - i. Access
 - ii. Formulas
 - iii. Calculations
 - iv. Complications
 - f. Parenteral Nutrition
 - i. Access

- ii. Calculations
- iii. Formulas
- iv. Complications

7. Gastrointestinal Disease

- a. Pathophysiology and nutrition therapy for upper gastrointestinal disorders
 - i. Oral cavity: caries, dysgeusia, xerostomia
 - ii. Esophagus: GERD, dysphagia, esophagitis, achalasia
 - iii. Stomach: nausea & vomiting, gastric & peptic Ulcers
- b. Pathophysiology and nutrition therapy for lower gastrointestinal disorders
 - i. Diarrhea and constipation
 - ii. Malabsorption
 - iii. Celiac disease
 - iv. Irritable Bowel Syndrome (IBS)
 - v. Inflammatory bowel disease (Crohn's & Ulcerative Colitis)
 - vi. Diverticular Disease
 - vii. Surgical Interventions – Ostomies
 - viii. Short Bowel Syndrome
 - ix. Blind Loop Syndrome: Bacterial Overgrowth

8. CVD, HTN and CHF

- a. Atherosclerosis and coronary heart disease
 - i. Etiology, pathophysiology & medical and pharmacologic treatment
 - ii. Risk factors and prevention
 - iii. Blood markers and lipid metabolism
 - iv. MNT and Therapeutic lifestyle changes
 - 1. Nutrient composition
 - 2. Food choices
- b. Hypertension
 - i. Epidemiology, etiology, pathophysiology & medical and pharmacologic treatment
 - ii. Primary Prevention
 - iii. MNT
 - 1. Weight Control
 - 2. Dietary patterns: DASH
 - 3. Sodium restriction and other minerals
- c. Chronic coronary artery disease & Congestive Heart Failure (CHF)
 - i. Etiology, pathophysiology & medical and pharmacologic treatment
 - ii. Risk factors
 - iii. Cardiac cachexia
 - iv. MNT

9. Renal disease

- a. Chronic Kidney Disease (CKD)
 - i. Etiology, pathophysiology & medical and pharmacologic treatment
 - ii. Stages of disease progression

- iii. Clinical symptoms and laboratory values used in assessing the patient
 - iv. Nutritional care in renal insufficiency
 - b. Acute Renal Failure
 - i. Etiology, pathophysiology & medical and pharmacologic treatment
 - ii. Clinical symptoms and laboratory values used in assessing the patient
 - iii. Nutritional care
 - c. ESRD
 - i. Etiology, pathophysiology & medical and pharmacologic treatment
 - 1. Hemodialysis and peritoneal dialysis
 - ii. Acute complications
 - iii. Long term complications
 - iv. Nutritional care in dialysis and transplants

10. Hepatobiliary and pancreatic disease

- a. Pathophysiology and nutrition therapy for liver disease
 - i. Acute & chronic hepatitis
 - ii. Non-alcoholic steatohepatitis
 - iii. Alcoholic liver disease
 - iv. Early cirrhosis
 - v. Late cirrhosis
 - vi. hepatic encephalopathy
 - vii. Other liver related diseases:
 - 1. Gall Bladder
 - 2. Pancreatitis
- b. Complementary & alternative medicine

11. Cancer

- a. Pathophysiology & Definitions
- b. Nutrition in the Etiology of Cancer
- c. Nutritional Implications of Cancer
- d. Nutritional Implications of Cancer Therapy
- e. Nutritional Care of the Cancer Patient
 - i. General
 - ii. Head and neck
 - iii. Gastrointestinal

12. HIV, Pulmonary Disorders

- a. Pathophysiology and nutrition therapy for HIV
 - i. Stages of HIV Infection
 - ii. Medical management
 - iii. Opportunistic infections, complications & malnutrition
 - iv. Weight Loss, wasting & metabolic disorders
 - 1. Lipodystrophy
 - 2. Metabolic abnormalities
 - v. Medical nutrition therapy
 - vi. Food & water safety
 - vii. Complimentary & Alternative Therapies

- b. Pathophysiology and nutrition therapy for pulmonary disorders
 - i. Aspiration
 - ii. Asthma
 - iii. Chronic obstructive pulmonary disease
 - iv. Cystic fibrosis
 - v. Lung cancer
 - vi. Pneumonia
 - vii. Respiratory failure
 - viii. Tuberculosis

13. Pediatrics

- a. Nutrition assessment of infants, children and adolescents
- b. Nutrition support of the preterm infant
- c. Chronic lung disease of prematurity
- d. Inborn errors of metabolism
- e. Management of food allergies
- f. Nutrition therapy for epilepsy
- g. Nutrition therapy for cystic fibrosis

14. Selected topics in nutrition

- a. Nutritional genomics
- b. Nutrition and aging
 - i. Sarcopenia
 - ii. Polypharmacy
- c. Special diets: vegan, vegetarian
- d. Complementary & alternative medicine

Schedule of Topics and Readings

Week #	Subject	Readings
1. Sept 8	Course overview and requirements Introductions NCP: Assessment	IDNT Intro and Snapshots 1-4 articles as assigned
2. Sept 15	NCP: Assessment (continued) Diagnosis, Intervention & Documentation	articles as assigned
3. Sept 22	Weight management, eating disorders	E-S sec 10 articles as assigned
4. Sep 29	Diabetes Mellitus	E-S sec 9 articles as assigned
5. Oct 6	Diabetes Mellitis (continued) Other endocrine disorders	articles as assigned
6. Oct 20	Critical care and nutrition support	E-S sec 14 and 17 articles as assigned
7. Oct 27	CVD/HTN/CHF	E-S sec 6 articles as assigned
8. Nov 3	Gastrointestinal Diseases	E-S sec 7 articles as assigned
9. Nov 10	Renal disease	E-S sec 16 articles as assigned
10. Nov 17	Hepato/biliary and pancreatic disease	E-S sec 8 articles as assigned
11. Nov 24	Cancer	E-S sec 13 articles as assigned
12. Dec 1	HIV, Pulmonary disorders	E-S sec 5 articles as assigned
13. Dec 8	Pediatric MNT	E-S sec 3 articles as assigned
14. Dec 15	Selected topics Genomics, aging, special diets	articles as assigned

Schedule Assignments *

Date and Time	Due
Sept 11	Worksheet: estimating needs
Sept 25	Case # 1 Assessment
Oct 9	Case #2: Diabetes
Oct 23	Abstract and review of research article
Oct 30	Worksheet: EN and PN calculations
Nov 6	Case #3: GI disease and nutrition support
Nov 20	Case #4: CKD with HD
Nov 26	Submission of all research brief power point presentations. In-class presentations to be made Dec 1, Dec 8, Dec 15
Dec 11	Case #5: Cancer
Dec 22	Final Exam

***Unless noted otherwise, all assignments are due**

- 1. Scientific and Evidence Base of Practice: integration of scientific information and research into practice.**
 - CRD 1.1 Select indicators of program quality and/or customer service and measure achievement of objectives. (Note: *Outcomes may include clinical, programmatic, quality, productivity*, CRD 1.3 Justify programs, products, services and care using appropriate evidence or data
 - CRD 1.4: Evaluate emerging research for application in dietetics practice
 - CRD 1.2: Apply evidence based guidelines, systemic reviews and scientific literature in the nutrition care process and other areas of dietetics practice.
- 2. Professional Practice Expectations: beliefs, values, attitudes and behaviors for the professional dietitian level of practice.**
 - CRD 2.2 Demonstrate professional writing skills in preparing professional communications
 - CRD 2.3: Design, implement and evaluate presentations to a target audience
 - CRD 2.5 Demonstrate active participation, teamwork and contributions in group settings
- 3. Clinical and Customer Services: development and delivery of information, products and services to individuals, groups and populations**
 - CRD 3.1: Perform the Nutrition Care Process (a through e below) and use standardized nutrition language for individuals, groups and populations of differing ages and health status, in a variety of settings
 - CRD 3.1a: Assess the nutritional status of individuals, groups and populations in a variety of settings where nutrition care is or can be delivered
 - CRD 3.1b: Diagnose nutrition problems and create problem, etiology, signs and symptoms (PES) statements

- iii. CRD 3.1c: Plan and implement nutrition interventions to include prioritizing the nutrition diagnosis, formulating a nutrition prescription, establishing goals and selecting and managing intervention
- iv. CRD 3.1d: Monitor and evaluate problems, etiologies, signs, symptoms and the impact of interventions on the nutrition diagnosis
- v. CRD 3.1.e: Complete documentation that follows professional guidelines, guidelines required by health care systems and guidelines required by the practice setting
- b. CRD 3.4: Deliver respectful, science-based answers to consumer questions concerning emerging trends
- c. CRD 3.6: Develop and evaluate recipes, formulas and menus for acceptability and affordability that accommodate the cultural diversity and health needs of various populations, groups and individuals

Herbert Lehman College, City University of New York
Department of Health Science

Public Health and Community Nutrition (DFN 641): Spring 2016

The relationship of diet to health promotion and disease prevention. The role of public, private, and voluntary organizations in providing nutrition-care services for ambulatory populations. Techniques for developing, funding, implementing, and evaluating projects in the community.

This is a hybrid course, meaning that between 33-80% of the course will be online.

Class (Lecture): Thursdays, 6-8:40 (hybrid class)

Class location: Gillet 429

Prerequisite: DFN 430 or 620, or the equivalents

Instructor: Kate Gardner Burt, PhD, RD

Office hours: By appointment only

Office location: Gillet Hall, 432

Contact: Katherine.Gardner@lehman.cuny.edu

Course Objectives: Student who complete this course will be able to:

- Discuss inequalities of access to healthy foods and health disparities across different neighborhoods of different socio- economic levels and races;
- Explain and critique how food and nutrition professional work on the community level (particularly in NYC);
- Describe and analyze the programs that make up the dietary guidelines, food assistance, and other governmental policies and explain how these program have changed over time;
- Demonstrate an understanding of nutritional epidemiology and research methods;
- Demonstrate increased value for working "on the ground" with community members;
- Describe various theories of behavior change and demonstrate the ability to develop nutrition education interventions;
- Understand the purposes of and how to conduct a needs assessment; and
- Discuss food policy issues and controversies and explain how to get involved in food policy change.

CRD Codes: This course meets the following CRD codes:

- 1.4 - Evaluate emerging research for application in dietetics practice
- 1.5 - Conduct projects using appropriate research methods, ethical procedures and data analysis
- 2.2 - Demonstrate professional writing skills in preparing professional communications
- 2.3 - Design, implement and evaluate presentations to a target audience
- 2.5 - Demonstrate active participation, teamwork and contributions in group settings
- 3.3 - Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management
- 4.10 - Develop a plan to provide or develop a product, program or service that includes a budget, staffing needs, equipment and supplies

Required Textbook: Spark, Arlene. Nutrition in Public Health: Principles, Policies, and Practice. 2nd ed. CRC, 2015. Print.

All other readings for class are posted on Blackboard and detailed below.

ALL READINGS MUST BE COMPLETED BEFORE CLASS!

Agenda

Date	Topic(s)	Readings and Videos Due	Assignments
2/4: In Person	Session 1: Overview & Introduction	<u>Recommended:</u> Spark Chap 1 Healthy People 2020 Brochure Review the Dietary Guidelines Advisory Report Website	<u>TO DO:</u> Self-enroll in a group online; Conduct the Community Health Profiles Assignment online
2/11: In Person	Session 2: Community Nutrition, Food, and Food Security Assessments *This class will help you with Steps 1 & 2 of DESIGN	<u>Required:</u> Spark Chap 2 Community Food Systems Assessments <u>Required Viewing:</u> Dr. Frieden discusses NHANES data <u>Recommended:</u> Spark Chap 10 Position of the Academy of Nutrition and Dietetics: <i>The Roles of Registered Dietitians and Dietetic Technicians, Registered in Health Promotion and Disease Prevention</i>	<u>DUE:</u> Group enrollment and CHP Assignment on Blackboard discussion board <u>TO DO:</u> SNAP challenge
2/18: In Person	Session 3: Dietary Guidance & Food Policy	<u>Required:</u> The \$11 Trillion Reward: How Simple Dietary Changes Can Save Lives and Money, and How we Get There Special Report: How Washington went soft on childhood obesity Plant the Plate Infographic <u>Required Viewing:</u> What's it like working for the DOH? HBO's Weight of the Nation: Challenges (Part 4) – you can watch the whole thing, but the required portion is the last segment: The Real Cost of Food, which begins at 43:31 <u>Recommended Reading:</u> Spark Ch 8 Harvard's Healthy Eating Plate and Pyramid And Now, A Word From Our Sponsors – Michele Simon Review the Dietary Guidelines Advisory Report	<u>TO DO (continued):</u> SNAP challenge
2/25: In Person	Session 4: Food Insecurity & Assistance programs *This class will help you with Steps 1 & 2 of DESIGN	<u>Required:</u> SNAP Households Must Balance Multiple Priorities Feeding America Policy Brief: Nourishing Our Children Beyond the School Day Michele Simon's Food Stamps: Follow The Money Farm To School Network's Evaluation Transformation: Public Health Outcomes <u>Recommended Reading:</u> Spark Chap 11 FRAC: SNAP and Public Health: The Role of SNAP in Improving the Health and Well-Being of Americans NY Times Article: Minimum Wage: Who Makes It? <u>Recommended Viewing:</u> Robert Reich on the history of U.S. income inequality Robert Reich on what needs to be done	<u>DUE:</u> SNAP challenge log & receipts <u>TO DO:</u> SNAP challenge Paper
3/3: In	Session 5: Theories of	<u>Required:</u> Glanz – Selected Chapters (2, 7, 12, 17)	<u>DUE:</u> SNAP Challenge Paper

Your final course grade will be comprised of the following components:

Assignment	Expectations
Attendance and Participation in Person and on Blackboard (20%)	<p>Class attendance is crucial to your successful completion of this course. Unexcused lateness will not be tolerated and will be marked as an absence. Repeated absences will only be excused with written documentation from a third party (e.g. doctor, employer, jury duty, etc.) attesting to the circumstances of your absence. <i>This portion of your grade is calculated based on whether or not your name is on the sign in sheet so remember to sign into class!</i></p> <p>Participation in class discussion and group assignments is paramount to your success in this class and your future professional career. <i>This grade is based on a score for in-class participation, discussion board postings, and can be affected by your participation in group work.</i></p>
Community Health Profile Assignment (5%)	<p>Based on the population you chose (and the group that you self-enroll in), visit http://www1.nyc.gov/site/doh/data/tools.page and explore the site. Review some Community Health Profiles and explore the relationship between the population you chose and one NYC community profile.</p> <p>Post 1-2 paragraphs in your discussion group on:</p> <ol style="list-style-type: none"> a) A little about yourself and why you're interested in the population (group) you chose b) 2 findings that interested you from the CHP, about your population, and provide context (compare to NYC data)
DUE: 2/11 by 4:00pm	
Food Stamp Challenge: Log & Paper (15%)	<p>You will go on the SNAP Challenge diet for 7 days. You will pretend your cupboards and refrigerator only have oil and spices and will have \$35.75 (\$5.11 a day) to spend on food for the week.</p> <p>Food Log and Receipts DUE: 2/25 by 6:00pm (5 points) Paper DUE: 3/3 by 6:00pm (10 points)</p>
Health Behavior Theory: Article Critique and Presentations (10% each)	<p>You will individually research one study related to your audience using one of the health behavior theories discussed in class. Review your article according the assignment guidelines.</p> <p>In 5-7 minutes, you will be required to deliver a short presentation about your selected behavioral change theory and the article you chose. Present important aspects of the article discussed in your critique.</p> <p>DUE: 3/17 by 6:00pm – no make-up presentations!</p>
Grant Writing Assignment (5%)	<p>Find a grant that could fund your group's project. Write a 2-paragraph summary of the project and post it to Blackboard. The first paragraph should describe the grant you found (and link to it). Pay close attention to the grant guidelines. What types of projects are funded? Did this grant give you any ideas or things to consider for your group project?</p> <p>For the second paragraph, use the Proposal Writing Short Course's Statement of Need Guidelines (and research you've done for your program) to draft a Statement of Need, for the particular grant you found. This paragraph should be concise - only 3-5 sentences!</p>

DUE: 3/31 by 6:00pm

Logic Model
Assignment
(5%)

Create a logic model for your program. Post it to blackboard on the due date and comment on each of your group member's models. Together, develop a single model for your program.

Individual models DUE: 4/7 by 6:00pm (3 points)

Group model DUE: 4/14 by 6:00pm (2 points)

DESIGN
Workbook
(30%)

The culminating project of this class is your DESIGN workbook. For this assignment you should submit the following documents (in the order listed):

1. Grant Summary
2. DESIGN Workbook
3. Logic Model
4. References

DUE: 5/12 by 6:00pm

Course Policies: Expectations, Assignments, and Grading

Attendance

Barring extraneous circumstances, you are expected to attend every class. If you must miss a class, you MUST let me know ahead of time in order to be excused. An excused absence will not be counted against your attendance grade but you will be unable to make up any missed work.

Make-up exams or presentations are not available unless planned with me in advance of the scheduled exam date with verifiable documentation. If an emergency situation arises in which you cannot make it to the scheduled exam or presentation, contact me as soon as possible so that we can work out an acceptable plan. Please provide documentation when we meet.

Student Absence on Account of Religious Belief:

A student who, for religious reasons, does not attend classes on a particular day or days shall be excused from any examination or other work. The student shall have equivalent opportunity to make up any examination or study or work requirements. Please make every effort to notify me beforehand of any planned absences for religious reasons.

Assignments

All assignments are to be submitted on Blackboard before class. They must adhere to the following guidelines: page limits as indicated for each assignment, 12-point Times New Roman font, and double-spaced. ALL SOURCES MUST BE CITED following the APA Style Format. Cheating (e.g. using a classmate's work or using work that you have submitted in previous courses) and plagiarism (e.g. copying material directly from another source) is STRICTLY prohibited.

When you submit an assignment you must:

1. Check your Safe Assign score.
2. If your score is >20%, I will not accept or grade your assignment. A high (>20%) score indicates that a significant portion of your paper is taken from another source.
3. You will have 24 hours to revise and resubmit your assignment.
4. If you do not resubmit within one week, you will receive a zero.

If you are at all unclear about what constitutes plagiarism or how to properly cite sources, you should review these guidelines and more at [the Purdue Online Writing Lab](#).

Writing Resources at Lehman:

1. Lehman College free tutoring and writing assistance: Instructional Support Services Program
2. Strunk, W. and White, E.B. (1999). *The Elements of Style* (fourth edition). Needham Heights, MA: Allyn & Bacon/Longman.
3. *The Rules of APA Style*. Use for writing papers and bibliographies, citing references, etc.
4. Truss, L. (2003). *Eats, Shoots & Leaves*. New York, NY: Gotham Books. The most entertaining book on punctuation you'll never read.

Academic Integrity:

The faculty and administration of Lehman College support an environment free from cheating and plagiarism. Each student is responsible for being aware of what constitutes cheating and plagiarism and for avoiding both. The CUNY policy states "academic dishonesty is prohibited in The City University of New York. Penalties for academic dishonesty include academic sanctions, such as failing or otherwise reduced grades, and/or disciplinary sanctions, including suspension or expulsion." The complete text (including definitions and explanations of 'cheating' and 'plagiarism') of the CUNY Academic Integrity Policy and the Lehman College procedure for implementing that policy can be found [here](#).

To ensure the highest level of academic integrity, you must take the Indiana University plagiarism tutorial and pass the certification test [here](#). You will need to register to get a certificate. Print out the certificate, fill it out, sign it and submit it on Blackboard by 2/11/2016. No written assignments will be accepted prior to your completion of this tutorial.

If a faculty member suspects a violation of academic integrity and, upon investigation, confirms that violation, or if the student admits the violation, the faculty member **MUST** report the violation.

Grading

Assignments that contain more than 3 errors (spelling, grammar, punctuation, format, standard English usage) will have points deducted – the number of points deducted is indicated in each grading rubric. Late assignments will automatically get 20% deducted; after 1 week, a late assignment automatically get 50% deducted.

Grading for this course will be based on a straight scale (i.e. no curve), from A to F.

A: 95-100
A-: 90-94
B+: 87-89
B: 84-86
B-: 80-83
C+: 77-80
C: 74-76
C-: 70-73
D+: 67-69
D: 64-66
D-: 60-63
F: Below 60

Department of Health Sciences
Lehman College, CUNY

**HEA 620 HEALTH COUNSELING (online)
(3 credits)**

Syllabus
Spring 2016

Professor: Craig Demmer, EdD, PhD
Email: craig.demmer@lehman.cuny.edu
Phone: 718-960-7313
Office: Gillet Hall Room 334
Office hours: Wednesdays 12:00-3:00pm

COURSE DESCRIPTION

College catalog description:

3 hours, 3 credits. Health problems of the school child, remedial procedures, and health counseling techniques. PREREQ: Either a personal health, public health, or physical inspection course (or equivalents), or Departmental permission. *NOTE: Students (in consultation with the instructor) will be expected to enter into a specific health-counseling situation in-depth and follow it to fruition at the end of the semester.*

Full course description:

3 hours, 3 credits. The purpose of this course is to provide an introduction to health counseling and behavior change. Health counseling is a psycho-educational process that involves helping people change unhealthy behaviors to achieve an optimal state of health. Students will acquire basic counseling skills for helping people with behavior change in either health education or nutrition settings. This course consists of assigned readings, online discussions, writing assignments, self-awareness activities, counseling exercises and an exam.

REQUIRED TEXTS

Denizet-Lewis, B. (2010). *America Anonymous: Eight Addicts in Search of a Life*. New York: Simon and Schuster. Paperback. ISBN-13: 978-0743277839. (amazon.com: \$11.25)

Meier, S. T & Davis, S. R. (2010). *The Elements of Counseling 7th edition*. Belmont, CA: Wadsworth/Thomson Learning. Paperback. ISBN-13: 978-0495813330. (amazon.com: \$39.37)

Yalom, I.D. (2009). *The Gift of Therapy*. New York: Perennial. ISBN-13: 978-0061719615. (amazon.com: \$8.61)

COURSE OBJECTIVES

Upon completion of this course, students will be able to:

- 1) Explain why health counseling is an important skill for health educators and nutritionists.
- 2) Describe and discuss addictive behaviors, etiology, treatment, and prevention issues.
- 3) Discuss the importance of ethics when counseling people about health/nutrition problems.
- 4) Describe how behavior theories can be used to explain and address health and nutrition problems.
- 5) Explain the importance of self-awareness and how one's personal characteristics and experiences can influence the counseling process.
- 6) Plan and implement a personal behavior change intervention.
- 7) Explain how you can help people change unhealthy behaviors by using motivational interviewing and basic counseling strategies.
- 8) Describe the role of mental health professionals and explain when and how to make referrals.
- 9) Read a case study about a health or nutrition problem and provide a professional opinion using one's knowledge of behavior change interventions, motivational interviewing and basic counseling strategies.
- 10) Describe the nature and purpose of group counseling and outline how to conduct a group session to address health and nutrition problems.
11. Act as a resource person and be able to evaluate and recommend various educational resources relating to health.
12. Demonstrate professionalism through the following means: a) communicate in a polite, respectful manner through email, phone, or in person; b) meet deadlines; c) prepare and write assignments in a professional manner; and d) conduct oneself with integrity at all times in accordance with the CUNY policy on academic integrity and the Code of Ethics for Health Educators.

The course objectives are aligned with standards of the American Association for Health Education (AAHE) and ACEND (Accreditation Council for Education in Nutrition and Dietetics)

COURSE REQUIREMENTS

Summary of course requirements and point values:

Self-Awareness Paper: 20 points

Discussion Board: 20 points

Behavior Change Project: 15 points

Interview with a Professional Counselor: 20 points

Final Exam: 25 points

Total: 100 points

(+ 3 points extra credit)

GRADE SCALE AND GRADING STANDARDS

Grades are defined as follows:

A 93-100%
A- 90-92%
B+ 87-89%
B 83-86%
B- 80-82%
C+ 77-79%
C 73-76%
C- 70-72%
F < 70%

Grading policy

This course operates on a total points system. This means that there are clearly stated standards for achievement and your grade depends only on your own performance, not on the performance of your class as a whole. This also means that there will be no "curving" of grades. Please pay careful attention to the grade scale above and what each grade represents.

Students should have reasonable expectations in grading. While there will always be variations in grading due to course content, instructors, and other issues, the faculty of the Health Education and Promotion program will not foster or engage in grade inflation. In accordance with the University grading schedule, students must earn grades based on merit and competitive comparison. It is unreasonable to expect perfection in each and every course enrolled, or to insist that the student deserves an A because the student has always earned them. Performance is individualized and the range of performance varies. A B is a solid grade that represents good work, while an A is reserved for those performing with excellence and at the highest level.

In this era of grade inflation, some students may believe that if they perform satisfactorily in a course, they deserve an A. That is not the case in my courses. To earn an A or A- on any assignment, you need to demonstrate superior performance. A B+ is considered a very good grade in my course and indicates that you have met the standard expected of most students. Bear in mind that you will have to work hard to earn a B+ or B in my course. Expect a satisfactory evaluation (C) for meeting minimum expectations. Also, remember that grades are given for what you produce, not how hard you think you worked. This is not to say that effort is unimportant. Usually, students achieve good grades if they are clear about what they need to do to achieve a good grade, they work very hard, and they organize their time effectively.

Please feel free to come to me during the semester if you have any concerns or questions about how to achieve the best possible grade in my course. It is not much help to come to me after you have received your grade and ask me to explain why you earned the grade you did. The instructions for each assignment are clearly explained and you are told in advance how your grade will be determined for each assignment.

COURSE POLICIES

A detailed handout on course policies is posted in the course on Blackboard.

ACADEMIC INTEGRITY

I have high expectations of my students and that includes academic honesty and integrity. Academic dishonesty of any sort will not be tolerated and will result in a zero grade. Academic dishonesty includes, but is not limited to, cheating, plagiarizing, fabricating information or citations, facilitating acts of academic dishonesty by others, submitting work of another person or papers written for other courses, or tampering with the academic work of other students. Students may be asked to submit their notes and references to prove that their work is their own. Please refer to the handouts below for the College Policy on Academic Integrity:

[CUNY policy on academic integrity.pdf](#)

[College Policies and Procedures for Academic Integrity.pdf](#)

ACCOMMODATING STUDENTS WITH DISABILITIES

Lehman College is committed to providing access to all programs and curricula to all students. Students with disabilities who may need classroom accommodations are encouraged to register with the Office of Student Disability Services. For more information, please contact the Office of Student Disability Services, Shuster Hall, Room 238, phone number, 718-960-8441.

THE ACADEMIC CENTER FOR EXCELLENCE (ACE) AND THE SCIENCE LEARNING CENTER (SLC)

Lehman College has two tutoring centers on campus. The ACE provides appointment-based and drop-in tutoring in the humanities, social sciences and writing, as well as general writing skills. The SLC provides drop-in tutoring for natural and computer science courses. To obtain more information about the ACE and SLC, please visit their website at <http://www.lehman.edu/issp>, or please call the ACE at 718-960-8175, and the SLC at 718-960-7707.

DESCRIPTION OF COURSE REQUIREMENTS

(Detailed information about each requirement including instructions are posted in the course on Blackboard)

1) SELF-AWARENESS PAPER (20 points)

[AAHE: I. C; VIII. D] [CRD 2.4, 2.5, 2.11, 3.2]

Deadline: 10pm on February 18, 2016

2) DISCUSSION BOARD ASSIGNMENT (20 points)

[AAHE: I.A; I.C; I.D; I.E; I.F; VIII. B; VII. D] [CRD 2.5, 3.2]

Deadlines (all by 10pm):

Forum 1:

Feb 21: Posted first message

Feb 25: Posted response to classmate

Forum 2:

Feb 29: Posted first message

March 4: Posted response to classmate

Forum 3:

March 7: Posted a first message

March 11: Posted response to classmate

3) BEHAVIOR CHANGE PROJECT (15 points)

[AAHE: I. A; II.A; II.B; II.C; III,D; IV.A; IV.D; V.E; VIII. D] [CRD 2.5, 2.13, 3.1c]

Deadline: 10pm on April 10, 2016

4) INTERVIEW WITH A PROFESSIONAL COUNSELOR (20 points)

[AAHE: VII D] [CRD 2.5, 2.10, 2.11, 3.2]

Deadline: 10pm on May 14, 2016

5) FINAL EXAM (25 points)

[AAHE: I.A-F; VII.D; VIII.B; VIII. D] [CRD 2.2, 2.4, 2.5, 2.7, 2.10, 2.11, 3.2]

Deadline: 10pm on May 21, 2016

6) EXTRA CREDIT ASSIGNMENT (3 points)

[AAHE: VII.A; VII.C; VIII.D] [CRD 2.5]

Deadline: 10pm on May 21, 2016

CLASS SCHEDULE

Week 1: Jan 29 - Feb 4

Topic: Welcome and overview of the course

To do:

- 1) Read attached notes
 - 2) Post a personal introduction by 10pm on January 29.
 - 3) Work on your Self-Awareness Paper
-

Week 2: Feb 5 - 11

Topic: Theories of Health Behavior

To do:

- 1) Read attached study materials.
 - 2) Work on your Self-Awareness Paper.
-

Week 3: Feb 12- 18

Topic: Theories of Health Behavior

To do:

- 1) Read attached study materials
 - 2) Submit your Self-Awareness Paper by 10pm on February 18
-

Week 4: Feb 19 - 25

Topic: Addictive Behaviors

To do:

- 1) Read chapters 1-8 from "*America Anonymous*" by Denizet-Lewis.
 - 2) Post a message in Forum 1 by 10pm on Feb 21
 - 3) Post response to classmate in Forum 1 by 10pm on Feb 25
-

Week 5: Feb 26 - March 4

Topic: Addictive Behaviors

To do:

- 1) Read chapters 9-16 from "*America Anonymous*" by Denizet-Lewis.
 - 2) Post a message in Forum 2 by 10pm on February 29
 - 3) Post response to classmate in Forum 2 by 10pm on March 4
-

Week 6: March 5 - 11

Topic: Addictive Behaviors

To do:

- 1) Read chapters 17-conclusion from "*America Anonymous*" by Denizet-Lewis.
 - 2) Post a message in Forum 3 by 10pm on March 7
 - 3) Post response to classmate in Forum 3 by 10pm on March 11
-

Week 7: March 12 - 18

Topics: Professional Ethics, Introduction to Counseling Theories

To do:

- 1) Read attached study materials.
 - 2) Work on your Behavior Change project.
-

Week 8: March 19 - 25

Topic: Motivational Interviewing

To do:

- 1) Read attached study materials
 - 2) Work on your Behavior Change project
-

Week 9: March 26 - April 3

Topic: Counseling Strategies

To do:

- 1) Read attached study materials
 - 2) Read chapters 1-3 from "The Elements of Counseling" by Meier & Davis.
 - 3) Work on your Behavior Change project
-

Week 10: April 4 - 10

Topic: Counseling Strategies

To do:

- 1) Read attached study materials
 - 2) Read chapters 4-6 from "Elements of Counseling"
 - 3) Submit your Behavior Change project by 10pm on April 10
-

Week 11: April 11 - 21

Topic: Counseling Strategies

To do:

- 1) Read chapters 1-6, 9, 11-12, 16, 20, 23, 25-27, 29-30 from "The Gift of Therapy"
 - 2) Work on Interview Project
-

Spring Break April 22 -30

No classes! Enjoy your Spring break!

Week 12: May 1 - 7

Topic: Counseling Strategies

To do:

- 1) Read chapters 36, 38, 40, 44, 46-47, 51, 53-55, 58, 63-65, 70-73 from "The Gift of Therapy"
 - 2) Work on Interview Project
-

Week 13: May 8 - 14

Topic: Facilitating groups

To do:

- 1) Read attached study materials
 - 2) Submit Interview Project by 10pm on May 14
-

Week 14: May 15 - 21

Topic: How to make referrals

To do:

- 1) Read attached notes.
- 2) Submit Final Exam (and Extra Credit) by 10pm on May 21

COURSE ENDS MAY 21, 2016

Lehman College
 Department of Health Sciences
 DFN 661 – Food Service Management
 Summer Session A/B- 2016

Course Plan

Course Description: In-depth treatment of foodservice operations, including:

Sanitation, foodservice planning, quality assurance, facility design, and equipment as well as facility management; menu planning; food purchasing, receiving and storage; production management; assembly, distribution, service; and marketing.

Credits: Credit hours 3

Instructor: Martine I. Scannavino, DHSc, RDN, LDN, FAND
martine.scannavino@lehman.cuny.edu
 610-606-4666, ext. 3486

Text: **Foodservice Organizations, a Managerial and Systems Approach** (9th edition) Mary B. Gregoire, 2016
 (8th ed. is acceptable ...Note: you will still be responsible for all new content presented in class from new edition).

Additional Required Resource

ProSim Restaurant Simulation Course Key WG2RK6
 Create a login and purchase the materials at
<https://prosim.knowledgematters.com/>

Foundation Knowledge and Competencies met:

A.N.D. Knowledge Requirements: Learning Outcomes	Course Learning Objectives	Assessment Methods
<i>This course will help you to:</i>	<i>After successfully completing this course, you are expected to be able to:</i>	<i>Competencies and learning objectives will be assessed as part of the following course assignments:</i>
CRD 2.3 Design, implement and evaluate presentations to a target audience and KR2 2.1 Students are able to demonstrate communication skills sufficient for entry level practice (use of effective and professional oral and written communication and documentation)	<ul style="list-style-type: none"> • Students will successfully present their menu project via online “webinar format” to a group of peers for review. 	<ul style="list-style-type: none"> • Menu Project • Menu Project Presentation “Webinar”

<p>CRD 2.1 Practice in compliance with current federal regulations and state statutes and rules, as applicable and in accordance with accreditation standards and the Scope of Dietetics Practice and Code of Ethics for the Profession of Dietetics</p> <p>and</p> <p>KRD 2.3 Understanding the governance of dietetics practice, such as the Scope of Practice and the Code of Ethics for the profession of Dietetics and interdisciplinary relationships in practice settings.</p>	<ul style="list-style-type: none"> • Students will successfully complete an Ethics scenario case study. 	<ul style="list-style-type: none"> • A.N.D. Ethics in Purchasing Case Study
<p>CRD 3.5 Coordinate procurement, production, distribution and service of goods and services.</p> <p>CRD 4.1 Participate in management of human resources</p> <p>CRD 4.6 Analyze quality, financial or productivity data and develop a plan for intervention.</p> <p>CRD 4.9 Analyze financial data to assess utilization of resources</p> <p>KRD 4.1 Students are able to apply management and business theories and business principles to deliver programs or services.</p>	<ul style="list-style-type: none"> • Students will successfully identify and apply appropriate management and business theories (i.e. TQM, QA, Systems Theory Model, CQI,) Levels of management , X –Y and Z theories management in a graded discussion reflecting to food foodservice and institutional issues • Students will successfully compete the Small Business Administration’s online education session How to Prepare a Business Plan and complete the post tutorial assessment. • Students will make appropriate facility management decisions regarding, staffing, equipment, layout design, menu pricing and options, financial management, marketing and purchasing by applying data and systems management principles through simulations 	<ul style="list-style-type: none"> • Discussion Board Postings: Total Quality Management, Menu Design, Purchasing Concepts, Management vs. Leadership, Decision Making. • SBA Tutorial certificate program. • Simulations: staffing, equipment, layout design, menu pricing and options, marketing, financial management and purchasing.
<p>KRD 4.2 Students are able to apply the principles of quality management of food</p>	<ul style="list-style-type: none"> • Students will successfully identify and discuss food 	<ul style="list-style-type: none"> • NYC DOHMH Food Handlers course or

<p>and nutrition services.</p>	<p>safety regulations, regulatory agencies and their role in the food system continuum.</p> <ul style="list-style-type: none"> • Students will successfully complete a budget simulation to demonstrate application of financial planning and cost control concepts. • Students will successfully use and apply customer satisfaction survey data to make decisions through food service simulations 	<p>Servsafe or equivalent</p> <ul style="list-style-type: none"> • Discussion Board: Food Safety Regulation • Simulation: Financial Statements and Budget • Simulations customer survey data.
<p>CRD 1.3 Justify programs, products, services and care using appropriate evidence or data</p> <p>CRD 3.6: Develop and evaluate recipes, formulas and menus for acceptability and affordability that accommodate the cultural diversity and health needs of various populations, groups and individuals.</p> <p>Support Knowledge: KRD 5.1: The food and food systems foundation of the dietetics profession must be evident in the curriculum. Course content must include the principles of food science and food systems, techniques of food preparation and application to the development, modification and evaluation of recipes, menus and food products acceptable to diverse groups.</p>	<ul style="list-style-type: none"> • Students will successfully develop nutritionally appropriate menus to support or promote health and address stage of life, diverse ethnic groups and varied lifestyle factors. • Students will successfully develop a modified menu to meet the dietary needs of a population. • Students will successfully perform nutrient analysis on menu items to determine adequacy of nutrient content for a varied. • Students will successfully support menu and nutrient choices for target population with appropriate evidence in current literature and practice guidelines. 	<ul style="list-style-type: none"> • operations menu development project, alternate menu options, and supporting nutrient analysis and evidence of need.

Competencies	Course Learning Objectives	Sessions
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<i>This course will help you to achieve the following competencies</i>	<i>After successfully completing this course you are expected to be able to:</i>	<i>Competencies and learning objectives will be addressed as part of the following course sessions:</i>
Apply of Facility Management principles	<p>Describe and apply the steps in planning and designing facilities.</p> <p>Demonstrate informed decision making in the selection of equipment.</p> <p>Select basic cooking and storage equipment.</p> <p>Describe a preventive maintenance program.</p>	4,5,6, & 8
Apply safety principles related to food, personnel and consumers	<p>Discuss cleaning and sanitation principles</p> <p>Describe how to keep pests out.</p> <p>Apply HACCP principles to develop a recipe flow chart.</p> <p>Define the process of food service safety and quality assurance audits.</p>	2, 5, & 8
Function as a multidisciplinary team member through the process of development of a menu for a specific population	Apply management and business theories and principles to the development, marketing and delivery of programs or services	All sessions
Manage and use resources in the provision of services to individuals and organizations.	Understand the importance of managerial functions: planning, organizing, staffing, leading, and controlling	1, 6, 9, 10, 11,12
Identify food delivery systems	<p>Discuss factors affecting choice of food delivery systems</p> <p>Explain and give examples of various styles of service</p> <p>Design a tool to get customer feedback and satisfaction level</p>	6,7, &13
Identify and apply Food and non-food procurement practices	<p>Discuss purchasing departments objectives, procedures, methods and market research methods</p> <p>Explain how food and non-</p>	5, 7

	<p>food items are distributed.</p> <p>Apply purchasing ethics</p>	
Identify and apply food production systems planning and protocols	<p>Apply menu-planning guidelines.</p> <p>List the objectives of food production.</p> <p>Compare and contrast different production systems</p> <p>Adjust /convert recipes</p> <p>Demonstrate how to use forecasting models, production sheets, and evaluation tools.</p> <p>Recognize ways to control food costs in production, including use of portion control guidelines</p>	3, 4, 6, & 12
Identify and apply food and Nutrition laws/regulations/policies	<p>Describe how the safety and wholesomeness of the US food supply is ensured through government safety and inspection programs</p> <p>Describe the governmental policies regulating food service</p>	3 & 8
Identify materials management procedures	List appropriate receiving, storage, and inventory management guidelines.	5
Identify and apply systems management theory	Apply systems theory to foodservice operation	1 & 2 (specifically) All sessions
Identify and apply marketing theories and techniques	<p>Discuss the marketing process, marketing cycle, marketing mix, marketing techniques and unique aspects of foodservice marketing.</p> <p>Compare and contrast marketing, merchandising, and sales promotion</p>	13

Course objectives:

1. Students will demonstrate competency in the following areas by assessing level of proficiency using key identifiers:
 - a. Facility Management
 - i. Describe and apply the steps in planning and designing facilities.
 - ii. Describe the factors affecting selection of equipment.
 - iii. Select basic cooking and storage equipment.
 - iv. Develop a preventive maintenance program.
 - b. Sanitation and safety
 - i. Apply cleaning and sanitation principles.
 - ii. Describe how to keep pests out.
 - iii. Apply HACCP principles to develop a recipe flow chart.
 - iv. Define the process of food service safety and quality assurance audits.
 - c. Food Delivery systems
 - i. Discuss factors affecting choice of food delivery systems
 - ii. Explain and give examples of various styles of service
 - iii. Design a tool to get customer feedback and satisfaction level.
 - d. Food and non-food procurement
 - i. Discuss purchasing departments objectives, procedures, methods and market research methods
 - ii. Explain how food and non-food items are distributed.
 - iii. Apply purchasing ethics.
 - e. Food Production systems
 - i. Apply menu-planning guidelines.
 - ii. List the objectives of food production.
 - iii. Compare and contrast different production systems
 - iv. Adjust /convert recipes
 - v. Discuss how to use forecasting models, production sheets, and evaluation tools.
 - vi. Recognize ways to control food costs in production, including use of portion control guidelines.
 - f. Food and Nutrition laws/regulations/policies
 - i. Describe how the safety and wholesomeness of the US food supply is ensured through government safety and inspection programs
 - ii. Describe the governmental policies regulating school food service.

- g. Materials management
 - i. List appropriate receiving, storage, and inventory management guidelines.
 - h. Systems theory
 - i. Apply systems theory to foodservice operation
 - i. Marketing theory and techniques
 - i. Apply the marketing process, marketing cycle, marketing mix, marketing techniques and unique aspects of foodservice marketing in a marketing simulation.
 - ii. Apply marketing, merchandising, and sales promotion concepts.
2. Students will have demonstrated the ability to:
- a. Use current information technologies
 - b. Work effectively as a member of a team
 - c. Calculate and interpret nutrient composition of foods
 - d.** Translate nutrition needs into food choices and menus for people of diverse cultures and religions
 - e. Determine recipe /formula proportions and modifications for volume food production
 - f. Write specifications for food and foodservice equipment
 - g. Apply marketing techniques

Teaching Methods

1. Asynchronous Lecture / teacher –centered discussion
2. Asynchronous Student – centered discussion
3. Case studies
4. Practice/skill rehearsal in simulations
5. Practical application in field experiences
6. Assignments involving researching, organizing information, and writing
7. Reading in textbooks, reference books, periodicals, newspapers, and journals

Work expected of the student

1. Students are expected to have read the assignments prior to assigned date and to actively participate in online discussion.
2. Students are responsible for all terms defined in the textbook.
3. **Written assignments must be word-processed and completed Using APA citations.** Spelling, punctuation and grammar will constitute part of the grade for written assignments.
4. Students are expected post assignments on time (late discussion postings will not receive credit)
5. Students are expected to be prepared with necessary materials for class.

Course Schedule

***All due dates close at 11:59PM on the date posted.**

***DB = Discussion Board**

Date/Session	Topic(s)	Assignments
Wednesday 6/1 Session 1	Introduction Food Service Industry a Systems Approach / Quality Management	Chapter 1 Quiz 1 closes Sat. 6/3 Personal bios DUE to Bios DB Sat. 6/3
Saturday 6/3 Session 2	Managing Quality	Chapter 2 Quiz 2 closes Mon. 6/6 Managing Quality DB due Mon. 6/6 Small Business Association: How to Write Business Plan Certificate – due Saturday 6/11
Monday 6/6 Session 3	Menu Planning	Chapter 3 Quiz 3 closes Wed. 6/8 Menu Planning Group Wikis Assignment due Sun. 7/10 Managing Quality DB Due Tonight Menu Design Simulation Completed by Sat. 6/11
Wednesday 6/8 Session 4	Product Flow & Kitchen Design	Chapter 4 Quiz 4 closes Sat.6/11 Menu Planning DB Due Tonight Layout Simulation Completed by Mon. 6/13
Saturday 6/11 Session 5	Procurement, receiving, storage and inventory control	Chapter 5 Quiz 5 closes Mon. 6/13 Menu Design Simulation Due Tonight

		<p>Purchasing Simulations due Sat. 6/18</p> <p>Small Business Association: How to Write Business Plan Certificate – due Saturday 6/11</p>
Monday 6/13 Session 6	Production	<p>Chapter 6</p> <p>Quiz 6 closes Wed. 6/15</p>
Wednesday 6/15 Session 7	Distribution & Service	<p>Chapter 7</p> <p>Quiz 7 closes Sat. 6/18</p> <p>Purchasing DB due 6/15</p>
Saturday 6/18 Session 8	Safety Sanitation and Maintenance	<p>Chapter 8</p> <p>Quiz 8 closes Mon. 6/20</p> <p>Midterm Chapters 1-7 Due Monday 2/20</p> <p>Safety and Sanitation DB Due Mon. 6/20</p>
Monday 6/20 Session 9	Management Principles	<p>Chapter 9</p> <p>Quiz 9 Closes Mon. 6/22</p> <p>Midterm Closes Tonight</p> <p>Safety and Sanitation DB Due Tonight Mon. 6/20</p> <p>Ethics Case Study due 6/27</p>
Wednesday 6/22 Session 10	Leadership and Organizational Change	<p>Chapter 10</p> <p>Quiz 10 closes Sat. 6/25</p> <p>Management vs Leadership DB due Sat. 6/25</p>
Saturday 6/25 Session 11	Decision Making, Communication and Balance	<p>Chapter 11</p> <p>Quiz 11 closes Monday. 6/27</p> <p>Decision Making DB due 6/29</p> <p>Management vs Leadership</p>

		DB due Tonight 6/25
Monday 6/27 Session 12	Management of Human Resources	Chapter 12 Quiz 12 closes Wed. 6/29 Staffing Simulation Due Saturday 7/2 Ethics Case Study due Tonight 6/27
Wednesday 6/29 Session 13	Management of Financial Resources	Chapter 13 Quiz 13 closes Sat. 7/2 Decision Making DB due 6/29 Financial Statements Simulations due Wed. 7/6 Menu Pricing Simulation due Saturday 7/10
Saturday 7/2 Session 14	Marketing	Chapter 14 Quiz 14 closes Mon. 7/4 Advertising Simulation Due Sat. 7/12 Staffing Simulation Due Tonight Saturday 7/2
Monday 7/4	Independence Day College Closed	Holiday
Wednesday 7/6 Session 15	Meals Satisfaction and Accountability	Chapter 15 Quiz 15 closes Sat. 7/9 Financial Statements Simulations due Tonight Wed. 7/6 Menu Engineering Simulation due 7/10
Sunday 7/10	Presentation Posted to your menu Wikis page	Menu Planning Group Wikis Assignment due tonight Sun. 7/10 Menu Engineering Simulation due 7/10
Friday 7/11 – Sunday 7/13	Comprehensive Final Exam Opens	Advertising Simulation Due Tonight Sat. 7/12
Tuesday 7/19	All grades due to Registrar	

Assignments:

NOTE: Unless the student has obtained approval from the course instructor for an extension of a due date prior to the due date, failure to complete an assignment by the due date will result in no credit for the work.

Discussion Board participation – (15 pts each) 90 pts

Discussion -

- All students are required to post to the 6 discussion board questions/topics.
- All discussion responses (when required) must be well thought and communicative. Providing feedback and demonstrating an understanding of the subject matter: “good posing” and “I agree” are not acceptable response postings. See Grading Rubric for discussion on the course page.

Please be sure to use complete and appropriate language and to cite and references all of your work using APA on the discussion board. Failure to cite and reference will result in no credit for the posting.

Quizzes 15 @ 10 pts – total 150 pts

There is a quiz for each chapter in the text. All quizzes must be completed before the deadline – no exceptions

Midterm – 50 pts

Final Exam – 50 pts

Case Study total 25 pts

There will be 1 case study on Ethics in Practice in this course. The case study is to be completed by each student. You must research the problem, prepare appropriate solutions to the case scenario, and post your solution to the assignment manager submission link by the due date.

SBA Certificate total 15 points

SBA How to write a Business Plan Certificate

Here are the links for the SBA Learning Center and Template How to write a business plan <https://www.sba.gov/tools/sba-learning-center/training/how-write-business-plan>

a. Be sure you save the certificate of completion to submit to the assignment manager.

Simulations: 8 @ 25 pts (200)

Menu Assignment: 110 points

Each group will be responsible for the following project:

You must use the group's Menu Project Wikis for development and Presentation of this project.
This will enable me to assess your participation.

Objectives:

1. Calculate and interpret nutrient composition of foods
2. Translate Nutrition needs into menus for individual groups
3. Determine recipe/formula proportions and modifications for volume food production
4. Modify recipe / formula for a specific group dietary need
5. Apply marketing principles

Procedures:

The menu project is a way for you to apply many of the principles taught in this course. You are expected to create a fictitious on-site foodservice concept (hospital, nursing home, assisted living, or school). Your facility census will be between 50 and 75 (50 regular/25 alt. menu). Your project will include the following components:

1. Background:
 - i. Organizational name, mission statement, and objectives, average client. (this information will define your menu)
2. Menu:
 - i. Develop a five day menu that reflects your organization mission and population served. Each day must have 3 meals all meals must include beverages. Lunch and dinner must also include appetizers and dessert.
 - ii. Provide one alternate choice **at each meal on Tuesday** for individuals with a special dietary need. (you must identify that dietary need, i.e. celiac disease and gluten free choice on the menu). This means there must be at least 2 entrée choices for each meal on Tuesday and alternate offerings for sides and dessert if appropriate.
3. Nutrient analysis
 - i. You must include a nutrient analysis for each item served on Tuesday's dinner. Nutrients to include: Pro, CHO and Fat (total, Saturated and Trans) and 5 micro nutrients that is of greatest concern to your target population (i.e. Seniors and B12). Include rationale for these choices in final project summary as well as current scientific findings to support your menu and populations nutrient needs (i.e. B12 deficiency can be considerably higher in adults populations aged 65 and older (Cuskelly, Mooney, & Young, 2007).
4. Recipes:
 - i. Research and present recipes that will serve 6-10 people for all of Tuesday's dinner items. Convert all recipes for all regular menu items to serve 50 and 25 portions

for all alternate menu items for Tuesday's dinner offerings. If you are using the same item for both (i.e. a vegetable side, it must yield 75 portions) Indicate source of recipe on each page. You must use the block recipe template found in the document section of the course.

5. HACCP Flow Chart
6. Specifications:
 - i. You will identify one recipe from Tuesday's dinner menu and write purchasing specifications for the ingredients.
 - ii. You will identify the type of equipment needed to produce this menu item and research and write the specifications for one large piece and one small ware needed to produce the recipe.
7. Presentation:
 - i. You must post a Power Point presentation of your project to the Menu Project WIKIS. The Power point must be narrated using some manner of voice-over/narration tool e.g. Power point Narrator function, JING, ect.... and have it open to comment and response by **July 10** . Everyone is responsible for making a thoughtful and constructive comment to each of the other groups via the feedback survey **no later than midnight July 13** . Failure to do so will result in a loss of 10 points for that required component.

Project Evaluation:

This project is worth 110 points:

<i>Background:</i>	<i>5 points</i>
<i>Menu:</i>	<i>20 points</i>
<i>HACCP</i>	<i>5 points</i>
<i>Specifications</i>	<i>15 points</i>
<i>Recipes</i>	<i>15 points</i>
<i>Nutrient analysis</i>	<i>25 points (with justifications and summary of adequacy)</i>
<i>Presentation PPT</i>	<i>25 points</i>

Menu project comments / Survey– 10 pts

Grade points

POINTS	GRADE
558+	A
540-557	A-
522-539	B+
498 – 521	B
480 – 497	B-
462 – 479	C+
438 – 461	C
420 – 437	C-
402 – 419	D+
360 – 401	D
Below 360	F

**DFN 7341 Concepts and Methods of Dietetics Practice (3 credits)
Fall 2014**

Instructor: Judith M. Porcari, MBA, MS, RD
Office Hours: by appointment only
Office Location:
Email: Judith.Porcari@lehman.cuny.edu (preferred method to reach me outside of class)
Tel. #:

Class Meeting Time and Location

Tues 6p-8:40p

All course materials are posted on Blackboard and may be downloaded at your convenience.

Pre-requisite and/or Co-requisite

Pre-requisites: DFN 730, Supervised PreProfessional Practice

Course Description

This course is designed to provide the dietetic intern with the professional skills and knowledge required for successful practice in dynamic organizations.

The course is:

- A hybrid: classroom time is supplemented weekly with self-directed learning activities that must be completed outside of classroom time.
- A development of critical thinking skills and the application of the nutrition knowledge and business skills.

Learning Objectives

By the end of the semester, you will be able to ...

- Understand the professionalism that will help you succeed
- Understand organizational structure and its influence on dietetic practice
- Present material related to dietetic practice and rotation experiences
- Develop a newsletter on current issues in nutrition

DI Program Competencies & Learning Outcomes

Upon completion of the DI seminar classes, graduates are able to:

4. **Scientific and Evidence Base of Practice: integration of scientific information and research into practice.**
 - a. CRD 1.1 Select indicators of program quality and/or customer service and measure achievement of objectives.
 - b. CRD 1.4: Evaluate emerging research for application in dietetics practice
 - c. CRD 1.5: Conduct research projects using appropriate research methods, ethical procedures and statistical analysis
5. **Professional Practice Expectations: beliefs, values, attitudes and behaviors for the professional dietitian level of practice.**
 - a. CRD 2.1: Practice in compliance with current federal regulations and state statutes and rules, as applicable and in accordance with accreditation standards and the Scope of Dietetics Practice and Code of Ethics for the Profession of Dietetics
 - b. CRD 2.3: Design, implement and evaluate presentations to a target audience

- c. CRD 2.6: Assign appropriate patient care activities to DTRs and/or support personnel as appropriate
 - d. CRD 2.7: Refer clients and patients to other professionals and services when needs are beyond individual scope of practice
 - e. CRD 2.9: Participate in professional and community organizations
 - f. CRD 2.10
 - g. CRD 2.12: Perform self assessment, develop goals and objectives and prepare a draft portfolio for professional development as defined by the Commission on Dietetics Registration
6. **Clinical and Customer Services: development and delivery of information, products and services to individuals, groups and populations**
- a. CRD 3.1: Perform the Nutrition Care Process (a through e below) and use standardized nutrition language for individuals, groups and populations of differing ages and health status, in a variety of settings
 - i. CRD 3.1a: Assess the nutritional status of individuals, groups and populations in a variety of settings where nutrition care is or can be delivered
 - ii. CRD 3.1b: Diagnose nutrition problems and create problem, etiology, signs and symptoms (PES) statements
 - iii. CRD 3.1c: Plan and implement nutrition interventions to include prioritizing the nutrition diagnosis, formulating a nutrition prescription, establishing goals and selecting and managing intervention
 - iv. CRD 3.1d: Monitor and evaluate problems, etiologies, signs, symptoms and the impact of interventions on the nutrition diagnosis
 - v. CRD 3.1.e: Complete documentation that follows professional guidelines, guidelines required by health care systems and guidelines required by the practice setting
 - b. CRD 3.2: Demonstrate effective communications skills for clinical and customer services in a variety of formats
 - c. CRD 3.3: Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management
 - d. CRD 3.4: Deliver respectful, science-based answers to consumer questions concerning emerging trends
 - e. CRD 3.6: Develop and evaluate recipes, formulas and menus for acceptability and affordability that accommodate the cultural diversity and health needs of various populations, groups and individuals
7. **Practice Management and Use of Resources: strategic application of principles of management and systems in the provision of services to individuals and organizations.**
- a. CRD 4.4: Conduct clinical and customer service quality management activities
 - b. CRD 4.5: Use current informatics technology to develop, store, retrieve and disseminate information and data

Teaching Methods and Learning Experiences:

1. Didactic learning is supported by the required readings and presentations.
2. A professional quality newsletter will be produced by each workgroup.
3. Group work and class discussion are the core of this course.

SCHEDULE OF CLASSES

Class	Date	Topic	Self directed learning activities	Assignment Due
1	Sep 1	Course overview		
2	Sept 8	TJC CMS NYS	http://www.jointcommission.org/ http://www.jointcommission.org/standards_information/npsqs.aspx http://www.strategiesfornursemanagers.com/cedetail/239940.cfm	http://ncpt.webauthor.com/encpt-tutorials Completed NCP certificates must be submitted via BlackBoard.
	Sep 15	NO CLASS		
	Sep 22	NO CLASS		
3	FRI Sep 25	Health Care Team; Referrals to RD		MNT Test 1
4	Oct 6	Patient/ Client Satisfaction	Press Ganey: http://www.pressganey.com/ Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS®): http://www.medicare.gov/hospitalcompare/Data/Overview.html?AspxAutoDetectCookieSupport=1	
5	Oct 13	RD Order Writing; Oral and written communication	https://owl.english.purdue.edu/owl/section/4/16/	
6	Oct 20	Electronic Health Records	http://www.healthit.gov/providers-professionals/faqs/what-health-it	Newsletter
7	Oct 27	Electronic Health Records		

Class	Date	Topic	Self directed learning activities	Assignment Due
8	Nov 3	Diet Office software	http://www.vstech.com/hospital-food-service/menus-room-service.php http://www.computrition.com/Products/Hospitality-Suite.aspx https://www.cbord.com/ http://www.dfmsoft.com/ http://www.dietarymanagementsoftware.com/	Comparison of available products
9	Nov 10	Organizational structure	http://www.medscape.com/viewarticle/568115 This is an eight (8) page article that will be discussed in class. http://smallbusiness.chron.com/organizational-structure-hospitals-3811.html https://faculty.unlv.edu/ccochran/hca400/HCA400_web/Org_structure.HTM	
10	Nov 17	Quality Improvement/ Nutrition Research	ANDHII: https://www.andhii.org/ https://www.youtube.com/watch?v=nl_48GJ4MmU Malnutrition Resource Center: http://malnutrition.andjrn.org/ Dietetics Practice-Based Research Network (DPBRN) via Academy website	

Class	Date	Topic	Self directed learning activities	Assignment Due
			http://www.criticalcarenutrition.com/index.php?option=com_content&view=article&id=146&Itemid=50	
11	Nov 24	Quality Improvement/ Nutrition Research		MNT Test 2
12	Dec 1	Nutrition Management – People skills	http://www.ashhra.org/toolkits/ae/employee_engagement.shtml#tools http://www.ashhra.org/toolkits/nr/performance_management.shtml#tools https://www.youtube.com/watch?v=c8_avX9miag https://www.youtube.com/watch?v=rVyJXnZEp2A	
15	Dec 8	Job Hunting	http://www.ashhra.org/toolkits/nr/recruitment_selection.shtml See “Resume Templates” in the Career Center of the AND website http://www.eatrightpro.org/resource/career/career-development/career-toolbox/resume-templates	
16	Dec 15	Final Project	Mock interviews	Resume and Cover letter

Recommended Resources

1. Nelms, M.N., Sucher, K., Lacey, K., & Roth, S.L. Nutrition Therapy & Pathophysiology, 2nd Ed., Belmont, CA: Wadsworth, Cengage Learning, 2011.
2. International Dietetics & Nutrition Terminology Reference Manual: Standardized Language for the Nutrition Care Process, 3rd Ed., 2010. Chicago: American Dietetic Association.
3. Standard dictionary of choice
 - a. Merriam Webster. Merriam Webster's Dictionary and Thesaurus. Springfield, MA: Merriam-Webster, Inc., 2007
 - b. Online option: Merriam-Webster's Online Dictionary (<http://www.merriam-webster.com/dictionary/>)
4. Medical dictionary of choice
 - a. Venes, D. (ed). Taber's Cyclopedic Medical Dictionary. Philadelphia PA: F. A. Davis Company. 2009
 - b. Online option: Merriam-Webster's Online Dictionary (<http://www.merriam-webster.com/dictionary/>)
5. Merck Manual
 - a. Beer, M., Porter, R., Jones, T. (ed.) The Merck Manual of Diagnosis and Therapy, 18th Edition. Hoboken NJ: John Wiley and Sons, Inc. 2006
 - b. Online option: The Merck Manuals Online Medical Library (<http://www.merck.com/mmpe/index.html>)
6. PubMed search engine
7. PubMed Health
 - a. Online option:
http://www.ncbi.nlm.nih.gov/pubmedhealth/s/tests_and_treatments/a/

The Lehman College Library has tools such as JAWS and Zoom Text that make books "readable" and thus accessible to users with disabilities. They offer software packages that read works aloud or that increase the size of text dramatically. These are available in the library and are accessible at all hours that the library is open.

Instructional Support Services Program/Tutoring

Arrangements for a tutor made by made by reaching:

The Instructional Support Services Program
Lehman College
Old Gym Building, Room 205
250 Bedford Park Blvd. West
Bronx, NY 10468
Tel. 718-960-8175
Fax: 718-960-7831

<http://www.lehman.edu/academics/instructional-support-services/faqs.php>

If I suggest that you make an appointment - please know that I have done so in the interests of helping you succeed in this class and in the workforce.

Blackboard

- ALL assignments must be submitted via Blackboard.
 - Assignments are due at the beginning of class on the assigned due date. Full credit will be granted if you submit the assignment on time.
 - Late submissions will be penalized. Late is defined as anytime after the beginning of the class on the assigned due date. Late assignments will be penalized at the rate of an additional one (1) point penalty every class period missed.
 - [Please keep copies of all assignments submitted electronically.](#)
- Administrative issues
 - Portal/Blackboard Username or Password Problems: contact the Lehman HELP DESK in the IT Center in Carman Hall (ext. 1111) or call off campus (718) 960-1111
 - Videos and up-to-date Blackboard status information: <http://www.lehman.edu/academics/blackboard/index.php>
 - Online Student Orientation: <http://www.lehman.cuny.edu/faculty/rwhittaker/oo/ooselect.html>

Assignments and Grading

Your work in this course will be graded on a straight scale. All assignments will receive a numeric grade.

Incorrectly spelled course content words (i.e., nutrition vocabulary) may be penalized at the rate of ¼ point per spelling error.

A+ = 97-100	B+, C+, D+ = 7-9
A = 93-96	B, C, D = 3-6
A- = 90-92	B-, C-, D-, = 0-2
F = below 60	

Component of the course grade	Points
Class participation	10
NCP Tutorials	10
MNT Test 1	20
Newsletter	20
Software comparison	10
MNT Test 2	20
Resume/ Cover letter	5
Mock job interview	5

Class Participation (10%)

All interns are expected to summarize the previous week's experiences at the beginning of each class. The presentation should be less than 5 minutes and contain highlights, two (2) positive items and two (2) opportunities for change with suggestions for change.

NCP Tutorials (10%)

The tutorials will guide your use of the Nutrition Care Process. A free certificate is available at the end of the sequence. A fee must be paid to obtain the certificate if you are not a member of the Academy of Nutrition and Dietetics.

MNT Test 1 (20%)

This objective test should be taken on line prior to Friday, September 25, 2015 at 6pm.

Newsletter (20%)

Each group will produce a professional quality newsletter. Topics for the newsletter focus will be determined during the second class. The newsletter will be a maximum of six (6) pages. A rubric is posted to guide preparation and explain the grading system.

Software Comparison (10%)

Each group will contribute to a final chart comparing diet office software products. We will develop the chart in class.

MNT Test 2 (20%)

This objective test should be taken on line prior to Tuesday, November 24, 2015 at 6pm.

Resume/ Cover Letter (5%)

Each individual will prepare a resume and cover letter for a staff clinical dietitian position.

Mock job interview (5%)

This exercise will be conducted in class.

Extra Credit

As a practical matter, providing one student with an extra credit opportunity is unfair to the entire class. Providing additional assignments to the entire class in order to accommodate one student is burdensome to the class. Therefore extra credit assignments will not be assigned.

I will be happy to suggest, upon request, additional resources for students to use to improve their understanding and therefore their grade on the next assignment.

Attendance Policy

Punctual attendance is expected. Please notify me, at the beginning of class, if it is necessary for you to leave class early. If you must leave early please choose a seat close to the door. Attendance and participation will influence your understanding of the course material. Group work in a constructive and collegial manner is expected.

Students who need accommodation for religious observances *not accommodated by the current schedule* should notify me by the second class period so that proper arrangements can be made.

Classroom Policies

- Use of cell phones or other wireless devices is not permitted. Cell phones must be turned off and put away. Any student noted to be texting during class will be penalized at the rate of 1 point per observation. These points will affect your final grade.
- Make-up exams will be available up to one week after the date of the original exam. A doctor's note or other appropriate documentation is required.
- Lateness is discouraged. Two seats by the door are to be left vacant during every class. If you are late, please take the seat close to the door so as to not interrupt the group whilst you look for a seat.
- Discrete food and beverage consumption *is* permitted during class. Healthy items only (just kidding....).

Accessibility

Please register with the Office of Student Disability Services in order to receive disability-related academic accommodations. Students who have a documented disability or suspect they may have a disability are invited to contact the Office of Student Disability Services located in Shuster Hall, Room 238. Students should be prepared to discuss the nature of the disability, the impact on learning, and the accommodations needed to help you meet your academic goals. Please contact (718) 960-8441 to schedule an appointment.

Please provide me with the course accommodation form, provided by the Center for Student Disability Service, so that we may make proper arrangements.

Academic Integrity

The goals of higher education can be effectively met in an environment free from cheating and plagiarism. The faculty and staff of Lehman College espouse and are obligated to support policies that prohibit and provide consequences for academic dishonesty. Individual students are responsible for being aware of, and avoiding, both cheating and plagiarism. The complete text of the CUNY Academic Integrity Policy and the Brooklyn College procedure for implementing the Lehman College of the City University of New York

Department of Health Sciences

Lehman College of the City University of New York
Department of Health Sciences

**DFN 731-H81[70550] Concepts and Methods of Dietetics Practice (3 credits)
Spring 2016**

Instructor: Judith M. Porcari, MBA, MS, RD
Office Hours: by appointment only
Office Location:
Email: Judith.Porcari@lehman.cuny.edu (preferred method to reach me outside of class)
Tel. #: 631-513-6896

Class Meeting Time and Location

Tues 6p-8:40p

All course materials are posted on Blackboard and may be downloaded at your convenience.

Pre-requisite and/or Co-requisite

Pre-requisites: DFN 730, Supervised PreProfessional Practice

Course Description

This course is designed to provide the dietetic intern with the professional skills and knowledge required for successful practice in dynamic organizations.

The course is:

- A hybrid: classroom time is supplemented weekly with self-directed learning activities that must be completed outside of classroom time.
- A development of critical thinking skills and the application of the nutrition knowledge and business skills.

Learning Objectives

By the end of the semester, you will be able to ...

- Understand the professionalism that will help you succeed
- Understand organizational structure and its influence on dietetic practice
- Present material related to dietetic practice and rotation experiences
- Discuss career path options

DI Program Competencies & Learning Outcomes

Upon completion of the DI seminar classes, graduates are able to:

8. **Scientific and Evidence Base of Practice: integration of scientific information and research into practice.**
 - a. CRD 1.1 Select indicators of program quality and/or customer service and measure achievement of objectives.
 - b. CRD 1.3 Justify programs, products, services and care using appropriate evidence or data
 - c. CRD 1.4: Evaluate emerging research for application in dietetics practice
 - d. CRD 1.5: Conduct research projects using appropriate research methods, ethical procedures and statistical analysis
9. **Professional Practice Expectations: beliefs, values, attitudes and behaviors for the professional dietitian level of practice.**

- a. CRD 2.1: Practice in compliance with current federal regulations and state statutes and rules, as applicable and in accordance with accreditation standards and the Scope of Dietetics Practice and Code of Ethics for the Profession of Dietetics
- b. CRD 2.3: Design, implement and evaluate presentations to a target audience
- c. CRD 2.6: Assign appropriate patient care activities to DTRs and/or support personnel as appropriate
- d. CRD 2.7: Refer clients and patients to other professionals and services when needs are beyond individual scope of practice
- e. CRD 2.9: Participate in professional and community organizations
- f. CRD 2.10 Establish collaborative relationships with other health professionals and support personnel to deliver effective nutrition services.
- g. CRD 2.12: Perform self-assessment, develop goals and objectives and prepare a draft portfolio for professional development as defined by the Commission on Dietetics Registration

10. Clinical and Customer Services: development and delivery of information, products and services to individuals, groups and populations

- a. CRD 3.1: Perform the Nutrition Care Process (a through e below) and use standardized nutrition language for individuals, groups and populations of differing ages and health status, in a variety of settings
 - i. CRD 3.1a: Assess the nutritional status of individuals, groups and populations in a variety of settings where nutrition care is or can be delivered
 - ii. CRD 3.1b: Diagnose nutrition problems and create problem, etiology, signs and symptoms (PES) statements
 - iii. CRD 3.1c: Plan and implement nutrition interventions to include prioritizing the nutrition diagnosis, formulating a nutrition prescription, establishing goals and selecting and managing intervention
 - iv. CRD 3.1d: Monitor and evaluate problems, etiologies, signs, symptoms and the impact of interventions on the nutrition diagnosis
 - v. CRD 3.1.e: Complete documentation that follows professional guidelines, guidelines required by health care systems and guidelines required by the practice setting
- b. CRD 3.2: Demonstrate effective communications skills for clinical and customer services in a variety of formats
- c. CRD 3.3: Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management
- d. CRD 3.4: Deliver respectful, science-based answers to consumer questions concerning emerging trends
- e. CRD 3.6: Develop and evaluate recipes, formulas and menus for acceptability and affordability that accommodate the cultural diversity and health needs of various populations, groups and individuals

11. Practice Management and Use of Resources: strategic application of principles of management and systems in the provision of services to individuals and organizations.

- a. CRD 4.4: Conduct clinical and customer service quality management activities
- b. CRD 4.5: Use current informatics technology to develop, store, retrieve and disseminate information and data
- c. CRD 4.11 Code and bill for dietetic/nutrition services to obtain reimbursement from public or private insurers.

Teaching Methods and Learning Experiences:

- 4. Didactic learning is supported by the required readings and presentations.
- 5. A professional quality newsletter will be produced by each workgroup.
- 6. Group work and class discussion are the core of this course.

SCHEDULE OF CLASSES

Class	Date	Topic	Class in session	Self directed learning activities	Assignment Due
				CRD 2.1	
1	Feb 2	Career Paths: Neonatal Nutrition	Yes	Rebecca Kaye, RD CNSC CRD 2.5, 2.7, 2.10, 4.11	
	Feb 9	Friday Schedule	No		
2	Feb 16	Career Paths: Patient Care Services	Yes	Ken Massie, MS RD http://www.conagrafoodscienceinstitute.com/recipe-resources.jsp CRD 2.5, 2.7, 2.10	Cultural Competency CE program due An Overview of Cultural Competency: Focusing on Cultural Awareness http://anhi.org/courses/3B044FCF38074784A3D273FC9551264B
3	Feb 23	Career Paths: Pharmaceutical Industry	Yes	Jennifer Taveras, RD Abbott Nutrition CRD 2.5, 2.7, 2.10, 3.4, 3.6	Online exam
4	Mar 1	Career Paths: Food Distribution	No	Field Trip: Fresh Direct OR Anita VonRunnen of US Foods CRD 2.5, 2.7, 2.9, 2.10, 3.4, 3.6	Attend
5	Mar 8	Career Paths: Retail Nutrition	Yes	ShopRite RD CRD 2.5, 2.7, 2.10, 3.4, 3.6	International Restaurant and Food Service Show of New York March 6, 2016 - March 8, 2016 http://www.internationalrestaurantny.com/Content/16.htm

Class	Date	Topic	Class in session	Self directed learning activities	Assignment Due
				CRD 2.1	
6	Mar 15	Journal Club	Yes	CRD 1.1, 1.3, 1.4, 1.5	Online exam
7	Mar 22	Journal Club	Yes	CRD 1.1, 1.3, 1.4, 1.5	
8	Mar 29	Career Paths: Private Practice	Yes	Tracy Stopler, MS, RD CRD 2.10, 2.12, 4.11	
9	Apr 5	Microbiome	No	The Secret World Inside You http://www.amnh.org/exhibitions/the-secret-world-inside-you Post Magazine https://anhi.org/login?ReturnUrl=/courses/my-courses/enroll-user/855016375FCF4DB5937BAFAF1D0A0D56 Inflammation as the Key Interface of the Medical and Nutrition Universes CRD 2.9	Attend
10	Apr 12	Career Paths: Food Supply	No	Field Trip: Stone Barns Farm https://www.stonebarnscenter.org/ CRD 2.9	Attend
11	Apr 19	Extended Care Nutrition and Completing MDS Sheets	Yes	Joy Licata, MS RD Director of Nutrition Parker Jewish Institute https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/MDS30RAI	Online exam

Class	Date	Topic	Class in session	Self directed learning activities	Assignment Due
				<p>CRD 2.1</p> <p>Manual.html</p> <p>http://www.aanac.org/docs/mds-3.0-rai-users-manual/11113_mds_3-0_chapter_1_v1-12.pdf?sfvrsn=6</p> <p>CRD , 2.5, 2.6, 2.7, 2.10, 3.4, 3.6</p>	
	Apr 26	SPRING BREAK	No		
12	May 2	Final Project	Yes	<p>MNT Case Study</p> <p>CRD 2.3, 2.6, 3.1 (a-e), 3.2, .3., 3.5, 3.5</p>	
13	May 9	Final Project	Yes	<p>MNT Case Study</p> <p>CRD 2.3, 2.6, 3.1 (a-e), 3.2, .3., 3.5, 3.5</p>	
14	May 16	Final Project	Yes	<p>MNT Case Study</p> <p>CRD 2.3, 2.6, 3.1 (a-e), 3.2, .3., 3.5, 3.5</p>	<p>May 19-21, 2016 New York State Academy of Nutrition and Dietetics Annual Meeting & Expo Tarrytown, New York www.eatrightny.org</p>

Recommended Resources

8. Nelms, M.N., Sucher, K., Lacey, K., & Roth, S.L. Nutrition Therapy & Pathophysiology, 2nd Ed., Belmont, CA: Wadsworth, Cengage Learning, 2011.
9. International Dietetics & Nutrition Terminology Reference Manual: Standardized Language for the Nutrition Care Process, 3rd Ed., 2010. Chicago: American Dietetic Association.
10. Standard dictionary of choice
 - a. Merriam Webster. Merriam Webster's Dictionary and Thesaurus. Springfield, MA: Merriam-Webster, Inc., 2007
 - b. Online option: Merriam-Webster's Online Dictionary (<http://www.merriam-webster.com/dictionary/>)
11. Medical dictionary of choice
 - a. Venes, D. (ed). Taber's Cyclopedic Medical Dictionary. Philadelphia PA: F. A. Davis Company. 2009
 - b. Online option: Merriam-Webster's Online Dictionary (<http://www.merriam-webster.com/dictionary/>)
12. Merck Manual
 - a. Beer, M., Porter, R., Jones, T. (ed.) The Merck Manual of Diagnosis and Therapy, 18th Edition. Hoboken NJ: John Wiley and Sons, Inc. 2006
 - b. Online option: The Merck Manuals Online Medical Library (<http://www.merck.com/mmpe/index.html>)
13. PubMed search engine
14. PubMed Health
 - a. Online option:
http://www.ncbi.nlm.nih.gov/pubmedhealth/s/tests_and_treatments/a/

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Instructional Support Services Program/Tutoring

Arrangements for a tutor made by made by reaching:

The Instructional Support Services Program
Lehman College
Old Gym Building, Room 205
250 Bedford Park Blvd. West
Bronx, NY 10468
Tel. 718-960-8175
Fax: 718-960-7831

<http://www.lehman.edu/academics/instructional-support-services/faqs.php>

If I suggest that you make an appointment - please know that I have done so in the interests of helping you succeed in this class and in the workforce.

Blackboard

- ALL assignments must be submitted via Blackboard.
 - Assignments are due at the beginning of class on the assigned due date. Full credit will be granted if you submit the assignment on time.
 - Late submissions will be penalized. Late is defined as anytime after the beginning of the class on the assigned due date. Late assignments will be penalized at the rate of an additional one (1) point penalty every class period missed.
 - [Please keep copies of all assignments submitted electronically.](#)
- Administrative issues
 - Portal/Blackboard Username or Password Problems: contact the Lehman HELP DESK in the IT Center in Carman Hall (ext. 1111) or call off campus (718) 960-1111
 - Videos and up-to-date Blackboard status information: <http://www.lehman.edu/academics/blackboard/index.php>
 - Online Student Orientation: <http://www.lehman.cuny.edu/faculty/rwhittaker/oo/ooselect.html>

Assignments and Grading

Your work in this course will be graded on a straight scale. All assignments will receive a numeric grade.

Incorrectly spelled course content words (i.e., nutrition vocabulary) may be penalized at the rate of ¼ point per spelling error.

A+ = 97-100	B+, C+, D+ = 7-9
A = 93-96	B, C, D = 3-6
A- = 90-92	B-, C-, D-, = 0-2
F = below 60	

Component of the course grade	Points
Class participation	5
Online Exam 1	15
An Overview of Cultural Competency: Focusing on Cultural Awareness	5
Fresh Direct	5
Journal Club	10
Online Exam 2	15
Microbiome at the Museum of Natural History	5
Stone Barns	5
Online Exam 3	15
MNT Case Study	20

Class Participation (5%)

All interns are expected to summarize the previous week's experiences at the beginning of each class. The presentation should be less than 5 minutes and contain highlights, two (2) positive items and two (2) opportunities for change with suggestions for change.

An Overview of Cultural Competency: Focusing on Cultural Awareness (5%)

Complete the continuing education program.

Journal Club (10%)

An article from a referred journal will be abstracted and presented to the group. A grading rubric will be posted.

Online Exams (45%)

The exams are given as preparation for the RD exam. More details to follow.

Fresh Direct, Stone Barns Farm, Microbiome at the Museum of Natural History (15%)

Attendance is expected. Details to follow.

MNT Case Study (20%)

Case study developed during clinical rotation will be presented to the group. A grading rubric will be posted.

Extra Credit

As a practical matter, providing one student with an extra credit opportunity is unfair to the entire class. Providing additional assignments to the entire class in order to accommodate one student is burdensome to the class. Therefore extra credit assignments will not be assigned.

I will be happy to suggest, upon request, additional resources for students to use to improve their understanding and therefore their grade on the next assignment.

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From the student handbook:

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disability, the impact on learning, and the accommodations needed to help you meet your academic goals. Please contact (718) 960-8441 to schedule an appointment.

Please provide me with the course accommodation form, provided by the Center for Student Disability Service, so that we may make proper arrangements.

The Academic Center for Excellence (ACE) and the Science Learning Center (SLC)

The Academic Center for Excellence (ACE) and the Science Learning Center (SLC) are two of the tutoring centers on campus. The ACE provides appointment-based and drop-in tutoring in the humanities, social sciences, and writing, as well as general writing and academic skills workshops. The SLC provides drop-in tutoring for natural science courses. To obtain more information about the ACE and the SLC, please visit their website at <http://www.lehman.edu/issp>, or please call the ACE at 718-960-8175, and the SLC at 718-960-7707.

Academic Integrity

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Professional Development

This is a graduate course. As such, behaviors that demonstrate your transition to a professional are expected. These include

- Punctual attendance.
 - Tardiness demonstrates inappropriate time management skills and is disruptive to the classroom.
 - If you are late please come in the classroom quietly, with all that you need already out, and sit in the seat nearest to the door;
- Preparedness.
 - Bring your syllabus to every class; know what is assigned for that day and be prepared to intelligently discuss the readings for that day;
 - Hand in assignments at the beginning of class on the date they are due;
 - Avoid asking questions that are already answered in the syllabus or reading assignments
- Appropriate oral communication skills.
 - Raise your hand and wait to be acknowledged before speaking
 - Avoid using “fillers” such as “like”, “mmm”, “okay, so”
 - Use nonjudgmental responses when responding to a fellow classmate
- Appropriate written communication skills.
 - Correctly spell *all* words including medical terminology and nutrition-related words
 - Use proper grammar
- Collaborative and collegial work in small groups
- Gracious acceptance of constructive criticism
- Connection to the profession
 - Become a student member of the AND
 - Bring in journal articles on one or more topics to share with the class
 - Attend a professional conference

Career opportunities

Please **subscribe to NY_RD News**. *This weekly electronic posting of nutrition-related positions (located primarily in the New York metropolitan area) will help you understand the job market. Often, opportunities for student are listed. To subscribe, send an e-mail message (e.g., **Subscribe to NY_RD News**) to NY_RD_News-subscribe@yahoogroups.com* This weekly posting is managed by Kyle Shadix, CCC, MS, RD, New York, NY and includes full-time as well as part-time positions.

Summer 2016 DFN 731 H01N [10692] – Concepts and Methods of Dietetics Practice, 3 hours, 3 credits

Mondays, 5:00pm-8:30pm, June 6 to August 15, Gillet 418

Lehman College, CUNY, 250 Bedford Park Boulevard West, Bronx, NY 10468-1589

Instructor: Marina Stopler, MS, RD, IBCLC

Office: Gillet, Room 432

Office Hours: By appointment

Email: marina.stopler@lehman.cuny.edu;

Office telephone: 718-960-6713

Cell phone: 914:523-2806

Health Sciences Department Phone #: 718-960-8775

Course Description

This course is designed to provide the dietetic intern with the professional skills and knowledge required for successful practice in dynamic organizations.

Co-requisite: DFN 730: Supervised Pre-Professional Practice

The course is:

- A hybrid: classroom time is supplemented weekly with self-directed learning activities that must be completed outside of classroom time.
- A development of critical thinking skills and the application of the nutrition knowledge and business skills.

Course Learning Objectives:

By the end of the semester, you will be able to:

- Understand the requirements for the Registered Examination for Registered Dietitians (RD Exam)
- Present material related to dietetic practice and rotation experiences
- Explore programs and organizations which offer nutrition education and health-related nutrition information.
- Utilize web-based resource for practice exam to feel more confident in taking the RD exam

1. Internet access. All of the information for this class will be posted on CUNY Blackboard

2. Pre-exit meeting: All interns are scheduled for a pre-exit meeting at the beginning of each class

3. Participation:

- All interns are expected to summarize the previous week's experiences at the beginning of each class.
- The presentation should be less than 5 minutes and contain highlights, two (2) positive items and two (2) opportunities for change with suggestions for change.
- All interns are expected to participate in Q & A when guest speakers are present.

4. Presentations:

- Presentations of Research Studies
- Presentations of remaining MNT Case Studies
- Short Presentations of Community Educational Experience

5. Readings

- Complete assigned readings before the beginning of class

6. Exams and Quizzes:

- There will be online exams and in-class quizzes;
- Online exams include a Pre-test, Post-Test and Exit Exam
- Visual Veggies Practice exams

7. Attendance:

- Punctual attendance is expected. Please notify me, at the beginning of class, if it is necessary for you to leave class early. If you must leave early please choose a seat close to the door. Attendance and participation will influence your understanding of the course material. Group work in a constructive and collegial manner is expected.
- Students who need accommodation for religious observances *not accommodated by the current schedule* should notify me by the second class period so that proper arrangements can be made.
- *From the student handbook:* Students are expected to attend classes regularly, and instructors are required to record attendance for grading and counseling purposes. Individual instructors, as well as departments or degree programs, may establish specific attendance requirements. Instructors have the right to weigh attendance and class participation in determining grades. It is the student's responsibility to ascertain the effect attendance may have on the grade in a course. Students receiving financial aid must be certified as attending classes regularly for continuing eligibility.

8. Resources:

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International Dietetics & Nutrition Terminology Reference Manual: Standardized Language for the Nutrition Care Process, 3rd Ed., 2010. Chicago: American Dietetic Association.

Standard dictionary of choice

- Merriam Webster. Merriam Webster's Dictionary and Thesaurus. Springfield, MA: Merriam-Webster, Inc., 2007
- Online option: Merriam-Webster's Online Dictionary (<http://www.merriam-webster.com/dictionary/>)

Medical dictionary of choice

- Venes, D. (ed). Taber's Cyclopedic Medical Dictionary. Philadelphia PA: F. A. Davis Company. 2009
- Online option: Merriam-Webster's Online Dictionary (<http://www.merriam-webster.com/dictionary/>)

Merck Manual

- Beer, M., Porter, R., Jones, T. (ed.) The Merck Manual of Diagnosis and Therapy, 18th Edition. Hoboken NJ: John Wiley and Sons, Inc. 2006
- Online option: The Merck Manuals Online Medical Library (<http://www.merck.com/mmpe/index.html>)

PubMed search engine

- PubMed Health
- Online option: http://www.ncbi.nlm.nih.gov/pubmedhealth/s/tests_and_treatments/a/

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DI Program Competencies and Learning Outcomes

Upon Completion of the DI Seminar classes, graduates will be able to:

1. Scientific and Evidence Base of Practice: integration of scientific information and research into practice

- CRD 1.1 Select indicators of program quality and/or customer service and measure achievement of objectives. (Note: *Outcomes may include clinical, programmatic, quality, productivity, economic or other outcomes in wellness, management, sports, clinical settings, etc.*)
- CRD 1.4: Evaluate emerging research for application in dietetics practice
- CRD 1.5: Conduct projects using appropriate research methods, ethical procedures and data analysis

2. Professional Practice Expectations: beliefs, values, attitudes and behaviors for the professional dietitian level of practice.

- CRD 2.1: Practice in compliance with current federal regulations and state statutes and rules, as applicable and in accordance with accreditation standards and the Scope of Dietetics Practice and Code of Ethics for the Profession of Dietetics
- CRD 2.3: Design, implement and evaluate presentations to a target audience
- CRD 2.5: Demonstrate active participation, teamwork and contributions in group settings
- CRD 2.6: Assign patient care activities to DTRs and/or support personnel as appropriate.
- CRD 2.7: Refer clients and patients to other professionals and services when needs are beyond individual scope of practice
- CRD 2.9: Participate in professional and community organizations
- CRD 2.10: Establish collaborative relationships with other health professionals and support personnel to deliver effective nutrition services.
- CRD 2.11: Demonstrate professional attributes within various organizational cultures
- CRD 2.12: Perform self-assessment, develop goals and objectives and prepare a draft portfolio for professional development as defined by the Commission on Dietetic Registration
- CRD 2.13: Demonstrate negotiation skills

3. Clinical and Customer Services: development and delivery of information, products and services to individuals, groups and populations

- CRD 3.1: Perform the Nutrition Care Process (a through e below) and use standardized nutrition language for individuals, groups and populations of differing ages and health status, in a variety of settings
 - CRD 3.1.a: Assess the nutritional status of individuals, groups and populations in a variety of settings where nutrition care is or can be delivered
 - CRD 3.1.b.:Diagnose nutrition problems and create problem, etiology, signs and symptoms (PES) statements
 - CRD 3.1.c: Plan and implement nutrition interventions to include prioritizing the nutrition diagnosis, formulating a nutrition prescription, establishing goals and selecting and managing intervention
 - CRD 3.1.d: Monitor and evaluate problems, etiologies, signs, symptoms and the impact of interventions on the nutrition diagnosis
 - CRD 3.1.e: Complete documentation that follows professional guidelines, guidelines required by health care systems and guidelines required by the practice setting
- CRD 3.2: Demonstrate effective communications skills for clinical and customer services in a variety of formats.
- CRD 3.3: Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management
- CRD 3.4: Deliver respectful, science-based answers to consumer questions concerning emerging trends

4. Practice Management and Use of Resources: strategic application of principles of management and systems in the provision of services to individuals and organizations

- CRD 4.4: Conduct clinical and customer service quality management activities
- CRD 4.5: Use current informatics technology to develop, store, retrieve and disseminate information and data

CRD 4.7: Propose and use procedures as appropriate to the practice setting to reduce waste and protect the environment

Teaching Methods and Learning Experiences:

7. Didactic learning is supported by the required readings and presentations.
8. Group work and class discussion are the core of this course.

Accommodating Disabilities:

Lehman College is committed to providing access to all programs and curricula to all students. Students with disabilities who may need classroom accommodation are encouraged to register with the Office of Disability Services. For more information, please contact the Office of Student Disability Services, Shuster Hall, Room 238, 718-960-9441.

The Academic Center of Excellence (ACE) and the Science Learning Center (SLC):

Lehman College has two tutoring centers on campus. The ACE provides appointment based and drop-in tutoring in the humanities, social sciences, and writing, as well as general writing skills and test preparation workshops for the CPE. The SLC provides drop-in tutoring for natural and computer science courses. To obtain more information about the ACE and the SLC, please visit their website at <http://www.edu/issp>, or please call the ACE at 718-960-8175, and the SLC at 718-960-7707.

Academic Integrity and Plagiarism Policy:

Statement may be found in the student handbook. For more information refer to <http://www.lehman.cuny.edu/student-affairs/documents/student-handbook-02.pdf>.

Instructional Support Services Program/Tutoring

Arrangements for a tutor made by made by reaching:

The Instructional Support Services Program
Lehman College

Old Gym Building, Room 205; Tel. 718-960-8175, Fax: 718-960-7831

<http://www.lehman.edu/academics/instructional-support-services/faqs.php>

Grade Determination:

Pre-test/Post test: 10%

Quizzes: 5%

Online Exams: 15%

Presentations:

Public School: 10%

Research: 20%

Visual Veggies: 20%

Exit Exam 20%

Grading:

A = 93.0+, A- = 90-92.9, B+ = 87-89.9, B = 83-86.9, B- = 80-82.9, C+ = 77-79.9, C = 73-76.9, C- = 70-72.9, F = below 60

**Class Schedule and Assignments – Summer 2016 – Hybrid
May be modified at instructors discretion**

Class dates:
June 6

Topics of the day:
CDR RD Handbook
RD Exam Guides
Visual Veggies

Resources:
www.cdrnet.org
www.eatright.org

Pretest: Will be available until June 13, 4pm

June 13 Film: Food for Thought www.foodforthoughtfilm.com
Food for Life www.stonebarnscenter.org
Review of NYSAND Conference
Quiz #1: Food Science and Nutrition Composition of Foods
Visual Veggies

June 20 Public School Presentations:
Quiz #2: Education and Communication
Visual Veggies

June 27 Research Presentations:
Quiz #3: Research and Design, Management Concepts, Nutrition and Support Services
Visual Veggies

Week of July 4 **Visual Veggies**
Online Exam A: Domain II Nutrition Care for Individuals and Groups: Will be available until July 11, 4pm

July 11 Research Presentations:
Visual Veggies
Online Exam B: Domain III Management of Food and Nutrition Programs and Services: available until July 18, 4pm

July 18 Case Study Presentations: PowerPoint, 30 minutes each
Visual Veggies
Online Exam C: Domain IV Food and Nutrition Systems: available until July 25, 4pm

July 25 Career Services Center: Resume workshop
Visual Veggies

August 1 Maternal Child Health/Lactation
World Breastfeeding Week www.waba.my.org
Baby-Friendly Hospital Initiative www.BFHLusa.org
www.ilca.org
Quiz #4: Nutrient and Energy Needs Throughout the Lifespan
Visual Veggies

August 8 **Visual Veggies:**
Post test: available until 11:59pm

August 15 **Visual Veggies**
Exit Exam: available until 11:59pm
CDR – completion of forms to take RD exam
Submit updated resumes
Exit Survey

Appendix 7 (a)

Clinical Case Study Guidelines

WRITTEN PAPER:

Objective: To enhance the learning process through critical evaluation of current practice. A literature review is required. The paper will allow the intern to gain in-depth knowledge of a specific area in medical nutrition therapy.

A patient of interest with one specific clinical condition will be selected, related to any aspect of medical nutrition therapy. The patient must be one with whom you have worked from the time of admission to the time of discharge and have had significant contact during the course of their hospitalization. You **must** be the one who performed the initial nutrition assessment and followed up on the care of the patient.

A literature review will be conducted, using an on-line service (e.g. Medline). All references must be current, published within the last 3 – 5 years if possible. A minimum of 10 peer-reviewed original articles should be used.

The paper should contain the following:

- Table of contents
- Abstract
- Introduction
- Review of the Literature
- Discussion of the Primary Condition
- Discussion of Medical Nutrition Therapy
- Presentation of the Patient
- Discussion of the Medical/Surgical Hospital Course
- Discussion of Nutritional Course
- Prognosis
- Summary
- Critical Comments
- Glossary of Relevant Medical Terminology
- Medication Bibliography
- References and any Appendices

Information about the food-drug interactions, laboratory and other test results, social and medical history etc. should be incorporated into the body of the paper in the appropriate section.

The **Introduction** should explain why you chose this particular area for the case study and what you wish to learn by studying it in more detail

The **Review of the Literature** will be a review of the current approaches to Medical Nutrition Therapy of the Primary Condition.

The **Discussion of the Primary Condition** will be an in-depth analysis of the medical condition of the patient.

The **Discussion of Medical Nutrition Therapy** will be an examination of the current recommendations for nutrition therapy for the condition.

The **Presentation of the Patient** should be a brief description of the patient with current diagnosis and duration of present condition, age, sex, race, family history etc. giving a "picture" of your patient.

The emphasis in the paper (and in the presentation) should be on the **Nutritional Course** and care given, needed, practiced, etc. and it must be complete and discussed in detail.

The **Summary** will bring the previous sections together and relate the patient's treatment with current recommendations.

The **Critical Comments** section is your opportunity to evaluate the situation and make any recommendations for improvement and/or confirm what you did for the patient. Be objective and ask questions: "Should I have done anything different?" "Started something sooner?" Please do not include subjective opinions and emotional reactions. This is not professional.

The paper is due on the day of the presentation. When the paper has been reviewed, please submit a corrected, hard copy for your file, if required.

Chapter 1928 -**ORAL PRESENTATION:**

Objective: To communicate to your peers the area and patient of interest in an interesting and appropriate manner in 20 minutes.

A Power point slide presentation is required. Remember, you will be undertaking an oral communication exercise.

Prepare the slides carefully. It should contain only salient points, the remainder you will present verbally. The slides should be legible and appropriately arranged. Take care choosing fussy backgrounds and colors, KIS!

Do not read your presentation verbatim, you should prepare the slides to act as a guide and then discuss the various points. You can use index cards etc. as a prompt/reminder.

Make a hard copy of your presentation, to be submitted with the paper and sufficient copies for your classmates. Half a grade point will be deducted from your final grade if you fail to do this on the day of the presentation.

Be creative!

Appendix 7 (b)

Clinical Case Study Outline

The following is the minimum information that you need to collect. Refer to the Case Study Guidelines. Remember, this is a guide.

- Biographical Information
 - a. Patient's Age/Sex
 - b. Nationality/Race – if relevant to condition
 - c. Socioeconomic Status
 - d. Family Status
- 2. Chief Complaint
 - a. Onset of present illness
 - b. Duration of present illness
 - c. Primary admission diagnosis
- 3. Date of Admission
- 4. Past Medical History (where relevant)
 - a. Past Medical History
 - Childhood/Adult illnesses
 - Injuries
 - Drug sensitivities & allergic reactions
 - b. Past Surgical History
- 5. Family Medical History (where relevant)
 - a. Health of Relatives
 - b. Cause of Death in Family
- 6. Social History (where relevant)
 - a. Family Responsibilities
 - b. Economic Conditions
 - c. Mental Stability
 - d. Occupation
 - e. Habits: Alcohol, Tobacco, Recreational Drugs
- 7. Previous History of Present Illness
- 8. Hospital Course
 - a. Diagnostic Tests
 - b. Course of Treatment
 - c. Complications
- 9. Nutrition Status
 - a. Past Diet History
 - b. Height/Weight
 - c. Nutritionally relevant labs

10. Nutrition Problems

11. Nutrition Assessment

a. Present Diet History

- Attitude and Appetite
- Modification of diet
- Special Considerations
- Feeding Problems
- Patient Reaction And Attitude To Diet

b. Object of Diet and Explanation

12. Results of Dietary Intervention and Explanation

a. Nutrition Care Plan: Suggestions and Education

b. Follow-up

c. Prognosis of Patient

Chapter 1929 -Appendix 10
Directions for School Nutrition Education Session: 20 hours

Interns are required to spend 20 hours of their Community Rotation in a school, delivering a nutrition education session to a class and observing meal service.

1. Interns will be assigned to a school and a grade level of their choice. Every endeavor will be made to accommodate the intern's preference but this cannot be guaranteed.
2. Principals may assign a staff member to be the "contact person" who will be informed of the name of the intern.
3. The intern will contact the contact person and arrange an appointment to visit the school and the teacher of their chosen class.
4. During the first visit, interns will undertake a nutrition education needs assessment, with the class if appropriate and the teachers, to ascertain the form and level of nutrition education required. The needs assessment will include the following:
 - a. Population demographics
 - b. Teacher's need
 - c. Class need
 - d. Prior to preparing the needs assessment, interns will arrange to be present in the lunchroom, at least once, to observe meal service.
5. The needs assessment will be posted on Blackboard no later than one week after the initial visit, and must be approved by DI Director.
6. Interns will then prepare a 30 minutes nutrition education lesson plan to be given to the class, which will be videoed. This should be:
 - a. Culturally and ethnically appropriate
 - b. Age appropriate
 - c. As interactive as possible, e.g. using foods, food preparation etc.
 - d. The lesson plan will include:
 - I. Detailed outline of activities
 - II. Time frame for each activity
 - III. An evaluation of student learning (e.g pre- test/post-test)
 - IV. List of materials to be used
 1. Bought in by intern
 2. Present in classroom.
7. The lesson plan will be posted on Blackboard no sooner than four weeks BEFORE the class is to be given, and must be approved by DI Director.
8. The report of the Nutrition Education class will be posted on Blackboard, no later than two weeks after the date of the education session.
9. A report will be prepared, reflecting the competencies and suggested activities in the Community Public Health: Schools section.
10. After the report is graded, a hard copy must be provided for the intern's file as well as details of the lesson plan.

Appendix 11
Wellness Newsletter

Interns are required to prepare a minimum of one article during the year to post on the Wellness Newsletter section of the DI Website.

13. A web page is available on the DI Web Site for the interns to be able to publish articles to the wellness newsletter.
14. Each intern will prepare and complete a minimum of one short article during the DI Program.
15. Each intern will choose a specific population (e.g. age, ethnic group or disease state) during the Community rotation section.
16. The population choice will be posted in a Forum on Discussion Board and must be approved by the DI Director.
17. A nutrition needs assessment will be performed to ascertain nutrition education needs for the population. This may be by direct observation, on line, experience, etc. The needs assessment will be submitted to the DI Director one month before the article is due.
18. A short (**one page, no more**) article will be prepared, in the intern's own words, addressing an aspect of the nutrition education needs.
 - a. The article should be concise, interesting and factually correct. All information should be cited and come from primary source (peer-reviewed journals, scholarly texts – internet publications unless they are from a source such as the American Diabetes Association or National Kidney Foundation are prohibited).
 - b. Sites such as Wikipedia should not be used as a primary source, they may contain incorrect information.
 - c. Internet links are permissible, as long as they link to an appropriate page(s).
19. The DI Director will evaluate the articles and post the completed article on the DI website.
 - a. Articles will be graded on logical layout of ideas/facts, clarity, message effectiveness, grammar and spelling.
20. Each intern will provide a hard copy of the articles to the DI Director for the intern's file.

Please remember that the article will be published on the DI Web Site. Thus it will be available for anyone navigating to the site to read. Therefore it is essential that you remember that you write like an article, not a term paper.

Tip: Read some nutrition newsletters before you start.

Appendix 12
Lehman College
Department Of Health Sciences Dietetic Internship Program

Directions for the Research Project: 150 hours

1. During the DI, interns will participate in or conduct a research project, based on the guidelines in the DFN 730: Dietetic Internship Supervised Practice curriculum No. IV for the Research Project.
2. On beginning the DI, all interns will complete the Collaborative Institutional Training Initiative (accessed at <http://www.cuny.edu/research/compliance/training-education.html>), in order to participate in human subjects research. Please go to the Research Compliance page, read CITI Training, go to the Instructions, register and complete the CITI RCR, Human Subjects Protection Basic Course and Conflict of Interest Modules. Please provide a hard copy of the certificate of completion, which will be placed in the interns' files.
3. Interns will either identify an area in which they are interested, or they will be assigned to a Health Sciences faculty member.
4. Interns will attend a lecture on research methods and statistical methods.
5. Interns will adhere to the following schedule:
 - a. First Part
 - i. A literature review will be prepared on the chosen area of interest, and a project proposal developed.
 - ii. Either a submission to the IRB will be prepared in conjunction with the PI of the project or the intern will learn the process of IRB application.
 - b. Second Part
 - i. Data will be collected from the designated population.
 - ii. The collected data will be analyzed using an appropriate software program.
 - iii. A paper will be prepared according to the format in the curriculum
 - c. Summer Semester
 - i. Each intern will give a 15-minute presentation of a summary of their project in an interesting and appropriate manner.

Appendix N

Standard 10: Learning activity summary of diseases, populations and diverse cultures, encountered in the program and use of the NCP Process

DFN 730: Dietetic Internship Supervised Practice

I. Medical Nutrition Therapy Rotation: 470 hours

To be completed in a minimum of 15 weeks at a minimum of 30 hours weekly.

Objectives	Suggested Experiences	Evaluation
<p>21. <i>Orientation to the Institution, Introductory Experiences (30 hours)</i> <i>The intern will be able to:</i></p> <ul style="list-style-type: none"> a. Explain the philosophy of the Nutrition Services Department. He/she will understand how the responsibilities of the clinical dietitian fit into the goals and philosophy of the Nutrition Services Department. b. Explain the importance of the patient confidentiality, and institutional accreditation and maintenance of standards. 	<ul style="list-style-type: none"> a. The intern tours the hospital b. The intern is introduced to the director of nutrition services, and dietetics staff. c. Director or RD preceptor explains the philosophy, goals and objectives of the hospital and dietary department. d. The intern reviews the hospital's table of organization. e. The intern reviews the dietary department's table of organization and the job descriptions of therapeutic dietitians and dietitian technicians. f. The intern reviews the dietary department's procedure manual and the hospital's diet manual. 	<p>The RD preceptor will evaluate the intern's knowledge of the Nutrition Services Department and facility organization.</p> <p>The RD preceptor will evaluate the intern's understanding of departmental policies and procedures.</p> <p>The RD preceptor will evaluate the intern's understanding of the patient confidentiality, and institutional accreditation and maintenance of standards.</p>

<p>a. <i>Orientation to the Nutrition Care Process (30 hours)</i> <i>The intern will be able to:</i></p> <ol style="list-style-type: none"> 1. Read a medical record and identify data that could indicate the possibility of a potential or actual nutrition problem. 2. Collect and evaluate nutrition assessment data to determine the potential or actual nutrition problem of a patient. 3. Identify a nutrition problem and formulate a nutrition diagnosis statement relating to that problem. 4. Develop an appropriate intervention to address the problem 	<ol style="list-style-type: none"> 1. The intern reviews medical records of assigned medical/surgical patients with RD assistance. 2. The intern discusses the techniques an RD uses when conducting a dietary interview with a patient. 3. The intern performs a nutrition screen using the standard hospital initial nutrition evaluation form to identify patients at risk. 4. The intern formulates a nutrition care plan using the Nutrition Care Process format. 	<p>The RD preceptor will evaluate the intern's ability to process medical records and provide feedback.</p> <p>The intern will provide a practice assessment, nutrition problem and intervention to the RD for review and feedback.</p>
<p>1. <i>General Medical Floor, Beginning Level Experience (30 hours)</i> <i>The intern will be able to:</i></p> <ul style="list-style-type: none"> • Assess the nutrition status of patients to identify potential or actual nutrition problems. • Plan nutrition care based on identified problems and needs. • Calculate prescribed diets and prepare appropriate meal plans and menus. • Review and modify available educational material to reflect patients': <ul style="list-style-type: none"> • Nutrients requirements • Medical status • Food preferences, lifestyle, economics, cultural & religious background. • Knowledge, educational background and learning capacity. • Counsel patients on therapeutic diets. • Communicate with members of the interdisciplinary team . • Coordinate nutrition care with the food service department. • Monitor the patients' understanding and compliance with the prescribed diet. 	<ol style="list-style-type: none"> 1. The intern interviews a medical/ surgical patient within 48 hours after hospital admission according to protocol, to obtain a diet history. 2. The intern performs a nutrition assessment on the patient using data obtained from the diet history, psychosocial information, anthropometric measurements, and laboratory tests to determine the patient's actual or potential nutrition problems and needs. 3. The intern reviews with the RD the processes used in formulating a nutrition problem in order to develop a care plan. 4. The intern reviews the procedure and format for documenting the nutrition care plan with the RD preceptor. 5. The intern develops a written care plan including a PES statement to develop interventions for each of the actual or potential problems identified during the nutrition assessment. 	<p>The RD preceptor will observe and provide feedback to the intern.</p> <p>The RD preceptor will review and appraise the nutrition care plan and provide the intern with feedback</p>

<p>1. <i>Cardiovascular Disease (30 hours)</i> <i>The intern will be able to:</i></p> <ol style="list-style-type: none"> 1. Explain how institutional care is integrated with other aspects of clinical care in cardiovascular disease within the health care institution. 2. Describe current recommendations for the nutrition assessment and management of patients with cardiovascular disease. 3. Assess the nutrition status of patients with cardiovascular disease to identify potential or actual nutrition problems. 4. Plan nutrition care based on identified problems and needs, according to current recommendations. 5. Calculate prescribed diets and prepare appropriate meal plans and menus. 6. Review and modify available educational material to reflect patients': <ul style="list-style-type: none"> • Nutrients requirements • Medical status • Food preferences, lifestyle, economics, cultural & religious background. • Knowledge, educational background and learning capacity. 7. Counsel patients on therapeutic diets appropriate for cardiovascular disease. 8. Communicate with members of the interdisciplinary team to facilitate integration of patient care. 9. Coordinate nutrition care with the food service department. 10. Monitor the patients' understanding and compliance with the prescribed diet. 	<ol style="list-style-type: none"> 1. The intern tours the CCU; the head nurse explains the purpose of and protocol on the unit. 2. The intern accompanies the RD on rounds and attends team meetings at which various disciplines discuss their care plans and their evaluation of individual patient's progress. 3. The intern completes a review of class notes and literature on the nutrition assessment and management of patients with hypertension, hyperlipidemia, atherosclerosis, ischemic heart disease, and congestive heart failure. 4. The intern interviews assigned patients and their family members, when possible, to obtain a diet history. 5. The intern analyzes the 3 day recall of assigned patients using computer software programs to obtain data on the nutrient composition of their diets especially in terms total fat, saturated fat, cholesterol, fiber, and carbohydrate, total calories and sodium content. 6. The intern performs a nutrition assessment on assigned cardiovascular patients using data obtained from the diet history, medical, history, anthropometric measurements and laboratory tests. 7. The intern identifies a nutrition problem, formulates a nutrition diagnosis statement, and prepares interventions for the assigned patients. 8. The intern develops diets that conform to National Cholesterol Education Program (NCEP) guidelines for the treatment of hyperlipidemia. 9. The intern develops a DASH diet for a patient with hypertension and one to promote reduction of edema in a patient with congestive heart failure. 10. The intern reviews the existing 	<p>The RD preceptor will observe and provide feedback to the intern.</p> <p>The intern will prepare a summary of diet therapy and food/medication interactions including but not limited to hypertension, hyperlipidemia, ischemic heart disease, and congestive heart disease and submits to the RD preceptor for review.</p> <p>The intern will submit an outline of assigned patients' nutrition problems and needs and the data used to identify these problems and needs to the RD preceptor for review.</p> <p>The intern will submit nutrition care plans including nutrition diagnosis to the RD preceptor for review, feedback and evaluation.</p> <p>The RD preceptor will review therapeutic diets recommended for assigned patients, observe at least one interview and provide feedback.</p> <p>The intern will prepare a study guide on cardiovascular disease for review in the DFN 731 seminar and other assignments allocated for submission to the D.I. Coordinator.</p> <p>The RD preceptor will evaluate the intern's ability to plan and provide nutrition care to patients with cardiovascular disease.</p>
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	<p>meets the needs of the patient.</p> <p>k. The intern counsels the assigned patients on the prescribed diets during hospitalization and prior to discharge.</p> <p>l. The intern presents a case study of the nutrition care plan on one assigned patient at an interdisciplinary team meeting.</p> <p>m. The intern observes the supervising RD monitoring of food service.</p> <p>n. The intern attends meal rounds during tray delivery to monitor portion control, tray quality and tray accuracy.</p> <p>o. The intern visits the patients on a periodic basis to discuss the patients concerns related to the diet and to reinforce concepts and techniques taught during counseling sessions.</p>	
<p>5. <i>Gastrointestinal Disease (30 hours)</i> <i>The intern will be able to:</i></p> <p>a. Explain how nutrition care is integrated with other aspects of the clinical management of the patient with gastrointestinal disease.</p> <p>b. Describe current recommendations for the nutrition assessment and management of the patient with various gastrointestinal diseases.</p> <p>c. Assess the nutrition status of patients with gastrointestinal disease and identify their potential or actual problems.</p> <p>d. Plan the nutrition care based on identified problems and needs.</p> <p>e. Calculate the prescribed diet and prepare meal plans and sample menus for meals and snacks.</p> <p>f. Review available educational material to be used to counsel the patient and modify these materials to reflect the patient's:</p> <p style="padding-left: 20px;">i. Nutrient requirements</p> <p style="padding-left: 20px;">ii. Medical status, including the</p>	<p>a. The intern accompanies the RD on rounds and attends team meet their care plans and comment on the patient's problems and progress.</p> <p>b. Reviews class notes and completes a review of the literature on nutrition assessment and management of the patient with achalasia and gastroesophageal reflux, peptic ulcer disease, dumping syndrome, malabsorption syndromes, and inflammatory bowel disease.</p> <p>c. The intern interviews assigned patients to obtain a diet history focusing on eating pattern, appetite and bowel habits.</p> <p>d. The intern performs a nutrition assessment on an assigned patient with a GI disorder using data obtained from the diet history, medical history, anthropometric measurements and laboratory findings.</p> <p>e. The intern identifies a nutrition problem, formulates a nutrition diagnosis statement and prepares written interventions for patients with at</p>	<p>The RD preceptor will observe and provide feedback to the intern.</p> <p>The intern will prepare a summary of diet therapy and food/medication interactions including but not limited to gastrointestinal reflux disease, gastric ulcer disease, diarrhea, constipation, dehydration, celiac disease and other malabsorption diseases, inflammatory bowel disease and submits to the RD preceptor for review.</p> <p>The intern will submit an outline of assigned patients' nutrition problems and needs and the data used to identify these problems and needs to the RD preceptor for review.</p> <p>The intern will submit nutrition care plans</p>

<ul style="list-style-type: none"> iii. physiological changes that have taken place in the structure and function of the GI tract that impairs the patient's ability to consume, absorb and utilize nutrients. iv. Food preferences, lifestyle, economics, cultural, religious background. v. Knowledge, educational background and learning capacity. g. Counsel GI patients on therapeutic diets. h. Communicate with members of the interdisciplinary team on a GI disorder. i. Coordinate nutrition care with the food service department. j. Monitor the patients' understanding and compliance with the prescribed diet. 	<ul style="list-style-type: none"> least two different GI disorders. f. The intern calculates diets so that nutrient composition, and foods allowed conform to current scientific information and clinical practice. g. The intern reviews the existing educational material on the unit, researches other sources for additional educational material, and then modifies and /or develops new material that meets the specific needs of the individual. h. The intern counsels assigned patients on the diet prescribed at regular intervals during hospitalization and prior to discharge. i. The intern presents one patient as a case study to an interdisciplinary team meeting focusing on the nutrition care plan. j. The intern observes the supervising RD monitoring food service. The intern attends meal rounds during tray delivery to monitor portion control, tray quality and accuracy. k. The intern visits the patient on a periodic basis to discuss the patient's concerns related to the diet and to reinforce concepts and techniques taught during the counseling sessions. The intern encourages the patient's input in designing individualized therapeutic diets using the selective menu to comply with the prescribed diet and to also reflect the patient's food preferences. The intern documents his/her impressions regarding the patient's understanding and compliance with the diet in the clinical dietitian's notes. 	<p>including nutrition diagnosis to the RD preceptor for review, feedback and evaluation.</p> <p>The RD preceptor will review therapeutic diets recommended for assigned patients, observe at least one interview and provide feedback.</p> <p>The intern will prepare a study guide on gastrointestinal disease for review in the DFN 731 seminar and other assignments allocated for submission to the D.I. Coordinator.</p> <p>The RD preceptor will evaluate the intern's ability to plan and provide nutrition care to patients with gastrointestinal disease.</p>
<p>6. <i>Diabetes Mellitus and Other Endocrine Disorders (60 hours)</i> <i>The intern will be able to:</i></p> <ul style="list-style-type: none"> a. Explain how nutrition care is integrated with other aspects of the clinical care of the patient with diabetes mellitus and other endocrine 	<ul style="list-style-type: none"> a. The intern accompanies the RD on rounds and attends team meetings at which various disciplines present their care plans and comment on the patient's problems and progress. b. Completes a review of the class notes and literature on the nutrition assessment of patients 	

<p>diseases.</p> <ul style="list-style-type: none"> b. Describe current recommendations for the nutrition assessment of patients with endocrine diseases such as parathyroid disease, thyroid disease, and adrenal corticoid disease, corticoid therapy and other endocrine problems as indicated by the patient population. c. Assess the nutrition status of Type 1 and Type 2 diabetic patients. d. Assess the nutrition status of overweight and obese patients e. Assess the nutrition status of a patient with an endocrine problem other than diabetes mellitus. f. Calculate the prescribed diet and prepare meal plans and sample menus for meals and snacks. g. Prepare educational materials for patients with DM or obesity: <ul style="list-style-type: none"> i. The type of diabetes/degree of obesity ii. Medical status iii. Hypoglycemic medication prescribed (dosage, time of administration, peak action). iv. Food preferences, lifestyle, economic, cultural, religious background. v. Knowledge, educational background and learning capacity. h. Counsel patients with DM Type 1 and Type 2, and obesity. i. Counsel patients with endocrine problems other than diabetes mellitus. j. Communicate with members of the interdisciplinary team to facilitate the integration of patient care. k. Coordinate nutrition care with the food service department. l. Teach the principles of self-management to diabetic patients. 	<ul style="list-style-type: none"> with diabetes mellitus and other endocrine disorders. c. The intern interviews assigned patients to obtain a diet history. If possible the intern also interviews a family member. d. The intern performs a computer analysis of patients diet for nutrient composition paying special attention to the intake of calories, total fat, saturated fat, cholesterol, total carbohydrates, fiber and protein. e. The intern performs a nutrition assessment of assigned patients using data from the diet history, medical history, drug history, anthropometric measurements and laboratory tests to identify actual and potential problems and needs. f. The intern identifies a nutrition problem, formulates a nutrition diagnosis statement for assigned patients. g. The intern formulates an intervention, including a diabetic diet conforming to the current guidelines for the management of diabetes mellitus. h. The intern reviews the existing educational material on the unit, researches other sources for additional educational material, and then modifies and /or develops new material that meets the specific needs of assigned patients. i. The intern observes the RD preceptor during counseling sessions with a type 1 and a type 2 diabetic patient. The interns counsels patients on: <ol style="list-style-type: none"> 1. Goals of diabetic management and how these goals are accomplished. 2. Exchange system or CHO counting 3. Principles and techniques involved in balancing food with exercise and hypoglycemic medications (when they are prescribed) 4. Principles involved in achieving and maintaining a reasonable weight 	
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<p>m. Monitor the patient's understanding and compliance with the therapeutic diet.</p>	<p>j. Intern provides nutrition counseling for a patient with an endocrine problem other than diabetes.</p> <p>k. The intern presents a case study of one assigned patient at an interdisciplinary meeting focusing on the nutrition care plan.</p> <p>l. The intern instructs and encourages diabetic patients to assume the responsibility for a meal plan coordinating a balanced diet, exercise and insulin and/or oral medications.</p> <p>m. The intern teaches the type 1 DM patient how to use blood glucose levels to manage food intake, insulin and exercise regimens.</p> <p>n. The intern teaches the type 2 DM patient how to lower blood glucose levels by weight management, using food intake and exercise regimens.</p> <p>o. The intern observes the supervising RD monitoring food service. The intern attends meal rounds during tray delivery to monitor portion control, tray quality and accuracy.</p> <p>p. The intern visits the patients on a periodic basis to discuss the patient's concerns related to their diet and to reinforce concepts and techniques taught in counseling sessions.</p> <p>q. The intern documents his/her impressions of the patient's understanding and compliance with the diet in the clinical dietitian's records.</p>	
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<p>7. <i>Renal Disease (60 hours)</i> <i>The intern will be able to:</i></p> <ol style="list-style-type: none"> a. Explain how nutrition care is integrated with other aspects of the clinical management of the patient with acute and chronic renal disease, especially in relation to medications and dialysis. b. Describe current recommendations for the nutrition assessment and management of patients with acute and chronic renal disease. c. Assess the nutrition status of patients with acute and chronic renal disease within 72 hours of admission or diagnosis (or according to facility's policy, whichever is earliest). d. Plan the nutrition care based on the identified problems and needs. e. Calculate prescribed diets and prepare appropriate meal plans and menus. f. Prepare education material designed to reflect the patient's: <ol style="list-style-type: none"> i. Nutrient requirements ii. Medical status and management iii. Food preferences, lifestyle, economic, cultural, religious background. iv. Knowledge, educational background and learning capacity. g. Counsels the patient on the prescribed diet. h. Communicate with members of the interdisciplinary team to facilitate the integration of patient care. i. Coordinate nutrition care with the food service department. j. Monitor the patient's understanding and compliance with the diet. k. Understand the importance of performing quality assurance of nutrition care of renal patients as mandated by accrediting agencies. 	<ol style="list-style-type: none"> a. The intern accompanies the renal RD on rounds and attends team meetings at which various disciplines present their care plans and comment on patient's problems and progress. b. Completes a review of class and literature on the nutrition assessment and management of the patients with acute and chronic renal failure. c. The intern interviews assigned patients with chronic renal disease, and if possible a family member, to obtain a diet history. d. The intern uses a computer to analyze patients' diet history for nutrient composition paying special attention to protein (HBV) and calorie intake as well as sodium, potassium, fluids, phosphorus, calcium, vitamin D, and water-soluble vitamins. e. The intern reviews the renal unit's goal laboratory values for dialysis patients and fluid weight gain and blood pressure control between dialysis sessions. f. The intern performs a nutrition assessment on assigned patients with chronic renal failure using diet history, medical history, anthropometric measurements and laboratory findings to identify actual and potential problems and needs. g. The intern prepares written nutrition care plans for the assigned patients with chronic renal disease including an assessment, nutrition diagnosis statement and intervention. The plan provides recommendations for the appropriate diet based on patient's food preferences. h. The intern reviews the existing educational material on the unit, researches other sources for additional educational material, and then modifies and /or develops new material that meets the specific needs of the assigned patient(s). i. The intern counsels the patient(s) on his/her prescribed diet at regular intervals during 	<p>The RD preceptor will observe and provide feedback to the intern.</p> <p>The intern will prepare a summary of diet therapy and food/medication interactions including but not limited to acute renal failure, nephrotic syndrome, chronic kidney disease Stages 1 to 5, hemodialysis and peritoneal dialysis and submits to the RD preceptor for review.</p> <p>The intern will submit an outline of assigned patients' nutrition problems and needs and the data used to identify these problems and needs to the RD preceptor for review.</p> <p>The intern will submit nutrition care plans including nutrition diagnosis to the RD preceptor for review, feedback and evaluation.</p> <p>The RD preceptor will review therapeutic diets recommended for assigned patients, observe at least one interview and provide feedback.</p> <p>The intern will prepare a study guide on renal disease for review in the DFN 731 seminar and other assignments allocated for submission to the D.I. Coordinator.</p> <p>The RD preceptor will evaluate the intern's ability to plan and provide nutrition care to patients with kidney disease.</p>
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	<p>hospitalization.</p> <p>j. The intern documents his/her impressions of the patient's understanding of the diet and ability to comply with the diet in the dietitian's notes.</p> <p>k. The intern presents a case study of one assigned patient at an interdisciplinary meeting focusing on the nutrition care plan.</p> <p>l. The intern interviews and counsels the assigned patient on a periodic basis to discuss the patient's concerns.</p> <p>m. The intern reviews the quality assurance manual for standards of care for renal patients.</p>	
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<p>8. <i>Oncology (20 hours)</i></p> <p><i>The intern will be able to:</i></p> <ol style="list-style-type: none"> a. Assess the nutrition status of oncology patients to identify patients at risk from PCM and other nutrition-related problems. b. Define goals for nutrition care in the nutrition care plan. c. Calculate prescribed diets and prepare appropriate meal plans and menus. d. Plan nutrition care and nutrition counseling. e. Monitor the patient's adherence to and tolerance of the prescribed nutrition regimen and determine whether modification in the care plan is required. f. Adjust the nutrition regimen where necessary. g. Communicate with members of the interdisciplinary team to facilitate the integration of patient care. i. Coordinate nutrition care with the food service department. j. Counsel the patient, care giver(s) and support network, including preparing them to assume responsibility for nutrition care at discharge. k. Monitor the patient's and support network's understanding and compliance with the nutrition regimen. 	<ol style="list-style-type: none"> a. The intern performs a nutrition screen on assigned patients to identify patients at nutrition risk. The screen will include an analysis of height, weight, non-voluntary weight loss, serum albumin, site and stage of tumor, cancer therapy given or planned and the effect of therapy on GI function and the patient's ability to tolerate oral intake. The screen will also include a brief interview with the patient or a family member to determine changes in appetite or eating patterns. b. The intern performs a complete assessment on assigned oncology patients at nutrition risk. c. The intern formulates a nutrition problem and diagnosis statement for the assigned patients based on but not limited to: <ol style="list-style-type: none"> 1. Weight status 2. Diet history, including appetite assessment, actual caloric intake, estimated caloric and nutrient intake food intolerances. 3. Medical history 4. Site and stage of tumor, cancer therapies and their effect on GI function and the patient's ability to tolerate oral intake. 5. Physical examination, physical symptoms associated with malnutrition. d. The intern completes a 3-day calorie count for one high-risk patient. e. The intern determines specific objectives for the nutrition intervention including the calculation of the ideal energy and protein intake for the assigned patients. f. The intern develops a nutrition care plan for the assigned oncology patients outlining plans for counseling the patient and/or significant others. g. The intern visits the patients on a regular basis to determine the patients' acceptance and tolerance of the nutrition regimen with the patient and/or the 	<p>The RD preceptor will observe and provide feedback to the intern.</p> <p>The intern will prepare a summary of diet therapy and food/medication interactions including but not limited to PCM and other nutrition-related problems and submits to the RD preceptor for review.</p> <p>The intern will submit an outline of assigned patients' nutrition problems and needs and the data used to identify these problems and needs to the RD preceptor for review.</p> <p>The intern will submit nutrition care plans including nutrition diagnosis to the RD preceptor for review, feedback and evaluation.</p> <p>The RD preceptor will review therapeutic diets recommended for assigned patients, observe at least one interview and provide feedback.</p> <p>The intern will prepare a study guide on oncology for review in the DFN 731 seminar and other assignments allocated for submission to the D.I. Coordinator.</p> <p>The RD preceptor will evaluate the intern's ability to plan and provide nutrition care to patients with malignant disease.</p>
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	<p>patient's family or a significant other. The intern maintains data on the patients' fluid and electrolyte balances to avoid dehydration.</p> <p>h. The intern presents a case study on an assigned patient at an interdisciplinary meeting. The case study focuses on the nutrition care plan.</p> <p>i. The intern prepares a 3-day calorie count based on clinical protocols. The intern requests the physician to change the diet order if indicated by the calorie count.</p> <p>j. The intern prepares educational material for the patient and family. The intern provides counseling at regular intervals during the hospitalization.</p> <p>k. The intern visits with the patient and family on a periodic basis to discuss concerns about diet and nutrition.</p>	
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<p>9. <i>HIV & AIDS (20 hours)</i> <i>The intern will be able to:</i></p> <ol style="list-style-type: none"> a. Explain how nutrition care is integrated with other aspects of the care of the patient with AIDS. b. Assess the nutrition status of AIDS patients and identify those at risk for an AIDS-related nutrition condition. c. Identify whether the patient has an acute or chronic AIDS-related condition and whether it is caused by the condition or treatment. d. Define goals for nutrition care in the nutrition care plan depending on whether the patient is suffering from PCM, wasting, or a chronic, medication-related condition. e. Calculate prescribed diets and prepare appropriate meal plans and menus. f. Monitor the patient's adherence to and tolerance of the nutrition regimen and determine whether the patient's response requires a modification in the nutrition care plan. g. Communicate with members of the interdisciplinary team to facilitate the integration of patient care. h. Coordinate nutrition care with the food service department. i. Adjusts the nutrition regimen where necessary. j. Outline a plan for ongoing monitoring of the patient's nutrition status, follow-up counseling and referral to other agencies for food and/or psychosocial support services. 	<ol style="list-style-type: none"> a. The intern reviews the current literature on the clinical management of the AIDS patient. b. The intern accompanies the RD on rounds and attends team meetings at which various disciplines discuss their care plans and evaluate the patients' progress. c. The intern performs a complete nutrition assessment on assigned AIDS patients noting: <ol style="list-style-type: none"> 1. Degree of malnutrition and wasting 2. Gastrointestinal manifestations and their effect on digestive and absorptive capacities. 3. Prescribed medications, their use and effect on nutrition status. 4. Presence of metabolic dysfunction, e.g. obesity, lipodystrophy. d. The intern visits the patient on a regular basis to determine the patient's adherence to and tolerance of the nutrition regimen with the patient and/or the patient's family and significant other. e. The intern presents a case study on an assigned patient at an interdisciplinary meeting. The case study focuses on the nutrition care plan. f. The intern performs a 3-day caloric count on one AIDS patient and modifies the nutrition regimen when necessary. g. The intern prepares educational material for the patient and family. The intern provides counseling at regular intervals during the hospitalization. 	<p>The RD preceptor will observe and provide feedback to the intern.</p> <p>The intern will prepare a summary of diet therapy and food/medication interactions including but not limited to weight loss/gain, electrolyte imbalance, PCM, lipodystrophy and opportunistic infections and submits to the RD preceptor for review.</p> <p>The intern will submit an outline of assigned patients' nutrition problems and needs and the data used to identify these problems and needs to the RD preceptor for review.</p> <p>The intern will submit nutrition care plans including nutrition diagnosis to the RD preceptor for review, feedback and evaluation.</p> <p>The RD preceptor will review therapeutic diets recommended for assigned patients, observe at least one interview and provide feedback.</p> <p>The intern will prepare a study guide on HIV/AIDS for review in the DFN 731 seminar and other assignments allocated for submission to the D.I. Coordinator.</p> <p>The RD preceptor will evaluate the intern's ability to plan and provide nutrition care to patients with HIV/AIDS.</p>
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<p>10. <i>Pediatrics (20 hours)</i> <i>The intern will be able to:</i></p> <ol style="list-style-type: none"> a. Explain how nutrition care is integrated with other aspects of the clinical care of the pediatric patient. b. Describe current recommendations for the nutrition assessment and management of Failure to Thrive, congenital, genetic-related and other pediatric disorders. c. Gather and assess information on the nutrition status of the pediatric patient. d. Plan the nutrition care of the pediatric patient. e. Calculate a diet prescription, prepare a meal plan and a sample menu for a pediatric patient. f. Prepare educational material to be used in counseling the child (where appropriate) and the child's support network. Educational material should be designed to reflect: <ol style="list-style-type: none"> i. The age and nutrient requirement of the child. ii. The medical status of the child. iii. The economic status and available food budget. iv. Shopping and cooking facilities. v. Ethnic, cultural and personal food preferences of the child. vi. Caregiver's education level and learning capacity. g. Counsel the child's caregiver on the appropriate food intake and food procurement and preparation and the child, where age permits. h. Communicate with members of the interdisciplinary team to facilitate the 	<ol style="list-style-type: none"> a. The intern tours the pediatric unit; the head nurse explains the protocol on the unit. b. The intern accompanies the RD on rounds and attends team meetings at which various disciplines discuss their care plans and their care plans and their evaluation of patient progress. c. The intern reviews class notes on the on the nutrition assessment and management of failure to thrive patients, pediatric AIDS, celiac disease and other disease and disorders represented on the pediatric unit at the time of the rotation. d. Through chart review, the RD identifies appropriate patients to follow. The intern interviews the families and observes and monitors the eating behavior. e. The intern analyzes the nutrient intake of the identified patients to determine adequacy for growth. f. The intern plots height for weight and weight for age on growth charts. g. The intern performs a nutrition assessment on the assigned patients using data on the history, medical history, psychological valuation of the child and the family, anthropometric measurements and laboratory findings to identify the reason for failure to thrive or other nutrition problems and needs. h. The intern prepares written nutrition care plans for the identified patients. i. The intern calculates the nutrition needs of each child and prepares meal plans, and sample menus. j. The intern reviews the existing material on the unit, reviews other sources, and develops new materials that meet the need of the child and his/her family if required. k. The intern counsels the mother/care giver at regular intervals during hospitalization. 	<p>The RD preceptor will observe and provide feedback to the intern.</p> <p>The intern will prepare a summary of diet therapy and food/medication interactions including but not limited to failure to thrive, diabetes, inherited disease of metabolism, asthma, overweight and obesity and submits to the RD preceptor for review.</p> <p>The intern will submit an outline of assigned patients' nutrition problems and needs and the data used to identify these problems and needs to the RD preceptor for review.</p> <p>The intern will submit nutrition care plans including nutrition diagnosis to the RD preceptor for review, feedback and evaluation.</p> <p>The RD preceptor will review therapeutic diets recommended for assigned patients, observe at least one interview and provide feedback.</p> <p>The intern will prepare a study guide on pediatrics for review in the DFN 731 seminar and other assignments allocated for submission to the D.I. Coordinator.</p> <p>The RD preceptor will evaluate the intern's ability to plan and provide nutrition care to pediatric patients.</p>
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<p>integration of patient care.</p> <ul style="list-style-type: none"> i. Coordinate nutrition care with the food service department. j. Monitors the caregiver's understanding of the nutrition care plan and willingness to comply with counseling. k. Monitor the child's compliance with the nutrition regimen and the child's growth. l. Outline a plan for ongoing monitoring of the child's nutrition status, follow-up counseling and referral to other agencies for food and/or psychosocial support services. 	<ul style="list-style-type: none"> l. The intern presents a case study on an assigned pediatric patient at an interdisciplinary team meeting. The case presentation focuses on the nutrition care plan. When indicated from the discussion the intern revises the nutrition care plan. m. The intern visits the mother/care giver on a regular basis to discuss mother/care giver's concerns regarding the feeding and emotional support of the child. The intern documents her impressions of the mother's/care giver's ability to comply in the dietitian's notes. n. The intern visits the child during mealtimes to observe the child's acceptance of the food and nutrition regimen. The child's nutrition progress and status is monitored during hospitalization. o. The intern's nutrition care plans provide for on-going monitoring of nutrition status and for follow-up nutrition education and support services. 	
<p><i>11. Critical Care (60 hours)</i> <i>The intern will be able to:</i></p> <ul style="list-style-type: none"> a. Understand how nutrition care of the critically ill is integrated with other aspects of care of surgical and trauma patients under physiological stress. b. Assess the nutrition status of patients after extensive surgery and/or trauma and identify if these patients are at risk for or already have protein calorie malnutrition and/or other nutrition problems. c. Define the goals for nutrition support in the nutrition care plan. d. Integrate pathophysiology into medical nutrition therapy recommendations. e. Select the appropriate route for nutrient delivery based on physiological and medical 	<ul style="list-style-type: none"> a. The intern reviews the class notes and assigned materials on the management of patients with extensive surgery and trauma. b. The intern tours the ICU and listens to the head nurse explain the protocol on the unit. c. The intern accompanies the RD on rounds and attends team meetings at which various disciplines discuss their care plans and their evaluation of the patients' progress. d. The intern will assist the RD in the assessment and management of assigned patients at least one of which should be receiving tube feeding and another receiving TPN. e. The intern performs a nutrition assessment on assigned surgical and/or trauma patients identified to be at nutrition risk. This will include an analysis of weight, height, non-voluntary weight loss, 	<p>The RD preceptor will observe and provide feedback to the intern.</p> <p>The intern will prepare a summary of diet therapy and food/medication interactions including but not limited to surgery, trauma, nutrition support (enteral and parenteral nutrition) and submits to the RD preceptor for review.</p> <p>The intern will submit an outline of assigned patients' nutrition problems and needs and the data used to identify these problems and needs to the RD preceptor for review.</p> <p>The intern will submit nutrition care plans including calculation of energy and protein</p>

<p>requirements and constraints.</p> <p>f. Develop and calculate a prescription for a nutrition support formula that is appropriate for the needs and nutrition status of the patient.</p> <p>g. Select, monitor, and evaluate complex enteral and parenteral regimens, i.e. more complicated health conditions in select populations.</p> <p>h. Participates in nasogastric feeding tube placement and care.</p> <p>i. Participate in waived point-of-care testing, such as blood glucose monitoring.</p> <p>j. Participates in the care of patients requiring adaptive feeding devices.</p> <p>k. Counsel the patient (if appropriate) and patient's caregivers on the rationale for nutrition support.</p> <p>l. Monitor the patient's adherence to and tolerance of the prescribed nutrition regimen and determine whether the patient's response necessitates modification to the nutrition care plan.</p> <p>m. Communicate with members of the interdisciplinary team to facilitate the integration of patient care.</p> <p>n. Coordinate nutrition care with the food service department.</p> <p>o. Adjust the nutrition regimen where necessary in response to the changing needs of the patient.</p> <p>p. Plan a transitional feeding regimen to wean the patient from nutrition support to an oral diet.</p> <p>q. Teaches the patient's support network to assume responsibility for nutrition care post-discharge.</p>	<p>pertinent laboratory values, and a brief interview with the patient or family members (where possible).</p> <p>f. The intern formulates a nutrition diagnosis statement and intervention as follows:</p> <p>i. The intern defines the goals for nutrition support for assigned patients.</p> <p>ii. The intern determines whether maintenance or repletion of nutrition status is appropriate for the assigned patients. The intern determines specific objectives for nutrition support and calculates energy and protein intake for the assigned patients.</p> <p>iii. The intern prepares a written nutrition care plan specifying the regimen to be administered to the assigned patients.</p> <p>h. The intern visits the patients to determine the patients' adherence to and tolerance of the nutrition regimen. The intern discusses the nutrition regimen with the patient and/or family or a significant other. The intern assesses the patient's tolerance to the feeding regimen and maintains data on the patient's residuals and GI function.</p> <p>i. The intern presents a case study on a selected patient at a meeting of the nutrition support team. The intern discusses the patient's metabolic tolerance to the nutrition regimen during the case presentation. The intern also discusses the extent to which the goals of the care plan are being met.</p> <p>j. The intern modifies the nutrition regimen when necessary to avoid complications associated with nutrition support and to accomplish the goals indicated in the nutrition care plan.</p> <p>k. When indicated in the nutrition care plan, the intern should provide plans for the gradual reintroduction of food into the GI tract (the</p>	<p>needs, nutrition diagnosis and choice of formula to the RD preceptor for review, feedback and evaluation.</p> <p>The RD preceptor will review therapeutic diets calculated for assigned patients, and provide feedback.</p> <p>The intern will prepare study guides on enteral and parenteral nutrition for review in the DFN 731 seminar and other assignments allocated for submission to the D.I. Coordinator.</p> <p>The RD preceptor will evaluate the intern's ability to plan and provide nutrition care to patients who require critical care.</p>
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	<p>weaning process), and the monitoring of the patient's tolerance to the food. The intern maintains records on nutrient intake during the weaning process.</p> <p>1. The intern provides the patient and/or the patients' family with instructions on how to maintain nutrition care at home, including the procedure and techniques to be used in home nutrition support when this is indicated.</p>	
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<p>12. <i>Quality Assurance (30 hours)</i> <i>The intern will be able to:</i></p> <ol style="list-style-type: none"> a. Demonstrate an understanding of the principles of quality assurance and continuous quality improvement of nutrition care as mandated by appropriate accreditation agencies. b. Select an appropriate indicator and measure quality outcomes. c. Complete a quality assurance activity on process and outcome standards of care. d. Undertake a dietitian chart review for timeliness of intervention according to institutional policies. 	<ol style="list-style-type: none"> a. The intern reviews the QA manual for process and outcome standards of care. b. The intern discusses with the RD preceptor Joint Commission standards and departmental QA techniques and procedures including QA reports that are generated. c. The intern accompanies the supervising RD as she collects and organizes QA data. d. Using food service department procedures, intern does a chart review of an appropriate number of charts, monitoring: <ol style="list-style-type: none"> 1. Presence of screening 2. Timelines of screening 3. Accuracy of risk assessment 4. Presence and timelines of assessment 5. Completion of all dietitian forms and notes e. Intern monitors running time and delivery of tube feedings to assigned patients. Nutrients delivered are compared with nutrients prescribed. 	<p>The intern discusses Quality Assurance and Continuous Quality Improvement activities and desired outcomes with the RD preceptor.</p> <p>The intern submits an assigned QA/CQI activity (e.g. chart review) to RD preceptor for review and includes it in the rotation portfolio.</p>
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<p>13. <i>Staff Relief (30 hours)</i> <i>The intern will be able to:</i></p> <ul style="list-style-type: none"> a. Demonstrate the ability to assume the responsibilities of the dietitian assigned to the unit. b. Complete the following tasks, including but not limited to: <ul style="list-style-type: none"> i. Nutrition screening and assessment ii. Identifying a nutrition problem iii. Developing a nutrition diagnosis iv. Planning nutrition care v. Monitoring and adjusting the nutrition care plan vi. Communicating with the interdisciplinary care team 	<p>The intern will be responsible for the nutrition care of half the patients on the unit of a large unit or all patients if unit contains fewer than 20 patients.</p>	<p>The RD preceptor will evaluate and provide feedback on the intern's performance.</p>
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<p>14. <i>Long Term Care (20 hours)</i></p> <p><i>The intern will be able to:</i></p> <ul style="list-style-type: none"> a. Assess the nutrition status of residents in long-term care to identify potential or actual nutrition problems. b. Plan nutrition care based on identified problems and needs. c. Prepare appropriate care plans. d. Complete required documentation e. Counsel residents on therapeutic diets f. Perform meal rounds g. Provide food preferences within as feasible h. Communicate with members of the interdisciplinary team to facilitate integration of patient care i. Coordinate nutrition care with the food service department. j. Monitor residents' satisfaction and compliance with the prescribed diet 	<ul style="list-style-type: none"> a. The intern interviews a resident within 48 hours after admission to obtain a diet history. b. The intern performs nutrition assessment on the patient using data obtained from the diet history, psychosocial information, anthropometric measurements, and laboratory tests to determine the patient's actual or potential nutrition problems and needs. d. The intern reviews with the RD the processes used in formulating objectives for the nutrition care plan. e. The intern reviews the procedure and format for documenting the nutrition care plan with the RD preceptor. f. The intern develops a written care plan giving objectives for each of the actual or potential problem uncovered during the nutrition screening/assessment. g. The intern will observe the completion of the required documentation. 	<p>The RD preceptor will evaluate and provide feedback on the intern's performance.</p> <p>The intern will submit nutrition care plans including assessments, calculation of energy and protein needs, nutrition diagnosis and diet order recommendation to the RD preceptor for review, feedback and evaluation.</p> <p>The intern will prepare a study guide on geriatric nutrition and long-term care for review in the DFN 731 seminar and other assignments allocated for submission to the D.I. Coordinator.</p> <p>The intern will submit recommended care planning documentation required by accreditation agencies to the RD preceptor for review, feedback and evaluation.</p>
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II. Food Service Management Rotation: 300 hours

To be completed in a minimum of 10 weeks at a minimum of 30 hours weekly.

Objectives	Suggested Experiences	Evaluation
<p>22. <i>Orientation To Nutrition And Food Service Department (30 hours)</i> <i>The intern will be able to:</i></p> <ul style="list-style-type: none"> a. Understand the philosophy and goals of the food service component of the Nutrition Services department and how the duties of the dietitian and other food service personnel relate to the functioning of the food service system in the institution. b. Demonstrate an understanding of the organization of the institution and jobs within the Nutrition Services department. c. Know the policies of the organization, particularly of the Nutrition Services Department, as they are described in the organization's policy and procedures manual. 	<ul style="list-style-type: none"> g. The intern is introduced to the food service director, administrative dietitians, cooks and supportive personnel. h. The intern tours the food service office, the food preparation areas, the cafeteria, catering facilities and the patient floors during food service. i. The intern listens to the director's or preceptor's philosophy, goals and objectives, strengths and weaknesses of food service component of the institution. A discussion relating the food service and clinical activities as well as their integration in order to provide appropriate food and nutrition services will be included. j. The intern reviews the organization chart of the institution, concentrating on the dietary department. k. The intern studies the various job descriptions of the members of the dietary department. l. The intern reads the policy and procedures manual of the Food Service Department. 	<p>The preceptor will evaluate the intern's knowledge of the Food Service Department and institution organization, goals and function within the institution.</p> <p>The preceptor will evaluate the intern's understanding of departmental policies and procedures and the functions and responsibilities of employees of various job titles within the department.</p> <p>The preceptor will evaluate the intern's understanding of the patient confidentiality, and institutional accreditation and maintenance of standards.</p>

<p>b. <i>Orientation To Foodservice Systems (30 hours)</i> <i>The intern will be able to:</i></p> <ol style="list-style-type: none"> 1. Understand the functioning of the Food Service system. 2. Appreciate how food service operations meet the food preference and nutrition needs of patients served and budgetary and employee constraints of the institution. 3. Understand how regular menus conform to the Dietary Guidelines, Dietary Reference Intakes and the Recommended Dietary Allowances. 4. Understand proper purchasing and/or ordering procedures according to the format followed in the food service institution, utilizing specification for quality standards. 5. Learn proper receiving and storage procedures in the food service system. 6. Demonstrates knowledge of inventory control. 	<ol style="list-style-type: none"> 5. The intern observes the system in operation from procurement to production to service to provide an overview of the Food Service System. 6. The intern examines the day's menu and observes: <ul style="list-style-type: none"> • Requisition of food needed for recipe preparation from storage and refrigeration for a given meal. • Preparation of food items from standardized recipes. • The production of patient trays and assists by working at several jobs in the tray line. • Clean-up operation after meal service. • The interaction of preceptor with kitchen employees. • While food is at appropriate temperature, the intern participates in the tasting and evaluation of the prepared food using appropriate sanitary procedures. 7. The intern summarizes impressions of cycle menu and discusses with the preceptor. 8. The intern gathers the standardized recipes that correspond to items on one week of the cycle menu and prepares a checklist on the types of food items needed, the number of servings portion sizes. 9. Learns proper receiving and storage procedures in the food service system. 10. Intern describes to the preceptor the types of ordering formats used in the institution e.g. centralized contract, and non-contract purchasing. g. The intern's written order will be 	<p>The preceptor will evaluate the intern's knowledge of the Food Service system function and operation.</p> <p>The preceptor will evaluate the intern's knowledge and understanding of the methods by which food service operations meet patients' needs, preferences within the constraints of the Dietary Guidelines and the institution.</p> <p>The preceptor will evaluate the intern's knowledge of the processes of purchasing and inventory control.</p>
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	<p>2. Observation of checking, dating, storing and recording by preceptor with follow-up feedback.</p> <p>3. Observes and later assists in the dating, storing and recording of food items delivered.</p> <p>4. The intern examines the types of inventory records with the computer application where appropriate, with the preceptor.</p> <p>5. The intern observes the taking of an inventory to determine food needs for purchasing.</p> <p>6. Under preceptor supervision the intern conducts an inventory of food items needed for a one-day menu using previously planned menus.</p>	
<p>6. <i>Procurement, Production And Distribution (120 Hours)</i> <i>The intern will be able to:</i></p> <ul style="list-style-type: none"> • Prepare a seven-day cycle menu and modify the menu according to the therapeutic diet restrictions in the formulary of the institution. • Use standardized recipes in quantity food production. • Analyze standardized recipes for compliance with restrictions of a modified diet. • Plan production sheets for kitchen staff and supervise preparations. • Supervise the distribution and serving of food. • Utilize effective communication skills. Provide education and training to other professionals and supportive personnel. 	<p>2. The intern develops at least two standardized recipes that are incorporated in the previously planned cycle menu.</p> <p>3. Intern analyzes one meal's recipes on the computer and checks for compliance with a therapeutic diet prescription.</p> <p>4. The intern reviews the techniques of designing a production sheet with the preceptor and observes their development, if appropriate.</p> <p>5. The intern fills out one week of production sheets for cooks and dietary workers according to the cycle menu. The intern oversees meal preparations.</p> <p>6. The intern compares production to performance by checking if production sheet was followed and if meal items were prepared on time and in correct amounts.</p> <p>7. Under the supervision of the preceptor at</p>	<p>The preceptor will evaluate the intern's knowledge of preparing an appropriate menu according to the policies of the institution and how the menu determines recipe preparation and food production.</p> <p>The preceptor will evaluate the intern's knowledge and performance in the planning, supervision, communication, education and training components.</p> <p>The preceptor will evaluate the intern's knowledge and ability to use food service equipment.</p>

<p>g. Demonstrate ability to use all food service equipment according to policies and procedures.</p>	<p>first and later unsupervised, the intern supervises the tray line and checks trays for portion control, food quality, timing of service and adherence to modified diets.</p> <p>11. The intern plans and conducts in-service education sessions for kitchen and tray aides on:</p> <ol style="list-style-type: none"> 1. Food safety and sanitation, or 2. Portion control, or 3. Basics of a diabetic, calorie controlled, low sodium or low fat diet <p>12. An evaluation component is planned for the in-service education sessions.</p> <p>13. The intern becomes familiar with and demonstrates knowledge, use and care of all food service equipment such as steam-jacketed kettles, ovens, refrigerators, and</p>	
<p>p. <i>Personnel Management (30 Hours)</i> <i>The intern will be able to:</i></p> <ul style="list-style-type: none"> • Demonstrate the ability to participate in personnel management. • Develop job descriptions and job specifications of food service employees. • Provide education and training to food service personnel. 	<p>6. The intern reviews a personnel form used in the annual evaluation conference between the preceptor and a kitchen employee.</p> <p>7. The intern reviews employee schedules and assignments and develops employee schedule and assignment for a one-month period.</p> <p>8. The intern reviews and observes management techniques with preceptor including written documentation and conferences to achieve and maintain acceptable employee performance.</p> <p>9. The intern will observe the performance of a kitchen aide, provide a written evaluation, and after discussion with preceptor and modification of report if</p>	<p>The preceptor will evaluate the intern's knowledge and understanding of employee annual evaluation meetings.</p> <p>The intern will provide a draft job description and specification for review by the preceptor.</p> <p>The intern will prepare and present an education/training session to the food service employees, which will be evaluated by employees and preceptor.</p>

	<p>necessary, have a conference with the employee. The intern performs a time motion study on the kitchen aide and writes a job specification to improve the employee's efficiency.</p> <p>f. The intern reviews lecture notes and assigned material on writing job descriptions and specifications. The intern develops a job description for one food service position, e.g. dishwasher.</p> <p>g. The intern reviews department of health safety and sanitation regulations. The intern develops and presents a food service training module on safety and sanitation to food service workers</p>	
<p>vi. <i>Financial Management (30 Hours)</i> <i>The intern will be able to:</i></p> <ul style="list-style-type: none"> • Participate in the management of cost effective food service systems. • Recognizes the impact of economic factors on dietetic practice. • Utilize departmental records in financial management including budget forecasting. 	<p>k. The intern discusses overall food service budget with food service director and the impact of economic factors on the financial management of the department.</p> <p>l. The intern reviews price quotes and receiving invoices and assists food service director in performing a cost analysis of a seven-day menu.</p> <p>m. The intern discusses with the food service director the utilization of the food service financial records in budget forecasting for the Nutrition Services Department. Considerations include food, labor costs, services, supplies, and repair maintenance.</p> <p>n. The intern observes the planning of the food service financial report, which</p>	<p>The intern will submit a cost analysis of the 7-day cycle menu to the preceptor for analysis and feedback of budgetary items.</p>

	<p>Services Department.</p> <p>e. The intern reviews the annual and periodic previous years plans and compares them to actual costs.</p>	
<p>1. <i>Quality Assurance (30 Hours)</i> <i>The intern will be able to:</i></p> <ul style="list-style-type: none"> Participate in the management of quality assurance and continuous quality improvement in food service as mandated by the policy and procedure manual and accreditation agencies. 	<p>7. The intern reviews the quality assurance standards for food service as mandated by accreditation agencies and prepares questions for discussion.</p> <p>8. The intern evaluates dietary aides for proper adherence to quality assurance standards particularly in the use of serving equipment and sanitary techniques, etc.</p> <p>9. The intern observes and evaluates dietary personnel for compliance with established safety and sanitation procedures.</p> <p>10. The intern documents observations on a safety and sanitation checklist. These include cutting techniques, safe use of equipment, safe and sanitary food preparation techniques, etc.</p> <p>11. The intern performs an inspection by checking and recording the temperatures of hot and cold foods on trays.</p> <p>12. The intern goes on rounds at mealtimes and checks and records temperatures of food when serving.</p> <p>13. The intern discusses accuracy of patient trays diet palatability, temperature,</p>	<p>The intern will prepare a list of identified QA issues with the preceptor, including but not limited to the use of serving equipment (safe food handling) and sanitary practices (refrigerator and food temperatures).</p> <p>The intern will undertake a QA/CQI exercise and present for review to the preceptor.</p>

	<p>patients on the floors.</p> <p>h. The intern examines the accreditation reports prepared by the accreditation agencies, reviews proposed changes, and discusses these with the preceptor. The intern proposes strategies to maintain and upgrade the quality of the operation.</p>	
<p>c. <i>Full Responsibility (30 Hours)</i> <i>The intern will be able to:</i></p> <ul style="list-style-type: none"> • Perform the responsibilities of the management dietitian. 	<p>The intern will assume full responsibility for the tasks and activities of the management dietitian for four days.</p>	<p>The preceptor will evaluate and provide feedback on the intern's performance.</p>

**III. Community Rotation: 280 hours
Community Public Health, Food Programs: 100 hours**

(Congregate Meal Programs, Head Start, Senior Centers, Health Centers) To
be completed in a minimum of 3.5 weeks at a minimum of 30 hours weekly

Objectives	Suggested Experiences	Evaluation
<p><i>The intern will be able to:</i></p> <p>23. Describe the state monitored nutrition services for the relevant population.</p> <p>24. Understand the impact of the political, legislative and economic factors on support for food programs for this population.</p> <p>25. Demonstrate knowledge of the agency, its program plan and quality assurance plan, or other evaluation procedures used by the agency.</p> <p>26. Describe the target population served by the agency and develop a community needs assessment of the population served by the agency.</p> <p>27. Develop care plans for the population served by the agency.</p> <p>28. Demonstrate ability to educate and counsel clients served by the agency.</p>	<p>The intern will:</p> <p>m. Summarize current literature on nutrition recommendations for the target population.</p> <p>n. Receive information on how political and legislative issues impact the program.</p> <p>O. Receive an orientation and tour of the agency, learn the job responsibilities of the staff, and review the program plan and evaluation activities.</p> <p>p. Visit at least one feeding site or observe the in house food program.</p> <p>q. With the help of the preceptor, prepare a nutrition community needs assessment of the population in the agency's catchment area. Information can be obtained from the NY state DOH website. Assessment will include:</p> <ul style="list-style-type: none"> a.) Vital statistics b.) Demographics c.) Other agencies in the area d.) Food ways e.) Cultural needs <p>r. Observe the preceptor interact with the clients.</p> <p>S. Identify nutritional needs and develop care plans and counsel assigned clients and/or</p>	<p>The preceptor will evaluate the intern's knowledge of the program's organization.</p> <p>The preceptor will evaluate the intern's understanding of program policies and procedures.</p> <p>The preceptor will evaluate the intern's understanding of the patient confidentiality, and institutional accreditation and maintenance of standards.</p> <p>The intern will be able to discuss the current quality assurance plan, or other evaluation procedures with the preceptor.</p> <p>The intern will be able to discuss the current nutrition recommendations for the population served by the agency with the preceptor.</p> <p>The intern will be able to discuss factors affecting program support with the preceptor.</p> <p>The preceptor will evaluate the intern's needs assessment, care plans and lesson plan for a group education session.</p> <p>The preceptor will evaluate the intern's ability to plan and provide individual nutritional care and group education to clients (and staff) by observation and provide feedback.</p>

Chapter 1932 -**DFN 730: Dietetic Internship Supervised**

Practice IIIB. Community Rotation

Community Public Health, HIV/AIDS: 100 hours

To be completed in a minimum of 3.5 weeks at a minimum of 30 hours weekly

Objectives	Suggested Experiences	Evaluation
<p><i>The intern will be able to:</i></p> <p>29. Describe the state monitored nutrition services for the HIV/AIDS population.</p> <p>30. Understand the impact of the political, legislative and economic factors on dietetic practice for this population.</p> <p>31. Demonstrate knowledge of the agency, its program plan and quality assurance plan, or other evaluation procedures used by the agency.</p> <p>32. Describe the target population served by the agency.</p> <p>33. Develop care plans for the population served by the agency.</p> <p>34. Demonstrate ability to educate and counsel clients served by the agency.</p>	<p>The intern will:</p> <p>t. Summarize current literature on nutrition recommendations and medications for PLWA.</p> <p>u. Receive information on how political and legislative issues impact the program.</p> <p>v. Receive an orientation and tour of the agency, learn the job responsibilities of the RD, and review program plan and evaluation activities.</p> <p>w. Visit at least one feeding site or observe the in house food program.</p> <p>x. With the help of the preceptor, prepare a nutrition community needs assessment of the HIV+ population in the agency's catchment area. Information can be obtained from the NY State DOH website. The assessment will include:</p> <ul style="list-style-type: none"> • Vital statistics • Demographics • Other agencies in the area • Food ways <p>e. Cultural needs</p> <p>c. Sheets depicting nutrition recommendations and food/drug interactions to be reviewed by the preceptor and placed in the rotation portfolio.</p> <p>d. Prepare a lesson plan and deliver a group</p>	<p>The RD preceptor will evaluate the intern's knowledge of the program's organization and nutrition services for the HIV/AIDS population.</p> <p>The RD preceptor will evaluate the intern's understanding of program policies and procedures.</p> <p>The RD preceptor will evaluate the intern's understanding of the patient confidentiality, and institutional accreditation and maintenance of standards.</p> <p>The intern will be able to discuss the current quality assurance plan, or other evaluation procedures with the RD preceptor.</p> <p>The intern will be able to discuss the current nutrition recommendations for the population served by the agency with the RD preceptor.</p> <p>The intern will be able to discuss factors affecting program support with the RD preceptor.</p> <p>The RD preceptor will evaluate the intern's needs assessment, care plans and lesson plan for a group education session.</p> <p>The RD preceptor will evaluate the intern's ability to plan and provide individual nutritional care and group education to clients (and staff) by observation and provide feedback.</p>

Chapter 1933 - **DFN 730: Dietetic Internship**
Supervised Practice IIIC. Community Rotation
Community Public Health, Women, Infants and Children (WIC): 60
hours

To be completed in a minimum of 2 weeks at a minimum of 30 hours weekly.

Objectives	Suggested Experiences	Evaluation
<p><i>The intern will be able to:</i></p> <p>35. Describe the goals, philosophy and limitations of the WIC program.</p> <p>36. Understand the USDA community nutrition programs addressing food security.</p> <p>37. Describe the WIC program budget development and fiscal reporting process.</p> <p>38. Understand the responsibilities of the WIC nutritionist.</p> <p>39. Assess nutritional risk, prepare a care plan and counsel WIC clients</p> <p>40. Prepare, implement and evaluate a group education session.</p>	<p>The intern will:</p> <p>y. Review literature on the WIC mission to reduce incidence of low birth weight babies, increase breastfeeding, and improving maternal nutrition. Review literature evaluating the success of WIC in meeting its goals.</p> <p>Z. Prepare a summary table of USDA community nutrition programs, qualifications, and offerings.</p> <p>aa. Intern will listen to description of administrative budget, to include:</p> <p>a.) Proposal preparation</p> <p>b.) Budget approval</p> <p>c.) Budget line modifications</p> <p>d.) Year end fiscal closeout</p> <p>e.) Case load management</p> <p>f.) Security measures</p> <p>g.) Equipment purchase records</p> <p>h.) Chart audits</p> <p>i.) Vendor contracts</p> <p>bb. Observe the WIC nutritionist evaluating the nutritional risk at intake of WIC clients.</p> <p>cc. Observe the WIC nutritionist counseling high- risk clients, pregnant and lactating women.</p> <p>dd. Assess the nutritional needs of pregnant women, month old to newborn, and 3 year old toddlers. Prepare care plan and counsel the clients or their parents.</p> <p>ee. Plan a group educational session with RD</p>	<p>The preceptor will evaluate the intern's knowledge of the program's organization and nutrition services for the WIC population.</p> <p>The intern will be able to discuss the goals, philosophy and limitations of the WIC program.</p> <p>The preceptor will evaluate the intern's understanding of program policies and procedures.</p> <p>The preceptor will evaluate the intern's understanding of the patient confidentiality, and institutional accreditation and maintenance of standards.</p> <p>The intern will be able to discuss the WIC program budget development and fiscal reporting process with the RD preceptor.</p> <p>The intern will be able to discuss the current nutrition recommendations for the population served by the agency and the responsibilities of the WIC nutritionist with the preceptor.</p> <p>The intern will be able to discuss factors affecting program support with the preceptor.</p> <p>The preceptor will evaluate the intern's care plans and lesson plan for a group education session.</p> <p>The preceptor will evaluate the intern's ability to plan and provide individual nutritional care and group education to clients (and staff) by observation and provide feedback</p>

Chapter 1935 - **DFN 730: Dietetic Internship Supervised Practice IIID. Community Rotation**
Community Public Health, Schools: 20 hours

To be completed in a minimum of 1 week at a minimum of 30 hours weekly.

Objectives	Suggested Experiences	Evaluation
<p><i>The intern will be able to:</i></p> <p>41. Describe the goals, philosophy and limitations of the school food program.</p> <p>42. Understand the impact of the political, legislative and economic factors on support for the school food program.</p> <p>43. Describe the target population served by the public school and develop a community needs assessment of the children served by the school.</p> <p>44. Develop a lesson plan for a nutrition education class appropriate for the assigned population.</p> <p>45. Demonstrate ability to educate and counsel clients served by the agency.</p> <p>46. Prepare, implement and evaluate a group education session.</p>	<p>The intern will:</p> <p>ff. Review the organization, delivery and requirements of the school breakfast and lunch program.</p> <p>gg. Receive information on how political and legislative issues impact the food and nutrition content of the food served.</p> <p>hh. Observe at least one lunchtime meal served.</p> <p>ii. Prepare a nutrition needs assessment of an assigned class. The assessment will include:</p> <ul style="list-style-type: none"> • Age • Grade • Ethnicity/Cultural needs • Socio-Demographics • Food ways <p>jj. Prepare a nutrition education class appropriate for the needs of the class, give the class, including a pre- and post-test.</p>	<p>The preceptor will evaluate the intern's knowledge of the program's organization.</p> <p>The preceptor will evaluate the intern's understanding of program policies and procedures.</p> <p>The intern will be able to discuss the current nutrition recommendations for the population served by the school food with the preceptor.</p> <p>The intern will be able to discuss factors affecting program support with the preceptor.</p> <p>The preceptor will evaluate the intern's needs assessment, and lesson plan for a group education session.</p> <p>The preceptor will evaluate the intern's ability to plan and provide an appropriate nutrition education session to the assigned class by observation and provide feedback.</p>

IV. Research Project: 150 hours

To be completed in a minimum of 5 weeks at a minimum of 30 hours weekly.

Objectives	Suggested Experiences	Evaluation
<p><i>The intern will be able to:</i></p> <ul style="list-style-type: none"> 47. Demonstrate an understanding of appropriate research methods 48. Identify a suitable population 49. Develop an appropriate research question/problem and hypothesis 50. Prepare an instrument 51. Prepare a project proposal 52. Understand the process of IRB approval 53. Conduct a research project 54. Analyze the results using appropriate statistical methods 55. Summarize the results 	<p>The intern will:</p> <ul style="list-style-type: none"> kk. Attend a class or lectures on research methods and statistics. ll. Summarize current literature on the problem chosen. mm. Develop a project proposal based on the research question/hypothesis, including appropriate statistical analysis. nn. Prepare and submit an application to the IRB oo. Using an appropriate instrument and/or information, collect data from the designated population. pp. Using a statistical software program, analyze the data collected. qq. Prepare a paper including <ul style="list-style-type: none"> • Abstract • Introduction • Methods • Results • Discussion • Implications for current practice 	<p>The preceptor will evaluate the intern's knowledge of research methods.</p> <p>The preceptor will evaluate the intern's understanding of the research process</p> <p>The preceptor will approve the project proposal.</p> <p>The intern will be able to write a suitable research proposal to answer an approved problem/question.</p> <p>The preceptor will evaluate the intern's proposal.</p> <p>The preceptor will evaluate the intern's ability to plan, implement, analyze and describe the research project.</p>

Appendix O

Student Learning Outcomes Assessment Plan include
Concentration Competencies

Directions for Learning Assessment Summary Matrix (Standard 13)
On-going Assessment of Core Knowledge & Competencies for the RD
Assessment Period from 2011 to 2015

Background: The Learning Assessment Planning Summary Matrix is used to document both whether students have achieved learning objectives developed to assess ACEND's Foundation Knowledge & Competencies¹ over the past five-years (columns A-E), and to document future plans for achieving learning objectives over the next assessment period (columns A-D). At the end of the assessment period, a fully-completed form is submitted to summarize how well the program is helping students to learn, and a new form is completed to reflect any updates to learning objectives over the next assessment period.

Note: Programs must submit separate outcome data (E) for each pathway; however, complete matrices do not need to be provided for those pathways, unless they are customized to the pathway.

Directions: When submitting completed plans for the past five years, you may attach your original competencies and matrices (from five years ago), and do not have to retype information into this document as long as the information requested in columns A-E is provided: List at least one learning objective and assessment method for every competency. Specify the rotation or class in which the assessment occurred, identify the individuals or groups responsible for ensuring that the assessment took place, and the timeframe for collecting the data. For domains 1 through 4, select at least two competencies per domain and include the actual outcome data achieved for the competencies over the five-year lifetime of the plan (column E). Be sure to submit separate outcome data for each program pathway.

When submitting plans for the next assessment period, complete a new summary matrix or copy your past five-year matrix, and update it to reflect learning objectives for the next assessment period (columns A-D). Leave column E blank; however, by the end of the assessment period lifetime of the new plan, you will have to provide outcome data for at least two competencies for each domain (domains 1 through 4 only). Be sure to collect separate outcome data for each program pathway.

¹ See Appendix A of ACEND's Accreditation Standards

LEHMAN COLLEGE DIETETIC INTERNSHIP
Dietetic Internship Using the IP Standards
Learning Assessment Summary Matrix (Standard 13)
On-going Assessment of Core Knowledge & Competencies for the RD
Assessment Period from 2011 to 2015

Domain 1: Scientific and Evidence Base of Practice: integration of scientific information and research² into practice					
KRD 1.1: The curriculum must reflect the scientific basis of the dietetics profession and must include research methodology, interpretation of research literature and integration of research principles into evidence-based practice. (Note: <i>Examples of evidence-based guidelines and protocols include the Academy's Evidence Analysis Library and Evidence-based Nutrition Practice Guidelines, the Cochrane Database of Systematic Reviews and the U.S. Department of Health and Human Services, Agency for Healthcare Research and Quality, National Guideline Clearinghouse Web sites.</i>)					
	A) Learning objective and the assessment methods that will be used (Guideline 13.1a & b)	B) Rotation or class in which assessment will occur (Guideline 13.1c)	C) Individuals responsible for ensuring assessment occurs (Guideline 13.1d)	D) Timeline for collecting formative and summative data (Guideline 13.1e)	E) Resulting data with the date collected for 2 competencies per domain
EXAMPLE CRD 2.3: Design, implement and evaluate presentations to a target audience (Note: <i>A quality presentation considers life experiences, cultural diversity and educational background of the target audience.</i>)	EXAMPLE 100% of students will score a four or better (on a five point scale) when giving a lecture at the Senior Center.	EXAMPLE Community Rotation	EXAMPLE Preceptor Program Director	EXAMPLE At the completion of the presentation	EXAMPLE 2010: 30/35 (86%) 2011: 25/30 (83%) 2012: 32/35 (91%) 2013: 34/35 (97%) 2014: 23/28 (82%) Not Met: 144/163 (88%) of students received a score of four or better (on a five point scale) over the assessment period (2009-2014).
CRD 1.1: Select indicators of program quality and/or customer service and measure achievement of objectives. (Note: <i>Outcomes</i>	80% of interns will achieve a letter grade of B or better on completion of final course exam	DFN 651	Faculty	During and end of graduate clinical course; 2-year summative (2014, 2015)	2014: 8/10 (80%) 2015: 12/14 (85.7%) Met: 83% of interns received a grade of B or

² Research is broadly defined as an activity that includes all components of the scientific method; i.e., statement of the problem, data collection, analysis and interpretation of results; and decision-making based on results. All students should have core experiences that prepare them to properly interpret research literature and apply it to practice (evidence-based practice), document the value of their services, and participate in adding to the body of scientific knowledge on nutrition, health, and wellness. Activities may include community needs assessment, food science experiments, product development/improvement, continuous-quality improvement activities, or other research projects including master theses and doctoral dissertations.

<i>may include clinical, programmatic, quality, productivity, economic or other outcomes in wellness, management, sports, clinical settings, etc.)</i>					better on the completion of the final course exam in Clinical Nutrition. 87% intern class average on final exam for years 2014 and 2015.
CRD 1.2: Apply evidence-based guidelines, systematic reviews and scientific literature (such as the Academy's Evidence Analysis Library and Evidence-based Nutrition Practice Guidelines, the Cochrane Database of Systematic Reviews and the U.S. Department of Health and Human Services, Agency for Healthcare Research and Quality, National Guideline Clearinghouse Web sites) in the nutrition care process and model and other areas of dietetics practice	80% of interns will achieve a letter grade of B or above on completion of academic coursework: Case Study: Cancer	DFN 651	Faculty	During and end of graduate clinical course	2014: 10/10 (100%) 2015: 12/14 (85.7%) Met: 91.7% of interns received a grade of B or better on the Cancer Case Study in Clinical 89.55 intern class average on the cancer case study (2014 and 2015)
CRD 1.3: Justify programs, products, services and care using appropriate evidence or data	80% of interns will achieve a letter grade of B or better on completion of Operations Menu	DFN 661	Faculty	During and end of food service management course	2013: 9/10 (90%) 2014: 7/7 (100%) 2015: 8/8 (100%) Met: 96% of interns received a grade of B or better on completion of the Operations Menu Project
CRD 1.4: Evaluate emerging research for application in dietetics practice	80% of students will achieve a letter grade of B or better on the completion of the Clinical Case Study Paper and	DFN 731 – fall, spring, summer	Faculty and DI Director	End of Clinical rotation; 2-year summative (2014, 2015)	2014: 13/13 (100%) 2015: 13/14 (92.9%) Met: 96.45 of interns received a grade of B or

	Presentation				better in the Clinical Case Study Paper and Presentation
CRD 1.5: Conduct projects using appropriate research methods, ethical procedures and data analysis	<p>80% of students will achieve a grade of B or better on completion of Research Paper and Presentation</p> <p>80% of interns will achieve an overall grade of B or better on the completion of their Research rotation</p>	DFN 730 - Research rotation	Preceptor	5-year summative for research rotation; 2011-2015: collected from evaluation forms completed by preceptors	<p>2011-2015 Paper</p> <p>38 A 3 A- 1 B+ 3 B 1 C- 45/46 = 97.8%</p> <p>Overall Grade: 43 A 2 A- 2 B+ 1 B 1 C 48/49 = 98%</p> <p>Met: 97.8% of interns received a letter grade of B or better on Research Paper and Presentation.</p> <p>98% of achieved an overall grade of B or better upon completion of their Research rotation.</p>

Domain 2: Professional Practice Expectations: beliefs, values, attitudes and behaviors for the professional dietitian level of practice.

KRD 2.1: The curriculum must include opportunities to develop a variety of communication skills sufficient for entry into pre-professional practice. (Note: *Students must be able to demonstrate effective and professional oral and written communication and documentation.*)

KRD 2.2: The curriculum must provide principles and techniques of effective counseling methods. (Note: *Students must be able to demonstrate counseling techniques to facilitate behavior change.*)

KRD 2.3: The curriculum must include opportunities to understand governance of dietetics practice, such as the Scope of Dietetics Practice and the Code of Ethics for the Profession of Dietetics; and interdisciplinary relationships in various practice settings.

	A) Learning objective and the assessment methods that will be used (Guideline 13.1a & b)	B) Rotation or class in which assessment will occur (Guideline 13.1c)	C) Individuals responsible for ensuring assessment occurs (Guideline 13.1d)	D) Timeline for collecting formative and summative data (Guideline 13.1e)	E) Resulting data with the date collected for 2 competencies per domain
CRD 2.1: Practice in compliance with current federal regulations and state statutes and rules, as applicable and in accordance with accreditation standards and the Scope of Dietetics Practice and Code of Ethics for the Profession of Dietetics	<p>80% of interns will achieve a letter grade of B or better at the completion of the supervised practice clinical rotation.</p> <p>80% of interns will receive an “adequate” or “more than adequate” on their clinical evaluation for “complies with Code of Ethics & Standards of Professional Practice.”</p>	DFN 730 – MNT rotation	Preceptor	5-year summative for MNT rotation; 2011-2015: collected from evaluation forms completed by preceptors (numbers reflect that some interns had more than one clinical rotation (e.g. hospital plus private practice)	<p>2011-2015 Clinical rotation 68 A 11 A- 7 B+ 7 B 1 C+ 93/94 = 98.9%</p> <p>Clinical evaluation 84 more than adequate 12 adequate 2 less than adequate 96/98 =</p> <p>Met: 98% of interns received a grade of B or better at the end of the clinical rotation</p> <p>97.8% of interns received a “more than adequate” or “adequate” on their Clinical evaluation for “complies with Code of Ethics & Standards of Professional Practice.”</p>

CRD 2.2: Demonstrate professional writing skills in preparing professional communications (Note: <i>Examples include research manuscripts, project proposals, education materials, policies and procedures</i>)	80% of interns will achieve a letter grade of 80% or better on completion of the Grant Writing Project	DFN 641	Faculty	During and end of coursework (2015)	2015: 8/8 = 100% Met: 100% of interns achieved a grade of B or better on the completion of the Grant Writing Project (average = 92.5%)
CRD 2.3: Design, implement and evaluate presentations to a target audience (Note: <i>A quality presentation considers life experiences, cultural diversity and educational background of the target audience.</i>)	80% of interns will receive a letter grade of B or above the public school educational presentation utilizing a nutrition needs assessment of the students served by the school.	DFN 730 - Public School rotation	Preceptor and DI Director	During and end of community, public school rotation; 5-year summative	2011-2015 53 A 4 A- 6 B+ 63/63 = 100% Met: 100% of interns received a grade of B or better on educational presentation. 90.5% of the interns received a letter grade of A.
CRD 2.4: Use effective education and counseling skills to facilitate behavior change	80% of Interns are able to achieve a grade of 80% or greater on completion of the Behavior Change Project	HEA 620	Faculty	During and end of coursework	2012: 14/14 = 100% 2013: 16/16 = 100% 2014: 11/11 = 100% 2015: 9/9 = 100% 2016: 11/12 = 91.7% Met: 60/61= 98.4% of interns received a 80% or greater on completion of the Behavior Change project. The average grade over 5 years was

					94%.
CRD 2.5: Demonstrate active participation, teamwork and contributions in group settings	80% of interns will achieve a letter grade of 80% or better on completion of the DESIGN Project	DFN 641	Faculty	During and end of coursework (2015)	2015: 7/8 = 87.5% Met: 85.7% of interns achieved a grade of B or better on the completion of the DESIGN project (average = 92%)
CRD 2.6: Assign patient care activities to DTRs and/or support personnel as appropriate (Note: <i>In completing the task, students/interns should consider the needs of the patient/client or situation, the ability of support personnel, jurisdictional law, practice guidelines and policies within the facility.</i>)	80% of interns will achieve a letter grade of B or better on the rotation evaluation at the completion of supervised practice clinical rotation: MNT Staff Relief	DFN 730 – MNT rotation	Preceptor	5-year summative for MNT rotation; 2011-2015: collected from evaluation forms completed by the preceptors	2011-2015 51 A 11 A- 5 B+ 9 B 1 C+ 76/77 = 98.7% Met: 98% of interns achieved a letter grade of B or better on the rotation evaluation at the completion of the supervised practice clinical rotation: MNT Staff Relief
CRD 2.7: Refer clients and patients to other professionals and services when needs are beyond individual scope of practice	80% of interns will receive a letter grade of B or better on the rotation evaluation at the completion of supervised practice rotation: HIV/AIDS (as part of total for Community)	DFN 730 – Community – HIV/AIDS rotation	Preceptors	5-year summative for Community – HIV/AIDS rotation: 2011-2015 collected from evaluation forms completed by the preceptors	2011-2015 135 A 30 A- 7 B+ 13 B 135/135 = 100% Met: 100% of interns achieved a letter grade of B or better on evaluation upon completion of community rotation.
CRD 2.8: Apply leadership skills to achieve desired	80% of interns will receive a letter grade of B or	DFN 730 – Community rotations (WIC, HIV/AIDS,	Preceptors	5-year summative for Community rotation;	2011-2015: Community grade

outcomes	<p>better on the rotation evaluation at the completion of the community rotations.</p> <p>80% of interns will be evaluated as “adequate” or “more than adequate” for criteria: “engages in a program of self-development and continuing education” and “extends him/herself above and beyond expectations in difficult situations.”</p>	Public Health)		2011-2015: collected from evaluation forms completed by the preceptors	<p>135 A 30 A- 7 B+ 13 B 135/135 = 100%</p> <p>Community evaluation 109 more than adequate 36 adequate 2 less than adequate 145/147 = 98.6%</p> <p>Met: 100% of interns achieved a letter grade of B or better on evaluation upon completion of community rotation.</p> <p>98.6% of interns were evaluated as “adequate” (24.4%) or “more than adequate” (74.2%) for extending beyond difficult situations; 99% of interns were evaluated as “adequate” (30%) or “more than adequate” (69%) for engaging in program development.</p>
CRD 2.9: Participate in professional and community organizations ^{3,4}	80% of interns will achieve a grade of B or better on completion of volunteering	DFN 731 – Volunteer	DI Director	During and end of experience	<p>2014: 13/13 = 100% 2015: 14/14 = 100%</p>

³ Community-based supervised practice experiences need not take place in a dietetics-related organization. Experiences may occur in local community organizations such as United Way, food banks such as Second Harvest, or even faith-based organizations such as the Salvation Army. Experiences can also occur at sister units of the program within the parent organization such as an outpatient clinic or a campus fitness center.

	in a community or professional organization				Met: 100% of the interns achieved a grade of B or better upon completion of the volunteer and conference experience. The average grade (2014 and 2015) was a 93% for the volunteer experience and 92.5% for conference experience.
CRD 2.10: Establish collaborative relationships with other health professionals and support personnel to deliver effective nutrition services (Note: <i>Other health professional include physicians, nurses, pharmacists, etc.</i>)	80% of interns will achieve a letter grade of B or better on the rotation evaluation at the completion of the supervised clinical rotation: Critical Care	DFN 730 – MNT rotation	Preceptor	During and end of MNT rotation; 5-year summative (2011-2015) based on evaluations completed by preceptors	2011-2015: 32 A 12 A- 7 B+ 8 B 1 B- 59/60 = 98% Met: 98% of interns achieved a grade of B or better. One intern received a grade of B-. 73% of interns achieved a grade of A/A-.
CRD 2.11: Demonstrate professional attributes within various organizational cultures (Note: <i>Professional attributes include showing initiative and proactively developing solutions, advocacy, customer focus, risk taking, critical thinking, flexibility, time management,</i>	80% of interns will achieve a letter grade of B or better on the rotation evaluation of supervised practice during Community rotation – WIC (as part of total for Community)	DFN 730 – Community WIC rotation	Preceptor	5-year summative for Community – WIC rotation: 2011-2015 collected from evaluation forms completed by the preceptors	135 A 30 A- 7 B+ 13 B 135/135 = 100% Met: 100% of interns achieved a letter grade of B or better on evaluation upon completion of

⁴ Professional and community organizations provide many opportunities for students to develop leadership skills. They do not have to hold an elected position to demonstrate leadership. For example, the program can create community-based projects where a group of students is asked to serve under the leadership of another student. After a task or set of tasks is successfully accomplished, another student may be selected to lead the group in accomplishing different tasks, until eventually; all students get to take a leadership role.

<i>work prioritization and work ethic.)</i>					community rotation.
CRD 2.12: Perform self-assessment, develop goals and objectives and prepare a draft portfolio for professional development as defined by the Commission on Dietetic Registration	80% of interns will achieve a letter grade of B or better on final grade and completion of self-assessment	DFN 731-summer	DI Director	6-year DI Exit Survey, and 6-year Self-Assessment (2010-2015)	Self-Assessment: 2010-2015: 66% of interns self-assessed CRD 2.12 between neutral and strongly agree (51% as strongly agree); Summary 2010-2015. Not Met: below 80%
CRD 2.13: Demonstrate negotiation skills (Note: <i>Demonstrating negotiating skills includes showing assertiveness when needed, while respecting the life experiences, cultural diversity and educational background of the other parties.</i>)	80% of interns will achieve a letter grade of 80% or better on completion of Self-Awareness Paper demonstrating negotiating skills and respective life experiences	HEA 620	Faculty	During and end of coursework; 5-year summative	2012: 14/14 = 100% 2013: 16/16 = 100% 2014: 11/11 = 100% 2015: 9/9 = 100% Met: 100% of the interns received a grade of 80% or better on Self-Awareness Paper

Domain 3: Clinical and Customer Services: development and delivery of information, products and services to individuals, groups and populations

KRD 3.1: The curriculum must reflect the principles of Medical Nutrition Therapy and the practice of the nutrition care process, including principles and methods of assessment, diagnosis, identification and implementation of interventions and strategies for monitoring and evaluation. (Note: *Students must be able to use the nutrition care process to make decisions, to identify nutrition-related problems and determine and evaluate nutrition interventions.*)

KRD 3.2: The curriculum must include the role of environment, food, nutrition and lifestyle choices in health promotion and disease prevention. (Note: *Students must be able to develop interventions to affect change and enhance wellness in diverse individuals and groups.*)

KRD 3.3: The curriculum must include education and behavior change theories and techniques. (Note: *Students must be able to develop an educational session or program/educational strategy for a target population.*)

	A) Learning objective and the assessment methods that will be used (Guideline 13.1a & b)	B) Rotation or class in which assessment will occur (Guideline 13.1c)	C) Individuals responsible for ensuring assessment occurs (Guideline 13.1d)	D) Timeline for collecting formative and summative data (Guideline 13.1e)	E) Resulting data with the date collected for 2 competencies per domain
CRD 3.1: Perform the Nutrition Care Process (a through e below) and use standardized nutrition language for individuals, groups and populations of differing ages and health status, in a variety of settings	<p>80% of inters will achieve a letter grade of B or better on the rotation evaluation at the completion of supervised practice clinical rotation.</p> <p>80% of interns will receive an evaluation rating of “adequate” and “more than adequate” on “charts using the Nutrition Care Process and other methods and writes appropriate care plans”</p>	DFN 730 - MNT rotation	Preceptor	During and end of clinical rotations; 5-year summative based on evaluations by preceptors	<p>2011-2015: Clinical grade 68 A 11 A- 7 B+ 7 B 1 C+ 93/94 = 98.9%</p> <p>Clinical evaluation 67 more than adequate 28 adequate 4 less than adequate 95/99 = 95.9%</p> <p>Met: 98.9% of interns achieved a letter grade of B or better on evaluation upon completion of clinical rotation. 84% of interns received a letter grade of A/A- (72% A, 16% A-).</p> <p>95.9% of interns were evaluated as “adequate”</p>

					and “more than adequate” on using the NCP (67.7% “more than adequate,” 28.3% “adequate”)
<ul style="list-style-type: none"> CRD 3.1.a: Assess the nutritional status of individuals, groups and populations in a variety of settings where nutrition care is or can be delivered 	<p>80% of interns will achieve a letter grade of B or better on the rotation evaluation at the completion of the supervised practice and community rotations</p> <p>80% of interns will receive an “adequate” or “more than adequate” on their clinical evaluation for “develops a community needs assessment of the population served by the agency.”</p>	DFN 730 – Community rotation	Preceptor	5-year summative for Community rotation; 2011-2015: collected from evaluation forms completed by the preceptors	<p>2011-2015: Community grade 135 A 30 A- 7 B+ 13 B 135/135 = 100%</p> <p>Community evaluation 70 more than adequate 26 adequate 0 less than adequate 96/96 = 100%</p> <p>Met: 100% of interns achieved a letter grade of B or better on evaluation upon completion of community rotation.</p> <p>100% of interns were evaluated as “adequate” (27%) or “more than adequate” (72.9%) or developing community needs assessment of the population served by the agency.”</p>
<ul style="list-style-type: none"> CRD 3.1.b.: Diagnose nutrition problems and create problem, etiology, signs and symptoms (PES) 	80% of interns will achieve a letter grade of B or better on the rotation evaluation at the completion of the	DFN 730 – Clinical rotation	Preceptor	5-year summative for Clinical rotation; 2011-2015: collected from evaluation forms completed by the	2011-2015: Clinical grade 68 A 11 A- 7 B+

statements	<p>supervised practice clinical rotations</p> <p>80% of interns will receive an evaluation rating of “adequate” and “more than adequate” on “demonstrates ability to develop an appropriate Nutrition Diagnosis and PES statement” on MNT Individual Unit Summary</p>			preceptors	<p>7 B 1 C+ 93/94 = 98.9%</p> <p>PES statements 81 more than adequate 33 adequate 4 less than adequate 114/118 = 96.6%</p> <p>Met: 98.9% of interns achieved a letter grade of B or better on evaluation upon completion of clinical rotation. 84% of interns received a letter grade of A/A- (72% A, 16% A-).</p> <p>96.6% of interns were evaluated as “adequate” and “more than adequate” on “demonstrates ability to develop an appropriate Nutrition Diagnosis and PES statement” (68.6% “more than adequate,” 28%% “adequate”)</p>
<ul style="list-style-type: none"> CRD 3.1.c: Plan and implement nutrition interventions to include prioritizing the nutrition diagnosis, formulating a nutrition prescription, establishing goals and selecting and managing intervention 	<p>80% of interns will achieve a letter grade of B or better on the rotation evaluation at the completion of the supervised practice clinical rotations</p> <p>80% of interns will receive an evaluation rating of</p>	DFN 730 - MNT rotation	Preceptor	During and end of clinical and community rotations; 5-year summative	<p>2011-2015: Clinical grade 68 A 11 A- 7 B+ 7 B 1 C+ 93/94 = 98.9%</p> <p>Intervention</p>

	“adequate” and “more than adequate” on “devises appropriate interventions & patient care plans” on MNT Individual Unit Summary				<p>78 more than adequate 47 adequate 0 less than adequate 125/125 = 100%</p> <p>Met: 98.9% of interns achieved a letter grade of B or better on evaluation upon completion of clinical rotation. 84% of interns received a letter grade of A/A- (72% A, 16% A-).</p> <p>100% of interns were evaluated as “adequate” and “more than adequate” on “developing appropriate interventions and patient care plans” (62.4% “more than adequate,” 37.6% “adequate”)</p>
<ul style="list-style-type: none"> CRD 3.1.d: Monitor and evaluate problems, etiologies, signs, symptoms and the impact of interventions on the nutrition diagnosis 	80% of interns will achieve a final grade of B or better on final exam of clinical nutrition course	DFN 651	Faculty	During and end of clinical nutrition course	<p>2014: 8/10 = 80% 2015: 12/14 = 85.7%</p> <p>Met: 20/24 = 83.3% of interns achieved a final exam grade of B or better</p>
<ul style="list-style-type: none"> CRD 3.1.e: Complete documentation that follows professional guidelines, guidelines required by health care systems and guidelines required by the practice setting 	80% of interns will achieve a letter grade of B or better on the rotation evaluation at the completion of the supervised practice clinical rotation	DFN 730 - MNT rotation	Preceptor	During and end of clinical and community rotations; 5-year summative	<p>2011-2015: Clinical grade 68 A 11 A- 7 B+ 7 B 1 C+ 93/94 = 98.9%</p>

					Met: 98.9% of interns achieved a letter grade of B or better on evaluation upon completion of clinical rotation. 84% of interns received a letter grade of A/A- (72% A, 12% A-).
CRD 3.2: Demonstrate effective communications skills for clinical and customer services in a variety of formats (Note: <i>Formats include oral, print, visual, electronic and mass media methods for maximizing client education, employee training and marketing.</i>)	80% of interns will achieve a letter grade of B or better on the rotation evaluation at the completion of the supervised practice food service rotation: Employee In-service training presentation	DFN 730 – Food Service Management rotation	Preceptor	During and end of food service rotation; 5-year summative	2011-2015 47 A 11 A- 4 B+ 1 B 63/63 = 100% Met: 100% of interns achieved a letter grade of B or better on evaluation at completion of the Employee In-service training presentation. 92.5% of interns achieved grade of A/A- (75% A, 17.5% A-)
CRD 3.3: Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management (Note: <i>Students/interns should consider health messages and interventions that integrate the consumer's desire for taste, convenience and economy with the need for nutrition, food safety.</i>)	80% of interns will achieve a grade of B or better on completion of Wellness Newsletter article	DFN 731 – fall and spring	DI Director	During and end of coursework in Concepts and Methods in Dietetics; 2-year summative (2014, 2015)	2014: 13/13 = 100% 2015: 13/14 = 92.8% Met: 96% of interns achieved a grade of B or better on completion of the Wellness Newsletter
CRD 3.4: Deliver respectful,	80% of interns will achieve	DFN 730 – Community	Preceptor	During and end of	2011-2015

<p>science-based answers to consumer questions concerning emerging trends</p>	<p>a letter grade of B or better on the rotation evaluation at the completion of the supervised practice of Community rotation</p> <p>80% of interns will receive an evaluation rating of “adequate” and “more than adequate” on “demonstrates ability to educate and counsel patients served by the agency with appropriate cultural sensitivity” on community evaluation</p>	<p>rotations</p>		<p>community rotations (WIC, HIV/AIDS, and Public Health) 5-year summative</p>	<p>Community grade 135 A 30 A- 7 B+ 13 B 135/135 = 100%</p> <p>Community evaluation 138 more than adequate 39 adequate 1 less than adequate 177/178= 99.4%</p> <p>Met: 100% of interns achieved a letter grade of B or better on evaluation at completion of the community rotations. 89% of interns achieved grade of A/A- (73% A, 16% A-)</p> <p>100% of interns were evaluated as “adequate” and “more than adequate” on “demonstrates ability to educate and counsel patients served by the agency with appropriate cultural sensitivity” (77.5% “more than adequate,” 21.9% “adequate”)</p>
<p>CRD 3.5: Coordinate procurement, production, distribution and service of goods and services (Note: <i>Students/Interns should</i></p>	<p>80% of interns will achieve a grade of B or better on completion Simulations Project: staffing, equipment, layout design,</p>	<p>DFN 661</p>	<p>Faculty</p>	<p>During and end of coursework</p>	<p>2013: 9/10 = 90% 2014: 7/7 = 100% 2015: 8/8 = 100%</p> <p>Met: 24/25 = 96% of</p>

<i>demonstrate and promote responsible use of resources including employees, money, time, water, energy, food and disposable goods.)</i>	menu pricing and options, marketing, financial management and purchasing.				interns achieved a letter grade of B or better on the Simulations project
CRD 3.6: Develop and evaluate recipes, formulas and menus for acceptability and affordability that accommodate the cultural diversity and health needs of various populations, groups and individuals	80% of interns will achieve a letter grade of B or better on the rotation evaluation at the completion of the supervised practice of Food Service Management rotation	DFN 730 – Food Service Management rotation	Preceptor	During and end of food service rotation; 5-year summative	2011-2015 52 A 7 A- 3 B + 2 B 64/64 = 100% Met: 100% of the interns achieved a grade of B or better upon the completion of food service rotation; 92% of interns achieved a grade of A/A- (81% A and 11% A-)
<p>Domain 4: Practice Management and Use of Resources: strategic application of principles of management and systems in the provision of services to individuals and organizations</p> <p>KRD 4.1: The curriculum must include management and business theories and principles required to deliver programs and services.</p> <p>KRD 4.2: The curriculum must include content related to quality management of food and nutrition services.</p> <p>KRD 4.3: The curriculum must include the fundamentals of public policy, including the legislative and regulatory basis of dietetics practice. (Note: <i>Students must be able to explain the impact of a public policy position on dietetics practice.</i>)</p> <p>KRD 4.4: The curriculum must include content related to health care systems. (Note: <i>Students must be able to explain the impact of health care policy and different health care delivery systems on food and nutrition services.</i>)</p> <p>KRD 4.5: The curriculum must include content related to coding and billing of dietetics/nutrition services to obtain reimbursement for services from public or private insurers</p>					
	A) Learning objective and the assessment methods that will be used (Guideline 13.1a & b)	B) Rotation or class in which assessment will occur (Guideline 13.1c)	C) Individuals responsible for ensuring assessment occurs (Guideline 13.1d)	D) Timeline for collecting formative and summative data (Guideline 13.1e)	E) Resulting data with the date collected for 2 competencies per domain
CRD 4.1: Participate in management of human resources	80% of interns will achieve a letter grade of B or better on rotation evaluation at the completion of the	DFN 730 – Food Service Management rotation	Preceptor	During and end of food service rotation; five-year summative based on preceptor evaluations	2011-2015 45 A 15 A- 3 B+ 1 B

	supervised practice Food Service Management rotation: Personnel Management				64/64 = 100% Met: 100% of interns achieved a letter grade of B or better on the Personnel Management component of the Food Service Management rotation. 93% received a letter grade of A/A- (70% A, 23% A-)
CRD 4.2: Perform management functions related to safety, security and sanitation that affect employees, customers, patients, facilities and food	80% of interns will achieve a letter grade of B or better on the rotation evaluation of the supervised practice Food Service Management 100% of interns pass the Food Handlers/Food Managers ServSafe Exam	DFN 730 – Food Service Management rotation	Preceptor and DI Director	During and end of food service rotation; five-year summative based on preceptor evaluations	2011-2015 52 A 7 A- 3 B + 2 B 64/64 = 100% Met: 100% of the interns achieved a grade of B or better upon the completion of food service rotation; 92% of interns achieved a grade of A/A- (81% A and 11% A-) 100% of interns have certificates for Food Handlers of Food Managers ServSafe Exam.
CRD 4.3: Participate in public policy activities, including both legislative and regulatory initiatives	80% of interns will achieve a letter grade of B or better on completion of coursework	DFN 731 - fall	Faculty	During and end of coursework	2014: 13 /13 = 100% 2015: 14 /14 = 100% 27/27 = 100% of interns achieved a letter grade of B or better upon

					completion of coursework (2014 and 2015)
CRD 4.4: Conduct clinical and customer service quality management activities	80% of the interns will receive a grade of B or better on the rotation evaluation at the completion of the supervised practice: Quality Assurance	DFN 730 - MNT rotation	Preceptor	During and end of completion of quality assurance component of rotation; 5-year summative	2011-2015 42 A 13 A- 7 B+ 4 B 66/66 = 100% Met: 100% of interns achieved a grade of B or better for Quality Assurance of the MNT rotation. 83% of inters achieved a grade of A/A-.
CRD 4.5: Use current informatics technology to develop, store, retrieve and disseminate information and data	80% of interns will receive a letter grade of B or better on the supervised practice Food Service Management rotation 80% of interns will receive an evaluation of "adequate" or "more than adequate" for "Utilizes computer technology in the practice of dietetics and food service."	DFN 730 - Food Service Management rotation	Preceptor	During and end of food service rotation; 5-year summative based on preceptor evaluations	2011-2015 52 A 7 A- 3 B + 2 B 64/64 = 100% Computer technology 53 more than adequate 11 adequate 64/64 = 100% Met: 100% of the interns achieved a grade of B or better upon the completion of food service rotation; 92% of interns achieved a grade of A/A- (81% A and 11% A-) 100% of interns were evaluated favorably.

					82.8% evaluated as "more than adequate in utilizing "computer technology in the practice of dietetics and nutrition." Remaining 16% evaluated as "adequate."
CRD 4.6: Analyze quality, financial or productivity data and develop a plan for intervention	80% of interns will achieve a letter grade of B or better on the cumulative rotation evaluation at the completion of supervised practice food service rotation: Cost Analysis of 7-day menu	DFN 730 – Food Service Management rotation	Preceptor	During and end of food service rotation; 5-year summative based on preceptor evaluation	2011-2015 39 A 17 A- 5 B+ 2 B 63/63 = 100% Met: 100% of interns achieved a grade of B or better on the 7-day Cost Analysis at the end of the food service rotation. 89% achieved a grade of A/A-.
CRD 4.7: Propose and use procedures as appropriate to the practice setting to reduce waste and protect the environment ⁵	80% of interns will participate in field trip to agricultural center that promotes food and sustainability. 80% interns will conduct research on sustainability with presentation and/or write newsletter or volunteer at a farmer's market and share with	DFN 731 – spring and summer DFN 730 – research, newsletter, and volunteer opportunities at farmer's market	DI Director	Field Trip (2014, 2015) Research presentations, Farmers market volunteer, and/or newsletter	2014: 12/13 = 92.3% 2015: 13/14 = 92.8% Met: 96% of interns participated in field trip to Stone Barns Food and Agricultural Center. 2014:10/13 = 76.9% 2015: 14/14 = 100%

⁵ Students/interns are encouraged to promote environmentally-friendly practices, so that future generations have the water, materials, and resources to protect human health and life on the planet. Practical steps include using local ingredients; not wasting food and resources; using efficacious, non-toxic products when available; properly disposing of toxic materials; reusing containers and products; recycling when possible; purchasing products with recycled content; and teaching others the value of sustainability.

	classmates				<p>Met: 24/27 = 88.9% of interns participated and shared learning experiences through newsletter, research project and/or volunteer at farmer's market</p>
CRD 4.8: Conduct feasibility studies for products, programs or services with consideration of costs and benefits.	<p>80% of interns will receive a grade of B or better on completion of coursework</p> <p>80% of interns will receive an evaluation of "adequate" or "more than adequate" for "participates in the management of human, financial, material, physical, and operational resources."</p>	DFN 730 - Food Service rotation	Preceptor	During and end of food service rotation; 5-year summative based on preceptor evaluation	<p>2011-2015 52 A 7 A- 3 B + 2 B 64/64 = 100%</p> <p>Resource management 37 more than adequate 25 adequate 62/62 = 100%</p> <p>Met: 100% of the interns achieved a grade of B or better upon the completion of food service rotation; 92% of interns achieved a grade of A/A- (81% A and 11% A-)</p> <p>100% of interns were evaluated favorably. 59.7% evaluated as "more than adequate in utilizing "computer technology in the practice of dietetics and nutrition." Remaining 40.3% evaluated as "adequate."</p>

CRD 4.9: Analyze financial data to assess utilization of resources	80% of interns will achieve a grade of B or better on completion Simulations Project: staffing, equipment, layout design, menu pricing and options, marketing, financial management and purchasing.	DFN 661	Faculty	During and end of coursework	2013: 10/10 = 100% 2014: 7/7 = 100% 2015: 8/8 = 100% Met: 25/25 = 100% achieved a grade of B or better
CRD 4.10: Develop a plan to provide or develop a product, program or service that includes a budget, staffing needs, equipment and supplies	80% of interns will achieve a letter grade of 80% or better on completion of the DESIGN Project	DFN 641	Faculty	During and end of coursework (2015)	2015: 7/8 = 85,7 Met: 85.7% of interns achieved a grade of B or better on the completion of the DESIGN project (average = 92%)
CRD 4.11: Code and bill for dietetic/nutrition services to obtain reimbursement from public or private insurers.	80% of interns will receive a grade of B or better on completion of coursework: Career Paths including private practice/reimbursement	DFN 731 - spring	Faculty	During and end of coursework.	2014: 13/13 = 100% 2015: 13/14 = 92% Met: 26/27 = 96% of interns achieved a letter grade of B or better upon completion of coursework (2014 and 2015)

Domain 5: Support Knowledge: knowledge underlying the requirements specified above.

KRD 5.1: The food and food systems foundation of the dietetics profession must be evident in the curriculum. Course content must include the principles of food science and food systems, techniques of food preparation and application to the development, modification and evaluation of recipes, menus and food products acceptable to diverse groups.

KRD 5.2: The physical and biological science foundation of the dietetics profession must be evident in the curriculum. Course content must include organic chemistry, biochemistry, physiology, genetics, microbiology, pharmacology, statistics, nutrient metabolism and nutrition across the lifespan.

KRD 5.3: The behavioral and social science foundation of the dietetics profession must be evident in the curriculum. Course content must include concepts of human behavior and diversity, such as psychology, sociology or anthropology

LEHMAN COLLEGE DIETETIC INTERNSHIP
Dietetic Internship Using the IP Standards
Learning Assessment Summary Matrix (Standard 13)
On-going Assessment of Core Knowledge & Competencies for the RD
Assessment Period from 2016 to 2020

Domain 1: Scientific and Evidence Base of Practice: integration of scientific information and research⁶ into practice					
KRD 1.1: The curriculum must reflect the scientific basis of the dietetics profession and must include research methodology, interpretation of research literature and integration of research principles into evidence-based practice. (Note: <i>Examples of evidence-based guidelines and protocols include the Academy's Evidence Analysis Library and Evidence-based Nutrition Practice Guidelines, the Cochrane Database of Systematic Reviews and the U.S. Department of Health and Human Services, Agency for Healthcare Research and Quality, National Guideline Clearinghouse Web sites.</i>)					
	A) Learning objective and the assessment methods that will be used (Guideline 13.1a & b)	B) Rotation or class in which assessment will occur (Guideline 13.1c)	C) Individuals responsible for ensuring assessment occurs (Guideline 13.1d)	D) Timeline for collecting formative and summative data (Guideline 13.1e)	E) Resulting data with the date collected for 2 competencies per domain
EXAMPLE CRD 2.3: Design, implement and evaluate presentations to a target audience (Note: <i>A quality presentation considers life experiences, cultural diversity and educational background of the target audience.</i>)	EXAMPLE 100% of students will score a four or better (on a five point scale) when giving a lecture at the Senior Center.	EXAMPLE Community Rotation	EXAMPLE Preceptor Program Director	EXAMPLE At the completion of the presentation	EXAMPLE 2010: 30/35 (86%) 2011: 25/30 (83%) 2012: 32/35 (91%) 2013: 34/35 (97%) 2014: 23/28 (82%) Not Met: 144/163 (88%) of students received a score of four or better (on a five point scale) over the assessment period (2009-2014).
CRD 1.1: Select indicators of program quality and/or customer service and measure achievement of objectives. (Note: <i>Outcomes</i>	80% of interns will achieve a letter grade of B or better on completion of final course exam	DFN 651	Faculty	During and end of graduate clinical course; 2-year summative (2014, 2015)	

⁶ Research is broadly defined as an activity that includes all components of the scientific method; i.e., statement of the problem, data collection, analysis and interpretation of results; and decision-making based on results. All students should have core experiences that prepare them to properly interpret research literature and apply it to practice (evidence-based practice), document the value of their services, and participate in adding to the body of scientific knowledge on nutrition, health, and wellness. Activities may include community needs assessment, food science experiments, product development/improvement, continuous-quality improvement activities, or other research projects including master theses and doctoral dissertations.

<i>may include clinical, programmatic, quality, productivity, economic or other outcomes in wellness, management, sports, clinical settings, etc.)</i>					
CRD 1.2: Apply evidence-based guidelines, systematic reviews and scientific literature (such as the Academy’s Evidence Analysis Library and Evidence-based Nutrition Practice Guidelines, the Cochrane Database of Systematic Reviews and the U.S. Department of Health and Human Services, Agency for Healthcare Research and Quality, National Guideline Clearinghouse Web sites) in the nutrition care process and model and other areas of dietetics practice	80% of interns will achieve a letter grade of B or above on completion of academic coursework: Case Study: Cancer	DFN 661	Faculty	During and end of graduate clinical course	
CRD 1.3: Justify programs, products, services and care using appropriate evidence or data	80% of interns will achieve a letter grade of B or better on completion of Operations Menu	DFN 661	Faculty	During and end of food service management course	
CRD 1.4: Evaluate emerging research for application in dietetics practice	80% of students will achieve a letter grade of B or better on the completion of the Clinical Case Study Paper and Presentation	DFN 731 – fall, spring, summer	Faculty and DI Director	End of Clinical rotation; 2-year summative (2014, 2015)	
CRD 1.5: Conduct projects using appropriate research methods, ethical procedures and data analysis	80% of students will achieve a grade of B or better on completion of Research Paper and Presentation	DFN 730 - Research rotation	Preceptor	5-year summative for research rotation; 2011-2015: collected from evaluation forms completed by preceptors	

	80% of interns will achieve an overall grade of B or better on the completion of their Research rotation				

Domain 2: Professional Practice Expectations: beliefs, values, attitudes and behaviors for the professional dietitian level of practice.

KRD 2.1: The curriculum must include opportunities to develop a variety of communication skills sufficient for entry into pre-professional practice. (Note: *Students must be able to demonstrate effective and professional oral and written communication and documentation.*)

KRD 2.2: The curriculum must provide principles and techniques of effective counseling methods. (Note: *Students must be able to demonstrate counseling techniques to facilitate behavior change.*)

KRD 2.3: The curriculum must include opportunities to understand governance of dietetics practice, such as the Scope of Dietetics Practice and the Code of Ethics for the Profession of Dietetics; and interdisciplinary relationships in various practice settings.

	A) Learning objective and the assessment methods that will be used (Guideline 13.1a & b)	B) Rotation or class in which assessment will occur (Guideline 13.1c)	C) Individuals responsible for ensuring assessment occurs (Guideline 13.1d)	D) Timeline for collecting formative and summative data (Guideline 13.1e)	E) Resulting data with the date collected for 2 competencies per domain
CRD 2.1: Practice in compliance with current federal regulations and state statutes and rules, as applicable and in accordance with accreditation standards and the Scope of Dietetics Practice and Code of Ethics for the Profession of Dietetics	80% of interns will achieve a letter grade of B or better at the completion of the supervised practice clinical rotation. 80% of interns will receive an “adequate” or “more than adequate” on their clinical evaluation for “complies with Code of Ethics & Standards of Professional Practice.”	DFN 730 – MNT rotation	Preceptor	5-year summative for MNT rotation; 2011-2015: collected from evaluation forms completed by preceptors (numbers reflect that some interns had more than one clinical rotation (e.g. hospital plus private practice)	
CRD 2.2: Demonstrate professional writing skills in preparing professional communications (Note: <i>Examples include research manuscripts, project proposals, education materials, policies and procedures</i>)	80% of interns will achieve a letter grade of 80% or better on completion of the Grant Writing Project	DFN 641	Faculty	During and end of coursework (2015)	
CRD 2.3: Design, implement and evaluate presentations to a target audience (Note: <i>A quality presentation considers life experiences, cultural diversity and educational</i>	80% of interns will receive a letter grade of B or above the public school educational presentation utilizing a nutrition needs assessment of the	DFN 730 - Public School rotation	Preceptor and DI Director	During and end of community, public school rotation; 5-year summative	

<i>background of the target audience.)</i>	students served by the school.				
CRD 2.4: Use effective education and counseling skills to facilitate behavior change	80% of interns will achieve a letter grade of 80% or better on completion of Self-Awareness Paper demonstrating negotiating skills and respective life experiences	HEA 620	Faculty	During and end of coursework	
CRD 2.5: Demonstrate active participation, teamwork and contributions in group settings	80% of interns will achieve a letter grade of 80% or better on completion of the DESIGN Project	DFN 641	Faculty	During and end of coursework (2015)	
CRD 2.6: Assign patient care activities to DTRs and/or support personnel as appropriate (Note: <i>In completing the task, students/interns should consider the needs of the patient/client or situation, the ability of support personnel, jurisdictional law, practice guidelines and policies within the facility.</i>)	80% of interns will achieve a letter grade of B or better on the rotation evaluation at the completion of supervised practice clinical rotation: MNT Staff Relief	DFN 730 – MNT rotation	Preceptor	5-year summative for MNT rotation; 2011-2015: collected from evaluation forms completed by the preceptors	
CRD 2.7: Refer clients and patients to other professionals and services when needs are beyond individual scope of practice	80% of interns will receive a letter grade of B or better on the rotation evaluation at the completion of supervised practice rotation: HIV/AIDS (as part of total for Community)	DFN 730 – Community – HIV/AIDS rotation	Preceptors	5-year summative for Community – HIV/AIDS rotation: 2011-2015 collected from evaluation forms completed by the preceptors	
CRD 2.8: Apply leadership skills to achieve desired outcomes	80% of interns will receive a letter grade of B or better on the rotation evaluation at the completion of the community rotations.	DFN 730 – Community rotations (WIC, HIV/AIDS, Public Health)	Preceptors	5-year summative for Community rotation; 2011-2015: collected from evaluation forms completed by the preceptors	

	80% of interns will be evaluated as “adequate” or “more than adequate” for criteria: “engages in a program of self-development and continuing education” and “extends him/herself above and beyond expectations in difficult situations.”				
CRD 2.9: Participate in professional and community organizations ^{7,8}	80% of interns will achieve a grade of B or better on completion of volunteering in a community or professional organization	DFN 731 – Volunteer	DI Director	During and end of experience	
CRD 2.10: Establish collaborative relationships with other health professionals and support personnel to deliver effective nutrition services (Note: <i>Other health professional include physicians, nurses, pharmacists, etc.</i>)	80% of interns will achieve a letter grade of B or better on the rotation evaluation at the completion of the supervised clinical rotation: Critical Care	DFN 730 – MNT rotation	Preceptor	During and end of MNT rotation; 5-year summative (2011-2015) based on evaluations completed by preceptors	
CRD 2.11: Demonstrate professional attributes within various organizational cultures (Note: <i>Professional attributes include showing initiative and proactively developing solutions, advocacy, customer focus,</i>	80% of interns will achieve a letter grade of B or better on the rotation evaluation of supervised practice during Community rotation – WIC (as part of total for Community)	DFN 730 – Community WIC rotation	Preceptor	5-year summative for Community – WIC rotation: 2011-2015 collected from evaluation forms completed by the preceptors	

⁷ Community-based supervised practice experiences need not take place in a dietetics-related organization. Experiences may occur in local community organizations such as United Way, food banks such as Second Harvest, or even faith-based organizations such as the Salvation Army. Experiences can also occur at sister units of the program within the parent organization such as an outpatient clinic or a campus fitness center.

⁸ Professional and community organizations provide many opportunities for students to develop leadership skills. They do not have to hold an elected position to demonstrate leadership. For example, the program can create community-based projects where a group of students is asked to serve under the leadership of another student. After a task or set of tasks is successfully accomplished, another student may be selected to lead the group in accomplishing different tasks, until eventually; all students get to take a leadership role.

<i>risk taking, critical thinking, flexibility, time management, work prioritization and work ethic.)</i>					
CRD 2.12: Perform self-assessment, develop goals and objectives and prepare a draft portfolio for professional development as defined by the Commission on Dietetic Registration	80% of interns will achieve a letter grade of B or better on final grade and completion of self-assessment	DFN 731-summer	DI Director	During and end of coursework; 2-year (2014, 2015), 6-year DI Exit Survey, and 6-year Self-Assessment (2010-2015)	
CRD 2.13: Demonstrate negotiation skills (Note: <i>Demonstrating negotiating skills includes showing assertiveness when needed, while respecting the life experiences, cultural diversity and educational background of the other parties.</i>)	80% of Interns are able to achieve a grade of 80% or greater on completion of the Behavior Change Project	HEA 620	Faculty	During and end of coursework; 5-year summative	

Domain 3: Clinical and Customer Services: development and delivery of information, products and services to individuals, groups and populations

KRD 3.1: The curriculum must reflect the principles of Medical Nutrition Therapy and the practice of the nutrition care process, including principles and methods of assessment, diagnosis, identification and implementation of interventions and strategies for monitoring and evaluation. (Note: *Students must be able to use the nutrition care process to make decisions, to identify nutrition-related problems and determine and evaluate nutrition interventions.*)

KRD 3.2: The curriculum must include the role of environment, food, nutrition and lifestyle choices in health promotion and disease prevention. (Note: *Students must be able to develop interventions to affect change and enhance wellness in diverse individuals and groups.*)

KRD 3.3: The curriculum must include education and behavior change theories and techniques. (Note: *Students must be able to develop an educational session or program/educational strategy for a target population.*)

	A) Learning objective and the assessment methods that will be used (Guideline 13.1a & b)	B) Rotation or class in which assessment will occur (Guideline 13.1c)	C) Individuals responsible for ensuring assessment occurs (Guideline 13.1d)	D) Timeline for collecting formative and summative data (Guideline 13.1e)	E) Resulting data with the date collected for 2 competencies per domain
CRD 3.1: Perform the Nutrition Care Process (a through e below) and use standardized nutrition language for individuals, groups and populations of differing ages and health status, in a variety of settings	<p>80% of inters will achieve a letter grade of B or better on the rotation evaluation at the completion of supervised practice clinical rotation.</p> <p>80% of interns will receive an evaluation rating of “adequate” and “more than adequate” on “charts using the Nutrition Care Process and other methods and writes appropriate care plans”</p>	DFN 730 - MNT rotation	Preceptor	During and end of clinical rotations; 5-year summative based on evaluations by preceptors	
<ul style="list-style-type: none"> CRD 3.1.a: Assess the nutritional status of individuals, groups and populations in a variety of settings where nutrition care is or can be delivered 	<p>80% of interns will achieve a letter grade of B or better on the rotation evaluation at the completion of the supervised practice and community rotations</p> <p>80% of interns will receive an “adequate” or “more than adequate” on their clinical evaluation for</p>	DFN 730 – Community rotation	Preceptor	5-year summative for Community rotation; 2011-2015: collected from evaluation forms completed by the preceptors	

	“develops a community needs assessment of the population served by the agency.”				
<ul style="list-style-type: none"> • CRD 3.1.b.: Diagnose nutrition problems and create problem, etiology, signs and symptoms (PES) statements 	<p>80% of interns will achieve a letter grade of B or better on the rotation evaluation at the completion of the supervised practice clinical rotations</p> <p>80% of interns will receive an evaluation rating of “adequate” and “more than adequate” on “demonstrates ability to develop an appropriate Nutrition Diagnosis and PES statement” on MNT Individual Unit Summary</p>	DFN 730 – Clinical rotation	Preceptor	5-year summative for Clinical rotation; 2011-2015: collected from evaluation forms completed by the preceptors	
<ul style="list-style-type: none"> • CRD 3.1.c: Plan and implement nutrition interventions to include prioritizing the nutrition diagnosis, formulating a nutrition prescription, establishing goals and selecting and managing intervention 	<p>80% of interns will achieve a letter grade of B or better on the rotation evaluation at the completion of the supervised practice clinical rotations</p> <p>80% of interns will receive an evaluation rating of “adequate” and “more than adequate” on “devises appropriate interventions & patient care plans” on MNT Individual Unit Summary</p>	DFN 730 - MNT rotation	Preceptor	During and end of clinical and community rotations; 5-year summative	
<ul style="list-style-type: none"> • CRD 3.1.d: Monitor and evaluate problems, 	80% of interns will achieve a final grade of B or better	DFN 661	Faculty	During and end of clinical nutrition course	

etiologies, signs, symptoms and the impact of interventions on the nutrition diagnosis	on final exam of clinical nutrition course				
<ul style="list-style-type: none"> CRD 3.1.e: Complete documentation that follows professional guidelines, guidelines required by health care systems and guidelines required by the practice setting 	80% of interns will achieve a letter grade of B or better on the rotation evaluation at the completion of the supervised practice clinical rotation	DFN 730 - MNT rotation	Preceptor	During and end of clinical and community rotations; 5-year summative	
CRD 3.2: Demonstrate effective communications skills for clinical and customer services in a variety of formats (Note: <i>Formats include oral, print, visual, electronic and mass media methods for maximizing client education, employee training and marketing.</i>)	80% of interns will achieve a letter grade of B or better on the rotation evaluation at the completion of the supervised practice food service rotation: Employee In-service training presentation	DFN 730 – Food Service Management rotation	Preceptor	During and end of food service rotation; 5-year summative	
CRD 3.3: Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management (Note: <i>Students/interns should consider health messages and interventions that integrate the consumer’s desire for taste, convenience and economy with the need for nutrition, food safety.</i>)	80% of interns will achieve a grade of B or better on completion of Wellness Newsletter article	DFN 731 – fall and spring	DI Director	During and end of coursework in Concepts and Methods in Dietetics; 2-year summative (2014, 2015)	
CRD 3.4: Deliver respectful, science-based answers to consumer questions concerning emerging trends	80% of interns will achieve a letter grade of B or better on the rotation evaluation at the completion of the supervised practice of Community rotation	DFN 730 – Community rotations	Preceptor	During and end of community rotations (WIC, HIV/AIDS, and Public Health) 5-year summative	

	80% of interns will receive an evaluation rating of “adequate” and “more than adequate” on “demonstrates ability to educate and counsel patients served by the agency with appropriate cultural sensitivity” on community evaluation				
CRD 3.5: Coordinate procurement, production, distribution and service of goods and services (Note: <i>Students/Interns should demonstrate and promote responsible use of resources including employees, money, time, water, energy, food and disposable goods.</i>)	80% of interns will achieve a grade of B or better on completion Simulations Project: staffing, equipment, layout design, menu pricing and options, marketing, financial management and purchasing.	DFN 661	Faculty	During and end of coursework	
CRD 3.6: Develop and evaluate recipes, formulas and menus for acceptability and affordability that accommodate the cultural diversity and health needs of various populations, groups and individuals	80% of interns will achieve a letter grade of B or better on the rotation evaluation at the completion of the supervised practice of Food Service Management rotation	DFN 730 – Food Service Management rotation	Preceptor	During and end of food service rotation; 5-year summative	

Domain 4: Practice Management and Use of Resources: strategic application of principles of management and systems in the provision of services to individuals and organizations

KRD 4.1: The curriculum must include management and business theories and principles required to deliver programs and services.

KRD 4.2: The curriculum must include content related to quality management of food and nutrition services.

KRD 4.3: The curriculum must include the fundamentals of public policy, including the legislative and regulatory basis of dietetics practice. (Note: *Students must be able to explain the impact of a public policy position on dietetics practice.*)

KRD 4.4: The curriculum must include content related to health care systems. (Note: *Students must be able to explain the impact of health care policy and different health care delivery systems on food and nutrition services.*)

KRD 4.5: The curriculum must include content related to coding and billing of dietetics/nutrition services to obtain reimbursement for services from public or private insurers

	A) Learning objective and the assessment methods that will be used (Guideline 13.1a & b)	B) Rotation or class in which assessment will occur (Guideline 13.1c)	C) Individuals responsible for ensuring assessment occurs (Guideline 13.1d)	D) Timeline for collecting formative and summative data (Guideline 13.1e)	E) Resulting data with the date collected for 2 competencies per domain
CRD 4.1: Participate in management of human resources	80% of interns will achieve a letter grade of B or better on rotation evaluation at the completion of the supervised practice Food Service Management rotation: Personnel Management	DFN 730 – Food Service Management rotation	Preceptor	During and end of food service rotation; five-year summative based on preceptor evaluations	
CRD 4.2: Perform management functions related to safety, security and sanitation that affect employees, customers, patients, facilities and food	80% of interns will achieve a letter grade of B or better on the rotation evaluation of the supervised practice Food Service Management 100% of interns pass the Food Handlers/Food Managers ServSafe Exam	DFN 730 – Food Service Management rotation	Preceptor and DI Director	During and end of food service rotation; five-year summative based on preceptor evaluations	
CRD 4.3: Participate in public policy activities, including both legislative and regulatory initiatives	80% of interns will achieve a letter grade of B or better on completion of coursework	DFN 731 - fall	Faculty	During and end of coursework	
CRD 4.4: Conduct clinical and customer service quality management activities	80% of the interns will receive a grade of B or better on the rotation evaluation at the completion of the supervised practice: Quality Assurance	DFN 730 - MNT rotation	Preceptor	During and end of completion of quality assurance component of rotation; 5-year summative	
CRD 4.5: Use current informatics technology to develop, store, retrieve and disseminate information and	80% of interns will receive a letter grade of B or better on the supervised practice Food Service	DFN 730 - Food Service Management rotation	Preceptor	During and end of food service rotation; 5-year summative based on preceptor evaluations	

data	Management rotation 80% of interns will receive an evaluation of “adequate” or “more than adequate” for “Utilizes computer technology in the practice of dietetics and food service.”				
CRD 4.6: Analyze quality, financial or productivity data and develop a plan for intervention	80% of interns will achieve a letter grade of B or better on the cumulative rotation evaluation at the completion of supervised practice food service rotation: Cost Analysis of 7-day menu	DFN 730 – Food Service Management rotation	Preceptor	During and end of food service rotation; 5-year summative based on preceptor evaluation	
CRD 4.7: Propose and use procedures as appropriate to the practice setting to reduce waste and protect the environment ⁹	80% of interns will participate in field trip to agricultural center that promotes food and sustainability	DFN 731 - summer	DI Director	Field Trip (2014, 2015)	
CRD 4.8: Conduct feasibility studies for products, programs or services with consideration of costs and benefits.	80% of interns will receive a grade of B or better on completion of coursework 80% of interns will receive an evaluation of “adequate” or “more than adequate” for “participates in the management of human, financial, material, physical, and operational resources.”	DFN 730 - Food Service rotation	Preceptor	During and end of food service rotation; 5-year summative based on preceptor evaluation	

⁹ Students/interns are encouraged to promote environmentally-friendly practices, so that future generations have the water, materials, and resources to protect human health and life on the planet. Practical steps include using local ingredients; not wasting food and resources; using efficacious, non-toxic products when available; properly disposing of toxic materials; reusing containers and products; recycling when possible; purchasing products with recycled content; and teaching others the value of sustainability.

CRD 4.9: Analyze financial data to assess utilization of resources	80% of interns will achieve a grade of B or better on completion Simulations Project: staffing, equipment, layout design, menu pricing and options, marketing, financial management and purchasing.	DFN 661	Faculty	During and end of coursework	
CRD 4.10: Develop a plan to provide or develop a product, program or service that includes a budget, staffing needs, equipment and supplies	80% of interns will achieve a letter grade of 80% or better on completion of the DESIGN Project	DFN 641	Faculty	During and end of coursework (2015)	
CRD 4.11: Code and bill for dietetic/nutrition services to obtain reimbursement from public or private insurers.	80% of interns will receive a grade of B or better on completion of coursework	DFN 731 - fall	Faculty	During and end of coursework.	

Domain 5: Support Knowledge: knowledge underlying the requirements specified above.

KRD 5.1: The food and food systems foundation of the dietetics profession must be evident in the curriculum. Course content must include the principles of food science and food systems, techniques of food preparation and application to the development, modification and evaluation of recipes, menus and food products acceptable to diverse groups.

KRD 5.2: The physical and biological science foundation of the dietetics profession must be evident in the curriculum. Course content must include organic chemistry, biochemistry, physiology, genetics, microbiology, pharmacology, statistics, nutrient metabolism and nutrition across the lifespan.

KRD 5.3: The behavioral and social science foundation of the dietetics profession must be evident in the curriculum. Course content must include concepts of human behavior and diversity, such as psychology, sociology or anthropology

**Directions for Program Concentrations Summary Matrices for Learning Assessment (Standards 9 & 13)
Assessment Period from 2011 to 2015**

Background: The Program Concentrations Planning Summary Matrices are used to document both whether students have achieved learning objectives developed to assess program-defined knowledge and competencies for the program's concentration area(s) over the past five-years (columns A-F), and to document future plans for achieving learning objectives over the next assessment period (columns A-E). At the end of five years, a fully-completed form is submitted to summarize how well the program is helping students to learn, and a new form is completed to reflect any updates to concentrations, competencies, and learning objectives over the next assessment period.

Note: Programs must submit separate outcome data (F) for each pathway; however, complete matrices do not need to be provided for those pathways, unless they are customized to the pathway.

Directions: When submitting completed plans for the past five years, you may attach your original concentration competencies and matrices (from five years ago), and do not have to retype information into this document as long as the information requested in columns A-F is provided. List at least one learning objective and assessment method for every competency; specify the rotation or class in which the assessment occurred; identify the individuals or groups responsible for ensuring that the assessment took place; and state the timeframe for collecting the data. Select at least two competencies for each concentration area, and include the actual outcome data achieved for the competencies over the five-year lifetime of the plan (column F). Be sure to submit separate outcome data for each program pathway.

When submitting plans for the next assessment period, complete a new summary matrix or copy your past five-year matrix, and update it to reflect concentrations, competencies, and learning objectives for the next five years (columns A-E). Leave column F blank; however, by the end of the five-year lifetime of the new plan, you will have to provide outcome data for at least two competencies for each concentration. Be sure to collect separate outcome data for each program pathway.

**Program Concentrations Summary Matrices for Learning Assessment (Standards 9 & 13)
Assessment Period from 2011 to 2015**

Title of Concentration Area 1: Medical Nutrition Therapy

A) List the program-defined Intern competencies (add or delete lines as needed)	B) Learning objective and the assessment methods that will be used (Guideline 13.1a & b)	C) Rotation or class in which assessment will occur (Guideline 13.1c)	D) Individuals responsible for ensuring assessment occurs (Guideline 13.1d)	E) Timeline for collecting formative and summative data (Guideline 13.1e)	F) Resulting Data with the Date Collected for 2 Competencies per Concentration
<p>Nutrition Assessment of patients with complex medical conditions, including but not limited to multi-organ failure, respiratory failure, trauma and renal disease:</p> <p>Perform a nutrition assessment.</p> <p>Formulate a nutrition diagnosis.</p> <p>Plan intervention strategies.</p>	<p>80% of interns will achieve a letter grade of B or better on case study for CKD and HTN.</p> <p>80% of interns will achieve a letter grade of B or better on the evaluation for the Critical Care rotation.</p>	<p>DFN 651 (Fall): Clinical Nutrition Case Study: CKD and HTN</p> <p>Rotation MNT: Critical Care (60 hrs)</p>	<p>Faculty</p> <p>Preceptor</p>	<p>During and end of coursework (2014 and 2015)</p> <p>During end of Critical Care component of MNT rotation, 5-year summary based on completed evaluations by preceptors</p>	<p>2014: 10/10 = 100% 2015: 12/14 = 85.7% Met: 22/24 = 91.7% over past two years</p> <p>91.7% achieved a grade of B or better on case study CKD and HTN (average = 88.6%) over the past two years</p> <p>2011-2015 Critical Care 32 A 12 A- 7 B+ 8 B 1 B- 59/60 = 100%</p> <p>Met: 98% of interns achieved a grade of B or better on the evaluation of the Critical Care rotation over the past five years</p>
<p>Complex enteral and parenteral nutrition regimens: Select enteral, monitor and evaluate enteral and</p>	<p>80% of interns will achieve a letter grade of B or better on completion of worksheet and case study for enteral, parental</p>	<p>DFN 651: Clinical Nutrition EN and PN worksheet Case Study: GI Disease and Nutrition Support</p>	<p>Faculty</p>	<p>During and end of coursework (years 2014 and 2015)</p>	<p>2014: 10/10 = 100% 2015: 14/14 = 100% Met: 24/24 = 100% over past two years</p>

<p>parenteral nutrition regimens for patients with complex medical conditions.</p>	<p>nutrition and nutrition support.</p>				<p>100% of interns achieved a letter grade of B or better on completion of worksheet (average = 92%)</p> <p>2014: 9/10 = 90% 2015: 12/14= 85.7% Met: 21 /24 = 87.5% over past two years</p> <p>87.5% achieved a grade of B or better on case study GI disease and nutrition support (average = 88.5%) over the past two years</p>
<p>Transitional feeding: Develop transitional feeding from enteral and parenteral nutrition support to oral intake.</p> <p>Implement transitional feeding from enteral and parenteral nutrition support to oral intake.</p>	<p>80% of interns will achieve a letter grade of B or better on case study for nutrition support.</p>	<p>DFN 651: Clinical Nutrition Case Study: GI Disease and Nutrition Support</p>	<p>Faculty</p>	<p>During and end of coursework (2014 and 2015)</p>	<p>2014: 9/10 = 90% 2015: 12/14= 85.7% Met: 21 /24 = 87.5% over past two years</p> <p>87.5% achieved a grade of B or better on case study GI disease and nutrition support (average = 89.7%) over the past two years</p>
<p>Nutrition counseling and education: Undertake nutrition counseling and education for patients with complex medical conditions.</p>	<p>80% of the interns will receive an evaluation of “adequate” or more than adequate” on the evaluation criteria of “effectively counsels patients and caregivers on diet and nutrition issues with appropriate cultural sensitivity “and “understands and educates patients on specific food</p>	<p>MNT rotation</p>	<p>Preceptor</p>	<p>During and end of MNT rotation, 5-year summary based on completed evaluations by preceptors</p>	<p>2011-2015 68 more than adequate 24 adequate 2 less than adequate Met: 92 /94 = 97.9% over past five years</p> <p>97.9% of interns achieved an “adequate” or “more than adequate” on for effectively counseling patients and caregivers (25.5% “adequate” and</p>

	and medication interactions.”				<p>72% “more than adequate” over the past five years</p> <p>2011-2015 67 more than adequate 30 adequate 1 less than adequate Met: 97/98 = 99% over past five years</p> <p>94% of interns achieved an “adequate” or “more than adequate” on understands and educates patients on specific food and medication interactions. (29% “adequate” and 65% “more than adequate” over the past five years</p>
<p>Feeding Tubes: Observe nasogastric and percutaneous endoscopic gastrostomy placement.</p> <p>Observe nasogastric and percutaneous endoscopic gastrostomy care.</p>	80% of interns will achieve a letter grade of B or better on the evaluation for the Critical Care rotation.	Rotation MNT: Critical Care (60 hrs)	MNT Preceptor	During end of Critical Care component of MNT rotation, 5-year summary based on completed evaluations by preceptors	<p>2011-2015 Critical Care 32 A 12 A- 7 B+ 8 B 1 B- 59/60 = 100%</p> <p>Met: 98% of interns achieved a grade of B or better on the evaluation of the Critical Care rotation over the past five years</p>
<p>Adaptive feeding devices: Observe nasogastric and</p>	80% of interns will achieve a letter grade of B or	Rotation MNT: Critical Care (60 hrs)	MNT Preceptor	During end of Critical Care component of MNT	2011-2015 Critical Care

<p>percutaneous endoscopic gastrostomy placement and care.</p> <p>Participate in the care of patients requiring adaptive feeding devices</p>	<p>better on the evaluation for the Critical Care rotation.</p>			<p>rotation, 5-year summary based on completed evaluations by preceptors</p>	<p>32 A 12 A- 7 B+ 8 B 1 B- 59/60 = 100%</p> <p>Met: 98% of interns achieved a grade of B or better on the evaluation of the Critical Care rotation over the past five years</p>
<p>Management : Manage clinical nutrition services</p>	<p>80% of interns will achieve a letter grade of B or better on the evaluation for the Staff rotation.</p>	<p>Rotation MNT 13: Staff Relief (30 hrs)</p>	<p>MNT Preceptor</p>	<p>During end of Staff Relief component of MNT rotation, 5-year summary based on completed evaluations by preceptors</p>	<p>2011-2015 Staff Relief 51 A 11 A- 5 B+ 9 B 1 C+ 76/77 = 98.7%</p> <p>Met: 98.7% of interns achieved a grade of B or better on the evaluation of the Critical Care rotation over the past five years</p>

Title of Concentration Area 2 (if applicable): Not applicable

<p>A) List the program-defined Intern competencies (add or delete lines as needed)</p>	<p>B) Learning objective and the assessment methods that will be used (Guideline 13.1a & b)</p>	<p>C) Rotation or class in which assessment will occur (Guideline 13.1c)</p>	<p>D) Individuals responsible for ensuring assessment occurs (Guideline 13.1d)</p>	<p>E) Timeline for collecting formative and summative data (Guideline 13.1e)</p>	<p>F) Resulting Data with the Date Collected for 2 Competencies per Concentration</p>
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Add rows as needed					

**Program Concentrations Summary Matrices for Learning Assessment (Standards 9 & 13)
Assessment Period from 2016 to 2020**

Title of Concentration Area 1:

A) List the program-defined Intern competencies (add or delete lines as needed)	B) Learning objective and the assessment methods that will be used (Guideline 13.1a & b)	C) Rotation or class in which assessment will occur (Guideline 13.1c)	D) Individuals responsible for ensuring assessment occurs (Guideline 13.1d)	E) Timeline for collecting formative and summative data (Guideline 13.1e)	F) Resulting Data with the Date Collected for 2 Competencies per Concentration
Nutrition Assessment of patients with complex medical conditions, including but not limited to multi-organ failure, respiratory failure, trauma and renal disease: Perform a nutrition assessment. Formulate a nutrition diagnosis. Plan intervention strategies.	80% of interns will achieve a letter grade of B or better on case study for CKD and HTN. 80% of interns will achieve a letter grade of B or better on the evaluation for the Critical Care rotation.	DFN 651 (Fall): Clinical Nutrition Case Study: CKD and HTN Rotation MNT: Critical Care (60 hrs)	Faculty Preceptor	During and end of coursework (2014 and 2015) During end of Critical Care component of MNT rotation, 5-year summary based on completed evaluations by preceptors	
Complex enteral and parenteral nutrition regimens: Select enteral, monitor and evaluate enteral and parenteral nutrition	80% of interns will achieve a letter grade of B or better on completion of worksheet and case study for enteral, parental nutrition and nutrition	DFN 651: Clinical Nutrition EN and PN worksheet Case Study: GI Disease and Nutrition Support	Faculty	During and end of coursework (years 2014 and 2015)	

regimens for patients with complex medical conditions.	support				
Transitional feeding: Develop transitional feeding from enteral and parenteral nutrition support to oral intake. Implement transitional feeding from enteral and parenteral nutrition support to oral intake.	80% of interns will achieve a letter grade of B or better on case study for nutrition support.	DFN 651: Clinical Nutrition Case Study: GI Disease and Nutrition Support	Faculty	During and end of coursework (2014 and 2015)	
Nutrition counseling and education: Undertake nutrition counseling and education for patients with complex medical conditions.	80% of the interns will receive an evaluation of "adequate" or more than adequate" on the evaluation criteria of "effectively counsels patients and caregivers on diet and nutrition issues with appropriate cultural sensitivity "and "understands and educates patients on specific food and medication interactions."	MNT rotation	Preceptor	During and end of MNT rotation, 5-year summary based on completed evaluations by preceptors	
Feeding Tubes: Observe nasogastric and percutaneous endoscopic gastrostomy placement. Observe nasogastric and percutaneous endoscopic gastrostomy care.	80% of interns will achieve a letter grade of B or better on the evaluation for the Critical Care rotation.	Rotation MNT: Critical Care (60 hrs)	MNT Preceptor	During end of Critical Care component of MNT rotation, 5-year summary based on completed evaluations by preceptors	
Adaptive feeding devices:	80% of interns will achieve	Rotation MNT: Critical Care	MNT Preceptor	During end of Critical Care	

Observe nasogastric and percutaneous endoscopic gastrostomy placement and care. Participate in the care of patients requiring adaptive feeding devices	a letter grade of B or better on the evaluation for the Critical Care rotation.	(60 hrs)		component of MNT rotation, 5-year summary based on completed evaluations by preceptors	
Management : Manage clinical nutrition services	80% of interns will achieve a letter grade of B or better on the evaluation for the Staff rotation.	Rotation MNT 13: Staff Relief (30 hrs)	MNT Preceptor	During end of Staff Relief component of MNT rotation, 5-year summary based on completed evaluations by preceptors	

Title of Concentration Area 2 (if applicable): Not applicable

A) List the program-defined Intern competencies (add or delete lines as needed)	B) Learning objective and the assessment methods that will be used (Guideline 13.1a & b)	C) Rotation or class in which assessment will occur (Guideline 13.1c)	D) Individuals responsible for ensuring assessment occurs (Guideline 13.1d)	E) Timeline for collecting formative and summative data (Guideline 13.1e)	F) Resulting Data with the Date Collected for 2 Competencies per Concentration
Add rows as needed					

Appendix P

Intern Data

Summary of aggregate data supporting data included in the
Student Learning Outcomes Assessment Plan

Intern data data collected for class in 2014 and 2015

	Program Intern	Completion	MS Nutriton Lehman	MS Other	First job within 6mo of DI	Present Employment	DPD SCI	DPD PROF	GPA
2014-2015									
1	KA	Y	y		Rehab center	Hollingswoth Rehab	3.58		3.58
2	YC	Y	Y		NY Methodist Hospital	NY Methodist Hospital	3.12	3.64	3.46
3	MC	Y	Y		Beth Abraham, Bronx		3.23	3.65	3.48
4	RD	N			did not complete program		3.01	3.57	3.27
5	WG	Y		x			3.55	3.57	3.68
6	GGI	Y	y		Rehab center	Rehab center	3.26	3.66	3.53
7	MH	Y	y		Lehman College	Lehman College	3.75	3.79	3.82
8	JH	Y	y		Rhode Island Hospital	Rhode Island Hospital	3.1	3.91	3.76
9	EK	Y	y		Jewish Home Lifecare	Jewish Home Lifecare	3.62	3.86	3.72
10	JL	Y	y		Daughters of Jacob	Shervier Nursing Home	3.18	3.75	3.51
11	LM	Y	y				3.13	3.23	3.21
12	SP	Y	y		Clinical Rehab, Cabrini		3.08	3.72	3.45
13	GS	Y	applying to MS (Tampa)		Kings Harbor, Bronx	Kings's Harbor	3.65	3.93	3.84
14	IWJ	Y	currently in MS		Rehab center	Rehab center	3.83	3.84	3.84
		13/14 = 92,9%	13/ 13 = 100% in MS program or already have MS		11/13 = 84.6%		3.363571	3.701538	3.582143
2015-2016									
	Program Intern	Completion	MS Nutriton Lehman	MS Other	First job within 6mo of DI	Present Employment	DPD SCI	DPD PROF	GPA
1	SA	Y		x	Sinai Post-Acute Nursing and Rehab Center	Sinai Post-Acute Nursing and Rehab Center	3.27	3.84	3.54
2	JZA	Y	currently in MS		God's Love We Deliver	God's Love We Deliver	3.27	3.69	3.48
3	KNB	Y	currently in MS		Amwell, Queens	Amwell, Queens	2.87	3.98	3.59
4	DD	Y	currently in MS		Dish with Dina/Entrepreneur	Dish with Dina/Entrepreneur	3.98	3.64	3.82
5	ED	Y	currently in MS		St. Joseph's	St. Joseph's	3.18	3.76	3.49
6	EE	Y	currently in MS		Terence Cardinal Cooke	Terence Cardinal Cooke			3.88
7	NF	Y	currently in MS		St. Joseph's	St. Joseph's	3.3	3.59	3.51
8	ERG	Y		x	Seattle, Washington	Seattle, Washington	4	4	4
9	JH	Y		x			3.66	3.75	3.71
10	SH	Y	currently in MS				3.59	3.78	3.68
11	TK	Y		x			3.61		3.61
12	YM	Y	currently in MS		Beth Abraham, Bronx		3.83	3.87	3.74
13	LM	Y	currently in MS		Beth Abraham, Bronx		3.85	3.88	3.82
14	ES	Y			Executive Chef in assisted living community		3.95	3.79	3.83
		14/14 = 100%	100% in MS program or already have MS		11/14 = 78.6%	11/14 = 78.6%	3.566154	3.7975	3.692857

MNT five year summary 2011 - 2015

Performance Requirements	More than adequate	Adequate	Less than adequate	N/A
Appreciates the integration of dietetics & food service systems	75	22		9
Calculates assessment measures such as weight, BMI, energy & protein needs	75	26	2	
Charts using the Nutrition Care Process & other methods & writes appropriate care plans	67	28	4	3
Recommends appropriate medical nutrition therapy for all conditions experienced	68	30	5	
Understands & educates patients on specific food & medication interactions	67	30	1	5
Understands the use of the menu as a basis for nutrition education	71	26	1	7
Effectively counsels patients and care givers on diet & nutrition issues with appropriate cultural sensitivity	68	24	2	9
Participates in QA activities & clinical nutrition evaluation	61	27	1	11
Applies current research information & methods to dietetic practice	63	33	3	2
Complies with the Code of Ethics & Standards of Professional Practice	84	12	2	

Performance Requirements	More than adequate	Adequate	Less than adequate	N/A
Punctuality	82	17	1	
Cooperative	88	9	1	
Shows motivation	82	14	3	
Accepts constructive criticism	84	12	5	
Completes assignments in a timely manner	70	23	7	
Manages time well	66	29	5	
Works with self-confidence	65	29	5	1
Interacts well with other dietitians & clinical nutrition manager	87	12	1	
Integrates & collaborates with other disciplines	69	28	1	2
Writes and speaks appropriately	80	18	1	
Shows good judgment in patient interactions	78	21		
Has good nutrition knowledge base	69	25	4	1
Incorporates knowledge from prior rotations	67	21	2	9
Extends him/herself above & beyond expectations in difficult situations	74	19	2	3
Engages in a program of self development & continuing education	66	22	4	6

	YES	NO	no response
Would you hire or recommend this intern for a position?	50	5	4

	A	A-	B+	B	B-	C+	C	F	na
HIV/AIDS Rotation*	20	10	4	1					42
Critical Care Rotation*	32	12	7	8	1				25
Pediatrics*	18	5	3	1					49
Quality Assurance*	42	13	7	4					17
Staff Relief*	51	11	5	9		1			12
Subacute	1								
Overall Grade	68	11	7	7		1			

Comments: Medical Nutrition Therapy

Monte-NR: MH showed great improvement from her midpoint evaluation to the end of her clinical rotation. Her strongpoint is providing nutrition counseling and patient interviews; an area of opportunity would be in time management. Overall MH was a pleasure to work with.

Jacobi: JH demonstrated enthusiasm and a positive demeanor throughout the rotation. She was well rounded in all areas including assessments, education, and contributed her culinary expertise. When appropriate she was a huge help when planning and executing the RD Day event where >150 people showed up. She also demonstrated her creativity through a creation of a pt handout on Dilantin + nutrient food interactions. She also demonstrated she was well-versed and eloquent public speaker when presenting her case study and continuing education seminar. She was an exemplary intern and will for sure be an excellent RD in the near future.

NR-Monte: EK strength is in her ability to listen to patients and provide nutrition counseling. Areas where improvement is needed EK's work are researching clinical nutrition and motivating herself to prepare for work projects.

Cabrini: SP developed strong clinical skills and is able to facilitate the NCP. SP is able to develop an individualized nutrition plan based on patients with higher needs i.e. tube feeding and pressure ulcers. SP has attained excellent verbal and communication skills. . . organized able to work independently and under pressure as is seen especially during the DOH survey at Cabrini of Westchester. SP shows extreme passion towards the field of nutrition, and would be a great asset to any organization. I highly recommend her.

Jacobi: SD was the perfect intern. During her time @Jacobi she established excellent rapport with staff dietitians, medical/nursing staff and management. Her drive was admirable and demonstrated great potential with her detailed and very thorough work. Assertiveness and confidence were apparent when it came to patient advocacy. SD presented in-services on vitamin D and cancer cachexia along with her case study to the dietitians. They were all phenomenal. SD possesses all the qualities desired in an outstanding dietetics professional. I highly recommend her for any position in the future.

MNT 2011-2015 summary - individual unit

Performance Requirements	More than adequate	Adequate	Less than adequate	N/A
Demonstrates competence in reading & understanding patients' medical records	93	34	5	
Demonstrates ability to perform an appropriate nutrition assessment	98	32	1	
Demonstrates ability to develop an appropriate Nutrition Diagnosis & PES statement	81	33	4	12
Calculates nutrition needs & appropriate diets	92	32		
Devises appropriate interventions & patient care plans	78	47		
Demonstrates ability to perform nutrition education & understands counseling principles with appropriate cultural sensitivity	90	42		8
Effectively counsels patients and care givers on diet & nutrition issues with appropriate cultural sensitivity (not on all surveys)	24	6	1	3
Overall:	89	29		

Feedback: MNT, individual unit

NR Monte: MH was great to work with and I learned a lot from her project/research.

NR-Monte: MH showed progress throughout the rotation by improving writing skills and learning PES statements. She was excellent speaking with patients, getting the most information and educating. She was always willing to research and find more information for patients. Areas to improve: Time management/productivity and better determining nutrition diagnosis.

NR-Monte/ICU and progressive care unit: Monica showed great enthusiasm for learning and was always very eager to provide dietary education. I feel

NR-Monte: MH communicated well with her staff, put patients at ease when counseling them and was very thorough in her nutrition assessments. She

NR-Monte: EK especially shined when counseling/educating pts and was able to assimilate well when given feedback. She always showed desire to learn

Gershner: This was an introduction to entrepreneurial dietetics. This young woman learned about the business aspect of dietetics as well as the

Rebekkah rehab: Can use more knowledge of calorie and protein needs/requirements with specific diseases and extracting appropriate information

FOOD SERVICE SUMMARY

Performance Requirements	More than adequate	Adequate	Less than adequate	N/A
Understands that food service operations meet the food & nutrition needs of clients served	55	8		
Utilizes computer & other technology in the practice of dietetics & food service	53	11		
Integrates food & nutrition services in the health care delivery system	44	18		2
Promotes positive relationships with other disciplines that relate to food service.	54	11		
Coordinates nutrition care with food service systems.	43	16		4
Utilizes the menu as the focal point of the food service operation.	48	13		2
Understands the need to incorporate cultural sensitivity in devising menus	51	9		2
Participates in the management of food service systems, including procurement, production, distribution & service.	43	18		2
Participates in the management of human, financial, material, physical & operational resources	37	25		1
Participates in the management of a Quality Assurance (QA) program.	35	23		1
Utilizes effective communication skills in the practice of dietetics.	54	9		
Provides education & training to other professional & support personnel.	43	20		
Complies with the Code of Ethics & Standards of Professional Practice	51	11		1

Performance Requirements	More than adequate	Adequate	Less than adequate	N/A
Punctuality	59	5		
Cooperative	60	4		
Dependability and responsibility	58	5	1	
Shows motivation	58	6		
Accepts constructive criticism	57	7		
Completes assignments in a timely manner	56	7	1	
Takes initiative in completing assignments	59	6		
Manages time well	58	7		
Works with self-confidence	50	12	2	
Shows tact and consideration working with others	58	4	1	
Incorporates knowledge from prior rotations	49	8		8
Integrates and collaborates with other disciplines	53	7		3
Engages in a program of self development & continuing education	42	16		3

	YES	NO
Would you hire or recommend this intern for a position?	33	1

	A	A-	B+	B	B-	C+	C	F
Employee in-service training presentation*	47	11	4	1				
Personnel Management*	45	15	3	1				
Cost Analysis of 7-day cycle menu*	39	17	5	2				
Overall Grade	52	7	3	2				

Comments: Food Service Management Rotation

Wartburg: It was a pleasure having MH work with us here at the Wartburg. She did a wonderful job assisting our team in all areas.

Beth Abraham: JH is an exceptional student. Her punctuality with specific projects was exemplary. She independently managed out diet office while at the same time took lead in training our new office worker on how to navigate the CBORD System.

Wartburg: JL was amazing to work with. A great help and great motivation. Thank you for having me be her preceptor.

Silvercrest: An outstanding individual. She was a pleasure to mentor. She has the drive and the right attitude to be successful in the field of food and nutrition. JA will be missed.

CABS: MC needs to work on showing motivation being ahead of the curve. Needs to be focused and engaging to promote teamwork.

Silvercrest: Great job. We will miss you. She was able to accomplish her task and still go above and beyond. She has the right attitude and focus to be successful in the field of dietetics.

COMMUNITY SUMMARY 2011-2015

Performance Requirements	More than adequate	Adequate	Less than adequate	N/A
Describes the state monitored nutrition services for the relevant population.	110	47		30
Understands the impact of the political, legislative and economic factors on support for food programs for this population.	106	38	1	42
Demonstrates knowledge of the agency, its program plan & evaluation procedures.	121	58		8
Understands the target population served by the agency	145	39		2
Develops a community needs assessment of the population served by the agency.	70	26		95
Develops care plans for the agency's population.	108	40	1	40
Demonstrates ability to educate and counsel clients served by the agency with appropriate cultural sensitivity.	138	39	1	3
Participates in QA & evaluation activities	71	20		93
Complies with the Code of Ethics & Standards of Professional Practice	150	31		1

Professional Performance	More than adequate	Adequate	Less than adequate	N/A
Punctuality	148	32	2	
Cooperative	162	19		
Shows motivation	149	26	3	
Accepts constructive criticism	144	34	1	
Completes assignments in a timely manner	137	36	5	3
Manages time well	129	48	3	
Works with self-confidence	144	44	2	
Interacts well with other dietitians	140	36		16
Integrates & collaborates with other disciplines/staff	140	39		4
Writes and speaks appropriately	141	39	1	
Shows good judgment in patient interactions	140	46		3
Has good nutrition knowledge base	139	49	3	
Incorporates knowledge from prior rotations	127	40	1	22
Extends him/herself above & beyond expectations in difficult situations	109	36	2	31
Engages in a program self development and continuing education	88	39	1	48

	YES	NO
<i>Would you hire or recommend this intern for a position? (not a question on all surveys)</i>	95	4

	A	A-	B+	B	B-	C+	C	F	na
Nutrition Education Presentation*	117	29	5	7	1				12
Overall Grade	135	30	7	13					

Comments From Preceptors -- Community Rotation:

DOJ/HIV: MH has excellent working skills and very dedicated to her assignments.

NR-Monte/WIC: MH hard worker; very motivated

GLWD: JH has been a great help here. She's good with her notes and takes her time counseling clients. Julie did a good job analyzing the recipes.

Mosholu Monte: EK instantly became a member of our team and was embraced by our seniors. She has made a significant impact in the lives of the seniors she consulted with. She will be missed.

JL could definitely work as an RDN.

Head Start: JL was a great asset to our programs and our staff. Her hard work and professionalism was evident in all aspects of her rotation. She brought new and relevant nutrition information to our programs, staff, and to me. It was a pleasure to have her work with us.

TOUCH: LM is a team player & really integrated herself with the staff at TOUCH. Her nutrition knowledge base will grow and her attitude will make her a successful provider. She and MC did an extraordinary job with their report on the Shop-rite voucher.

Betances: IWJ presented a variety of group class presentations which she created on her own. Patients love her and learned a lot from her presentations.

Iris House: JA was a total professional in all aspects of her work here at Iris House. Whether it was developing a number of educational brochures & flyers, developing a recipe, for and leading a cooking class, assisting with chart evaluations or helping with preparations for our Father's Day luncheon, she was

Trement Jamaica WIC: Great things to say about JC. She really knows how to interact with the WIC clients. She was also a hard worker and very professional.

PUBLIC SCHOOL 2011-2015

Performance Requirements	More than adequate	Adequate	Less than adequate	N/A
Describes the state/federal nutrition services for the relevant population.	38	7		19
Understands the impact of the political, legislative and economic factors on support for food programs for this population.	38	8		18
Understands the target population served by the school.	51	5		4
Develops a nutrition needs assessment of the students served by the school.	51	7		5
Demonstrates ability to develop age- and developmentally appropriate nutrition education.	57	6		
Demonstrates ability to educate students served by the school with appropriate cultural sensitivity.	57	4		2
Participates in evaluation activities.	58	3		2
Acts & speaks appropriately and professionally.	56	6		
Complies with the Code of Ethics & Standards of Professional Practice	56	3		4

	A	A-	B+	B	B-	C+	C	F
Nutrition Education Presentation*	53	4	6					

Comments: Public School

BRS: JL, Disseminate information clearly at beginning and then check for comprehension.

PS2Q: JA enthusiasm and creativity were evident in the presentation of the lesson and the interaction with the students. I am confident that JA will be successful in her career.

PS184 Brooklyn: Lesson well thought-out. Very difficult class to handle.

RESEARCH 2011-2015

Performance Requirements	More than adequate	Adequate	Less than adequate	N/A
Demonstrate an understanding of appropriate research methods.	40	7	2	
Identify a suitable population	38	2		8
Develop an appropriate research question/problem and hypothesis.	40	5		4
Prepare an instrument.	36	5		7
Prepare a project proposal.	29	5		13
Understand the process of IRB approval.	22	4		21
Conduct a research project by collecting data.	40	3		6
Summarize the results.	41	3	1	4

Performance Requirements	More than adequate	Adequate	Less than adequate	N/A
Punctuality	46	3		
Cooperative	45	2	1	1
Shows motivation	44	4	1	
Accepts constructive criticism	44	3	1	
Completes assignments in a timely manner	44	3	1	
Manages time well	41	4	3	
Works with self-confidence	39	3	2	1
Interacts well with coworkers	40	3		5
Integrates & collaborates with other disciplines	26	4	1	5
Writes and speaks appropriately	47	1		1
Shows good judgment in patient interactions	25	2		22
Has good nutrition knowledge base	41	5		3
Incorporates knowledge from prior rotations	25	2		21
Extends him/herself above & beyond expectations in difficult situations	36	5	1	7
Engages in a program of self development & continuing education	36	3	1	9

	YES	NO	na
<i>Would you hire or recommend this intern for a position?</i>	29		5

	A	A-	B+	B	B-	C+	C	C-
Research Presentation*	38	3	1	3				1
Overall Grade	43	2	2	1			1	

Comments: Research
QHE: LM was a delight to work with. She worked diligently on all aspects of the project extending herself beyond expectations in

Appendix Q

Examples of assessment tools and rubrics including sample rotation evaluation forms

Name of Intern: _____ Dates of

Rotation (Month/Dates/Year): _____ Site Name and

Borough: _____ Principle

Preceptor: _____ Please circle

the number that most closely reflects the degree to which you agree with each statement.

Strongly Disagree Neutral Strongly Agree

The activities in which I engaged at this site were appropriate to the level of my understanding, experience & expertise 1 _____ 2 _____ 3 _____ 4 _____ 5

The activities provided adequate experience of the dietetic practice at the site 1 _____ 2 _____ 3 _____ 4 _____ 5

The schedule allowed adequate time to undertake each activity 1 _____ 2 _____ 3 _____ 4 _____ 5

The preceptor gave me appropriate feedback on my performance 1 _____ 2 _____ 3 _____ 4 _____ 5

The preceptor encouraged questions & discussion 1 _____ 2 _____ 3 _____ 4 _____ 5

The preceptor gave clear instructions & guidance 1 _____ 2 _____ 3 _____ 4 _____ 5

The preceptor demonstrated expertise in the field of dietetics covered by the experience 1 _____ 2 _____ 3 _____ 4 _____ 5

The preceptor was supportive in enhancing my learning & achieving competency 1 _____ 2 _____ 3 _____ 4 _____ 5

I felt that I acquired competency in the scope of practice covered by this site 1 _____ 2 _____ 3 _____ 4 _____ 5

Poor Fair Average Above Excellent

Average

What is your overall evaluation of this supervised practice site? 1 _____ 2 _____ 3 _____ 4 _____ 5

What is your overall evaluation of this site preceptor? 1 _____ 2 _____ 3 _____ 4 _____ 5

Please comment on your overall experience at this site:

Name of Intern: _____ Dates of

Rotation (Month/Dates/Year): _____ Site Name and

Borough: _____ **Principle**

Preceptor: _____

Please circle the number that most closely reflects the Intern's performance. Please award a letter grade to indicated activities and an overall letter grade. Base the grade on whether you would hire or recommend this intern for a position.

Performance Requirements Adequate	More Than	Adequate	Less Than Adequate	N/A				
Appreciates the integration of food service systems	1 _____	2 _____	3 _____	4 dietetics &				
Calculates assessment measures such as energy & protein needs	1 _____	2 _____	3 _____	4 weight, BMI,				
Charts using the Nutrition Care Process & & writes appropriate care plans	1 _____	2 _____	3 _____	4 other methods				
Recommends appropriate medical nutrition conditions experienced	1 _____	2 _____	3 _____	4 therapy for all				
Understands & educates patients on medication interactions	1 _____	2 _____	3 _____	4 specific food &				
Understands the use of the menu as a nutrition education	1 _____	2 _____	3 _____	4 basis for				
Effectively counsels patients and care & nutrition issues with appropriate cultural sensitivity	1 _____	2 _____	3 _____	4 givers on diet				
Participates in QA activities & clinical evaluation	1 _____	2 _____	3 _____	4 nutrition				
Applies current research information & dietetic practice	1 _____	2 _____	3 _____	4 methods to				
Complies with the Code of Ethics & Professional Practice	1 _____	2 _____	3 _____	4 Standards of				
HIV/AIDS Rotation*	A _____	A- _____	B+ _____	B _____	B- _____	C+ _____	C _____	F _____
Critical Care Rotation*	A _____	A- _____	B+ _____	B _____	B- _____	C+ _____	C _____	F _____
Pediatrics*	A _____	A- _____	B+ _____	B _____	B- _____	C+ _____	C _____	F _____
Quality Assurance*	A _____	A- _____	B+ _____	B _____	B- _____	C+ _____	C _____	F _____
Staff Relief*	A _____	A- _____	B+ _____	B _____	B- _____	C+ _____	C _____	F _____

Professional Performance	More Than Adequate	Adequate	Less Than Adequate	N/A
Punctuality	1 _____	2 _____	3 _____	4 _____
Cooperative	1 _____	2 _____	3 _____	4 _____
Shows motivation	1 _____	2 _____	3 _____	4 _____
Accepts constructive criticism	1 _____	2 _____	3 _____	4 _____
Completes assignments in a timely manner	1 _____	2 _____	3 _____	4 _____
Manages time well	1 _____	2 _____	3 _____	4 _____
Works with self-confidence	1 _____	2 _____	3 _____	4 _____
Interacts well with other dietitians & clinical nutrition manager	1 _____	2 _____	3 _____	4 _____
Integrates & collaborates with other disciplines	1 _____	2 _____	3 _____	4 _____
Writes & speaks appropriately	1 _____	2 _____	3 _____	4 _____
Shows good judgment in patient interactions	1 _____	2 _____	3 _____	4 _____
Has good nutrition knowledge base	1 _____	2 _____	3 _____	4 _____
Incorporates knowledge from prior rotations	1 _____	2 _____	3 _____	4 _____
Extends him/herself above & beyond expectations in difficult situations	1 _____	2 _____	3 _____	4 _____
Engages in a program of self development & continuing education	1 _____	2 _____	3 _____	4 _____

Would you hire or recommend this intern for a position? Yes No Additional

Comments:

Overall Grade*: _____

*N.B. Please award an overall grade of either A, A-, B+, B, B-, C+, C, F

B or above is a passing grade

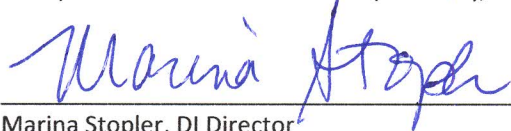
Appendix R

Standard 15: Program Director Position Description with allotted time for program management

The position description of the DI Director includes the following:

The DI Director

1. is responsible for assuring that all ACEND accreditation standards, policies and procedures will be met.
2. Develops policies and procedures in consultation with DI program faculty during program meetings and with the advisement of the Advisory Board at annual meetings for effective management of the DI and to ensure fair, equitable and considerate treatment of prospective and enrolled interns with regard to program admission, retention, and completion policies. The DI Policies and Procedures are described in the DI Handbook.
3. Recruits new interns by attending open houses periodically at FNCE and at local and city-wide recruiting events.
4. Advises, evaluates, and counsels interns during weekly seminars and by email and in individual meetings.
5. Organizes placements for interns to facilitate appropriate pre-professional practice experience at affiliated health care facilities and agencies.
6. Undertakes regular visits to affiliated sites and implements on-going preceptor training.
7. Maintains DI accreditation by submission of:
 - a) Fee statements to the provost's office for payment
 - b) Annual reports to ACEND
 - c) Requests to the program faculty, departmental faculty, and college graduate curriculum committee and senate for major program changes.
8. Maintains DI intern records, including transcripts and DPD verification statements for admission, rotation schedules, all intern and preceptor evaluation documents, and verification statements of completion; and keeps DI verification statements indefinitely. The intern records are kept in a designated file cabinet in the locked office of the DI director.
9. Maintains complaints about the DI received from interns or others, including disposition of the complaint. The DI Handbook contains the policies and procedures, which serve as the basis for handling of complaints.
10. Schedules and presides over regular meetings of the DI Advisory Board, with a minimum of one meeting annually.
11. Reviews DI curriculum with other program faculty and the Advisory Board to meet accreditation standards.
12. Reviews and updates the DI Handbook and DI Web Site as necessary.
13. Communicates and coordinates with DI faculty, preceptors, and others involved with the program.
14. Facilitates processes for continuous assessment of DI and intern learning outcomes according to the DI Assessment Plan.
15. Receives 3 hours per semester for DFN 730 and three hours in the summer for a total credit commitment of 9 hours per calendar year to perform the responsibilities itemized above.
16. Receives 3 hours per semester and three hours in the summer for a total credit commitment of 9 hours per calendar year to teach the DI seminar (DFN 731), the (45-hour) class required by all dietetic interns.


Marina Stopler, DI Director


Gul Tiryaki-Sonmez, Chair, Department of Health Sciences

Appendix S

Standard 16: List of preceptors with credentials aligned with supervised practice facility and rotation

Medical Nutrition Therapy

Name	Site	Credential	Yrs post-credentialing
Renata Shiloah	Betances Health Center, 280 Henry St, New York, NY 10002	MS, RD, CDN	13
Niharika Jaiswal	Cabrini Eldercare, 115 Broadway, Dobbs Ferry, NY 10522	M.S., R.D., CDN	
Arlene White-Tucker	Coler-Goldwater Specialty Hospital and Nursing Facility, 900 Main Street, Roosevelt Island, NY 10044	MS, RD, CDN, MA	17
Vihbuti Singh	Triboro Center for Rehabilitation and Nursing (formerly Daughters of Jacob Nursing Home), 1160 Teller Avenue, Bronx, NY 10456	RD, CDN	21
Shifra Aronoff	Hebrew Home at Riverdale, 5901 Palisade Avenue, Riverdale, NY 10471	RD	
Arlene White-Tucker	Henry J. Carter Hospital and Nursing Facility, 1752 Park Avenue, New York, NY 10035	MS, RD, CDN, MA	17
Anna Comiotes	Hudson Valley Hospital Center, 1980 Crompond Road, Cortland Manor, NY 10567	RD	5
Diane Bustamante	Jacobi Medical Center, 1400 Pelham Pkwy S, Bronx, NY 10461, (718) 918-5000. Preceptor:	RD, CDN	15
Anuradha (Anu) Jara	Jacobi Medical Center, 1400 Pelham Pkwy S, Bronx, NY 10461, (718) 918-5000. Preceptor:	MS, RD, CDN	9
Ying Sheng (Grace) Chen	Lincoln Hospital, 234 E 149th St, New York, NY 10451	MS, RD, CDN	18
Nani Lepicard	Mary Manning Walsh Home, 1339 York Avenue, New York, NY 10021	RD	16
Laura Sanford	Montefiore Medical Center, New Rochelle/Mount Vernon (formerly Sound Shore), 16 Guion Pl, New Rochelle, NY 10802	MS, RD, CDN, CNSC	11
Miriam Pappo	Montefiore Medical Center, 111 E 210th St, New York, NY 10467	MS, RD, CDN, CDE, CNSE	
Andrew Reda	Montefiore Medical Center, 111 E 210th St, New York, NY 10467	RD	29
Marianne Colucci	Northern Riverview, 87-89 S Rte 9W, Haverstraw, NY 10927	RDN, CDN	40
Cecilia Moy	North Central Bronx Hospital, 3424 Kossuth Ave, Bronx, NY 10467	MS, RD, CDN	30
Caroline Caminski	Rebekah Rehabilitation and Extended Care Center, 1070 Havemeyer Ave, Bronx, NY 10462	RD	
Mary O'Connell	Rebekah Rehabilitation and Extended Care Center, 1070 Havemeyer Ave, Bronx, NY 10462	RD	
Therese Franzese	The Rogosin Institute, 66-22 Queens Blvd., Woodside, NY 11377	MS, RD, CDN, CDE	30
Agnieszka Sowa	Woodhull Hospital, 760 Broadway, Brooklyn, NY 11206	MS, RD, CDN	12

Private Practice - MNT

Name	Site	Credential	Yrs post-credentialing
Roberta Gershner	42 Stonegate Rd #1, Ossining NY 10562	MS, RD, CDN	40
Zipporah Oksman	Essen Medical Associates: 2015 Grand Concourse, Bronx NY; 1550 University Street, Bronx; 2445 Arthur Avenue, Bronx New York	MS, RD, CDN	17
Mary Opfer	378, RT 202, Somers, NY 10589	MS, RD, CDN	
Tracy Stopler	Nutrition, E.T.C., 19 Garynson Court, Plainview, NY, 11803	MS, RD, CDN	26

Food Service Management

Name	Site	Credential	Yrs post-credentialing
Noreen Ferguson	Beth Abraham Medical Center, 612 Allerton Avenue, Bronx, NY 10467	RD, CDN	16
Akiva Palmer	Boulevard APL, 71-61 159th Street, Fresh Meadows, NY, 11365	Executive Chef	
Arlene White-Tucker	Coler-Goldwater Specialty Hospital and Nursing Facility, 900 Main Street, Roosevelt Island, NY 10044	MS, RD, RDN, MA,	17
Kathy Feld Berkowitz	Cortlandt Health Care, 110 Oregon Road, Cortlandt manor, NY 10567. Preceptor:	MS, RD, CDE, CDN	23
Sonia Grant	Heritage Health and Housing, 416 W 127th St, New York, NY 10027	MA, RD, CDN	25
Charlie Fox	Wartburg Senior Care, On Wartburg Plaza, Mount Vernon, NY 10552		
Anthony Pacchioni	Waveny LifeCare Network, 3 Farm Road - New Canaan, CT 06840,	RD	12

Community Public Health

Name	Site	Credential	Yrs post-credentialing
Renata Shiloah	Betances Health Center, 280 Henry St, New York, NY 10002, (212) 227-8401. Preceptor:	MS, RD, CDN	13
Ellen Pospishil	Head Start, Westchester, Westchester Community Opportunity Program (WestCOP), Inc. 2 Westchester Plaza, Suite 137, Elmsford, NY 10523	MS, RD	30
Marianne Colucci	Northern Riverview, 87-89 S Rte 9W, Haverstraw, NY 10927	RDN, CDN	43
Marianne Colucci	Meals on Wheels, 121 W Nyack Rd, Nanuet, NY 10954	RDN, CDN	43
Lisa Nicotra	Mosholu Montefiore Community Center, 3450 Dekalb Avenue, Bronx, NY 10467	LCSW	

HIV/AIDS

Name	Site	Credential	Yrs post-credentialing
Renata Shiloah	Betances Health Center, 280 Henry St, New York, NY 10002	MS, RD, CDN	13
Vihbuti Singh	Triboro Health and Rehabilitation Center (formerly Daughters of Jacob Nursing Home), 1160 Teller Avenue, Bronx, NY 10456	RD, CDN	21
Ronnie Fortuna	God's Love We Deliver (GLWD), 166 Avenue of the Americas, New York, 10013	MS, RDN, MBA	17
Pauline Cheung	God's Love We Deliver (GLWD), 166 Avenue of the Americas, New York, 10013	RD	17
Lisa Zullig	God's Love We Deliver (GLWD), 166 Avenue of the Americas, New York, 10013	RD	17
Sonia Grant	Heritage Health and Housing, 416 W 127th St, New York, NY 10027	MA, RD, CDN	25
Claire Esson-Samuels	Montefiore HIV, Montefiore Medical Center, 111 E 201th Street, Bronx, NY 10467	MS, RD, CDN	12
Laurie Orfe	Montefiore HIV - Mt. Vernon. 12 North Seventh Ave, Mount Vernon NY 10550,	LCSW-R	

WIC

Name	Site	Credential	Yrs post-credentialing
Lauren Sondey	Catholic Charities WIC. 38 St. John's Place, Freeport, NY 11520	RD, CDN	19
Siew (Kim) Teo	Lincoln Hospital WIC, 234 East 149th Street, 4th floor, Bronx, NY 10451	RD	
Iris Rosario	Montefiore- New Rochelle WIC	MS, CDN	32
Carmen Winchester-Reed	Montefiore-Bronx Westchester Square WIC. Westchester Ave. Bronx, NY 10468	PhD, RD	15
Paulette Sinclair-Weir	Neighborhood WIC. Various sites throughout NYC	RD, CDN	27
Laura Duer Leach	Rockland County DOH. Contact: 50 Sanatorium Rd. Bldg. J, Pomona, NY 10970	RD	19

Public School

Name	Site	Credential	Yrs post-credentialing
John Morash	Bedford Road School, 289 Bedford Road, Pleasantville, NY 10570.	Assist. Principal	
Lydia Tsiforas	PS 2 QAlfred Zimberg School, 75-10 21st Avenue, East Elmhurst, NY 11370	Assist. Principal	
Nina Colangelo	PS 55 Bx Benjamin Franklin School, 450 St. Paul's Place, Bronx, NY 10458	Nutr. Educator	
Allison Maltz	PS 134 Muscota New School, 4862 Broadway, New York, NY 10034	Assist. Principal	

Research

Name	Site	Credential	Yrs post-credentialing
Marilyn Aguirre-Molina	CUNY Institute For Public Health, Lehman College, CUNY, 250 Bedford Park Blvd West., Bronx, NY 10468	EdD	
Katherine Gardner Burt	Department of Health Sciences, Lehman College, CUNY, 250 Bedford Park Blvd West., Bronx, NY 10468	PhD, RD	7
Andrea Boyar	Department of Health Sciences, Lehman College, CUNY, 250 Bedford Park Blvd West., Bronx, NY 10468	PhD, RD, CDN	38
Mary Opfer	Department of Health Sciences, Lehman College, CUNY, 250 Bedford Park Blvd West., Bronx, NY 10468	MS, RD, CDN	
Danna Ethan	Department of Health Sciences, Lehman College, CUNY, 250 Bedford Park Blvd West., Bronx, NY 10468	EdD, MSW	
Natalie Rizzo	Nutrition a la Natalie, Astoria, NY 11103	MS, RD	2
Chul-Young Rho	Department of Health Sciences, Lehman College, CUNY, 250 Bedford Park Blvd West., Bronx, NY 10468	PhD, MPA, MA	
Lalitha Samuel	Department of Health Sciences, Lehman College, CUNY, 250 Bedford Park Blvd West., Bronx, NY 10468	PhD	

Appendix T

Standard 16: Summary of student feedback and preceptor evaluations faculty involved in the program

Medical Nutrition Therapy Rotation - Intern evaluation of sites 2011 - 2015

Strongly Disagree (1) Strongly Agree (5)

Activities in which I engaged at this site were appropriate to the level of my understanding, experience & expertise

The activities provided adequate experience of the dietetic practice at the site

The schedule allowed adequate time to undertake each activity

The preceptor gave me appropriate feedback on my performance

The preceptor encouraged questions & discussion

The preceptor gave clear instructions & guidance

The preceptor demonstrated expertise in the field of dietetics covered by the experience

The preceptor was supportive in enhancing my learning & achieving competency

I felt that I acquired competency in the scope of practice covered by this site

What is your overall evaluation of this supervised practice site?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

What is your overall evaluation of this site preceptor?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

Strongly Disagree (1) Strongly Agree (5)

Activities in which I engaged at this site were appropriate to the level of my understanding, experience & expertise

The activities provided adequate experience of the dietetic practice at the site

The schedule allowed adequate time to undertake each activity

The preceptor gave me appropriate feedback on my performance

The preceptor encouraged questions & discussion

The preceptor gave clear instructions & guidance

The preceptor demonstrated expertise in the field of dietetics covered by the experience

The preceptor was supportive in enhancing my learning & achieving competency

I felt that I acquired competency in the scope of practice covered by this site

What is your overall evaluation of this supervised practice site?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

What is your overall evaluation of this site preceptor?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

Site	M&T Sites									
	Betances	Beth Abraham	Cabrini	CABS (LTC)	Coler	Dry Harbor	DOJ	DOJ-Dialysis	Hebrew Home	NYP/HVHC
Preceptor	Sholoah	Ferguson	Jaiswal	Hussein	Tucker	Fong	Singh	Goldson	Flood	Comiotos
	5,5,5	5,5	5,5,5,5	5,5	4,2,3,5,5	5	5,5,4	4	4,5	5
	5,5,5	5,5	4,5,5,5	4,5	4,2,2,5,4	5	5,5,4	5	4,5	5
	5,5,5	5,5	5,3,5,5	4,5	3,2,5,5,4	5	5,5,4	5	3,5,5	5
	5,5,5	5,5	5,3,5,5	5,5	4,2,3,5,3	5	5,5,4	4	3,5	5
	5,5,5	5,5	5,3,5,5	4,5	3,2,3,5,3	5	5,5,4	5	2,5,5	5
	5,5,5	5,5	4,3,5,5	5,5	4,2,2,5,3	5	5,5,4	5	2,5,5	5
	5,5,5	5,5	5,5,5,5	4,5	5,5,5,5,5	5	5,5,4	5	4,5	5
	5,5,5	5,5	4,3,5,5	5,5	4,2,2,5,4	5	5,5,4	5	3,5	5
	5,5,5	5,5	4,5,5,5	4,5	4,4,4,5,5	5	5,3,4	5	4,5	4
	5,5,5	5,5	4,4,5,5	4,5	2,3,3,3,3	5	5,3,5	5	3,5,5	4
	5,5,5	5,5	4,3,5,5	5	4,2,2,5,3	5	5,5,5	5	3,5	5

HVHC	M&T Sites								
	HVHC	Jacobi	Jacobi	Jewish Home Lifecare	Kingsbrook	Lincoln	NCB	N. Manor	
Green	Harria/Giordano	Bustamante/Jara	Jennifer Kwon	Michele Herhek	Rosenbaum	Wang	Jara	Ficaratta	
	4	5,5	5,5,5,5,5	5	5,5	5	5,4,5	5,5	4
	4	5,5	5,5,5,5,5	5	5,5	5	5,5,5	5,5	4
	5	5,5	5,4,5,5,5	5	5,5	5	5,5,5	5,5	4
	4	5,5	5,5,4,5,5	5	5,5	5	4,4,4	5,5	4
	5	5,5	5,5,5,5,4	5	5,5	5	4,5,5	5,5	4
	4	5,5	5,4,5,5,4	5	5,5	5	4,4,5	5,5	4
	5	4,5	5,4,4,5,5	5	5,5	5	4,5,5	5,5	4
	3	5,5	5,4,5,5,4	5	5,5	5	5,5,5	5,5	4
	4	5,5	5,4,4,5,5	5	5,5	5	5,5,5	5,5	4
	3	5,5	5,5,5,5,4	5	5,5	5	5,5,5	5,5	4
	2	5,5	5,5,5,5,4	5	5,5	5	5,5,5	5,5	4

Intern Feedback: Medical Nutrition Therapy Rotations

Coler: This was a very challenging rotation for me but I left feeling more competent to be an RD. The site would have been more appealing if it was more modernized and if there were more resources for the interns such as computers and better seating arrangements.

NCB: I didn't get much time to spend with Anu but the time I spent with the dietitians went beyond my expectations. They were tough and demanded a lot, but gave constructive criticism and presented numerous opportunities for growth. I truly felt like I was part of the staff by the end of the rotation. I was thrown into varying situations and felt like I really grew a lot during this time. It was a great learning environment, everybody was very nice, accommodating and welcoming.

Rogosin: I lerned a lot about treatment of ESRD.

Rogosin: TF is a phenomenal teacher and preceptor. She encourages discussion and never makes you feel inadequate. One can tell that she has a passion for teaching by the way she interacts with you. There is also a good amount of independence at this rotation, she really gives you space to grow without making you feel overwhelmed. There is a good variety of patients and experiences gained at this site. I really do not have any negative feedback at all on this rotation -- it was a great experience.

Rogosin: Rogosin was the perfect site for me to begin my clinical experience. I was challenged everyday to think on my feet and learn in great depth how to become a strong clinical RD. From the very beginning TF had very high expectations. Not knowing much about dialysis and ESRD, I knew in order to succeed I would really have to push myself. I enjoyed the challenges and the level of work TF made me complete. I have gained confidence in myself after experiencing this rotation and I am thankful. My advice - it is best to have only one intern at a time here. TF was able to thoroughly train me since I have spent several weeks alone with her, but I feel it is more difficult and unfair for the new intern not to get that experience/training.

Dry Harbor: EF is a great teacher! She explains everything well and I am thankful for the opportunity to work with her. I have gained practical skills that will help me in the clinical setting.

Cabrini: My overall experience at this site was very good. My only regrets were being unable to spend more time in the short term rehab unit and acquiring experience with tube feeding patients. I would have appreciated a more well-rounded experience with a variety of conditions as opposed to primarily long-term care patients. I still feel I have learned a tremendous amount here and feel confident entering the position of an entry-level RD.

Private Practice: I didn't know what to expect from a private practice site. I have learned more than I ever could have imagined. RG was a wonderful preceptor and mentor. Experiencing individualized hour long counseling sessions addressing various medical conditions was a true learning experience, mixing both the clinical and the counseling aspects of the field. Time was allotted to research and study various diseases I may have forgotten or been unfamiliar with, enhancing both my learning and clinical understanding. Discussing questions and patients' conditions and behaviors with RG each day was an invaluable part of my internship experience. I am grateful to have gotten this opportunity.

NYP/HVHC: I had a wonderful experience. AC was a great preceptor. She gave me a lot of freedom when it came to seeing and charting on patients which allowed me to learn in a very hands-on environment by doing things myself. She always went over my notes with me before signing them and always offered suggestions for improvement but also complimented the things I did well. Whenever I had questions or needed help with something I always felt comfortable asking. I felt that NYP/HVHC for the most part offered a very positive learning environment. The only complaint I have is that since it is a smaller hospital there are some things that I did not get exposure to like pediatrics, a burn unit, I didn't get to see patients on TNP, but it was a great place to learn the basics.

Hebrew Home: This site provided ample opportunities to observe a variety of disease states, engage inpatient interviews, get comfortable with electronic medical charts, and practice non-NCP style charting. While my preceptor was frequently absent due to religious holidays and then only provided minimal guidance and time for questions, as a team the dietetic department were warm, knowledgeable, and supportive. The biggest elements that were missing from this experience were opportunities to practice the NCP style MNT (HHR does not use this approach), very few opportunities for nutrition education, and a somewhat limited, and at times non-evidence based repertoire of therapeutic interventions available.

Private Practice: This was a very different experience than I had elsewhere, I felt so lucky to have observed private practice and to have done it with this kind of dietitian. She taught me so very much that I would not have gotten at another site. Also, I gained insight into the billing process which was a great plus.

Cabrini: I was exposed to a variety of illnesses at this site. The nursing staff and overall environment were conducive to learning. I experienced difficulty with laptop malfunctions on a regular basis and was faulted for not completing assessments on the computer those times. This was greatly disappointing. Constructive criticism/encouragement varied greatly among dietitians.

Jacobi: Wonderful preceptor. Very knowledgeable, supportive, friendly, and helpful. Great site and great preceptors.

Betances MNT: Renata is an excellent preceptor. Loved this site!

Rogosin: I think dialysis should be part of every MNT rotation.

Betances MNT: Excellent experience!

DOI/Triboro: VS is patient and helpful. Very good experience.

Coler: Site was ok. Dietitians working there were all very nice and helpful, but I do feel like I missed out on doing my entire rotation at a nursing facility. The preceptor was definitely knowledgeable but I disagree with her teaching style. She is mean and aggressive. She would be nice some days so I would be encouraged to ask some questions, then

DOI/Triboro: The preceptor was very instructive in nursing home nutritional care, but did not provide the scope anticipated in the handbook, eg. Pediatrics, oncology, and ER care.

Northern Riverview: This site emphasized elements not emphasized in earlier clinical training, patient observation and interviewing to form clinical judgement. MC provided exemplary training.

HVHC: I had a great clinical experience at this hospital. SG was a pleasure to work with. She was patient and provided me with feedback when necessary.

St. Albans: My overall experience at this site was good. I definitely left with more knowledge than what I came in with. AWT was a brilliant preceptor but she needs to learn how to create a less stressful environment. In addition to her interns she needs to remain open regarding questions asked rather than saying that we should know it already.

NR-Monte: I had a good experience at the hospital and was able to experience different aspects of MNT. During my internship I had the opportunity to observe the bariatric and diabetic center private practices. I also worked and worked within the psychiatric and DOCS facilities at Mount Vernon Hospital. Both hospitals were busy and at times understaffed resulting in less time than originally scheduled to work in critical care. However, I was able to see the patients with sports nutrition therapy elsewhere.

Jacobi : I feel this rotation shaped me to be a true clinical dietitian. All my preceptors constantly challenged me and expected a high level of performance. I am very privileged to have completed my clinical experience in this hospital.

NCB: This site was by far the best for MNT. During all of my 1200 hours I learned the most at this site. I only wish I could have spent longer here. AJ was a great preceptor. She ensured that I got as much exposure as possible during my 5-week rotation. The entire team was helpful.

Rebekkah Rehab : I do not feel this was an appropriate site for an MNT rotation. Many of the patients were long term care and there is not a lot of nutrition diagnosis. This facility does not use the NCP nor do they write PES statements. There was minimal interaction with patients. My preceptor was somewhat jaded by her job and just wanted to get through the day.

Northern Manor : JF possesses the qualities of a great preceptor, always encourages the student to learn more.

Cabrini : This was one of the best experiences. NJ always made me want to learn more and she always encouraged questions. The other preceptors were also great to work with.

Rebekkah Rehab : Overall my experience at Rebekkah Rehab was good. CK, my main preceptor was very nice but she was not as assertive when it comes to her role as a dietitian at the site. I was a little disappointed when she didn't want me to do more challenging cases (even when I asked for it). Towards the end of the rotation, I asked MC if I could work on her units and to experience more of what I wanted. I just wish I go to do more tube feeding cases. The whole experience made me learn more about being assertive and well-rounded as part of the health care team.

Jacobi : I really enjoyed my time at JMC and feel that my understanding of MNT was greatly enhanced. My greatest frustration came with some dietitians who seemed stuck in "old" ways of thinking that was contrary to the latest research. That being said, I learned something from everyone, including soft skills related to patient interaction. I am not sure that acquired "competency" for clinical MNT, as I do not know what that really means. I am confident that I could be an entry level dietitian in a hospital setting, and I am also acutely aware that I am still learning... which I suppose will be true for the rest of my life in this ever-changing field.

St. Albans : It was the most difficult rotation that I have been on. It required a lot of physical and mental stamina to cope with the place and the people there and to be able to learn. Workman's Circle Multi Care Center: When it came to this site I almost knew things RD needs to know. I was coming from St. Albans. From this site, I learned that an RD job can be less stressful and sometimes can be fun too.

Wartburg-Long term care: 20 hours is inadequate time to learn LTC. If I'm interested in LTC, I would have liked more time getting a better understanding and knowledge of LTC, at least 100 hours. I learned more in the three days here than I did at WIC and I am more likely to get a job in LTC due to the aging population.

Food Service Management Rotation

-- Intern evaluation of sites 2011 - 2015

Food Service Sites

Sites

Preceptor

Stongly Disagree (1) Strongly Agree (5)

Activities in which I engaged at this site were appropriate to the level of my understanding experience & expertise

The activities provided adequate experience of the dietetic practice at the site

The schedule allowed adequate time to undertake each activity

The preceptor gave me appropriate feedback on my performance

The preceptor encouraged questions & discussion

The preceptor gave clear instructions & guidance

The preceptor demonstrated expertise in the field of dietetics covered by the experience

The preceptor was supportive in enhancing my learning & achieving competency

I felt that I acquired competency in the scope of practice covered by this site

What is your overall evaluation of this supervised practice site?
 Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

What is your overall evaluation of this site preceptor?
 Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

	Blvd ALP	Beth Abraham	Beth Abraham 2011, 2012	CABS	CABS	Coler	DOJ	Rebekkah Rehab
	Palmer	Ferguson	Ferguson	Pierre	Dimitri Viderman	Tucker	Singh/ Cunningham	O'Connell
	5, 4, 4, 5, 5, 5	5, 4, 5, 5, 4, 4, 5, 5, 5	5, 5, 5, 5	4, 4, 5, 3, 5, 5, 5, 5	4, 4, 4	4, 5	5	5
	3, 4, 4, 5, 5, 5	5, 3, 5, 5, 5, 4, 5, 4, 5	5, 5, 5, 5	3, 4, 4, 3, 4, 5, 5, 5	5, 4, 5	2, 5	5	5
	5, 5, 5, 5, 5, 5	5, 4, 5, 5, 5, 5, 5, 5, 5	5, 5, 5, 5	4, 4, 4, 3, 5, 5, 5, 5	5, 4, 5	3, 5	5	5
	4, 5, 5, 5, 5, 5	5, 2, 5, 5, 5, 5, 5, 5, 5	5, 5, 5, 5	3, 4, 5, 3, 5, 5, 5, 5	4, 4, 4	4, 5	5	5
	5, 3.5, 5, 5, 5, 5	5, 2, 5, 5, 4, 5, 5, 5, 5	5, 5, 5, 5	3, 4, 5, 2, 4, 5, 5, 5	5, 4, 3	3, 5	5	4
	4, 4, 4, 4, 5, 5	4, 3, 5, 5, 4, 5, 5, 5, 5	5, 5, 5, 5	3, 4, 4, 2, 4, 5, 4, 5	5, 4, 5	3, 5	5	4
	3, 3.5, 4, 3, 5, 4	5, 3, 5, 5, 5, 5, 5, 5, 5	5, 5, 5, 5	3, 4, 4, 3, 4, 5, 4, 5	5, 4, 4	4, 5	5	5
	4, 5, 5, 5, 5, 5	5, 4, 5, 5, 5, 4, 5, 5, 5	5, 5, 5, 5	3, 4, 5, 3, 4, 5, 5, 5	4, 5	4, 5	5	5
	4, 5, 5, 5, 5, 5	5, 4, 5, 5, 5, 4, 5, 4, 5	5, 5, 5, 5	5, 4, 4, 3, 4, 5, 5, 5	3, 4, 5	3, 5	5	5
	3, 4.5, 4, 4, 5, 5	5, 3, 5, 5, 5, 4, 5, 5, 5	5, 5, 5, 4	3, 4, 5, 2, 4, 5, 5, 5	5, 4, 5	2, 4	5	5
	4, 4.5, 4, 5, 5, 5	5, 4, 5, 5, 4, 5, 5, 5, 5	5, 5, 5, 5	3, 3, 5, 2, 4, 5, 5, 5	4, 5, 5	3, 5	5	4.5

Food Service Sites

Sites	Heritage Health	Meals-on-Wheels	Monte-NR	Monte-Wakefield	Wartburg	Wartburg	Wartburg	Silvercrest
Preceptor	Grant	Colucci		Anibel Rivera	Fox	Frasier	Pacchione	Roger St. Clair
Stongly Disagree (1) Strongly Agree (5)								
<i>Activities in which I engaged at this site were appropriate to the level of my understanding & expertise</i>	5, 5, 5, 2 , 3, 5	5	5	5	5, 5, 5, 5	5, 4, 5	5, 5, 5, 4, 4, 5, 5, 5	5, 5, 5, 5, 5
<i>The activities provided adequate experience of the dietetic practice at the site</i>	5, 3, 5, 4, 3, 5	4	5	5	4, 4, 5, 5	5, 4, 5	4, 5, 4, 2, 5, 5, 5, 5, 5, 5, 5	5, 5, 5, 5, 5
<i>The schedule allowed adequate time to undertake each activity</i>	4, 2 , 4, 3, 4, 5	5	5	5	5, 5, 5, 5	5, 4, 5	5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5	5, 5, 5, 5, 5
<i>The preceptor gave me appropriate feedback on my performance</i>	5, 5, 5, 5, 2, 5	5	5	5	5, 5, 5, 5	5, 4, 5	5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5	5, 5, 5, 5, 5
<i>The preceptor encouraged questions & discussion</i>	5, 5, 5, 5, 2, 5	5	5	5	5, 5, 5, 5	5, 4, 5	4, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5	5, 5, 5, 5, 5
<i>The preceptor gave clear instructions & guidance</i>	3, 3, 5, 4, 2, 5	5	5	5	5, 5, 5, 5	5, 4	5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5	5, 5, 5, 5, 5
<i>The preceptor demonstrated expertise in the field of dietetics covered by the experience</i>	4, 3, 5, 5, 2 , 5	5	5	5	4, 5, 5, 5	5, 4, 5	5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5	5, 5, 5, 5, 5
<i>The preceptor was supportive in enhancing my learning & achieving competency</i>	5, 5, 5, 5, 4, 5	5	5	5	4, 5, 5, 5	5, 4, 5	5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5	5, 5, 5, 5, 5
<i>I felt that I acquired competency in the scope of practice covered by this site</i>	4, 4, 4, 5, 4, 4	4	5	5	4, 5, 5, 5	5, 4, 5	5, 5, 4, 4, 5, 5, 5, 5, 5, 5, 5	5, 5, 5, 5, 5
<i>What is your overall evaluation of this supervised practice site?</i>								
<i>Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)</i>	4, 2, 4, 5, 2 , 4	5	5	5	4, 5, 5, 5	4, 4, 5	4, 5, 4, 4, 5, 5, 5, 5, 5, 5, 5	5, 5, 4, 5, 5
<i>What is your overall evaluation of this site preceptor?</i>								
<i>Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)</i>	5, 3, 4, 5, 3, 5	5	5	5	4, 5, 5, 5	5, 4, 5	4, 5, 4, 4, 5, 5, 5, 5, 5, 5, 5	5, 5, 5, 5, 5

Intern Feedback: Food Service Management Rotations

Boulevard ALP Overall I learned a lot about menu making and ordering. At times it was slow, and I wish I was passionate about the food being produced and AP was open to any suggestions. However, I hoped to get a bit more direction from him.

Coler: I learned quite a bit at this rotation however my preceptor is not a good food service RD but a clinical RD. It would have been nice to work with an RD that works specifically in food service. Also the food production is cook-chill and I would have preferred if it was a conventional food service set-up.

Heritage: Kitchen understaffed; everyone had to wear different hats and a lot of the time the needs of the clients are the priority. I and my fellow intern were proactive and tried to suggest the projects ourselves because we wanted to make the most of the experience. We suggested projects that after observing where the most help was needed. Future interns should be very self-sufficient and not the type to wait for directions at every step. SG is the principle preceptor, but we didn't get to "shadow" her often. We worked on small project for her, but were mostly under the sous-chef who has some nutrition training, but very minimal. Things are pretty much set there and often times, the menu does not provide the HIV patients with everything they need. I acquired competency because me and classmate were proactive. A lot of things I learned were because I was able to apply coursework and I noticed items that were not supposed to be done. . . . Everyone was very nice and accommodating. It's a tight knit group and everybody looks out for each other. I fell in love with the clients and the staff, but it's definitely hard work and not "by the book" when it comes to ServSafe, HAACP and other sanitation guidelines. There are frequent client outbursts, but there was never a time where I felt unsafe. I think if future interns will be sent there, that may be a good site for a community/HIV, but not for food service.

Wartburg: I was treated fairly and with respect by all staff members. I felt like an integral part of the dietary team. I recommend this site as a food service rotation.

Beth Abraham Interns are encouraged to participate in all activities. Guidance was always given when sought out and had a very positive environment.

Wartburg: I had an amazing experience at the Wartburg. AW and the rest of the staff members were very welcoming and happy to teach me. The only complaint that I really had was that I didn't interact much with the RD. Aside from this, I had a very valuable experience. I feel that I learned a lot not only about food service but also how to effectively communicate with residents and other staff members. AW and the managers really pushed me out of my comfort zone and made it a very rewarding experience. I hope that our careers will cross paths in the future.

Boulevard ALP A friendly and pleasant working environment that provided many diverse opportunities to try new things. Preceptor is fun and encouraging providing many valuable and interesting experiences related to food service.

Wartburg: My experience far exceeded my expectation. I received strong balance of guidance and freedom. I felt continually encouraged and supported by each and every employee. I have great appreciation for my experience at this rotation site.

Beth Abraham Great preceptor, site and staff. Everyone there was happy to teach us, they were friendly and respectful.

Beth Abraham Great team at Beth Abe. Great preceptor.

Boulevard APL This was a good food service site but I walked in with a lot of food service knowledge so unfortunately I didn't learn that much. I think I would have learned more under an RD who works in food service. Still good site for other interns.

Heritage Health The experience was helpful particularly in diet contract with HIV patients and their nutritional needs. Lack of hospital food, program experience, variety of diets.

CABS: I have to learn by myself, nobody will ask you to do extra work or supervise you. I love it, so I can do whatever I can (if they let me do it), it was fun. At the same time I always observed the workers and supervisors how to do their work. (if they need help I will go and help) and they interact with each other.

Wartburg: Wonderful opportunity at Wartburg. I was allowed to work independently as well as within a group. Worked directly with the dietitians in addition to food service directors and managers.

Beth Abraham I enjoyed my experience at Beth Abraham. I think NF is a great preceptor and role model. I learned a lot about how a kitchen operates but I would have liked more about ordering and inventory. I think that would have been interesting.

Silvercrest: RSC offers a unique perspective understanding both clinical and food service in dietetics. He peaked my interest in food service and the possibility of explaining that avenue.

CABS: The environment was friendly, however AP seemed to be very busy all the time. She was unable to devote time on enhancing my learning experience at CABS Nursing Home. I asked a lot of questions, but AP was always too busy to answer them. Therefore, I mostly worked with the managers and companions during the shift. I assisted them with general operation and GERI-Menu changes.

CABS: Working here during the holidays and when weather was dangerous was very hectic for the staff since they were almost always short-staffed, I was able to learn a lot from the kitchen and of the duties of the manager and food service director. The staff was very helpful and welcoming. AP was very busy during his time however tried to help me as best she could.

Heritage Health I would have been able to learn a lot more if they weren't so short staffed.

Heritage Health The supervisors I was assigned expected intern to serve meals on a daily basis. Instructions to meet competencies was not clear and a supervisor was not knowledgeable about this subject. It would be nice to spend more time in clinical and less time in food service.

Public School Rotation
- Intern evaluation of sites 2011 - 2015

		Public School Sites						
Sites	George Fischer MS, Carmel, NY	Good Shepard Acad., NJ	Greenwich Education Group	PS 2 Qns	PS 9, Brooklyn	PS314/Muscota	PS 55 BX	
Preceptor	Colette Brennaman	Lopriato		Tsiforas	Moore/Soso		Colangelo	
Activities in which I engaged at this site were appropriate to the level of my understanding, experience & expertise	5	5	5	5, 5, 5, 4, 4, 4, 5, 5, 5	5, 5, 5, 5, 4	5, 5	5, 5, 5, 4	
The activities provided adequate experience of the dietetic practice at the site	5	5	5	5, 5, 5, 5, 4, 5, 5, 5, 5	4, 5, 4, 5, 4	5, 5	4, 5, 5, 4	
The schedule allowed adequate time to undertake each activity	5	5	5	5, 5, 5, 5, 4, 5, 5, 5, 5	5, 5, 5, 5, 4	5, 5	5, 5, 4, 4	
The preceptor gave me appropriate feedback on my performance	5	5	5	5, 5, 5, 5, 4, 5, 5, 5, 5	4, 4, 3, 5, 4	5, 5	5, 5, 5, 3	
The preceptor encouraged questions & discussion	5	3	5	5, 5, 5, 5, 4, 5, 5, 4, 5	4, 5, 3, 5, 4	5, 5	5, 5, 4, 3	
The preceptor gave clear instructions & guidance	5	3	5	5, 5, 5, 5, 4, 4, 5, 5, 5	3, 3, 4, 5, 4	5, 5	4, 5, 3, 3	
The preceptor demonstrated expertise in the field of dietetics covered by the experience	5	na	5	5, 3, 5, 5, 4, 4, 3, 3, 5	na, 3, 4, 5, 4	5, 5	5, 5, 4, 3	
The preceptor was supportive in enhancing my learning & achieving competency	5	5	5	5, 5, 5, 5, 4, 5, 5, 5, 5	5, 4, 4, 5, 5	5, 5	5, 5, 5, 3	
I felt that I acquired competency in the scope of practice covered by this site	5	5	5	5, 5, 5, 4, 5, 4, 4, 5, 5	5, 5, 5, 5, 5	5, 5	4, 5, 5, 3	
What is your overall evaluation of this supervised practice site?	5	5	5	5, 5, 5, 5, 4, 4, 5, 5, 5	4, 4, 4, 5, 5	5, 5	4, 5, 5, 3	
What is your overall evaluation of this site preceptor?				5, 5, 5, 4, 5		5, 5		

Stongly Disagree (1) Strongly Agree (5)

Activities in which I engaged at this site were appropriate to the level of my understanding, experience & expertise

The activities provided adequate experience of the dietetic practice at the site

The schedule allowed adequate time to undertake each activity

The preceptor gave me appropriate feedback on my performance

The preceptor encouraged questions & discussion

The preceptor gave clear instructions & guidance

The preceptor demonstrated expertise in the field of dietetics covered by the experience

The preceptor was supportive in enhancing my learning & achieving competency

I felt that I acquired competency in the scope of practice covered by this site

What is your overall evaluation of this supervised practice site?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

What is your overall evaluation of this site preceptor?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

		Public School Sites						
Sites	PS 60	PS 76, The Bennington School	PS 207	PS 130 Bx	PS/IS 184 Brooklyn	PS 189	PS 34 Brooklyn	
Preceptor	Trum	Keegan	Mathew Malden	Lisa Ben-Aderet	D'Amore	Dina Derbino	Loke	
Activities in which I engaged at this site were appropriate to the level of my understanding, experience & expertise	4	5	5	5, 5, 5, 5, 5, 5	5, 4, 5, 5, 5, 5, 4	5	4	
The activities provided adequate experience of the dietetic practice at the site	4	4	5	5, 5, 5, 5, 5, 5	5, 5, 5, 5, 5, 4	5	4	
The schedule allowed adequate time to undertake each activity	4	5	5	5, 5, 5, 5, 5, 5	5, 3, 5, 4, 5, 5, 4	5	4	
The preceptor gave me appropriate feedback on my performance	4	5	5	5, 5, 5, 5, 5, 5	5, 4, 4, 5, 5, 5, 4	5	4	
The preceptor encouraged questions & discussion	4	5	5	5, 5, 5, 5, 5, 5	5, 3, 5, 5, 5, 5, 4	5	4	
The preceptor gave clear instructions & guidance	4	5	5	5, 5, 5, 5, 5, 5	5, 2, 5, 5, 5, 5, 4	5	4	
The preceptor demonstrated expertise in the field of dietetics covered by the experience	4	na	4	5, 5, 5, 5, 5, 5	5, 2, 4, 3, 5, 5, 4	3	4	
The preceptor was supportive in enhancing my learning & achieving competency	4	5	5	5, 5, 5, 5, 5, 5	5, 3, 5, 4, 5, 5, 5	5	4	
I felt that I acquired competency in the scope of practice covered by this site	4	5	5	5, 5, 5, 5, 5, 5	5, 4, 5, 4, 5, 5, 5	5	4	
What is your overall evaluation of this supervised practice site?	4	5	5	5, 5, 5, 5, 5, 5	3, 3, 5, 5, 5, 3, 5	5	4	
What is your overall evaluation of this site preceptor?				5, 5, 5, 5				

Stongly Disagree (1) Strongly Agree (5)

Activities in which I engaged at this site were appropriate to the level of my understanding, experience & expertise

The activities provided adequate experience of the dietetic practice at the site

The schedule allowed adequate time to undertake each activity

The preceptor gave me appropriate feedback on my performance

The preceptor encouraged questions & discussion

The preceptor gave clear instructions & guidance

The preceptor demonstrated expertise in the field of dietetics covered by the experience

The preceptor was supportive in enhancing my learning & achieving competency

I felt that I acquired competency in the scope of practice covered by this site

What is your overall evaluation of this supervised practice site?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

What is your overall evaluation of this site preceptor?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

Public School Sites

Sites	BRS, Pleasantville, NY	CASA, PS189 Bx	PS 150Q Tribeca Learning Center	Woodglen Elementary	Little Tor	Cheder Chabad	Bais Yaakov Chafetz
Preceptor	Morash	Brown (Mercedez, White)	Marisa Nicolo	Patricia McFadden	Sherman	Lazerus	Ms. Ben Jacobs
Activities in which I engaged at this site were appropriate to the level of my understanding, experience & expertise	5, 5, 5, 5, 5, 5, 5	4, 5	5	5	5, 4	5	5
The activities provided adequate experience of the dietetic practice at the site	3, 5, 5, 5, 5, 5, 5	4, 4	5	5	5, 4	5	5
The schedule allowed adequate time to undertake each activity	5, 5, 5, 5, 5, 5, 5	4, 2	5	5	4, 4	5	4
The preceptor gave me appropriate feedback on my performance	4, 5, 3, 5, 5, 4, 5	2, 1	5	5	4, 4	5	5
The preceptor encouraged questions & discussion	4, 5, na, 5, 5, 5, 5	2, 2	5	5	5, 4	5	4
The preceptor gave clear instructions & guidance	4, 5, na, 5, 5, 4, 5	2, 2	5	5	4, 4	5	4
The preceptor demonstrated expertise in the field of dietetics covered by the experience	1, na, 5, 3, 5, 4, 5	2, 3	5	5	5, 4	5	4
The preceptor was supportive in enhancing my learning & achieving competency	4, 5, 5, 5, 5, 5, 4	4, 3	5	5	5, 4	5	5
I felt that I acquired competency in the scope of practice covered by this site	4, 5, 5, 5, 5, 4	4, 3	5	5	5, 4	5	5
What is your overall evaluation of this supervised practice site? Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)	4, 5, 5, 5, 5, 5	2, 2	5	5	5, 4		4
What is your overall evaluation of this site preceptor? Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)							

Public School Sites

Sites	Eric S. Smith School, Middle School, Ramsey NJ	San Luis Rey Elem.	Brooklyn International High School	Fox Meadow HS	Nyack HS	NY School for the Deaf, 555 Knollwood Rd, White Plains, NY 10603	PS 9, Brooklyn, 80 Underhill Ave, Brooklyn, NY 11238
Preceptor	Carol Carlson	Katheleen D'Avanzo	Oszust	Lallo	Salhoobi	Gloria Booker	Ms. Onge
Activities in which I engaged at this site were appropriate to the level of my understanding, experience & expertise	5	5	4	5	5	5	5
The activities provided adequate experience of the dietetic practice at the site	5	4	4	5	5	5	5
The schedule allowed adequate time to undertake each activity	5	4	5	5	5	5	5
The preceptor gave me appropriate feedback on my performance	5	5	5	5	5	5	4
The preceptor encouraged questions & discussion	5	5	5	5	5	5	4
The preceptor gave clear instructions & guidance	5	5	5	5	5	5	5
The preceptor demonstrated expertise in the field of dietetics covered by the experience	3	na	5	3	5	5	5
The preceptor was supportive in enhancing my learning & achieving competency	5	5	5	5	5	5	5
I felt that I acquired competency in the scope of practice covered by this site	5	5	5	5	5	5	5
What is your overall evaluation of this supervised practice site? Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)	5	5	5	5	5	5	5
What is your overall evaluation of this site preceptor? Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)				5			

Public Health Rotation

- Intern evaluation of sites 2011 - 2015

Stongly Disagree (1) Strongly Agree (5)

- Activities in which I engaged at this site were appropriate to the level of my understanding, experience & expertise
- The activities provided adequate experience of the dietetic practice at the site
- The schedule allowed adequate time to undertake each activity
- The preceptor gave me appropriate feedback on my performance
- The preceptor encouraged questions & discussion
- The preceptor gave clear instructions & guidance
- The preceptor demonstrated expertise in the field of dietetics covered by the experience
- The preceptor was supportive in enhancing my learning & achieving competency
- I felt that I acquired competency in the scope of practice covered by this site

What is your overall evaluation of this supervised practice site?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

What is your overall evaluation of this site preceptor?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

Sites	Public Health Sites						
	Betances (2014-2016)	Betances 2011-2014	Jacobi Medical Center	Soundview Health Center	St. Joseph's Clinic	Monte-NR	Mosholu
Preceptor	Shiloah	Shiloah	Bustamante	Shiloah		Belloise	Nicotra
	4, 5, 5, 5, 4, 5, 5, 5, 5, 4, 5, 5	5, 5, 5, 5, 5, 5, 5, 4, 5, 5, 5, 5, 5	5, 5	5, 5	4	5	5, 5, 5, 4, 4
	4, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5	5, 5, 5, 5, 4, 5, 5, 4, 5, 5, 5, 5, 5	5, 5	5, 5	4	5	5, 5, 5, 4, 4
	3, 5, 5, 5, 4, 5, 5, 5, 5, 4, 5, 5	5, 5, 5, 5, 5, 5, 5, 4, 5, 5, 5, 5, 5	5, 5	5, 5	4	5	5, 5, 5, 5, 4
	3, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5	5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5	5, 5	5, 5	4	5	5, 5, 5, 3, 4
	5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5	5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5	5, 5	5, 5	4	5	5, 5, 5, 4, 4
	4, 5, 5, 5, 4, 5, 5, 4, 5, 5, 5, 5	5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5	5, 5	5, 5	4	5	5, 5, 5, 3, 4
	5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5	5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5	5, 5	5, 5	4	5	5, 5, 5, 2, na
	5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5	5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5	5, 5	5, 5	4	5	5, 5, 5, 3, 4
	5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5	5, 5, 5, 5, 4, 5, 5, 5, 5, 5, 5, 5, 5	5, 5	5, 5	4	5	5, 5, 5, 5, 4
	3, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5	5, 5, 5, 5, 5, 5, 5, 4, 5, 5, 5, 5, 5	5, 4	5, 5	4	5	5, 5, 5, 4, 4
	4, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5	5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5, 5	5, 5	5, 5	4	5	5, 5, 5, 2, 4

Stongly Disagree (1) Strongly Agree (5)

- Activities in which I engaged at this site were appropriate to the level of my understanding, experience & expertise
- Activities provided adequate experience of the dietetic practice at the site
- The schedule allowed adequate time to undertake each activity
- The preceptor gave me appropriate feedback on my performance
- The preceptor encouraged questions & discussion
- The preceptor gave clear instructions & guidance
- The preceptor demonstrated expertise in the field of dietetics covered by the experience
- The preceptor was supportive in enhancing my learning & achieving competency
- I felt that I acquired competency in the scope of practice covered by this site

What is your overall evaluation of this supervised practice site?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

What is your overall evaluation of this site preceptor?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

Sites	Public Health Sites						
	Mosholu	Head Start - Mosholu	Head Start	Head Start	MealsOnWheels	Northern Riverview	Urban Health Plan
Preceptor	Lovens	Maureen St. John (RN)/Rivera	Pospishil	Skeats/Conklin	Colucci	Colucci	Munroe
	5, 4, 5, 5, 5, 5, 5, 4, 5, 4, 5	4, 4, 5, 4	5, 5, 5, 5	5	5, 4, 5, 4, 5	4, 4	5
	5, 4, 5, 5, 5, 5, 5, 4, 4, 5, 4, 5	4, 2, 3, 4	3, 5, 5, 5	5	5, 4, 5, 4, 5	5, 4	5
	4, 5, 5, 5, 5, 5, 4, 5, 5, 5, 4	5, 4, 5, 5	5, 5, 5, 5	5	5, 4, 5, 5, 5	5, 4	5
	4, 5, 5, 5, 5, 5, 4, 5, 5, 4, 4	4, 4, 5, 4	5, 5, 5, 5	5	5, 4, 5, 4, 5	5, 4	5
	4, 5, 5, 5, 5, 5, 4, 5, 5, 3, 4	4, 5, 5, 5	5, 5, 5, 5	5	5, 4, 5, 4, 5	5, 4	5
	4, 5, 5, 5, 4, 5, 4, 4, 5, 4, 4	3, 5, 4, 4	4, 4, 5, 5	5	5, 4, 5, 4, 5	5, 4	5
	4, 3, 5, 5, 3, 4, 4, 4, 4, 4, 4	3, 3, 1, 4	4, 5, 5, 5	3	5, 4, 5, 5, 5	5, 4	5
	4, 5, 5, 5, 5, 5, 5, 5, 5, 4, 5	5, 4, 5, 5	5, 5, 5, 5	5	5, 4, 5, 4, 5	5, 4	5
	4, 5, 5, 5, 5, 5, 4, 5, 5, 4, 5	4, 4, 4, 5	4, 5, 5, 5	4	5, 4, 5, 5, 5	5, 4	4
	5, 5, 4, 5, 5, 5, 5, 5, 5, 4, 5	4, 4, 3, 5	3, 4, 5, 5	4	5, 4, 5, 4, 5	5, 4	5
	5, 5, 5, 5, 5, 5, 4, 5, 5, 4, 5	4, 4, 4, 5	4, 5, 5, 5	5	5, 4, 5, 4, 5	5, 4	5

HIV Rotation - Intern evaluation of sites 2011 - 2015

Strongly Disagree (1) Strongly Agree (5)

Activities in which I engaged at this site were appropriate to the level of my understanding, experience & expertise

The activities provided adequate experience of the dietetic practice at the site

The schedule allowed adequate time to undertake each activity

The preceptor gave me appropriate feedback on my performance

The preceptor encouraged questions & discussion

The preceptor gave clear instructions & guidance

The preceptor demonstrated expertise in the field of interests covered by the rotation

The preceptor was supportive in enhancing my learning & achieving competency

I felt that I acquired competency in the scope of practice covered by this site

What is your overall evaluation of this supervised practice site?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

What is your overall evaluation of this site preceptor?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

Site Preceptor	HIV sites					
	Betances Shiloh	Heritage Health Grant/Greenfield	Heritage Health Grant	Heritage Health Greenfield	GLWD Fortunato /	GLWD Cheung
Activities in which I engaged at this site were appropriate to the level of my understanding, experience & expertise	4, 5, 5, 4, 5, 4, 5, 5, 5	3, 5, 5, 5, 5, 5	5, 5	5, 5, 5, 5, 4	5, 5, 5, 5	5, 5, 5, 4, 5, 5, 5, 5, 5
The activities provided adequate experience of the dietetic practice at the site	4, 5, 5, 5, 5, 4, 5, 5, 5	3, 5, 5, 5, 5, 5	5, 5	5, 4, 5, 5, 5	5, 4, 5, 5	5, 5, 5, 4, 5, 4, 5, 5, 5
The schedule allowed adequate time to undertake each activity	3, 5, 5, 4, 5, 5, 5, 5, 5	3, 5, 5, 5, 5, 5	4, 5	5, 5, 5, 5, 4	5, 5, 5, 5	5, 5, 5, 4, 5, 5, 5, 5, 5
The preceptor gave me appropriate feedback on my performance	3, 5, 5, 5, 5, 5, 5, 5, 5	4, 5, 5, 5, 5, 5	5, 5	5, 5, 5, 5, 5	3, 5, 3, 5	5, 5, 5, 5, 5, 5, 5, 5, 5
The preceptor encouraged questions & discussion	5, 5, 5, 5, 5, 5, 5, 5, 5	4, 5, 5, 5, 5, 5	5, 5	5, 5, 5, 5, 4	5, 5, 5, 5	5, 5, 5, 5, 5, 5, 5, 5, 5
The preceptor gave clear instructions & guidance	4, 5, 5, 4, 5, 5, 4, 5, 5	4, 5, 5, 5, 5, 5	5, 5	5, 5, 5, 4, 5	2, 5, 5, 5	5, 5, 5, 5, 5, 4, 5, 4, 4
The preceptor demonstrated expertise in the field of interests covered by the rotation	5, 5, 5, 5, 5, 5, 5, 5, 5	5, 5, 5, 5, 5, 5	5, 5	5, 5, 5, 4, 4	5, 5, 5, 5	5, 5, 5, 4, 5, 4, 5, 5, 5
The preceptor was supportive in enhancing my learning & achieving competency	5, 5, 5, 5, 5, 5, 5, 5, 5	5, 5, 5, 5, 5, 5	5, 5	5, 5, 5, 5, 5	5, 5, 5, 5	5, 5, 5, 5, 5, 5, 5, 5, 5
I felt that I acquired competency in the scope of practice covered by this site	5, 5, 5, 5, 4, 5, 5, 5, 5	4, 5, 5, 5, 5, 5	5, 5	5, 5, 5, 5, 4	5, 4, 5, 5	5, 5, 5, 4, 5, 5, 5, 5, 5
What is your overall evaluation of this supervised practice site?	3, 5, 5, 5, 4, 5, 5, 5, 5	4, 4, 5, 5, 5, 5	5, 5	5, 4, 5, 4, 4	5, 4, 5, 5	5, 5, 5, 3, 4, 5, 5, 5, 5
What is your overall evaluation of this site preceptor?	4, 5, 5, 5, 5, 5, 5, 5, 5	4, 5, 5, 5, 5, 5	5, 5	5, 5, 5, 4, 5	5, 5, 4, 5	4, 5, 5, 4, 5, 5, 5, 5, 5

Strongly Disagree (1) Strongly Agree (5)

Activities in which I engaged at this site were appropriate to the level of my understanding, experience & expertise

The activities provided adequate experience of the dietetic practice at the site

The schedule allowed adequate time to undertake each activity

The preceptor gave me appropriate feedback on my performance

The preceptor encouraged questions & discussion

The preceptor gave clear instructions & guidance

The preceptor demonstrated expertise in the field of interests covered by the rotation

The preceptor was supportive in enhancing my learning & achieving competency

I felt that I acquired competency in the scope of practice covered by this site

What is your overall evaluation of this supervised practice site?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

What is your overall evaluation of this site preceptor?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

Site Preceptor	HIV Sites						
	Bx-Mante Esson-Samuel	AIDS Center- Monte- Muff	DOJ Singh	Iris House Alves	Monte- MV Orfe	TOUCH, Inc Lee	Pareski Clinic, Woodhull
Activities in which I engaged at this site were appropriate to the level of my understanding, experience & expertise	5, 5, 4, 4, 5, 5, 5, 5, 5	5, 5, 5, 5	5, 5	5, 5, 5	3, 4, 5	3, 4	5, 4
The activities provided adequate experience of the dietetic practice at the site	5, 5, 4, 4, 5, 5, 5, 5, 5	5, 5, 5, 5	5, 5	5, 5, 5	2, 3, 4	2, 4	5, 5
The schedule allowed adequate time to undertake each activity	5, 5, 5, 4, 5, 5, 5, 5, 5	5, 5, 5, 5	5, 5	5, 5, 5	4, 5, 5	4, 4	5, 5
The preceptor gave me appropriate feedback on my performance	5, 5, 5, 4, 5, 4, 5, 5, 5	4, 5, 5, 5	5, 5	5, 5, 4	3, 3, 5	4, 4	5, 4
The preceptor encouraged questions & discussion	5, 5, 5, 5, 5, 4, 5, 5, 5	4, 5, 5, 5	5, 5	5, 5, 4	4, 5, 5	3, 4	5, 4
The preceptor gave clear instructions & guidance	5, 5, 5, 4, 5, 4, 5, 5, 5	5, 5, 5, 5	5, 5	5, 5, 5	2, 3, 4	2, 4	5, 4
The preceptor demonstrated expertise in the field of interests covered by the rotation	5, 5, 5, 4, 5, 5, 5, 5, 5	4, 5, 5, 5	5, 5	5, 5, 5	na, na, 5	5, 4	5, 3, 5
The preceptor was supportive in enhancing my learning & achieving competency	5, 5, 4, 4, 5, 5, 5, 5, 5	4, 5, 5, 5	5, 5	5, 5, 5	3, 4, 5	4, 4	5, 4
I felt that I acquired competency in the scope of practice covered by this site	5, 5, 4, 4, 5, 5, 5, 5, 5	5, 5, 5, 5	5, 5	5, 5, 4	3, 4, 5	4, 4	4, 5, 4
What is your overall evaluation of this supervised practice site?	5, 5, 4, 3, 5, 4, 5, 4, 5	5, 5, 5, 5	5, 5	5, 5, 4	3, 3, 4, 5	3, 4	4, 5, 4
What is your overall evaluation of this site preceptor?	5, 5, 4, 4, 5, 4, 4, 4	4, 4, 5, 5	5, 5	5, 5, 4	3, 3, 5	3, 4	5, 4

WIC Rotation - Intern evaluation of sites 2011 - 2015

Strongly Disagree (1) Strongly Agree (5)

Activities in which I engaged at this site were appropriate to the level of my understanding, experience & expertise

The activities provided adequate experience of the dietetic practice at the site

The schedule allowed adequate time to undertake each activity

The preceptor gave me appropriate feedback on my performance

The preceptor encouraged questions & discussion

The preceptor gave clear instructions & guidance

The preceptor demonstrated expertise in the field of dietetics covered by the experience

The preceptor was supportive in enhancing my learning & achieving competency

I felt that I acquired competency in the scope of practice covered by this site

What is your overall evaluation of this supervised practice site?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

What is your overall evaluation of this site preceptor?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

Preceptor	WIC Sites							
	Brooklyn	Bx. Lebanon	Bx. Lebanon	Bx. Lebanon	Chinatown	Ocean Ave.	Catholic Charities	Hempstead, Glen
		Stein	Weakly	Ada Alicea	Marie Davis-Williams	Singh	Sondey	Susan McKenna
	5	5, 5, 4	2, 5	4, 4, 5, 3, 4	5	4, 4	3, 5, 5	5
	5	5, 5, 4	2, 4	3, 4, 5, 2, 4	5	4, 4	3, 4, 5	5
	5	3, 5, 4	3, 5	5, 3, 5, 2, 5	5	4, 4	3, 5, 5	5
	5	5, 5, 4	2, 5	3, 5, 5, 2, 4	5	4, 4	3, 4, 5	5
	5	3, 5, 4	1, 5	4, 4, 5, 1, 5	5	4, 4	3, 5, 5	5
	5	4, 5, 4	1, 5	3, 3, 5, 1, 5	5	4, 4	3, 4, 5	5
	5	5, 5, 4	4, 5	4, 5, 5, 1, 5	5	4, 4	3, 5, 5	5
	5	4, 5, 4	1, 5	4, 3, 5, 1, 4	5	4, 4	3, 5, 5	5
	5	5, 5, 4	5, 4	4, 4, 5, 3, 5	5	4, 4	3, 5, 5	5
	5	4, 5, 4	1, 4	3, 3, 5, 1, 5	5	5, 4	3, 4, 5	5
	5	5, 5, 4	1, 5	3, 3, 5, 1, 5	5	5, 5	3, 5, 5	5

Strongly Disagree (1) Strongly Agree (5)

Activities in which I engaged at this site were appropriate to the level of my understanding, experience & expertise

The activities provided adequate experience of the dietetic practice at the site

The schedule allowed adequate time to undertake each activity

The preceptor gave me appropriate feedback on my performance

The preceptor encouraged questions & discussion

The preceptor gave clear instructions & guidance

The preceptor demonstrated expertise in the field of dietetics covered by the experience

The preceptor was supportive in enhancing my learning & achieving competency

I felt that I acquired competency in the scope of practice covered by this site

What is your overall evaluation of this supervised practice site?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

What is your overall evaluation of this site preceptor?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

Preceptor	WIC Sites							
	Elmhurst	Flushing (PHS)	Jamaica (PHS)	Jamaica, Astoria, Ridgewood (PHS)	E. Tremont (PHS)	Jamaica	Lincoln	Morrisania
	Nadira Ramgolam	Amy Ngai	Meghar	Zahida		Terens	Siew Teo	Barrett
	5	5	5	3	2	5, 5, 5, 5, 4	5, 5	5
	5	3	5	3	2	3, 4, 4, 5, 4	5, 5	4
	5	4	5	3	2	4, 5, 5, 5, 4	5, 5	2
	5	3	5	5	3	4, 3, 5, 5, 2	5, 5	5
	5	5	5	5	2	4, 3, 5, 5, 4	5, 5	5
	5	4	5	5	3	5, 4, 5, 5, 4	5, 5	5
	5	5	5	5	4	4, 3, 5, 5, 3	5, 5	5
	5	5	5	5	3	4, 3, 5, 5, 3	5, 5	5
	5	4	5	5	2	5, 4, 5, 5, 3	5, 5	4
	5	3	5	3	1	4, 4, 4, 5, 3	5, 5	5
	5	3	5	3	3	4, 3, 5, 5, 4	5, 5	5

Site	WIC Sites								
	Morris Heights	WS-Monte	NR-Monte	NR-Monte	Nassau - DOH	RC-DOH	St. Barnab	Urban Health	Middletow n
Preceptor		Winchester-Reed/Conte	Cann	Linton	Janice Pawli, RD	Leach	Contus	Thompson	Mary Jackson

Stongly Disagree (1) Strongly Agree (5)

Activities in which I engaged at this site were appropriate to the level of my understanding, experience & expertise

The activities provided adequate experience of the dietetic practice at the site

The schedule allowed adequate time to undertake each activity

The preceptor gave me appropriate feedback on my performance

The preceptor encouraged questions & discussion

The preceptor gave clear instructions & guidance

The preceptor demonstrated expertise in the field of dietetics covered by the experience

The preceptor was supportive in enhancing my learning & achieving competency

I felt that I acquired competency in the scope of practice covered by this site

What is your overall evaluation of this supervised practice site?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

What is your overall evaluation of this site preceptor?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

4	4, 4, 5, 4, 5, 4	4, 5	5, 5, 5, 4, 5	5	5, 5, 4, 5, 5, 4	5	5	5
4	3, 4, 5, 5, 5, 4	4, 5	4, 4, 5, 4, 5	5	5, 5, 4, 5, 5, 3	5	5	5
5	5, 5, 5, 5, 5, 4	4, 5	5, 5, 5, 5, 5	5	5, 5, 4, 5, 5, 4	5	5	5
5	5, 4, 5, 5, 5, 3	3, 4	4, 5, 5, 5, 5	5	5, 3, 3, 4, 5, 4	5	5	5
4	5, 5, 5, 5, 5, 5	4, 3	5, 5, 5, 5, 5	5	5, 5, 4, 4, 5, 4	5	5	5
5	4, 4, 5, 4, 5, 4	3, 3	4, 5, 5, 5, 5	4	5, 5, 4, 4, 5, 4	5	5	5
5	4, 5, 5, 4, 5, 5	4, 2	4, 4, 5, 5, 5	5	5, 5, 4, 5, 5, 4	5	5	5
4	4, 5, 5, 5, 5, 5	4, 5	5, 5, 5, 5, 4	5	5, 5, 4, 5, 5, 4	5	4	5
4	4, 5, 5, 5, 5, 5	5, 5	5, 5, 5, 5, 4	5	5, 5, 4, 5, 5, 4	5	5	5
4	4, 5, 5, 4, 5, 4	4, 5	4, 5, 5, 4, 5	5	4, 5, 4, 4, 5, 3	5	5	5
5	4, 5, 5, 5, 5, 4	3, 2	5, 5, 5, 5	4	5, 5, 4, 5, 5, 4	5	5	5

Intern Feedback: All Community Rotations

Betances : The site allows the student to practice their patient counseling skills and group presentation skills

Betances : Overall, Betances Health Center is an excellent site to do my HIV rotation. First of all, the center has grants for HIV as well as an HIV physician specialist, as well as HIV staff and case managers. I was fortunate enough to work closely with the staff and attend great HIV group sessions, meetings and much more. In addition, counseling HIV patients was an amazing experience, and I was never afraid.

Betances : This is a wonderful site to do a community - public health nutrition at. I have gained a ton of valuable experience with counseling and educating a variety of patients. Also my preceptor RS goes above and beyond with her interns, giving us the confidence to succeed in the real world. The most difficult part of the rotation is saying goodbye.

Mosholu Montefiore : Everybody was absolutely wonderful and accommodating at this site. I really felt welcomed and accepted immediately. It was also great working with people who appreciate the hard work one puts in. There were times where there was a little lull in work, but I was never bored during my time here. LN had given me enough projects to work on that there was always something that could be improved.

PS 2 Queens : Teaching 2nd grade ESL students was a great experience. I enjoyed educating the students on the "Go, Slow, Whoa Foods."

PS 2 Queens : Great experience! The teachers were helpful in helping me write a lesson plan. The kids are very well-behaved and attentive.

WIC-Catholic Charities : My preceptor did not give me clear directions/instructions with what she expected of me to do at my time at WIC. Her projects did not prepare me anyway. The best part was working with peer counselors and breastfeeding specialists.

WIC-Bronx Lebanon : Poor evaluation.

PS 55 Bronx: I was really excited about working with kids. I wish we were told a little more information on what type of special-ed kids they were. Overall it was a good experience.

GLWD: Although I had some bumps in the road initially, I think this rotation was a really good learning experience for me. Everybody was very welcoming and friendly. However, because the interns are working with a new dietitian everyday, it was difficult for me to get into the flow of understanding everybody's personal style. One day one person would give you instructions to do something in a specific way, and then somebody else would

GLWD : see attached. DD

PS 2 Queens : Both Assistant Principal LT and 2nd grade ESL teacher RM were extremely approachable and helpful in guiding this lesson. In addition, being able to meet the students, not just my preceptors, before my presentation was a wonderful experience as I developed a rapport with them and asked them for their likes/dislikes (since they were my target audience). Overall, a great experience at the school and during the lesson.

WIC, NR-Monte : I enjoyed my time at WIC. All staff was friendly and helpful. I was allowed to experience all that WIC provides to its participants and got a great sense of how the service works to improve participants/community/nutritional health.

BRS : I absolutely loved working at BRS. Attending the food tasting and gardening lessons were great ways to interact with the students while incorporating nutrition and health. The people I worked with were helpful and eager to include me in activities. My lower markings in regard to the fact that I did not have a principle preceptor per se, and certainly did not have a dietetics background, therefore limiting my competency coverage. I was proud of my lesson and pleased with the response from both students and teachers. BRS is a great school promoting health as a priority amongst its students.

MV-Monte : Preceptor and all other staff members were very kind. Program lacks emphasis on importance regarding HIV population. With this being the first time hosting dietetic interns, I believe our presence ignited the idea of implementing more nutrition counseling/education for patients. There is greater need for dietetic profession integration in the HIV program. If dietetic interns are continuously accepted at this site, I hope group education classes can be organized to utilize the lessons created during our time there.

Head Start : EP was a wonderful preceptor - always encouraging relevant conversation. I felt very comfortable asking her questions about tasks and her experiences as an RD. Interning at Head Start afforded me the opportunity to practice and enhance my presentation skills by teaching nutrition education in the form of a lesson to preschool-aged children and in the form of staff training to teachers. From working in the classrooms with children and

PS, CASA : Principal was difficult to contact and maintain ongoing correspondence. He implemented many health-conscious programs, but the positive did not weigh out the negative.

Betances : I was able to build confidence and rapport with patients as well as medical team. This is a very caring and nurturing environment, and I would encourage more students to take advantage of this rich environment.

BRS : BRS was an awesome place to do my public school rotation. CM is a great teacher who was very helpful when I made my lesson plan and he made me feel really comfortable teaching his class. I had a great time throughout this rotation.

NR-Monte : I had a good experience here although at times it was hard since most participants spoke another language.

MV-Monte: Patients in the clinic rarely got referred to see a dietitian so I think we would have been more helpful to them if they were being referred. LO is a great lady, but I didn't think she knew what to do with us so we did take initiative to create lesson plans and do research on HIV/AIDS to make the most out of our experience here.

Head Start: Head Start was a good experience. There were times that EP was a little unorganized but she was great and always took the time to make sure we understood what we were supposed to do and made sure we met our competencies.

Betances : Excellent preceptor and overall learning environment! A+

WS-WIC: A fun, rich learning environment with positive and supportive staff. I thoroughly enjoyed working with this patient/participant population and learning from this sites wonderful staff.

PS2 Queens : Staff and students were enthusiastic and engaged. This rotation was a particularly fun and rewarding one.

Mosholu Monte : LN and her staff provided a very welcoming environment to work in. Lisa gave me very good feedback on my performance and her staff was very supportive.

BRS : Overall, enjoyed my learning experience at this site, I was rated as less than excellent by preceptor with no comments connected to those ratings. I would have appreciated feedback so that I could learn and improve any deficits for future lessons. I was also disappointed that I was unable to attend some of the tasting events at the school due to conflicts with other school-related activity.

NR-WIC: My experience at WIC has been diverse and expansive. I am happy to have experienced/observed each step in the process of achieving the goals of helping WIC participants and food safety issues and with nutritional counseling and support (including physical activity). I leave this experience with positive feelings about the program, each staff member, the leader and my contribution to the program. After only two weeks, I find it difficult to leave. Thank you for this wonderful learning experience.

Mosholu Monte : I was given opportunity to observe many forms of leadership and many styles in this setting. The observations assisted my future development of my own manner of leading. I felt supported, guided, but also permitted to find my own way. This experience strongly enhanced my overall learning experience.

MV-Monte : Overall varied and helpful experience.

Betances : I learned so much. RS is an excellent preceptor/ I loved this site!

PS 134/Muscota : Great site!

Lincoln WIC : Great preceptor! Very helpful!

GLWD : RF is a great preceptor, however she did not give the appropriate feedback on my performance in time for me to make the necessary changes. Still, great site!

Betances : Excellent counseling experience, excellent preceptor.

Betances HIV: Very valuable experience and improved my knowledge and expertise in nutrition needs and counseling of HIV/AIDS patients.

PS 2 Queens : This was an enlightening experience and worthwhile. The children were happy and enthusiastic. It made me feel more comfortable with teaching children.

St. Barnabus WIC : Everyone was very helpful. Would have liked more hands on experience.

GLWD : This was by far the best site of my DI. I was challenged, but in a positive way. I was able to use my MNT knowledge while speaking to people in the community. I really think that in the future interns should complete 200 hours (HOV/AIDS and PH) here if the site allows. I learned so much more here than I did at my public health site. I would like to work here.

Mosholu Monte : I really loved being at the senior center, however, I felt like everything I learned was self-taught. There is no dietitian on staff, so I really didn't have anyone to learn from. I really didn't feel like I was doing the right thing until the last 2 weeks.

PS 55 Bronx: I really enjoyed meeting Mr. Ritz and seeing the tower gardens.

WS-WIC : I really loved working at this site! Everyone was friendly, they were always helpful and answered all my questions. CWR was the best preceptor! She had things for me to do everyday but also asked what I wanted or needed to do and what I learned to gain from this experience. I learned more in two weeks than I could have imagined.

Head Start: It was a pleasure working with SS and MC. I really appreciated their willingness to let me suggest nutrition projects. Two great people!

MOW: MC gave freely of her time and expertise. She would be a great asset to any intern. She is approachable and patient.

Hertiage Health HIV: This rotation in general filled by Columbia interns who have completed clinical rotation and is 50% longer. I was at a serious disadvantage.

PS 184 Brooklyn: This experience taught me how to prepare well and ready for class.

MOW: It was a pleasure working with MC. She guided us through all the tasks that MOW performs to help individuals in the community. We were able to assist in every area.

RC-DOH WIC: I had a wonderful experience at the various WIC sites. The dietitians I worked with were very patient, educated me on the various tasks they performed and allowed me to interact with the clients.

Little Tor Elementary: I really enjoyed educating students on the importance of good nutrition. The students were very knowledgeable and engaged in our lesson. It would have been nice however to get to spend more time with the students/teacher prior to the lesson.

TOUCH-HIV: I really enjoyed learning about TOUCH and how they serve individuals with HIV in the community. However, I would have liked to counsel more with members of TOUCH more than once per week.

WIC-Catholic Charities: My preceptor took my position as an intern very seriously and she gave me a lot of responsibilities while I was there. I learned about all aspects of WIC including meeting with and evaluating participants, creating brochures, and schedules for upcoming events and sitting in on the peer counselor breastfeeding training classes. My preceptor and all of her employees always encouraged questions and were very pleasant to work with.

GLWD: Was my favorite rotation. This charity organization is an amazing place. I got to work right away because they were understaffed with dietitians. I gained an enormous amount of knowledge and experience from this rotation.

NR-WIC: WIC was a great learning experience. Although I was there for only 2 weeks I saw a lot. The FIT WIC program is a fantastic outreach program for the community. I also enjoyed working with Theresa. There were lots of papers to write in the short 2 weeks but I do feel I learned a lot.

Monte-WIC: Not always busy, a lot of down time. CES allowed me to perform some assessments and write notes which was a good learning experience. I also did a presentation at one of her weight-loss groups. I would have liked it to be a little busier.

Head Start: This was one of my favorite rotations. It was such a nice change to work with children as opposed to the elderly population. I learned so much about the Head Start program and good nutrition practices for children. I would definitely recommend this site for interns. Just make sure they have a car.

Head Start: This experience with Head Start was great. I really enjoyed learning about a different career in the dietetics field and clinical experience. EP was a great preceptor, she always welcomed questions and explained everything in great detail.

Betances: RS was an excellent preceptor who took every opportunity to teach me. She was always open to my questions and comments and always made me feel comfortable. I worked with a diverse range of patients, which taught me to be patient and empathetic, while learning how to counsel patients on a healthy balanced diet.

Flushing WIC (PHS): Everyone is nice, but I don't think I got the best WIC experience.

Betances: Overall my experience at Betances was great. I was able to learn a lot about counseling, providing nutrition recommendations to clients and developing case plans. And my preceptor RS was very supportive and encouraging in enhancing my learning.

Monte-HIV: Not only did I learn about the NCP and therapy for HIV/AIDS population, but I also learned about the insurance process and use of supplements.

PS 184 Brooklyn: Although I wish I had a more well-behaved class, I learned a lot working with this class. The site is a little unorganized and hectic but overall I am glad to have the experience teaching a younger population.

PS 184 Brooklyn: I really enjoyed working with AD on this assignment. She was very encouraging while allowing me to pick a topic and a teaching method with which I am comfortable. She was helpful during the lesson both with the execution and ensuring the students paid attention. Overall, this was a better experience than I anticipated since I don't have a lot of experience with children!

Good Shepard Academy, Nutley, NJ: I can't say enough about this school. The principal was so helpful and accommodating to my needs. Even though I am a student, she made me feel very appreciated. I would recommend this school to other interns.

Monte-HIV: I was looking forward to having this rotation. It was the only site that I learned and observed how an RD consult with clients. I learned a lot from this rotation.

Mosholu: The site was going through management change. There was no RD present at the site that I can learn from her experience. The new director and Ms. Mareen (RN) were extremely supportive. It was an opportunity for me to plan and work with seniors independently.

East Tremont WIC (PHS): I was not able to learn much at WIC due to limited time for nutritionist observation. I mostly did shopping tours and the poster. Only 2 times did I actually observe the nutritionist.

Research Rotation

-- Intern evaluation of sites 2011 - 2015

Stongly Disagree (1) Strongly Agree (5)

Activities in which I engaged at this site were appropriate to the level of my understanding, experience & expertise

The activities provided adequate experience of the dietetic practice at the site

The schedule allowed adequate time to undertake each activity

The preceptor gave me appropriate feedback on my performance

The preceptor encouraged questions & discussion

The preceptor gave clear instructions & guidance

The preceptor demonstrated expertise in the field of dietetics covered by the experience

The preceptor was supportive in enhancing my learning & achieving competency

I felt that I acquired competency in the scope of practice covered by this site

What is your overall evaluation of this supervised practice site?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

What is your overall evaluation of this site preceptor?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

Stongly Disagree (1) Strongly Agree (5)

Activities in which I engaged at this site were appropriate to the level of my understanding, experience & expertise

The activities provided adequate experience of the dietetic practice at the site

The schedule allowed adequate time to undertake each activity

The preceptor gave me appropriate feedback on my performance

The preceptor encouraged questions & discussion

The preceptor gave clear instructions & guidance

The preceptor demonstrated expertise in the field of dietetics covered by the experience

The preceptor was supportive in enhancing my learning & achieving competency

I felt that I acquired competency in the scope of practice covered by this site

What is your overall evaluation of this supervised practice site?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

What is your overall evaluation of this site preceptor?

Poor (1), Fair(2), Average(3), Above Average (4), Excellent (5)

Research Sites

Site	DHS	DHS	DHS	DHS	DHS	DHS	DHS
Preceptor	Boyar	Burt	Ethan	Opfer	Samuel	Rho	Huyng
	4, 5, 5	5, 5, 5	5, 3, 5, 5, 3, 4	5	3, 4, 5	3	4
	4, 5, 5	3, 4, 5, 4	5, 3, 5, 5, 3, 3	5	3, 4, 5	4	4
	4, 5, 4	4, 5, 5, 5,	5, 5, 4, 5, 3, 3	5	5, 5, 4	4	4
	5, 5, 5	5, 3, 3, 3	5, 2, 5, 5, 3, 4	5	5, 5, 5	4	3
	5, 5, 5	5, 5, 4, 3	5, 4, 5, 5, 3, 4	5	5, 5, 5	4	3
	5, 5, 4	5, 5, 3, 3	5, 2, 5, 5, 3, 3	5	5, 4, 4	3	4
	5, 5, 5	5, 5, 5, 4	5, 3, 5, 5, 3, 4	5	5, 5, 5	4	5
	4, 5, 5	5, 5, 4, 5	5, 3, 5, 5, 3, 4	5	5, 5, 5	5	4
	4, 5, 5	4, 4, 5, 4	5, 3, 4, 5, 3, 4	5	3, 5, 5	4	4
	5, 5, 5	4, 5, 4, 4	5, 4, 5, 5, 3, 3	5	3, 4, 5	4	4
	5	4, 4, 4, 4	5, 5	5	4	4	

Research Sites

Site	Veggiecation	Wartburg	CIHE	CIHE (2011-2014)	CIHE	CIHE	Monte-NR
Preceptor	Rizzo/Colangelo	Brathwaite	Molina/Gina	Molina	Nguyen	Lunn	Sanford
	5, 4.5	5, 5	3, 4, 5, 4, 5, 5, 4, 5, 5, 4	5, 5, 5, 5, 5, 5, 4	5	4, 4	5
	5, 3.5	5, 5	2, 5, 5, 5, 4, 5, 3, 5, 5, 4	5, 5, 4, 5, 5, 5, 4	5	3, 4	5
	5, 5	4, 4	2, 5, 5, 3, 5, 5, 5, 5, 4	5, 5, 5, 5, 5, 5, 4	3	5, 3	5
	4, 5	4, 4	3, 4, 5, 3, 4, 5, 5, 5, 4	5, 5, 4, 5, 5, 5, 4	3	5, 4	5
	4, 4	4, 4	3, 5, 5, 3, 5, 5, 5, 5, 4	5, 5, 5, 5, 5, 5, 4	3	5, 5	5
	3, 3.5	3, 4	2, 4, 5, 2, 4, 5, 4, 5, 5, 4	5, 5, 4, 5, 5, 3, 5, 5	3	5, 3	5
	5, 4	3, 4	2, 4, 5, 5, 4, 5, 5, 5, 4	5, 5, 5, 5, 3, 5, 5	3	3, 5	5
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	4, 4	5, 4	3, 5, 5, 4, 4, 5, 5, 5, 4	5, 4, 5, 5, 5, 5, 4	3	4, 4	5
	4, 4		2, 5, 5, 2, 5, 5, 4, 5, 5, 4	5, 5, 5, 5, 5, 4		5	

Intern Feedback: Research Rotation

Burt: My scholarly writing skills have improved since working with this preceptor

Veggiecattion: I had a good experience working with the Veggiecattin team on this project. I work better under circumstances that are structured so I struggled with aspects of this rotation, but overall it was a good experience.

CIHE: Overall I did not have the best experience at this site. Prof. MAM was not always in the office; I was lucky if I saw her for 10 minutes a week. When I texted her for assistance, she would respond hours later. I had minimal guidance throughout the entire rotation.

Burt: My mark lower than "5" are only due to the fact that this preceptor went on maternity leave mid-rotation, causing NF and I to carry out the requirements of the rotation independently, which I feel we handled well. Had KB been with us throughout the rotation it would have been better.

CIHE: Enjoyed the experience and the ability to research a topic that was personal to me. Productive environment.

Burt: I think KB is an awesome person and teacher but I chose neutral for a few just because she wasn't around as much as I would have liked. I completely understand that she couldn't be there and I think the [other intern] and I managed but there were definitely some challenges.

Veggiecattion: I enjoyed working on many elements of this rotation and was able to practice some important aspects of nutrition research as well as nutrition curriculum building. That said, being able to select a project/topic of our choosing would have allowed for more depth.

Boyar: I thoroughly enjoyed this learning experience. This was a unique research opportunity to work through the entire process from beginning to end. AB guidance through the process and the writing were greatly appreciated and cemented my knowledge in this area.

CIHE: MAM is an excellent preceptor. Very helpful and knowledgeable.

Opfer: Great insight into how an article is written. Very useful information for my future writing endeavors. Great experience.

CIHE: I felt pretty good about this experience, but I have a few suggestions. For the preceptor it would be nice if there were specific times and days every week that she would be in the office and available to interns. Also it would have been nice to spread out the workload.

Rho: Preceptor was very helpful with my research project and accommodated my schedule. He was available for questions and guidance in the writing process. The subject of my paper, ESRD, incidence and resource was more appropriately related to Public Health.

CIHE: Gina was a great preceptor. She provided guidance and was always available. I really enjoyed working with the ALC and those involved in the edible garden. It was a valuable experience!

Samuel: This rotation was my least favorite so far. I took research methods at LC with CD. This class required me to write a grant proposal. I felt I learned more from this class than I did in this rotation. My assignment for this class was basically doing a nutrient analysis.

Ethan: Overall, it was a great experience working with Prof. Ethan and learning different ways of collecting data for research.

Ethan: I was interested to work on a distracted bikers research project. DE was very nice, but I wish she could have given us more guidance and instructions through the rotations.

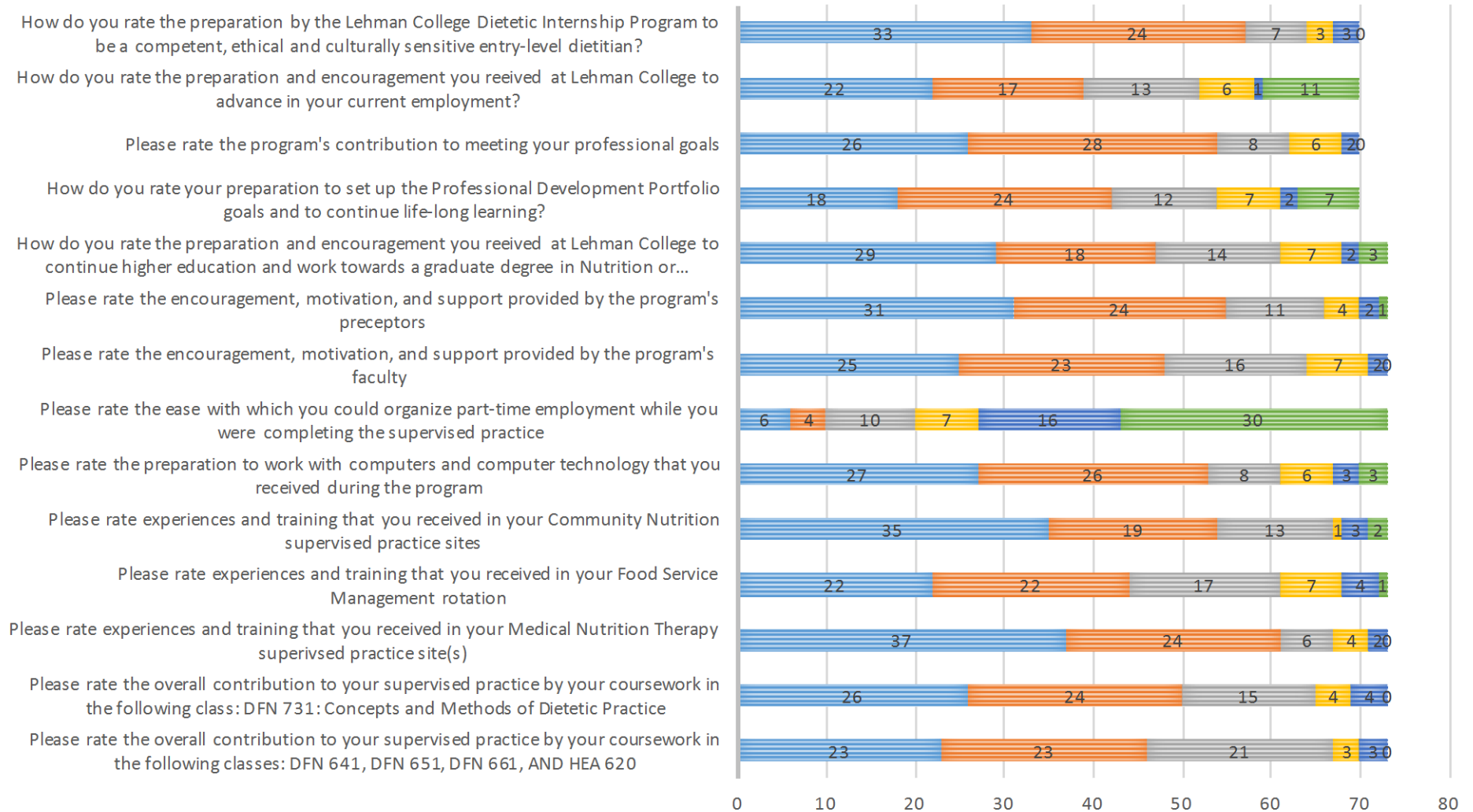
Ethan: I really enjoyed working with Prof. DE on this project. She is very supportive and encouraging. She allowed us to be as independent as we could while providing guidance and instruction when required to proceed. I appreciate that I got to work with another preceptor.

Ethan: The work was very tedious, but the findings were interesting.

Ethan: Although frustrating at first (due to coding) it was rewarding to see the primary results of a pilot. DA provided feedback and encouraged questions. I learned a lot about research methods.

EXIT SURVEY SUMMARY 2010-2015

■ Excellent ■ Very Good ■ Good ■ Satisfactory ■ Poor ■ N/A



Lehman College
Program in Dietetics, Foods, and Nutrition
Dietetic Internship Program

Exit Survey – Summary
2010-2015

Please use the space below for comments, criticisms, and/or commendations.

1. I am glad to see that Lehman's program holds such high standards. I am happy to have gone through it.
2. Would have preferred to have some sort of hospital experience.
3. I felt that this program prepared me for both the dietetics work field as well as continuing education in the field. Although the program was challenging, it helped build self-confidence and build genuine relationships.
4. The program is well rounded in the experiences it provides. I felt fully competent at the end of the program to begin work as an entry-level dietitian. The only rotation I would perhaps shorten would be HIV/AIDS. Although the experience was beneficial I think making the critical care hours longer might provide more time to gain experience with nutrition support. Although I felt completely competent in it, I think it's a very important aspect to entry-level jobs and the more exposure the better.
5. Some coursework is not helpful. Some rotations took too long to commute. It could take up to 6 hours to travel between home, rotation, and school on school days, which is exhausting.
6. It was an excellent experience!! I learned a lot and feel very prepared for what's ahead. After talking to interns from other programs and hearing their experiences, I feel that this is the best program in the area.
7. Great program! My only comment is that I would've loved to have better MNT class without online exams and online classes. In-class lectures are much more useful, especially in such an important class as MNT.
8. I am very pleased about doing my dietetic internship at Lehman, which allowed me to complete two goals: completing the DI and the MS in Nutrition. I really enjoyed each of the sites where I was assigned for internship rotations. I feel that the preceptors were supportive and interested in helping me become competent. Once they got to know me, they were more than willing to allow me to use my strengths to help them accomplish their goals, as well as my own goals of learning. I know some of my fellow interns struggled with preceptor interactions, but I did not experience the same struggles.
9. I do think interns could benefit from a longer time at the HIV rotation at God's Love We Deliver or the community rotation at Betances. At both sites, we do individual counseling in an outpatient setting, but are there for such a short period of time that we don't have time to follow-up and see if our recommendations were followed and successful.

10. Program was really intense the classes were a good supplement to supervised practice however there was a lot of confusion with the syllabus and coursework for the MNT and food service class. The HEA 620 class was a lot of work but rewarding. So was the DFN 641 class. I would have like to have seen more discussion on current happenings in the dietetics world in the seminar class.
11. It would have been nice to have an elective rotation where interns can do about 2 weeks minimum in a specialty they are interested in ie: private practice, dialysis, sports, etc. It would also have been nice if all students can have experience in all or most of different populations; athletes, woman, men, children, elderly, instead of being placed at both nursing home and senior center.
12. I had a great experience through Lehman's DI program and feel very prepared to enter the nutrition field. I would have liked to have seen more functional medicine/integrative nutrition and not strictly clinical nutrition. Also felt WIC and Food Services rotations were too long- would have preferred 30-40 hours of WIC and 200 hours of food service which more hours for clinical community out-patient clinic-based rotations.
13. Professor Tree's seminar was the most useful class every semester and the class that I benefitted the most of the other classes felt like a repeat of undergraduate courses I took at NYU. I learned valuable information in Prof. Tree's seminars as she is an extremely intelligent woman with many life experiences and I feel the knowledge that I have gained from her lectures will help me the most in the real world.
14. Thoroughly enjoyed my experience at Lehman College and the rotations in which I attended. I look forward to my career in Dietetics.
15. I would recommend visiting some of the sites that got bad reviews from students to see if you would like to continue sending people/interns there. My only bad experience was WIC, but I wouldn't send any future interns there if possible.
16. Loved the DDS coming in to talk to us about types of jobs. Would recommend spreading out domains for consistent practice. Making sure that sites know we are FT students so that there is no extra homework.
17. Comm classes came in handy (unable to read last word in sentence).
18. DFN 731 –varied each semester was good in its own way, but I mostly liked given speakers and appreciate RD exam prep (unable to read two words) regular seminar (FAIS).
19. Didn't get much experience in oncology and peds.
20. FSM was disjointed – faculty needed staff us interns.
21. Absolutely no time to work P/T.
22. I love DFN Lehman Faculty! Very encouraging and supportive.
23. Preceptors varied greatly- some very willing to take interns under their wing, some acted like we were a burden.

24. Each class was a waste of time and money. Concepts and methods was a class we spent money on to sit and talk; did not learn anything.
25. I think I know the same information as before I even started the program. Going through each rotation was for the sake of going through the motions. I will study and pass the RD exam, which I could have done on my own without completing the DI.
26. DFN661, HEA 620, and DFN 651- extremely helpful, I would have preferred counseling as a hybrid. DFN 641- was confusing- I was sure that I understood assignments. After submission, I found out that I did not.
27. I would have preferred not to take classes in addition to rotation, DFN 730 and DFN 731.
28. I felt supported and encouraged but requests for breaks between rotations were not granted. I was sick for most of the year.
29. DFN 731 (Fall and Spring semesters) can be vastly improved by actually preparing us for our future careers as RDs and preparing for the RD exam rather than cramming it all in one summer semester.
30. Would have been less stressful if rotation placement could be known with more prior notice.
31. I loved the 2nd semester of DFN 731 where guest speakers come in. I wished the sites were closer to where I lived and I wished the internship offered a wider variety of rotations of sports nutrition, pediatrics, corporate wellness etc.
32. HEA 620 class was a missed opportunity to learn valuable counseling skills. Assignments were mostly irrelevant to topic and lacked real world applicability. Professor made learning unpleasant and created an environment in which different viewpoints and approaches were not valued or appreciated. Also, this class would be more appropriate as a hybrid class.
33. Having a break down throughout the process helps keep students focused. HEA 620 course did not provide additional, necessary information in a format that was useful for this program.
34. HEA 620- an online counseling class is not ideal. It was filled with essays that always needed to be min of 8 pages. It did not prepare me in any way in prepping for employment.
35. DFN 661- food service was another online course very stressful. I don't think it was useful.
36. I think sites should be chosen more careful and consideration should be put into whether or not that site can meet the competencies that it needs to. When issues do arise, it should not be solely up to the intern to fix them. Preceptors need to know what is expected of them. Health counseling 620 was completely useless; online does not work for that class. Also Demmer did not teach that class in a way to create better health counselors.
37. Health 620- would be best as a hybrid. Food service should not be offered in the summer.
38. I thought MNT was helpful as a class, but did not think community or health counseling were helpful, unsure how a counseling class was taught online. I felt both of these classes were just busy work and not beneficial to me. I liked all of my preceptors. Most of the things we did in DFN

731 could have been done online aside from guest speakers, which were helpful. It was frustrating when things were unorganized and communicated to us at the last minute. Gradually going over domains throughout the year would have been more helpful than doing it all over the summer.

39. One of the most difficult aspects of the LCDI Program was related to the inability to work while completing rotations etc. This year was extremely challenging and difficult, both on a personal level and professional level. However, now that the program is completed, I am left with a real sense of accomplishment and pride in myself.
40. This program was not P/T Min 30 hours per week + class + homework did not allow for any part-time work. * Clinical nutrition (651) should not be taught online. I feel I learned more the first week in my clinical rotation than in the whole semester. *It would be great (more organized) if the rotations were set up in the beginning (avoid long gaps).
41. The DI actually prepared us well to be a competent entry-level dietitian. I learned a lot for this year. However, this is not a part-time program. Working minimum 30 hours wkly and taking 4 pre-requisite classes at the same time is like a full-time program.
42. The research rotation could be given in the beginning of the program in order to allow us more time to collect the data and properly analyze it. Also, more help could be provided in finding research placements. I believe students would benefit from having a day off from their rotations on critical times such as before exams & presentations. The WIC rotation can be done over 30 hours! 60 hours was too long and repetitive. Thanks.
43. I believe I am very prepared for a career in dietetics thanks to the Director of the DI, Sue Tree.
44. Do you feel that the DI was part-time? An orientation before the DI program started would have been helpful, but Tree has done this for the new interns. I believe the DI was very well rounded and appropriately helped us meet the competencies required. Would have liked to see a class focusing on interviewing and tips to follow when applying for a job. An entry level resume would have been more appropriate for the resume class.
45. Suggestion – have seminar every other week.
46. The biggest attraction towards the LCDI was the advertisement as a part-time internship. However, due to the fact that we are required to complete 30 hours in one week, I was forced to work in weekends and during the week which took my focus away from my studies and the DI itself. This should not be a part-time internship.
47. I felt that DFN 641, while the professor was a great person, but I didn't feel like I learned much but got a lot of good public speaking experience. Clinical nutrition (651) was not very helpful in preparing for clinical rotations. I think it would be better in person. The handouts used for the class were very disorganized and I felt the assignments were graded unfairly as well as not well communicated as far as what we were supposed to do. This is not really a part-time internship at all and would not had time to work on the side. Dr. Demmer's class (HEA 620) was awesome. Food Service Management (DFN 661) was poorly taught + the professor was very inaccessible + the class was very hard to do online as it required a lot of group work.

48. Very intense and demanding which paid off and was also anticipated. The work load was intense, but I was capable of completing assignments. The DI program should not be considered part-time due to the classes that are involved along with going to the internship sites. This made it a full-time dietetic internship in my opinion. I do not think anything really needs to change. The workload we received only benefitted me; there is so much to learn in this field so there is never really too much work. Very supportive classmates which made this experience enjoyable.

Lehman College
Program in Dietetics, Foods, and Nutrition
Dietetic Internship Program

Dietetic Intern Self-Assessment Survey SUMMARY 2010-2015

Please complete the following survey, where 1 = Strongly Agree and 5 = Strongly Disagree.

Upon completing the DI at Lehman College, I feel that I am able to:

		Strongly Agree 1	2	3	4	Strongly Disagree 5	N/A
CRD 1.1	Select appropriate indicators and measure achievement of clinical, programmatic, quality, productivity, economic or other outcomes	38	5	1	9	7	0
CRD 1.2	Apply evidence-based guidelines, systematic reviews and scientific literature in the nutrition care process and model and other areas of dietetics practice	45	4	1	8	0	0
DI 1.3	Justify programs, products, services and care using appropriate evidence or data	42	6	3	8	7	0
CRD 1.4	Evaluate emerging research for application in dietetics practice	42	4	2	18	6	0
CRD 1.5	Conduct research projects using appropriate research methods, ethical procedures and statistical analysis	31	5	5	13	5	0
CRD 2.1	Practice in compliance with current federal regulations and state statutes and rules, as applicable and in accordance with accreditation standards and the ADA Scope of Dietetics Practice Framework, Standards of Professional Performance and Code of Ethics for the Profession of Dietetics	45	5	3	10	8	0
CRD 2.2	Demonstrate professional writing skills in preparing professional communications (e.g. research manuscripts, project proposals, education materials, policies and procedures)	43	5	2	10	7	0
CRD 2.3	Design, implement and evaluate presentations considering life experiences, cultural diversity and educational background of the target audience	48	5	1	8	9	0
CRD 2.4	Use effective education and counseling skills to facilitate behavior change	41	6	0	14	7	1
CRD 2.5	Demonstrate active participation, teamwork and contributions in group settings	17	3	1	10	9	0
CRD 2.6	Assign appropriate patient care activities to DTRs and/or support personnel considering the needs of the patient/client or situation the ability of support personal, jurisdictional law, practice guidelines and policies within the	32	6	6	15	7	2

	facility						
CRD 2.7	Refer clients and patients to other professionals and services when needs are beyond individual scope of practice	41	3	5	12	6	1
CRD 2.8	Apply leadership principles to achieve desired outcomes	42	4	2	16	6	1
DI 2.8	Demonstrative initiative by proactively developing solution to problems	33	5	0	8	7	0
DI 2.9	Apply leadership principles to effectively to achieve desired outcomes	39	4	2	10	6	0
CRD 2.9	Serve in professional and community organizations	45	3	2	8	8	0
CRD 2.10	Establish collaborative relationships with internal and external stakeholders, including patients, clients, care givers, physicians, nurses and other health professionals, administrative and support personnel to facilitate individual and organizational goals	40	4	2	15	7	0
CRD 2.11	Demonstrate professional attributes such as advocacy, customer focus, risk taking, critical thinking, flexibility, time management, work prioritization and work ethic within various organizational cultures	37	7	1	16	8	0
CRD 2.12	Perform self-assessment, develop goals and objectives and prepare a draft portfolio for professional development as defined by the Commission on Dietetics Registration	39	3	8	17	6	3
CRD 2.13	Demonstrate assertiveness and negotiation skills while respecting life experiences, cultural diversity and educational background	40	1	5	19	6	0

CRD 3.1	Perform the Nutrition Care Process (a through e below) and use standardized nutrition language for individuals, groups and populations of differing ages and health status, in a variety of settings						
CRD 3.1a	Assess the nutritional status of individuals, groups and populations in a variety of settings where nutrition care is or can be delivered	46	3	2	10	8	0
CRD 3.1b	Diagnose nutrition problems and create problem, etiology, signs and symptoms (PES) statements	45	3	2	10	7	0
CRD 3.1c	Plan and implement nutrition interventions to include prioritizing the nutrition diagnosis, formulating a nutrition prescription, establishing goals and selecting and managing intervention	42	7	1	16	8	0
CRD 3.1d	Monitor and evaluate problems, etiologies, signs, symptoms and the impact of interventions on the nutrition diagnosis	36	4	2	4	0	0
CRD 3.1e	Complete documentation that follows professional guideline, guidelines required by health care systems and guidelines required by the practice setting	9	5	1	2	0	0
DI 3.2	Develop and demonstrate effective communications skills using oral, print, visual, electronic and mass media methods for	41	3	1	17	6	0

	maximizing client education, employee training and marketing						
DI 3.3	Demonstrate and promote responsible use of resources including employees, money, time, water, energy, food and disposable goods	29	6	6	23	7	0
CRD 3.3	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 and health messages and interventions	35	5	9	17	7	0
CRD 3.4	Deliver respectful, science-based answers to consumer questions concerning emerging trends	36	6	1	13	6	0
CRD 3.5	Coordinate procurement, production, distribution and service of goods and services	22	6	5	26	7	0
CRD 3.6	Develop and evaluate recipes, formulas and menus for acceptability and affordability that accommodate the cultural diversity and health needs of various populations, groups and individuals	18	1	4	20	7	0

CRD 4.1	Use organizational processes and tools to manage human resources (participate in the management of human resources)	18	4	23	25	2	0
CRD 4.2	Perform management functions related to safety, security and sanitation that affect employees, customers, patients, facilities and food	36	5	8	12	9	0
DI 4.3	Apply systems theory and a process approach to make decisions and maximize outcomes	21	7	6	17	5	1
CRD 4.3	Participate in public policy activities, including both legislative and regulatory initiatives	16	10	9	24	5	1
CRD 4.4	Conduct clinical and customer service quality management activities	27	4	2	20	7	0
CRD 4.5	Use current informatics technology to develop, store, retrieve and disseminate information and data	23	5	5	26	7	0
CRD 4.6	Prepare and analyze quality, financial or productivity data and develops a plan for intervention	21	5	8	25	6	2
CRD 4.7	Propose and use procedures as appropriate to the practice setting to reduce waste and protect the environment	31	6	2	16	9	0
CRD 4.8	Conduct feasibility studies for products, programs or services with consideration of costs and benefit	15	4	17	16	7	3
CRD 4.9	Obtain and analyze financial data to assets budget controls and maximize fiscal outcomes	14	5	16	30	4	1
CRD 4.10	Develop a business plan for a product, program or service including development of a budget, staffing needs, equipment and supplies	20	6	10	24	2	1
CRD 4.11	Participate in coding and billing of dietetics/nutrition services to obtain reimbursement for services from public or	18	6	8	20	7	3

Dietetic Intern Self-Assessment Survey FEEDBACK 2010-2015

1. I feel that this dietetic internship introduced me to many areas of practical diabetics, which will assist me greatly as a future dietitian. It also taught me to organize and manage my time effectively.
2. I found the DI to be an excellent experience in supervised practice across various realms of dietetics I do wish that I could have had some time in a hospital instead of only completing clinical hours in LTC. Overall, great program DFN 731 was both challenging and interesting.
3. It would have been great to get the experience of a real hospital since there's a way of knowing if I'll be able to case with it. I will only find out now when I'm thrown into that setting. I also think that for such a large and demanding program, an assistant director would be extremely helpful.
4. Lehman DI provided me with a great experience all the various practice sites allowed me to develop a multicultural understanding of dietetics exposing me to various, cultural, populations and socioeconomic groups.
5. Overall the internship was a very good experience and I learned a lot at each rotation.
6. This internship is great by providing varies rotation experiences within the field of nutrition. The seminal study guide are good complement with internship however if more time can be spend on discussing them, it would be better because we often did not have enough time to we go over them. In general the sites were great if we can get some experience even just a hospital would be great to have.
7. The varied experiences, firm regulations and deadlines, and need to be self-sufficient increased my confidence in my ability to perform the activities and competencies listed above
8. This was the most difficult experience that I have ever encountered in my academic career. I learned a great deal and have had a wonderful experience at my rotation sites. In retrospect, I would I have performed better if I had taken the masters classes before entering the DI.
9. I lernr a lot during this year! I wish I had more experience in acute care setting (I believe MNT can being equally divided between long-term & acute rotation, e.g. 250 hrs. in each setting). Other than that great program very dedicated preceptors & efficient settings
10. My selections are based on my confidence level in performing described tasks. Entering the field as an entry-level dietitian I cannot say I have mastered all tasks, but I feel throughout my career I am confident I can perform them all well.
11. I have gained practical skills, but feel that I have the same knowledge from when I completed my undergrad. I wish I were more confident in my knowledge and skills entering this field.
12. It helps that I have some business background; because it begin with because I was able to draw on my personal experience with same time
13. Using or creating e-portfolios during the internship would be a worthwhile activity and would cut down on costs for students. More lesson/lectures on public policy and how to participate in advocacy efforts would be beneficial
14. I thoroughly enjoyed most of my experiences and found them helpful. I did not feel that I acquired much in the area of budgeting-overall.
15. I learnt a lot during this year! I wish I had more experience in acute care setting (I believe MNT car be equally divided long-term and acute rotation, e.g. 250 hrs. in each setting Other than that great program, very dedicated preceptors and efficient settings.
16. WIC hours should be decreased – it should be no more than 30 hours. A physical form outlining possible need for certain vaccination provided prior to the start of the program may help prevent

delays between rotations. Example – test for titles take up to 7 days to get the results.

17. Very time consuming and a bit overwhelming, but a great experience, learn a lot when in the field. I feel able to work in this field at an entry level status working my way up through experiences
18. Health counseling was a great class I felt that community nutrition, food service management and clinical nutrition were not very helpful as far as assignment given, course materials. Dr. Tree's class was great- learned a lot and I was able to resent case study which was a lot of fun to and while I felt the research project was something that I wish less time could have been spent or hours would have been better put towards further clinical experience I loved my rotation sites, learned the most during clinical and always feel that hands on experience is the best learning tool Than you for the wonderful rotation sites and experience.
19. After my rotation completion of DI, I was offered a job as a clinical dietitian in a nursing/rehab home. I feel very confident in my knowledge I obtained from this DI to assess and give care to the residents/patients.
20. This is a fast-paced, tough program, but I consider it the best experience of my life. I will miss Dr. Tree's seminar.
21. I have gained vast amount of knowledge through this internship. I became more confident and professional in Nutrition field.
22. Although this past year was rather difficult at times, I feel very accomplished and proud that I completed the internship at Lehman College
23. This internship was advertised as part time, but it did not adequately allow me to work enough to pay for much of the cost attributed to the rotations transportation, school books. Additionally, this was much more community then clinical.
24. This Dietetic Internship provided a lot of training on the Dietetic field and well-prepared on to be an entry level Dietitian.
25. I wish I could have gained a true MNT experience working at ICU and acute care – as my MNT was only long-term.
26. Overall I feel I have had a truly educational experience believe I am ready to work in the nutrition field wish I had a clinical experience that also emphasized TPN, PPN rehab analysis and even pediatrics if I could do it again I would have like to clinical experience in a hospital
27. Overall, all preceptor are very supportive as for MNT rotation, I did not get any experience in the hospital setting it would be better if I could have experience with vent dependent trauma or ICU patients
28. I believe this dietetic internship has prepared me to be a very well rounded registered dietitian
29. I feel very prepared to enter the nutrition field through my courses and field work combined – would have like to learn more about holistically integrative nutrition and not strictly clinical. Also feel WIC was too long- more hours should be devoted to outpatient clinic settings ambulatory care – got a great experience in there settings.
30. I thoroughly enjoyed most of my experiences and found them helpful. I did not feel that I acquired much in the area of budgetary overall.
31. Using or creating E-portfolios during the internship would be a worthwhile activity and would cut down on cost for students. More lesion/lectures on public policy and how to participation in advocacy efforts would be beneficial.



Lehman College, CUNY

TO: ILSE DEVEER, Health Sciences. (as private and confidential)

Student Evaluation of Teaching and Learning (SETL) Results for Fall 2015

Dear ILSE DEVEER,

In the attachment you will find the evaluation results for your class

DFN_651_H81_1159 - #81844 - Medical Nutrition Therapy.

If you have any further questions do not hesitate to contact me (stefan.becker@lehman.cuny.edu).

Stefan Becker
Professor and Vice Provost for Academic Programs
718-960-1120

Note: This email was created automatically.

ILSE DEVEER (ILSE.DEVEER)



DFN_651_H81_1159 - #81844 - Medical Nutrition Therapy (DFN_651_H81_1159)

No. of responses = 10

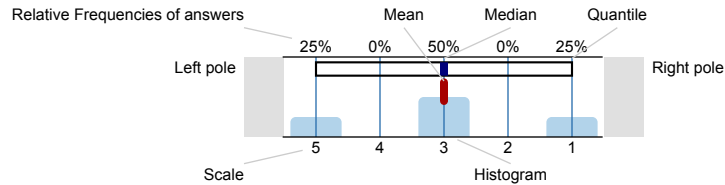
No. of enrolled = 22

% returned = 45.45

Survey Results

Legend

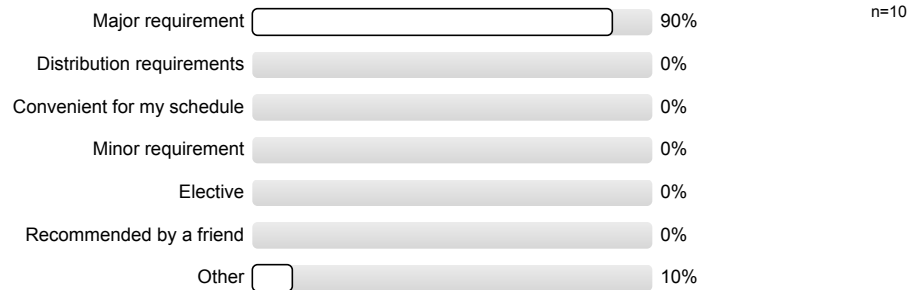
Question text



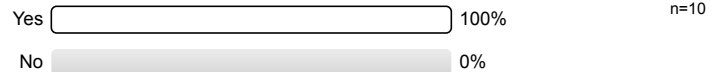
n=No. of responses
 av.=Mean
 md=Median
 ab.=Abstention

1. GENERAL INFORMATION

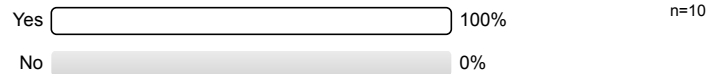
1.1) Why did you choose this course? (Check all that apply)



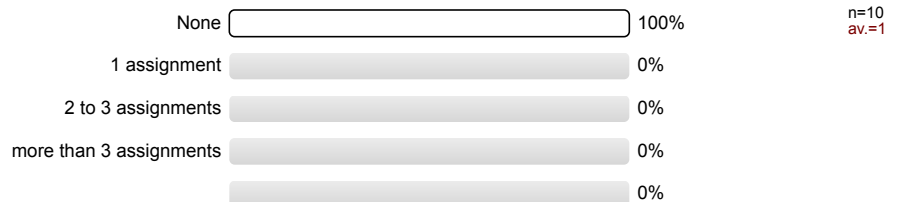
1.2) A syllabus was provided and clear.



1.3) The syllabus was followed.



1.4) Approximately how many class assignments did you not complete?

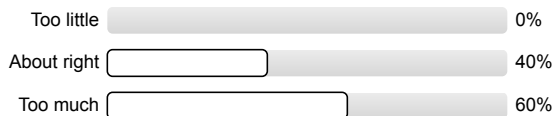


1.5) On average how many hours per week did you actually spend completing work outside of this class?



n=10
av.=3.7

1.6) I consider the amount of outside work required for this course to be:



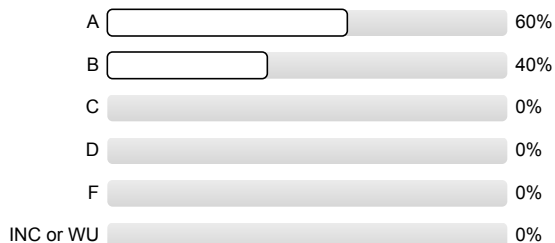
n=10
av.=2.6

1.7) My background knowledge and skills were adequate or appropriate for the requirements of this course.



n=10
av.=1.1

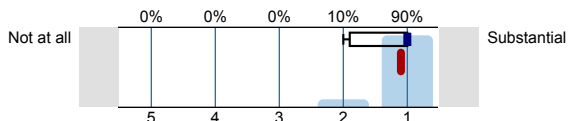
1.8) The grade I expect to receive in this course is:



n=10
av.=1.4

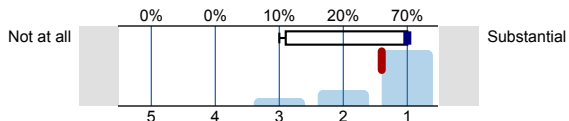
2. INSTRUCTIONAL DESIGN SKILLS

2.1) The assignments and/or exams contributed to my learning.



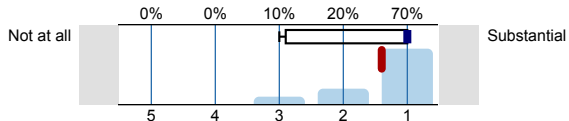
n=10
av.=1.1
md=1

2.2) The textbook or readings enhanced my learning.



n=10
av.=1.4
md=1

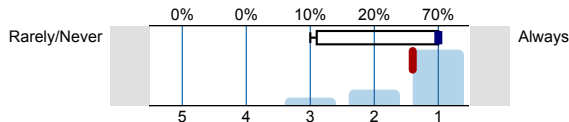
2.3) The course objectives, requirements, and grading policy were clear.



n=10
av.=1.4
md=1

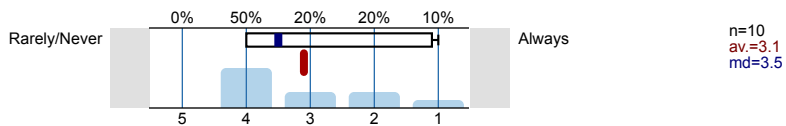
3. COURSE MANAGEMENT SKILLS

3.1) The class assignments and due dates have been scheduled regularly throughout the semester.

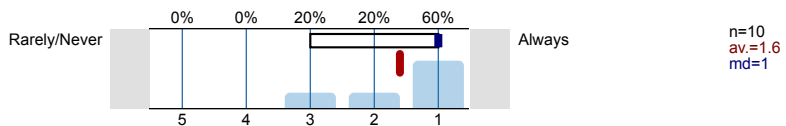


n=10
av.=1.4
md=1

3.2) Assignments and/or exams were returned promptly.

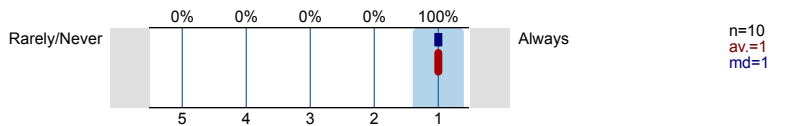


3.3) The instructor was available during posted hours, by appointment or via email.

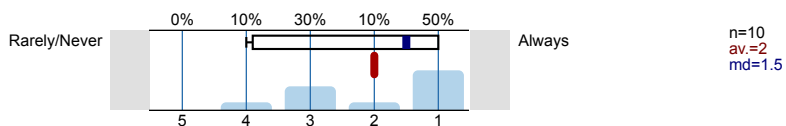


4. PEDAGOGICAL (DELIVERY) SKILLS

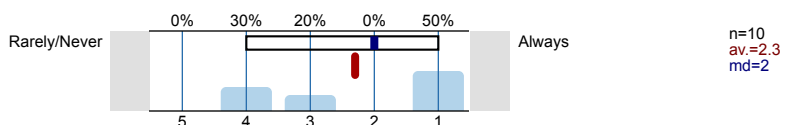
4.1) The instructor was well-prepared and organized.



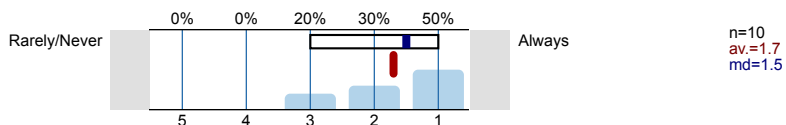
4.2) The instructor encouraged questions and/or discussions



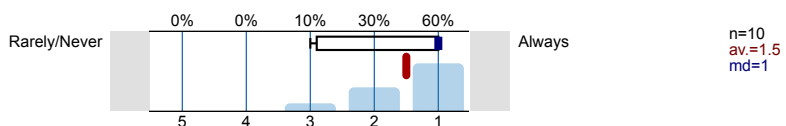
4.3) The instructor responded to student inquiries and concerns effectively.



4.4) The instructor stimulated my interest in the subject.

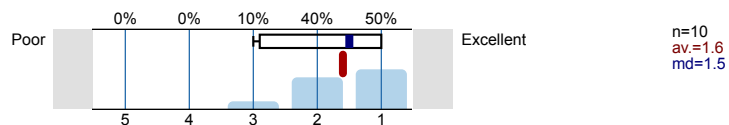


4.5) The instructor explained concepts clearly.

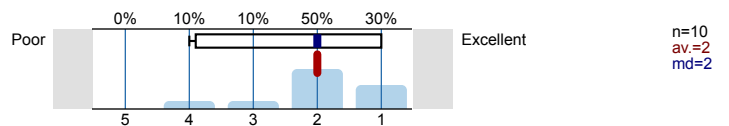


5. SUMMARY

5.1) What is your overall rating of this instructor's teaching?

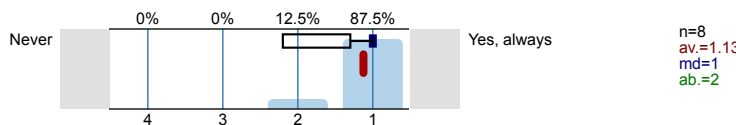


5.2) What is the overall rating of this course?

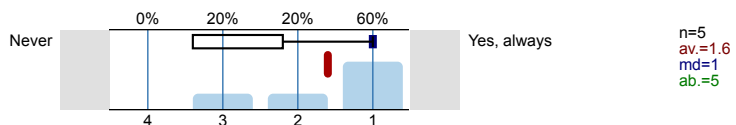


7. ONLINE COURSE EXPERIENCE

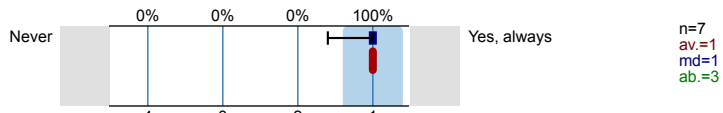
7.1) Do you have the necessary technological equipment and skills required for this course



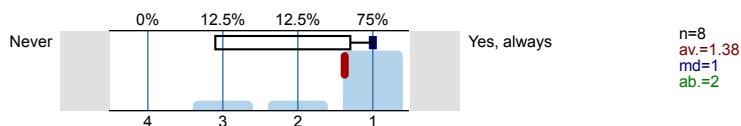
7.2) Was there adequate technical support if you encountered difficulties?



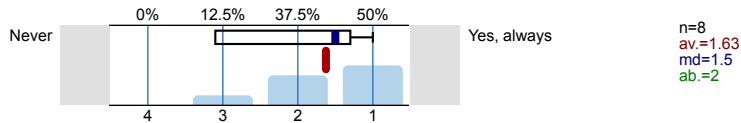
7.3) Was the format and page design of the online course easy to use?



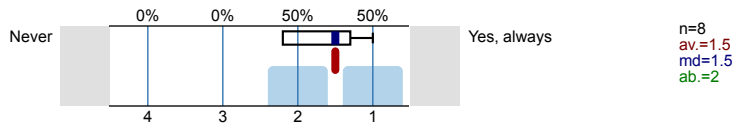
7.4) Were there sufficient instructions given for you to complete all assignments?



7.5) Did you participate in online or email conversations with your instructor during the course?

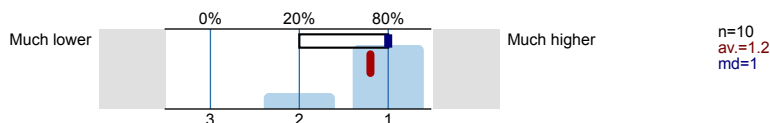


7.6) Did you participate in online or email conversations with your classmates during the course?

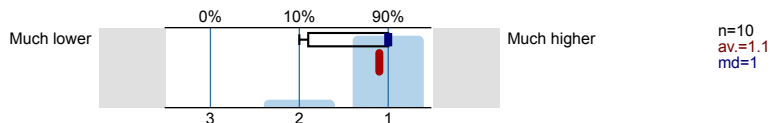


9. THIS COURSE AS COMPARED TO OTHER COLLEGE COURSES YOU HAVE TAKEN

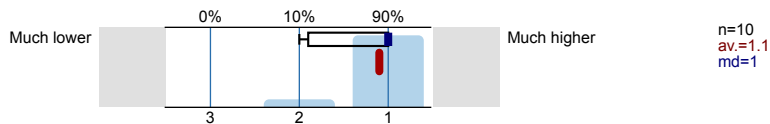
9.1) The intellectual challenge presented was:



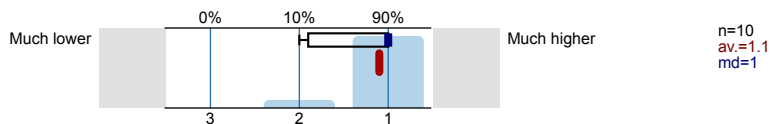
9.2) The amount of effort you put into this course was:



9.3) The amount of effort to succeed in this course was:



9.4) Your involvement in this course (doing assignments, etc.) was:



Comments Report

6. OPEN QUESTIONS

6.1) Comment on what **this instructor** has done especially well.

- Prof. de Veer works in the "real world" and always incorporated her experiences into her lectures, which helped me better visualize and understand certain situations. She also had a great way of explaining critical thinking skills (even simple things like "picture what this case study patient looks like") that will stick with me forever. Also, THANK YOU for utilizing Blackboard so well. Many professors have us hunt for posted materials or forget to set a notification that lets us know when something has been posted on BB. (Even though I try to check BB every day, sometimes I can't get to it regularly.) I also loved the FAQ section. Lastly, excellent explanation of all assignment instructions. I never once had to ask for clarification in what was being asked of me.
- Professor De Veer is highly knowledgeable in the field, and makes class engaging. I looked forward to coming to her class every single week. It is clear that she wants to see her students learn a lot, succeed, and grow as professionals. The warm and inviting classroom environment encouraged us to ask questions, and Professor De Veer eagerly answered them. This was a great class! I hope to have Professor De Veer as an instructor in future courses.
- The additional readings and case studies improved my knowledge of the subject substantially.
- The professor is very knowledgeable and can explain concepts well.
- Very organized, intelligent, willing to pass on information, and has contagious enthusiasm for the topics. The work was challenging, but felt supported and could tell that the professor wanted us to learn from her.

6.2) Comment on the areas in which **this instructor** could improve his/her teaching.

- Maybe cover less topics but more in depth.
- Some of the case studies took me forever to complete, but didn't really help in my learning per se because I was spending a lot of time just looking up definitions instead of getting into the nitty gritty of the patient's condition. My suggestion, since so much of this was already covered in undergrad, would be for Prof. de Veer to take out a lot of the questions about simple definitions (leave in the ones about explaining the differences between x and y conditions, etc.) and the lists of food-med interactions and just let the bulk of the case study be the critical thinking components, ADIME, etc. Also, since many of the students are now working out in the field as interns or otherwise, maybe the professor could also ask everyone to come prepared to share an onsite MNT-related experience relevant to that week's topic so that we could take turns applying information in class...kind of like an interactive case study.
- The instructor could be a little more concise when answering a question pertaining to a particular homework.

6.3) Comment on what you believe were the best features of **this course**.

- Although a lot of work, the case studies were the best features of the course. They required a lot of outside research, but really made me learn how to apply the knowledge I have acquired.
- Professor is knowledgeable
- The lecture format

6.4) Identify specific ways **this course** could be improved.

- It would be helpful to have a midterm so that there is more of a half way point in the course material. It would make studying for the final easier.
- My biggest issue with this class is that there were too many assignments. Students must come prepared to spend an average of 24-72 hours actual work time for each project in addition to class time and readings. Students who work or have other classes may have a hard time keeping up with the assignments for this class. The professor also takes off points for cosmetic features such as line spacing on the assignments. All work submitted to her must be perfectly formatted to her instructions or she takes off points.. She does not accept paper copies, everything must be submitted on blackboard including long calculations. So I have had to spend upwards of an hour retyping calculations in Word so that I can submit on blackboard. The outside time requirement for this class is unreasonable.
- Research presentation is a lot of effort for few points. The timing of the assignments should be retooled. Having a case study and the cumulative final due at the same time is unfair. Assignments need to be returned on time. If they aren't back on time our questions regarding the timing should be answered in a respectful manner and not answered in a manner that implies that we are pestering her. We deserve to be spoken to respectfully the same way she does.
- The professor should consider the timing of the assignments. The research presentation is a lot of effort for such few points. The case study and a cumulative final given a few days apart is not fair. The assignments should be returned on time. There should be some review for the final or practice questions throughout the semester.

8. ONLINE LEARNING

8.1) Did you feel hindered in your online course experience in any way? If so, please describe:

- No

8.2) What learning activities most influenced your learning in this course? Please describe:

- Case studies
- Lastly, the related article readings really helped in understanding the topics as the textbook was more like a reference guide.

Appendix U

Standard 16: Sample Orientation outline – ongoing training agenda

Orientation Outline

1. Preceptors are selected by the DI Director who interviews in person or by telephone the primary preceptor of the facility that expresses interest in developing an affiliation agreement with Lehman's DI.
2. During these interviews, the potential preceptors are questioned as to their dietetics education and degrees, the number of years since receiving the RD credential, their level of expertise, and the experience they are able to provide the interns. A CV is also requested.
3. Based on the interview and the CV, the preceptor is evaluated as to whether he/she is able and likely to provide the depth and breadth of learning activities required in the curriculum and whether he/she can provide the interns the exposure to the diversity of practice needed.
4. Once selected, the new preceptor is also sent the appropriate syllabus (competencies with objectives, suggested activities, and evaluation criteria) for the rotation that he/she is expected to supervise. These documents are discussed via email, telephone, or in-person to make sure the preceptor understands the responsibilities to be assumed. T
5. There is regular follow between DI Director and Preceptors. Site visits occur every 18 months – 24 months.
6. he DI Handbook is in Appendix Z.

Appendix V

Standard 17: Summary of professional achievements of facility and preceptors

Medical Nutrition Therapy

Name	Site	Credential
Renata Shiloah	Betances Health Center, 280 Henry St, New York, NY 10002	Active member of AND and member of LIDA, GNYDA, Bariatric Nutrition Dietitians and attends their meeting to maintain registration.
Niharika Jaiswal	Cabrini Eldercare, 115 Broadway, Dobbs Ferry, NY 10522	
Arlene White-Tucker	Coler-Goldwater Specialty Hospital and Nursing Facility, 900 Main Street, Roosevelt Island, NY 10044	AND and ADA member. ServSafe certified, Attends meeting to maintain credentials.
Vihbuti Singh	Triboro Center for Rehabilitation and Nursing (formerly Daughters of Jacob Nursing Home), 1160 Teller Avenue, Bronx, NY 10456	AND member and attends meetings to maintain registration status.
Shifra Aronoff	Hebrew Home at Riverdale, 5901 Palisade Avenue, Riverdale, NY 10471	AND member and attends meetings to maintain registration status.
Arlene White-Tucker	Henry J. Carter Hospital and Nursing Facility, 1752 Park Avenue, New York, NY 10035	AND and ADA member. ServSafe certified, Attends meeting to maintain credentials.
Anna Comiotes	Hudson Valley Hospital Center, 1980 Crompond Road, Cortland Manor, NY 10567	AND member and attends meetings to maintain registration status.
Diane Bustamante	Jacobi Medical Center, 1400 Pelham Pkwy S, Bronx, NY 10461	Active member of ADA, GNYDA, LIDA. ServSafe Certified, Participated in Sodexo's IMPACT National Meeting Mentoring Program (2011), Graduated Sodexo's Emerging Leadership Development program (2014)
Anuradha (Anu) Jara	Jacobi Medical Center, 1400 Pelham Pkwy S, Bronx, NY 10461	Active ADA member since 2008
Ying-Sheng (Grace) Chen	Lincoln Hospital, 234 E 149th St, New York, NY 10451	AND member and attends meetings to maintain registration status.
Nani Lepicard	Mary Manning Walsh Home, 1339 York Avenue, New York, NY 10021	AND member and attends meetings to maintain registration status.
Laura Sanford	Montefiore Medical Center, New Rochelle/Mount Vernon (formerly Sound Shore), 16 Guion Pl, New Rochelle, NY 10802	Member of AND, GNYDA, WRDA, ASPEN and attends meetings to maintain CDR credentials. Renewed CNSC in 2016.
Andrew Reda	Montefiore Medical Center, 111 E 210th St, New York, NY 10467	AND member and attends meetings to maintain registration status.
Marianne Colucci	Northern Riverview, 87-89 S Rte 9W, Haverstraw, NY 10927	AND member and attends meetings to maintain registration status.
Cecilia Moy	North Central Bronx Hospital, 3424 Kossuth Ave, Bronx, NY 10467	Active ADA member and member of GNYDA
Caroline Caminski	Rebekah Rehabilitation and Extended Care Center, 1070 Havemeyer Ave, Bronx, NY 10462	AND member and attends meetings to maintain registration status.
Mary O'Connell	Rebekah Rehabilitation and Extended Care Center, 1070 Havemeyer Ave, Bronx, NY 10462	AND member and attends meetings to maintain registration status.
Therese Franzese	The Rogosin Institute, 66-22 Queens Blvd., Woodside, NY 11377	Chair CRN of Long Island 2015-2016, Member of ADA; DPG's Pediatric Nutrition, Dietitian's in Nutrition Support
Agnieszka Sowa	Woodhull Hospital, 760 Broadway, Brooklyn, NY 11206	Active AND member and member of NYSDA and ASPEN. ServSafe certification.

Private Practice - MNT

Name	Site	Credential
Roberta Gershner	42 Stonegate Rd #1, Ossining, NY 10562	Active AND member for many years and awarded the "Distinguished Dietitian" award in 2006. AND DPG Sprots and Cardiovascular and Wellness Nutrition, Weight Management, Nutrition Entrepreneurs, Medical Nutrition, Diabetes Care and Education, Nurition in Complimentary Care. Member and former president of WRDA. Mmeber of ADE, and NYSDA. Multiple publicatons in past five years.
Zipporah Oksman	Essen Medical Associates:2015 Grand Concourse, Bronx NY; 1550 University Street, Bronx; 2445 Arthur Avenue, Bronx New York	AND member and attends meetings to maintian registration status.
Mary Opfer	378, RT 202, Somers, NY 10589	AND member and attends meetings to maintian registration status. Refer to Standard 17 narrative.
Tracy Stopler	Nutrition, E.T.C., 19 Garynson Court, Plainview, NY, 11803	AND member and attends meetings to maintian registration status.

Food Service Management

Name	Site	Credential
Noreen Ferguson	Beth Abraham Medical Center, 612 Allerton Avenue, Bronx, NY 10467	AND member and attends meetings to maintian registration status.
Akiva Palmer	Boulevard APL, 71-61 159th Street, Fresh Meadows, NY, 11365	
Arlene White-Tucker	Coler-Goldwater Specialty Hospital and Nursing Facility, 900 Main Street, Roosevelt Island, NY 10044	AND member and attends meetings to maintian registration status.
Kathy Feld Berkowitz	Cortlandt Health Care, 110 Oregon Road, Cortlandt manor, NY 10567. Preceptor:	AND member and attends meetings to maintian registration status.
Sonia Grant	Heritage Health and Housing, 416 W 127th St, New York, NY 10027	AND member and attends meetings to maintian registration status.
Charlie Fox	Wartburg Senior Care, One Wartburg Plaza, Mount Vernon, NY 10552	
Anthony Pacchioni	Waveny LifeCare Network, 3 Farm Road · New Canaan, CT 06840,	AND member and attends meetings to maintian registration status.

Community Public Health

Name	Site	Credential
Renata Shiloah	Betances Health Center, 280 Henry St, New York, NY 10002, (212) 227-8401. Preceptor:	Active member of AND and member of LIDA, GNYDA, Bariatric Nutrition Dietitians and attends their meeting to maintain registration.
Ellen Pospishil	Head Start, Westchester, Westchester Community Opportunity Program (WestCOP), Inc. 2 Westchester Plaza, Suite 137, Elmsford, NY 10523	Active AND member since 1997. WRDA Clinical update, 2016, FNCE 2015
Marianne Colucci	Northern Riverview, 87-89 S Rte 9W, Haverstraw, NY 10927	AND member and attends meetings to maintian registration status.
Marianne Colucci	Meals on Wheels, 121 W Nyack Rd, Nanuet, NY 10954	AND member and attends meetings to maintian registration status.
Lisa Nicotra	Mosholu Montefiore Community Center, 3450 Dekalb Avenue, Bronx, NY 10467	LCSW

HIV/AIDS

Name	Site	Credential
Renata Shiloah	Betances Health Center, 280 Henry St, New York, NY 10002	Active member of AND and member of LIDA, GNYDA, Bariatric Nutrition Dietitians and attends their meeting to maintain registration.
Vihbuti Singh	Triboro Health and Rehabilitation Center (formerly Daughters of Jacob Nursing Home), 1160 Teller Avenue, Bronx, NY 10456	AND member and attends meetings to maintain registration status.
Ronnie Fortuna	God's Love We Deliver (GLWD), 166 Avenue of the Americas, New York, 10013	AND member and attends meetings to maintain registration status.
Pauline Cheung	God's Love We Deliver (GLWD), 166 Avenue of the Americas, New York, 10013	AND member. DPG Oncology Nutrition Community Group, Medical Nutrition Practice Groups, Dietetics in Integrative and Functional Medicine Group. ServSafe Certified. Publication in 2013: God's Love We Deliver, <i>Nutrition Tips for Caregivers</i> .
Lisa Zullig	God's Love We Deliver (GLWD), 166 Avenue of the Americas, New York, 10013	AND member since 2000, Presenter for National Association of Nutrition and Aging Services program in 2012. ServSafe certified.
Sonia Grant	Heritage Health and Housing, 416 W 127th St, New York, NY 10027	Active member of ADA since 1992, DPG's HIV/AIDS, Diabetes Care and Education, member of NYSDA (planning committee) and GNYDA. Participates in speaking engagements.
Claire Esson-Samuels	Montefiore HIV, Montefiore Medical Center, 111 E 201th Street, Bronx, NY 10467	AND member since 2005. Attends meetings offered by GNYDA and NYSDA.
Laurie Orfe	Montefiore HIV - Mt. Vernon. 12 North Seventh Ave, Mount Vernon, NY 10550,	AND member and attends meetings to maintain registration status.

WIC

Name	Site	Credential
Lauren Sondey	Catholic Charities WIC. 38 St. John's Place, Freeport, NY 11520	AND member and attends meetings to maintain registration status.
Siew (Kim) Teo	Lincoln Hospital WIC, 234 East 149th Street, 4th floor, Bronx, NY 10451	
Iris Rosario	Montefiore- New Rochelle WIC	Maintains CDN status every 3 years. Attends conferences.
Carmen Winchester-Reed	Montefiore-Bronx Westchester Square WIC. Westchester Ave. Bronx, NY 10468	AND member and attends meetings to maintain registration status.
Paulette Sinclair-Weir	Neighborhood WIC. Various sites throughout NYC	AND member and attends meetings to maintain registration status.
Laura Duer Leach	Rockland County DOH. Contact: 50 Sanatorium Rd. Bldg. J, Pomona, NY 10970	Active AND member. Most recent completion of portfolio in 2014. Attends yearly WIC conferences.

Public School

Name	Site	Credential
John Morash	Bedford Road School, 289 Bedford Road, Pleasantville, NY 10570.	Assist. Principal
Lydia Tsiforas	PS 2 QAlfred Zimberg School, 75-10 21st Avenue, East Elmhurst, NY 11370	Assist. Principal
Nina Colangelo	PS 55 Bx Benjamin Franklin School, 450 St. Paul's Place, Bronx, NY 10458	Nutr. Educator
Allison Maltz	PS 134 Muscota New School, , 4862 Broadway, New York, NY 10034	Asst. Principal

Research

Name	Site	Credential
Marilyn Aguirre-Molina	CUNY Institute For Public Health, Lehman College, CUNY, 250 Bedofrd Park Blvd West., Bronx, NY 10468	Lehman Faculty; resume available upon request.
Katherine Gardner Burt	Department of Health Sciences, Lehman College, CUNY, 250 Bedofrd Park Blvd West., Bronx, NY 10468	Lehman Faculty; refer to Standard 17 narrative
Andrea Boyar	Department of Health Sciences, Lehman College, CUNY, 250 Bedofrd Park Blvd West., Bronx, NY 10468	Member ADA, DPG's Research, Dietitians in Funciotnal Medicine, Dietetic Educators. Attended FNCE 2016
Mary Opfer	Department of Health Sciences, Lehman College, CUNY, 250 Bedofrd Park Blvd West., Bronx, NY 10468	Lehman Faculty; refer to Standard 17 narrative
Danna Ethan	Department of Health Sciences, Lehman College, CUNY, 250 Bedofrd Park Blvd West., Bronx, NY 10468	Lehman Faculty; refer to Standard 17 narrative
Natalie Rizzo	Nutrition a la Natalie, Astoria, NY 11103	ADA member since 2015, blogger and writer for Food and Nutrition magazine
Chul-Young Rho	Department of Health Sciences, Lehman College, CUNY, 250 Bedofrd Park Blvd West., Bronx, NY 10468	Lehman Faculty; refer to Standard 17 narrative
Lalitha Samuel	Department of Health Sciences, Lehman College, CUNY, 250 Bedofrd Park Blvd West., Bronx, NY 10468	Lehman Faculty; refer to Standard 17 narrative

Appendix W

Standard 19: Sample of Affiliation Agreements

NEW YORK CITY HEALTH AND HOSPITALS CORPORATION

Student Clinical Training Agreement (CUNY-Only)

MODIFICATIONS TO THIS FORM ARE NOT BINDING ON THE FACILITY WITHOUT THE WRITTEN APPROVAL OF THE OFFICE OF LEGAL AFFAIRS OF THE NEW YORK CITY HEALTH AND HOSPITALS CORPORATION.

AGREEMENT made this 1st day of August 20 12 by and between
LINCOLN HOSPITAL MEDICAL CENTER . (the "facility") located at
234 East 149th Street, Bronx, NY 10451 and the City University of
New York, a body corporate, existing pursuant to Article 125 of the Education Law of the State of New
York, located at 535 E. 80th Street, New York, NY 10021, acting on behalf of
LEHMAN COLLEGE, (the "College"), located at
250 Bedford Park Blvd. West, Bronx, NY 10468

All notices sent with respect to this agreement should be sent to the above principle addresses.

WHEREAS, the College wishes to have students enrolled in its Dietetic Internship program (the Program) to obtain necessary clinical observation and experience at the Facility; and

WHEREAS, the Facility agrees to provide such students with clinical observation and experience in
DIETETIC INTERNSHIP PROGRAM

NOW, THEREFORE, it is agreed:

1. This agreement, when executed by the Executive Director or Administrator of the Facility (the Executive Director or the Administrator), as applicable, and a duly authorized representative of the College, shall be deemed effective as of the date first above written and shall continue for two (2) years from that date. This Agreement shall be automatically renewable for two (2) additional two-year terms, unless either party shall give the other party written notice of intent not to renew this Agreement, thirty (30) days before the end of any term. Either party may terminate this Agreement at any time with or without cause upon six (6) months written notice. In addition, the Facility may terminate the Agreement upon thirty (30) days' written notice if it determines that the continued satisfactory operation of the Facility requires such termination. The Facility shall make its best efforts to ensure that any such termination shall not take effect with respect to students already enrolled in the Program until such students shall have completed their clinical experience.

2. The Facility shall make its premises available, upon the following terms and conditions, in order to implement the Program. The parties recognize that the objective of the Facility is the delivery of high quality, dignified and comprehensive care for its patients. Therefore, the College will do whatever is necessary to prevent itself, its students and faculty from in any way interfering with the provision of patient care at the Facility.

3. The number of students to be assigned to the Program, their schedule and dates of admission shall be mutually arranged at least six (6) months in advance of their admission to the Facility. The Facility may set a maximum limit on the number of students who may be involved at any one time in the Program. The specific days and hours of the students' activities at the Facility shall be mutually agreed upon by the parties. The head instructor of the Program at the College shall plan the assignments and schedules in cooperation with the clinical coordinator for the Program at the Facility.

4. The College shall assign students to the Program in accordance with the following protocol:

- a. Students will be under the general supervision of the facility Director for the Health Sciences Department.
- b. Students will have patient contact under the direct supervision of a College instructor with a current, valid, New York State license to practice the following specialty [complete only if students will have hands-on contact with patients] CDN New York State Certificate/RD National American Dietetic Association.
- c. Students will be assigned duties required for completion of the clinical field work experience course descriptions and objectives provided in Exhibit C of the Addendum Packet, submitted by the college to the facility, and signed by both parties.
- d. Students will be assigned to those areas mutually agreed to by the Facility and the College at the commencement of the Addendum.
- e. The hospital shall supply instructors for the Supervision and instruction of students assigned to the Facility.

5. The College is responsible for the administration of the Program, including the curriculum content, the requirements of matriculation, grading, graduation and faculty appointments. The College recognizes that patient care remains the prerogative of the Facility and that the head of the department to which students are assigned is responsible for care given by students and faculty. The final assignment of patients to be seen by Students in the Program (if applicable) will be made by that department head, in conjunction with the College's instructor.

6. Students selected for the Program shall have completed didactic preparation at the College commensurate with the anticipated clinical assignments.

7. The College represents and warrants that, at all times during the term of this Agreement, the Executive Director or Administrator, as applicable, shall be advised of and made a party to any negotiation and/or decision regarding any commission, payment, percentage, brokerage, contingency, or other fees or compensation paid in connection with this Agreement, including the provision of any gift or anything of value to be made, given or promised directly to (a) any employee of the Facility; (b) the medical services affiliate of the Facility or its officers, agents, or employees; or (c) any other person or organization, which payment benefits the Facility or its employees, or the affiliate, its officers, agents, or employees. The college makes such representation and warranty to induce the Facility to enter this Agreement and the Facility relies upon such representation and warranty in execution hereof. The Executive Director or Administrator, as applicable, in his or her sole discretion, shall determine the disposition of any and all payments made under this Agreement. In any event, such payments shall be used for the sole benefit of the Facility. If any such payments are made, the terms and conditions of such payments shall be made a part of this Agreement, and shall be agreed to in writing by the General Counsel, Legal Affairs, for the New York City Health and Hospitals Corporation (HHC).

8. The Facility shall not assume responsibility for the payment of any compensation to students or faculty, or for medical, meal, travel, laundry, uniforms or other incidental expenses incurred by students or faculty while at the Facility. If any such expenses are incurred by the Facility at the request of the students or faculty, the College shall reimburse the Facility for its costs. The Facility will provide medical care to students and faculty that may be necessary, to be billed at the Facility's standard rates.

9. The Students and faculty of the College who are assigned to the Facility under this Agreement shall comply with all the rules, regulations, and procedures and policies of the Facility and HHC, and all

applicable rules, regulations and laws of the City and State of New York and the Federal Government.

10. The students and faculty of the College who are assigned to the Facility under this Agreement shall in no event become nor be considered employees or agents of the Facility or HHC.

11. The College shall advise all students participating in the Program of the confidentiality requirements surrounding patient related information in accordance with relevant laws, regulations and policies. The College agrees to insure that all information and records relating to patients are and shall remain the property of the Facility and shall be kept confidential in accordance with applicable provisions of Federal, State and local Law, and the policies and procedures of the Facility.

12. The College shall advise all students participating in the Program of the relevant laws, regulations and policies regarding infection control, including Federal OSHA Bloodborne Pathogen and Tuberculosis Regulations.

13. This Agreement shall not impose any additional obligations, under the Workers' Compensation Law of the State of New York, upon any party to this Agreement, which obligations are not already imposed by such law, insofar as a member of the faculty and/or a student may sustain injury or disability by reason of accident or occupational disease arising out of, or in the course of, instruction hereunder.

14. Each student and faculty member assigned to the Facility shall have a complete physical assessment prior to assignment to the clinical field. In addition, in accordance with the New York State Health Code, as it may be amended from time to time, the College shall require the following of all faculty and students engaging in activities under this Agreement: (a) immunizations for rubella, consistent with good medical practice, except that women of child-bearing age shall have a screening test approved by the Facility, to be followed by immunization as appropriate; (b) hepatitis B vaccine if titer is low or negative or letter of declination; and (c) PPD (Mantoux) skin test for tuberculosis, prior to placement at the Facility, and no less than every year hereafter for negative findings. Positive findings shall require appropriate clinical follow-up by the College and notification to the Facility of such follow-up, but no repeat skin test. The College will certify in writing that this requirement has been met, prior to the assignment of any student or faculty member to the Facility, and that each student and faculty member has presented documented evidence of a medical assessment within the past year, demonstrating good health.

15. The College agrees to immediately remove a student or faculty member from assignment at the Facility upon the request of the Facility to do so after the Facility has determined that such removal would be in its best interest. When feasible, the Facility will attempt to discuss a particular situation with the appropriate representative of the College before making its request for removal. The Facility, however, shall have the right at any time, take whatever action it deems necessary, including the barring of a student or faculty member from its premises, to ensure the safety and welfare of its patients, and maintain its operation free from disruption.

16. The Institution agrees that neither it nor any of its directors, officers, members, partners, employees or agents shall directly or indirectly give any gift in any form including but not limited to money, service, loan, travel, entertainment, hospitality, thing or promise to members of the New York City Health and Hospitals Corporation's Board of Directors, Officers, employees, Community Advisory Boards, Hospital Auxiliaries and professional and academic affiliate personnel. In the event that the Institution, its employees or agents do give a gift to any said person such act will constitute a material breach of the contract and the Corporation shall have a right to terminate the agreement upon 10 days notice to the vendor/contractor.

17. The parties will comply in every respect with all the provisions of all government regulations, including the Mayor's Executive Order No. 50, dated April 25, 1980 as amended, which prohibits unlawful discrimination against any employee, applicant for employment, student or applicant for admission because of race, color, religion, sex, age, marital status, citizenship status, handicap, national origin, sexual orientation or affectional preference. The parties also will remove any barriers of discrimination concerning disabled veterans of the Vietnam Era. In the event of non-compliance, this agreement may be canceled, terminated or suspended in whole or in part.

18. This Agreement may be modified or amended only in writing, signed by the Executive Director or Administrator, as applicable, an authorized representative of the College, and HHC's General Counsel for Legal Affairs, and the General Counsel and Vice Chancellor for Legal Affairs for the City University of New York. No modification or amendment to this HHC Form shall be enforceable against the Facility until it is signed by HHC's General Counsel for Legal Affairs.

19. Any notice or other communication required to be given pursuant to this Agreement shall be in writing and sent by messenger, or by certified or registered mail, return receipt requested, to the address specified above.


20. Notwithstanding any other provision in this Agreement, the Facility remains responsible for (a) ensuring that any services provided pursuant to this Agreement complies with all pertinent provisions of federal, state and local statutes, rules and regulations; (b) planning, coordinating and ensuring the quality of all services provided; and (c) ensuring adherence to the plan of care established for patients.

IN WITNESS WHEREOF, the parties have duly executed three (3) copies of this Agreement as of the day and year first above written.

(No Further Text On This Page)

STATE OF NEW YORK)
)
) ss.:
COUNTY OF BRONX)

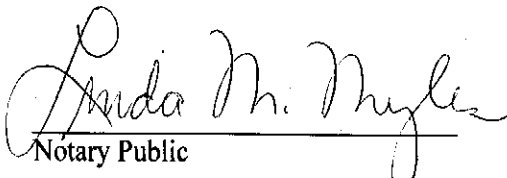
On this 26th day of NOVEMBER, 20 , before me personally came FRIS Jimenez-Hernandez, to me known to me to be the Executive Director or Administrator of the Facility described in the attached Agreement, and who executed the attached Agreement on behalf of the Facility for the purposes therein mentioned.


Notary Public

LISA C. SCHWARTZ
Notary Public, State of New York
No. 01SC4690685
Qualified in New York County
My Commission Expires 7-31-2013

State of New York)
)
) ss.:
County of New York)

On this 23 day of October, 2012, before me personally came Frederick P. Schatter, to me known to me to be the General Counsel of the College described in the attached Agreement, and who executed the attached Agreement on behalf of the College for the purposes therein mentioned.


Notary Public

LINDA M. MYLES
Notary Public, State of New York
No. 31-4838760
Qualified in New York County
Commission Expires.....4-30-15

**ADDENDUM
Student Clinical Training
(CUNY Only)**

This agreement is made as of this 1st day of August, 2012, between the
LINCOLN HOSPITAL MEDICAL CENTER ("Facility"), of the New York City
Health and Hospitals Corporation ("HHC"), having its principle place of business at
234 East 149th Street, Bronx, NY 10451 (facility's full address), and
LEHMAN COLLEGE ("College") with its principle place
of business at 250 Bedford Park Blvd. West, Bronx, NY 10468 (College's full address).

Whereas, HHC entered into this Agreement with said college dated August 1, 2012
, under which the said facility is incorporated hereto and made a part of the Agreement; and

Whereas, pursuant to the Agreement the college wishes to place such students at agreed facility; and

Whereas, the Addendum when signed by the parties on Exhibit D shall give authorization for such
placement;

NOW, THEREFORE the parties agree to the terms of Exhibits B and C.

This addendum becomes effective when signed for the term beginning August 1, 2012
through July 31, 2014.

Attach Exhibits B, C, and D to this document and distribute as follows:

Distribution: Facility (2 originals)
College (1 original)

EXHIBIT B
Student Clinical Training Agreement
(CUNY-Only)

CERTIFICATION OF STUDENT HEALTH STATUS FOR MEDICAL CLEARANCE

College: Lehman College
Date/Semester Fall 2012

Facility: Lincoln Medical and Mental Health Center

The students listed below have met all State Health Department requirements for hospital staff, in accordance with Item #10 and #14 of the Agreement.

Each student has presented documented evidence of the following:

- Physical examination within the past year or physical assessment thereafter, demonstrating good health;
- Adult diphtheria-tetanus immunization within the last ten (10) years;
- Negative tuberculin (PPD/Mantoux) skin test within the year, or negative chest X-ray; and
- Positive rubella test or rubella immunization after 1969.
- Each individual shall have hepatitis .B vaccine if titer is low or negative or letter of declination.

Signature


Authorized Representative (College)

Title

Chair, HS

Names of Students

- | | |
|---------------------|-----|
| 1. Lauren Jannarone | 16. |
| 2. | 17. |
| 3. | 18. |
| 4. | 19. |
| 5. | 20. |
| 6. | 21. |
| 7. | 22. |
| 8. | 23. |
| 9. | 24. |
| 10. | 25. |
| 11. | 26. |
| 12. | 27. |
| 13. | 28. |
| 14. | 29. |
| 15. | 30. |

EXHIBIT C
Student Clinical Training
(CUNY-Only)
CLINICAL FIELD WORK EXPERIENCE - COURSE DESCRIPTIONS
AND OBJECTIVES

DFN 730: Dietetic Internship Supervised Practice

I. Medical Nutrition Therapy Rotation: 470 hours

To be completed in a minimum of 15 weeks at a minimum of 30 hours weekly.

Objectives	Suggested Experiences	Evaluation
<p>I. <i>Orientation to the Institution, Introductory Experiences (30 hours)</i> <i>The intern will be able to:</i></p> <ol style="list-style-type: none"> Explain the philosophy of the Nutrition Services Department. He/she will understand how the responsibilities of the clinical dietitian fit into the goals and philosophy of the Nutrition Services Department. Explain the importance of the patient confidentiality, and institutional accreditation and maintenance of standards. 	<ol style="list-style-type: none"> The intern tours the hospital The intern is introduced to the director of nutrition services, and dietetics staff. Director or RD preceptor explains the philosophy, goals and objectives of the hospital and dietary department. The intern reviews the hospital's table of organization. The intern reviews the dietary department's table of organization and the job descriptions of therapeutic dietitians and dietitian technicians. The intern reviews the dietary department's procedure manual and the hospital's diet manual. 	<p>The RD preceptor will evaluate the intern's knowledge of the Nutrition Services Department and facility organization.</p> <p>The RD preceptor will evaluate the intern's understanding of departmental policies and procedures.</p> <p>The RD preceptor will evaluate the intern's understanding of the patient confidentiality, and institutional accreditation and maintenance of standards.</p>

<p>4. <i>Cardiovascular Disease (30 hours)</i> <i>The intern will be able to:</i></p> <ol style="list-style-type: none"> a. Explain how institutional care is integrated with other aspects of clinical care in cardiovascular disease within the health care institution. b. Describe current recommendations for the nutrition assessment and management of patients with cardiovascular disease. c. Assess the nutrition status of patients with cardiovascular disease to identify potential or actual nutrition problems. d. Plan nutrition care based on identified problems and needs, according to current recommendations. e. Calculate prescribed diets and prepare appropriate meal plans and menus. f. Review and modify available educational material to reflect patients': <ol style="list-style-type: none"> i. Nutrients requirements ii. Medical status iii. Food preferences, lifestyle, economics, cultural & religious background. iv. Knowledge, educational background and learning capacity. g. Counsel patients on therapeutic diets appropriate for cardiovascular disease. h. Communicate with members of the interdisciplinary team to facilitate integration of patient care. i. Coordinate nutrition care with the food service department. j. Monitor the patients' understanding and compliance with the prescribed diet. 	<ol style="list-style-type: none"> a. The intern tours the CCU; the head nurse explains the purpose of and protocol on the unit. b. The intern accompanies the RD on rounds and attends team meetings at which various disciplines discuss their care plans and their evaluation of individual patient's progress. c. The intern completes a review of class notes and literature on the nutrition assessment and management of patients with hypertension, hyperlipidemia, atherosclerosis, ischemic heart disease, and congestive heart failure. d. The intern interviews assigned patients and their family members, when possible, to obtain a diet history. e. The intern analyzes the 3 day recall of assigned patients using computer software programs to obtain data on the nutrient composition of their diets especially in terms total fat, saturated fat, cholesterol, fiber, and carbohydrate, total calories and sodium content. f. The intern performs a nutrition assessment on assigned cardiovascular patients using data obtained from the diet history, medical, history, anthropometric measurements and laboratory tests. g. The intern identifies a nutrition problem, formulates a nutrition diagnosis statement, and prepares interventions for the assigned patients. h. The intern develops diets that conform to National Cholesterol Education Program (NCEP) guidelines for the treatment of hyperlipidemia. i. The intern develops a DASH diet for a patient with hypertension and one to promote reduction of edema in a patient with congestive heart failure. j. The intern reviews the existing educational materials available on the unit, researches other sources for additional educational material, and then modifies and/or develops new material that 	<p>The RD preceptor will observe and provide feedback to the intern.</p> <p>The intern will prepare a summary of diet therapy and food/medication interactions including but not limited to hypertension, hyperlipidemia, ischemic heart disease, and congestive heart disease and submits to the RD preceptor for review.</p> <p>The intern will submit an outline of assigned patients' nutrition problems and needs and the data used to identify these problems and needs to the RD preceptor for review.</p> <p>The intern will submit nutrition care plans including nutrition diagnosis to the RD preceptor for review, feedback and evaluation.</p> <p>The RD preceptor will review therapeutic diets recommended for assigned patients, observe at least one interview and provide feedback.</p> <p>The intern will prepare a study guide on cardiovascular disease for review in the DFN 731 seminar and other assignments allocated for submission to the D.I. Coordinator.</p> <p>The RD preceptor will evaluate the intern's ability to plan and provide nutrition care to patients with cardiovascular disease.</p>
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<p>iii. physiological changes that have taken place in the structure and function of the GI tract that impairs the patient's ability to consume, absorb and utilize nutrients.</p> <p>iv. Food preferences, lifestyle, economics, cultural, religious background.</p> <p>v. Knowledge, educational background and learning capacity.</p> <p>g. Counsel GI patients on therapeutic diets.</p> <p>h. Communicate with members of the interdisciplinary team on a GI disorder.</p> <p>i. Coordinate nutrition care with the food service department.</p> <p>j. Monitor the patients' understanding and compliance with the prescribed diet.</p>	<p>least two different GI disorders.</p> <p>f. The intern calculates diets so that nutrient composition, and foods allowed conform to current scientific information and clinical practice.</p> <p>g. The intern reviews the existing educational material on the unit, researches other sources for additional educational material, and then modifies and/or develops new material that meets the specific needs of the individual.</p> <p>h. The intern counsels assigned patients on the diet prescribed at regular intervals during hospitalization and prior to discharge.</p> <p>i. The intern presents one patient as a case study to an interdisciplinary team meeting focusing on the nutrition care plan.</p> <p>j. The intern observes the supervising RD monitoring food service. The intern attends meal rounds during tray delivery to monitor portion control, tray quality and accuracy.</p> <p>k. The intern visits the patient on a periodic basis to discuss the patient's concerns related to the diet and to reinforce concepts and techniques taught during the counseling sessions. The intern encourages the patient's input in designing individualized therapeutic diets using the selective menu to comply with the prescribed diet and to also reflect the patient's food preferences. The intern documents his/her impressions regarding the patient's understanding and compliance with the diet in the clinical dietitian's notes.</p>	<p>including nutrition diagnosis to the RD preceptor for review, feedback and evaluation.</p> <p>The RD preceptor will review therapeutic diets recommended for assigned patients, observe at least one interview and provide feedback.</p> <p>The intern will prepare a study guide on gastrointestinal disease for review in the DFN 731 seminar and other assignments allocated for submission to the D.I. Coordinator.</p> <p>The RD preceptor will evaluate the intern's ability to plan and provide nutrition care to patients with gastrointestinal disease.</p>
<p>6. <i>Diabetes Mellitus and Other Endocrine Disorders</i> (60 hours) The intern will be able to:</p> <p>a. Explain how nutrition care is integrated with other aspects of the clinical care of the patient with diabetes mellitus and other endocrine</p>	<p>a. The intern accompanies the RD on rounds and attends team meetings at which various disciplines present their care plans and comment on the patient's problems and progress.</p> <p>b. Completes a review of the class notes and literature on the nutrition assessment of patients</p>	

m. Monitor the patient's understanding and compliance with the therapeutic diet.

- j. Intern provides nutrition counseling for a patient with an endocrine problem other than diabetes.
- k. The intern presents a case study of one assigned patient at an interdisciplinary meeting focusing on the nutrition care plan.
- l. The intern instructs and encourages diabetic patients to assume the responsibility for a meal plan coordinating a balanced diet, exercise and insulin and/or oral medications.
- m. The intern teaches the type 1 DM patient how to use blood glucose levels to manage food intake, insulin and exercise regimens.
- n. The intern teaches the type 2 DM patient how to lower blood glucose levels by weight management, using food intake and exercise regimens.
- o. The intern observes the supervising RD monitoring food service. The intern attends meal rounds during tray delivery to monitor portion control, tray quality and accuracy.
- p. The intern visits the patients on a periodic basis to discuss the patient's concerns related to their diet and to reinforce concepts and techniques taught in counseling sessions.
- q. The intern documents his/her impressions of the patient's understanding and compliance with the diet in the clinical dietitian's records.

	<p>hospitalization.</p> <p>j. The intern documents his/her impressions of the patient's understanding of the diet and ability to comply with the diet in the dietitian's notes.</p> <p>k. The intern presents a case study of one assigned patient at an interdisciplinary meeting focusing on the nutrition care plan.</p> <p>l. The intern interviews and counsels the assigned patient on a periodic basis to discuss the patient's concerns.</p> <p>m. The intern reviews the quality assurance manual for standards of care for renal patients.</p>	
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patient's family or a significant other. The intern maintains data on the patients' fluid and electrolyte balances to avoid dehydration.

- h. The intern presents a case study on an assigned patient at an interdisciplinary meeting. The case study focuses on the nutrition care plan.
- i. The intern prepares a 3-day calorie count based on clinical protocols. The intern requests the physician to change the diet order if indicated by the calorie count.
- j. The intern prepares educational material for the patient and family. The intern provides counseling at regular intervals during the hospitalization.
- k. The intern visits with the patient and family on a periodic basis to discuss concerns about diet and nutrition.

<p>10. Pediatrics (20 hours)</p> <p>The intern will be able to:</p> <ol style="list-style-type: none"> Explain how nutrition care is integrated with other aspects of the clinical care of the pediatric patient. Describe current recommendations for the nutrition assessment and management of Failure to Thrive, congenital, genetic-related and other pediatric disorders. Gather and assess information on the nutrition status of the pediatric patient. Plan the nutrition care of the pediatric patient. Calculate a diet prescription, prepare a meal plan and a sample menu for a pediatric patient. Prepare educational material to be used in counseling the child (where appropriate) and the child's support network. Educational material should be designed to reflect: <ol style="list-style-type: none"> The age and nutrient requirement of the child. The medical status of the child. The economic status and available food budget. Shopping and cooking facilities. Ethnic, cultural and personal food preferences of the child. Caregiver's education level and learning capacity. Counsel the child's caregiver on the appropriate food intake and food procurement and preparation and the child, where age permits. Communicate with members of the interdisciplinary team to facilitate the 	<ol style="list-style-type: none"> The intern tours the pediatric unit; the head nurse explains the protocol on the unit. The intern accompanies the RD on rounds and attends team meetings at which various disciplines discuss their care plans and their care plans and their evaluation of patient progress. The intern reviews class notes on the nutrition assessment and management of failure to thrive patients, pediatric AIDS, celiac disease and other disease and disorders represented on the pediatric unit at the time of the rotation. Through chart review, the RD identifies appropriate patients to follow. The intern interviews the families and observes and monitors the eating behavior. The intern analyzes the nutrient intake of the identified patients to determine adequacy for growth. The intern plots height for weight and weight for age on growth charts. The intern performs a nutrition assessment on the assigned patients using data on the history, medical history, psychological valuation of the child and the family, anthropometric measurements and laboratory findings to identify the reason for failure to thrive or other nutrition problems and needs. The intern prepares written nutrition care plans for the identified patients. The intern calculates the nutrition needs of each child and prepares meal plans, and sample menus. The intern reviews the existing material on the unit, reviews other sources, and develops new materials that meet the need of the child and his/her family if required. The intern counsels the mother care giver at regular intervals during hospitalization. 	<p>The RD preceptor will observe and provide feedback to the intern.</p> <p>The intern will prepare a summary of diet therapy and food/medication interactions including but not limited to failure to thrive, diabetes, inherited disease of metabolism, asthma, overweight and obesity and submits to the RD preceptor for review.</p> <p>The intern will submit an outline of assigned patients' nutrition problems and needs and the data used to identify these problems and needs to the RD preceptor for review.</p> <p>The intern will submit nutrition care plans including nutrition diagnosis to the RD preceptor for review, feedback and evaluation.</p> <p>The RD preceptor will review therapeutic diets recommended for assigned patients, observe at least one interview and provide feedback.</p> <p>The intern will prepare a study guide on pediatrics for review in the DFN 731 seminar and other assignments allocated for submission to the D.I. Coordinator.</p> <p>The RD preceptor will evaluate the intern's ability to plan and provide nutrition care to pediatric patients.</p>
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<p>requirements and constraints.</p> <p>f. Develop and calculate a prescription for a nutrition support formula that is appropriate for the needs and nutrition status of the patient.</p> <p>g. Select, monitor, and evaluate complex enteral and parenteral regimens, i.e. more complicated health conditions in select populations.</p> <p>h. Participates in nasogastric feeding tube placement and care.</p> <p>i. Participate in waived point-of-care testing, such as blood glucose monitoring.</p> <p>j. Participates in the care of patients requiring adaptive feeding devices.</p> <p>k. Counsel the patient (if appropriate) and patient's caregivers on the rationale for nutrition support.</p> <p>l. Monitor the patient's adherence to and tolerance of the prescribed nutrition regimen and determine whether the patient's response necessitates modification to the nutrition care plan.</p> <p>m. Communicate with members of the interdisciplinary team to facilitate the integration of patient care.</p> <p>n. Coordinate nutrition care with the food service department.</p> <p>o. Adjust the nutrition regimen where necessary in response to the changing needs of the patient.</p> <p>p. Plan a transitional feeding regimen to wean the patient from nutrition support to an oral diet.</p> <p>q. Teaches the patient's support network to assume responsibility for nutrition care post-discharge.</p>	<p>pertinent laboratory values, and a brief interview with the patient or family members (where possible).</p> <p>f. The intern formulates a nutrition diagnosis statement and intervention as follows:</p> <p>i. The intern defines the goals for nutrition support for assigned patients.</p> <p>ii. The intern determines whether maintenance or repletion of nutrition status is appropriate for the assigned patients. The intern determines specific objectives for nutrition support and calculates energy and protein intake for the assigned patients.</p> <p>iii. The intern prepares a written nutrition care plan specifying the regimen to be administered to the assigned patients.</p> <p>h. The intern visits the patients to determine the patients' adherence to and tolerance of the nutrition regimen. The intern discusses the nutrition regimen with the patient and/or family or a significant other. The intern assesses the patient's tolerance to the feeding regimen and maintains data on the patient's residuals and GI function.</p> <p>i. The intern presents a case study on a selected patient at a meeting of the nutrition support team. The intern discusses the patient's metabolic tolerance to the nutrition regimen during the case presentation. The intern also discusses the extent to which the goals of the care plan are being met.</p> <p>j. The intern modifies the nutrition regimen when necessary to avoid complications associated with nutrition support and to accomplish the goals indicated in the nutrition care plan.</p> <p>k. When indicated in the nutrition care plan, the intern should provide plans for the gradual reintroduction of food into the GI tract (the</p>	<p>needs, nutrition diagnosis and choice of formula to the RD preceptor for review, feedback and evaluation.</p> <p>The RD preceptor will review therapeutic diets calculated for assigned patients, and provide feedback.</p> <p>The intern will prepare study guides on enteral and parenteral nutrition for review in the DFN 731 seminar and other assignments allocated for submission to the D.I. Coordinator.</p> <p>The RD preceptor will evaluate the intern's ability to plan and provide nutrition care to patients who require critical care.</p>
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<p>12. <i>Quality Assurance (30 hours)</i> <i>The intern will be able to:</i></p> <ol style="list-style-type: none"> Demonstrate an understanding of the principles of quality assurance and continuous quality improvement of nutrition care as mandated by appropriate accreditation agencies. Select an appropriate indicator and measure quality outcomes. Complete a quality assurance activity on process and outcome standards of care. Undertake a dietitian chart review for timeliness of intervention according to institutional policies. 	<ol style="list-style-type: none"> The intern reviews the QA manual for process and outcome standards of care. The intern discusses with the RD preceptor Joint Commission standards and departmental QA techniques and procedures including QA reports that are generated. The intern accompanies the supervising RD as she collects and organizes QA data. Using food service department procedures, intern does a chart review of an appropriate number of charts, monitoring: <ol style="list-style-type: none"> Presence of screening Timelines of screening Accuracy of risk assessment Presence and timelines of assessment Completion of all dietitian forms and notes Intern monitors running time and delivery of tube feedings to assigned patients. Nutrients delivered are compared with nutrients prescribed. 	<p>The intern discusses Quality Assurance and Continuous Quality Improvement activities and desired outcomes with the RD preceptor.</p> <p>The intern submits an assigned QA/CQI activity (e.g. chart review) to RD preceptor for review and includes it in the rotation portfolio.</p>
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<p><i>14. Long Term Care (20 hours)</i></p> <p><i>The intern will be able to:</i></p> <ol style="list-style-type: none"> a. Assess the nutrition status of residents in long-term care to identify potential or actual nutrition problems. b. Plan nutrition care based on identified problems and needs. c. Prepare appropriate care plans. d. Complete required documentation e. Counsel residents on therapeutic diets f. Perform meal rounds g. Provide food preferences within as feasible h. Communicate with members of the interdisciplinary team to facilitate integration of patient care i. Coordinate nutrition care with the food service department. j. Monitor residents' satisfaction and compliance with the prescribed diet 	<ol style="list-style-type: none"> a. The intern interviews a resident within 48 hours after admission to obtain a diet history. b. The intern performs nutrition assessment on the patient using data obtained from the diet history, psychosocial information, anthropometric measurements, and laboratory tests to determine the patient's actual or potential nutrition problems and needs. d. The intern reviews with the RD the processes used in formulating objectives for the nutrition care plan. e. The intern reviews the procedure and format for documenting the nutrition care plan with the RD preceptor. f. The intern develops a written care plan giving objectives for each of the actual or potential problem uncovered during the nutrition screening/assessment. g. The intern will observe the completion of the required documentation. 	<p>The RD preceptor will evaluate and provide feedback on the intern's performance.</p> <p>The intern will submit nutrition care plans including assessments, calculation of energy and protein needs, nutrition diagnosis and diet order recommendation to the RD preceptor for review, feedback and evaluation.</p> <p>The intern will prepare a study guide on geriatric nutrition and long-term care for review in the DFN 731 seminar and other assignments allocated for submission to the D.I. Coordinator.</p> <p>The intern will submit recommended care planning documentation required by accreditation agencies to the RD preceptor for review, feedback and evaluation.</p>
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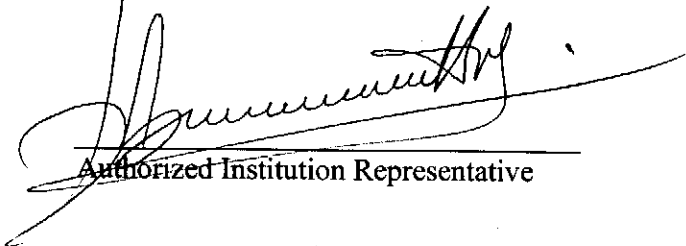
EXHIBIT D
Student Clinical Training
(CUNY Only)
HHC/INSTITUTION AFFILIATION NOTICE

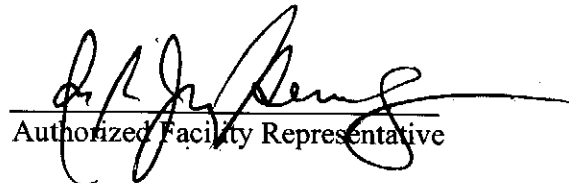
In accordance with the Agreement between the New York City Health and Hospitals Corporation ("Facility") and the College or School ("College"), students from LEHMAN COLLEGE College are assigned to LINCOLN HOSPITAL MEDICAL CENTER Facility, for the period August 1, 2012 to July 31, 2014.

The areas of assignment, numbers of students assigned and specific days and hours of student activities have been mutually determined, as outlined in Exhibit C, by the Director of Service at the Facility and a duly authorized representative of the College's program, and are consistent with the terms of this Agreement.

Institution

Facility


Authorized Institution Representative


Authorized Facility Representative

8/7/12
Date

11/26/12
Date

Appendix X

Standard 16: Plan of procedure for selecting and maintaining supervised practice facilities

Policy and Procedures

Interns:

At end of each rotation:

Intern completes evaluation form (Intern Evaluation of Preceptor). Preceptors and supervised practice sites are rated on a scale of 1 to 5.

1 = Poor

2 = Fair

3= Average

4 = Above Average

5 = Excellent

The intern's responses are reviewed by the DI Director soon after completion. These evaluations are used by the DI Director on an ongoing basis to determine if the preceptors and sites are providing the learning activities delineated in the syllabus, whether they are fulfilling their commitments to the interns and to the program and whether the intern felt welcome and valued. The evaluations, in consultation with the intern, are one method used to maintain quality control of the supervised practice experience.

Affiliation will be maintained for feedback where preceptor and supervised practice sites receive a score of Average (3), Above Average (4), and Excellent (5).

Ratings of Poor (1) and Fair (2) are reviewed. If it is an anomaly when compared to previous evaluations, the site is maintained. If there is a concern over a preceptor, the principle preceptor will be contacted to discuss the matter for clarity and understanding.

If a site is new or is one which continues to receive ratings of Poor (1) or Fair (2), principle preceptor will be contacted and future interns will not return to the supervised facility.

Interns are encouraged to share their placement experiences with the DI Director and the other interns in the DFN 731 seminar. Evaluation and training of the preceptors are also performed during annual or bi-annual visits performed by the DI Director. All of the feedback is taken into consideration.

Site visits:

Upon signing an affiliation agreement, communication between the DI Director and primary preceptor occurs on an ongoing basis with email, telephone calls, and site visits. During a site visit the DI Director will review preceptor responsibilities with the primary preceptor. Ongoing visits will be made every 12-24 months to clinical and food service facilities while the site is being used for the supervised practice by our DI Program.

Appendix Y

Standard 22: Copy of website pages and brochure

Lehman Dietetic Internship Program

Home page on the Lehman DI website includes welcome message and mission statement.

<http://www.lehman.edu/dietetic-internship-program/index.php>

Welcome

“There is an increasing awareness that the diets people consume contribute to the quality of their life. Studies have shown that people’s susceptibility to chronic disease is influenced by their diet. Dietary-influenced chronic disease is not only observed in affluent communities, but is increasingly seen in those that are economically compromised. Located in the Bronx, Lehman College is uniquely placed to assist in educating interns to become competent entry-level dietitians in order to develop approaches to support the community in moving toward dietary change to optimize health. The Dietetic Internship program would like to thank everyone who applied to the program this year. We are sorry we could only accept 14 interns.

Program Mission

The mission of the dietetic internship at Lehman College is to provide interns with a comprehensive learning experience through which they can acquire the competencies, knowledge, skills, and hands-on training required of entry-level nutrition care professionals, with an emphasis on medical nutrition therapy.

Lehman College interns are ethnical and culturally diverse and the program welcomes all applicants with the appropriate qualifications.”

Program Goals: <http://www.lehman.edu/dietetic-internship-program/program-goals.php> includes goals, meeting ACEND competencies and learning outcomes, objectives (outcome measures), and statement on program outcome availability data

“Upon completion of the Dietetic Internship, interns will be able to demonstrate the knowledge, skills, and competencies as established by the Accreditation Council for Education in Nutrition and Dietetics in its competencies and learning outcomes for Dietetic Internship programs, with particular emphasis on Medical Nutrition Therapy. To do this, interns must succeed in the following areas:

Program Goal One: Employment as an ethical and culturally sensitive entry-level Registered Dietitian.

- **Outcome Measures over a 5-year period:**
- Program Completion: 80% of the intern class will complete the DI within 18 months.
- Pass Rate of First-Time Test Takers of the Registration Examination: 80% of DI graduates will pass the Registration Examination on the first attempt.
- Graduate Employment: 70% or more of DI graduates who sought employment in dietetics were employed within six months of program completion.
- Employer Satisfaction:
 - 75% of employers will rate DI graduates as performing well.
 - 75% of employers will rate DI graduates as ethical and culturally sensitive.

Program Goal Two: Success in either a graduate program in nutrition and foods or in another health-related field.

- **Outcome Measure over a 5-year period:**
- Enrollment in a Graduate Program: 70% of enrolled interns will succeed in a graduate program in nutrition and foods or another health-related field.

In addition, the intern will be able to:

- Integrate knowledge and critical thinking skills with practical experience.
- Acquire New York State Certification after passing the Registered Dietitian Examination.

Lehman College DI Program outcome data available upon request. Please contact DI Director, Marina Stople, MS, RD, IBCLC “

Program Description:

“The Dietetic Internship Program at Lehman College is one of the few part-time internships in the country. The goal of the program is to provide access to a high-quality internship to those who need to undertake paid employment, proceeding through the internship over a three-semester period (12 months). The internship placements require a minimum of 1,200 hours of supervised practice to be completed over the course of three consecutive semesters for a minimum of 30 hours of supervised practice per week (Monday to Friday), for a total of 12 months. Interns are permitted to spend no more than 15 hours each week in paid employment.”

Interns are required to take twelve (12) graduate co-requisites and register for three (3) credits of the Seminar in Concepts and Methods of Dietetic Practice and three (3) credits of Supervised Pre-professional Practice for each of the three semesters of the Dietetic Internship. Interns undertaking paid employment may elect to take some of the co-requisite classes after the year of Supervised Practice, in which case graduation from the Program may take up to 24 months. DFN 651 must be taken in the fall semester of the Supervised Practice year.

The internship class enrolls a maximum of fourteen students each year. We accept applications every year in February for an end of August start date. We participate in [DICAS](#), the Centralized Application procedure and in the **spring** computer match program, administered by [D and D Digital Systems](#).

The Dietetic Internship Program has a Medical Nutrition Therapy emphasis, giving interns an opportunity to experience nutrition assessment, diagnosis, and interventions for increasingly complex medical conditions.

The 1,200 hours of supervised practice are divided as follows:

- Medical Nutrition Therapy Rotation: 470 hours
- Food Service Management Rotation: 300 hours
- Community Rotation: 280 hours
- Research Project: 150 hours

The three supervised practice components take place in a health-care facility or community agency. The community rotation is usually divided into three sections to enable interns to experience several different agencies. Research projects are supervised by departmental faculty.

It is expected that interns will complete the supervised practice component of the Dietetic Internship in three semesters (12 months), registering for DFN 730 and DFN 731 each semester that they are enrolled in the program.

Accreditation

The Dietetic Internship Program has been granted continued Accreditation by the Accreditation Council for Education in Nutrition and Dietetics (ACEND), a specialized accrediting body recognized by the Council on Postsecondary Accreditation and the United States Department of Education. ACEND may be reached at 312-899-0400, ext. 5400, or by writing to the following address:

Academy of Nutrition and Dietetics
120 South Riverside Plaza
Suite 2000
Chicago, Illinois, 60606

Acceptance Policy:

In order to be accepted into the Internship Program, students must be eligible to enter Lehman's M.S. in Nutrition program. To be considered for matriculation, students must have earned a minimum Grade Point Average of 3.0 either in the DPD courses or overall as undergraduates or graduates and possess a baccalaureate degree. To apply to the M.S. in Nutrition graduate program, see the [Prospective Intern](#) page.

A Dietetic Internship selection committee evaluates each applicant's potential as a dietetic practitioner. Acceptance into the program is not influenced by gender, age, sexual orientation, marital status, race, creed, national origin, color, disabilities or handicap. Students will be judged competitively based on their undergraduate and graduate (if applicable) GPA, work experience, and recommendations by faculty and employers. Students who believe other factors should be considered may include them in their Personal Statement with their DICAS application

Evaluation of Dietetic Internship Applications

Follow the application instructions very carefully. Leave sufficient time to assemble the application package, as academic transcripts and recommendation requests are going through DICAS. **DO** send a check or money order for the correct amount of the application fee separately to the DI Director.

How important is the GPA?

The GPA is important. Internship programs are evaluated by ACEND in part based on the percentage of Dietetic Internship graduates passing the Registered Dietitian exam on the first attempt. A strong academic background is a positive indicator that a candidate might be able to achieve this. Candidates with GPA's lower than 3.0 will not be considered as they are not eligible to be accepted into the Graduate Program.

What about GRE scores?

GRE scores are not required for application to the M.S. in Nutrition or the Dietetic Internship programs.

Do errors in my application matter?

Proof-read, proof-read, proof-read before you submit your final application package to DICAS! Typographical errors, mistakes, and omissions show that you are careless in your work. This is your opportunity to collect all the information you are presenting to us to help us assess your ability to be part of our Dietetic Internship. We want to know if you can perform well in Lehman's program.

How important is work/volunteer experience?

It is important for two reasons:

- It addresses the question of whether you can perform successfully in certain settings.
- It can support what you are saying in your personal statement.

Can I apply to the Internship without applying to the Graduate Program?

Yes, you can, but if you are accepted into the Dietetic Internship, it is mandatory that you apply to the M.S. in Nutrition program if you are not already enrolled in the program.

What about reference letters?

These should provide support for your application. Therefore, it is better to obtain such letters from people who know you well and can speak of your unique qualifications for the Dietetic Internship, than a more general letter from a professor who taught you once in a large class.

In Addition:

Other candidates who apply at the same time that you do affect your chances of being offered a place in the Dietetic Internship. Selected candidates are ranked before being submitted to D and D Digital for the computer match, just as candidates rank their internship preferences. A difference of even one position on the match list can make the difference between a match or no match. A strong applicant who failed to match one year would be encouraged to re-apply for the following year."

Academic Requirements:

<http://www.lehman.edu/dietetic-internship-program/academic-requirements.php>

"Students who wish to apply to the Dietetic Internship Program must have a GPA of at least 3.0 in their DPD courses or overall. If accepted into the Dietetic Internship Program at Lehman College, prospective interns are required to take four co-requisite graduate courses during the Dietetic Internship, unless they have previously taken equivalent graduate courses. Each intern is required to take at least two of these courses at Lehman College. DFN 651 must be taken at Lehman College. Interns must gain a B or better in each course. The courses are as follows:

- DFN 651: Clinical Nutrition. 45 hours, 3 credits. The assessment and management of nutritional problems encountered in patients in acute and chronic care settings are discussed using the nutrition care process. Includes an exploration of the scientific basis for current techniques and approaches in clinical nutrition based on medical nutrition therapy.
- DFN 641: Community and Public Health Nutrition. 45 hours, 3 credits. The relationship of diet to health promotion and disease prevention. The role of public, private, and voluntary organizations in providing nutrition care services

for ambulatory populations. Techniques for developing, funding, implementing, and evaluating projects in the community.

- DFN 661: Food Service Management. 45 hours, 3 credits. Management theory with application to the food service industry. Emphasis on the management of human and financial resources, the practice of optimal standards of safety, sanitation, and nutrition, and the role of the computer as a management tool.
- HEA 620: Health Counseling. 45 hours, 3 credits. An introduction to health counseling and behavior change is provided, with an overview of leading health problems of interest. Theoretical approaches to behavior change are examined. Basic counseling skills for helping people with behavior change will be acquired.
- DFN 730: Supervised Pre-Professional Practice. 45 hours, 3 credits per semester for a minimum of three semesters. A minimum of 400 hours per semester of supervised pre-professional practice at affiliated health care, management and community sites. COREQ: DFN 731.
- DFN 731: Concepts and Methods of Dietetic Practice. 45 hours, 3 credits per semester for a minimum of 3 semesters. This course comprises the theories, methods, and concepts of dietetic practice that will be required to master the competencies during the internship. Included are methods of community and individual assessment, theories, and practice of planning; theories and models of education and lesson plan development; outcomes analysis, evaluation methods and reimbursement practices in healthcare. COREQ: DFN 730.

Successful completion of didactic and supervised practice requirements of the Dietetic Internship enables interns to take the Registration Examination to become a Registered Dietitian (RD Test).

After passing the RD test, registered dietitians may apply to the New York State Education Department, Office of the Professions, to become a Certified Dietitian/Nutritionist in the State of New York.”

Prospective Interns: <http://www.lehman.edu/dietetic-internship-program/prospective-interns.php> includes academic program/calendar, links to DICAS and D and D Digital, program costs including link to financial aid, graduation completion requirements.

Information for Prospective Interns

“Use this schedule to guide you in applying to the Lehman College Dietetic Internship Program.

Fall Semester Prior to Applying: Start preparing your application package for the Dietetic Internship. Collect transcripts to be sent to DICAS for scanning.

Mid-February: Submit the completed Dietetic Internship application package to the DICAS portal. Complete the application for the Computer Match on line at [D and D Digital Systems](#). The exact date for submission is posted on the D and D Digital website. Students who wish to transfer graduate credits from another institution must contact [Dr. Lalitha Samuel](#) for permission to substitute courses.

Acceptance is competitive and based on consideration of undergraduate Grade Point Average, and recommendations.

Early-April: Match results for each applicant are posted on the [D and D Digital Systems'](#) Web site. This is the only notification source for applicants. Further instructions are available on the D and D Digital Systems site or from the Dietetic Internship Director, [Marina Stopler](#), MS, RD, IBCLC. Within 24 hours, students must notify the DI Director that they will be joining the Internship Program. Lack of notification will result in loss of placement.

Post-Match: New interns are contacted by the Dietetic Internship Director with information relating to applying to the Graduate Program. It is recommended that interns should apply to the graduate program as a [non-matriculated student](#). This will enable interns to take DFN 661 in the summer. If interns wish to enter and complete the MS Program in Nutrition, they can apply as a [matriculated student](#) in the fall semester.

June 1 onwards: Supply an active e-mail address to the Dietetic Internship Director, if different from that on the application. Register for fall classes and download the Intern Manual in the DFN 731 section on Blackboard, the CUNY Internet course management system, available through the [CUNY portal](#). Read carefully and prepare to bring to DI Orientation. Liability insurance must be purchased prior to the start of the internship rotations.

Last week of August: Begin fall didactic class(es), internship rotations (DFN 730) and fall semester seminar (DFN 731).

Mid-November: Register for spring classes, and DFN 730 and 731 for spring semester.

Last week of January: Begin spring internship rotations (DFN 730) and spring semester seminar (DFN 731) and didactic class(es).

Mid-April: Register for summer class, and DFN 730 and 731 for spring semester.

End of May: Begin summer internship rotations (DFN 730) and summer session seminar (DFN 731) and didactic class(es). Note, although interns register for DFN 730 each semester, internship placements will continue through college vacations.

End of August: Complete Dietetic Internship Program.

Program Costs

As of fall, 2015, graduate tuition fees are \$425 per credit for interns who are New York State residents and \$745 per credit for out-of-state residents. All graduate interns must pay an activity fee of \$54.60-\$74.60 and a technology fee of \$62.50-\$125 per semester. These fees are all subject to change by the Board of Trustees of the City University of New York.

In addition to tuition and administrative fees paid by all graduate interns, interns should be prepared to pay the following:

- Transportation to and from Practice Sites: \$300+ per semester
- White laboratory coat (s) for Practice Sites: \$45+
- Calculator: \$4+
- Academy of Nutrition & Dietetics Student membership (required): \$50
- Individual Intern Professional Liability Insurance (required): \$20+
- Books: \$200+
- Criminal background checks and fingerprinting: about \$70 (Many sites will cover the costs, some will not)
- Estimated Total for NYS residents: \$12,400 +

Go to [Financial Aid website](#) for information on availability of financial aid and loan deferments (federal or private) scholarships and/or other monetary support.

Completion of the Internship

In order for interns to be certified to the Commission on Dietetic Registration as having completed the Dietetic Internship Program at Lehman College and to be eligible to take the R.D. examination, they must meet the following criteria:

- Complete a minimum of 1,200 hours of rotations in 12 months with passing grades from all preceptors.
- Complete three semesters of DFN 731: Concepts and Methods of Dietetic Practice seminars with grades of B or better.
 - Complete and submit all portfolios.
 - Complete and submit all evaluation forms. Minimum grades of B must be achieved.
 - Pass the Exit Examination (at the end of the summer semester).
 - Appear for an exit meeting with the Dietetic Internship Director at Lehman College.
- Provide all relevant information and complete all forms required by the Commission on Dietetic Registration and the Lehman Dietetic Internship program.
- A Verification Statement signed by the Dietetic Internship Director will be issued to the intern and details of completion will be transmitted to the CDR."

Application Procedure: <http://www.lehman.edu/dietetic-internship-program/application-procedure.php>

Applying to the Dietetic Internship Program

"The program is using the on-line centralized internship application, DICAS. Please follow the instructions carefully.

Application to the Dietetic Internship Program:

- Access the [DICAS portal](#), e-mail DICASinfo@DICAS.org.
- Open an account through the [DICAS portal](#). Complete all parts of the Application, including work and volunteer experience. Please do not count any practical experience that was required for a class.
- The reasons why you want to become an RD and why you are choosing Lehman College DI should be included in the personal statement in the DICAS application.
- A Verification Statement from an ACEND-approved DP program in dietetics* or a Letter of Intent to provide one, if all requirements have not yet been fulfilled by the application deadline must be included.

- A minimum of three references (one should be from a faculty member who is knowledgeable about your academic ability and one from a professional colleague or supervisor). These will be uploaded to the DICAS site.
- You must submit one official copy of each transcript to the DICAS Online service, which will verify, scan, and attach them to the application. (Students who attended an undergraduate program abroad must present original transcripts evaluated by the World Education Service or equivalent).
- Please send separately a check for \$50 (non-refundable application fee), payable to Lehman College with a note including only your name, current school and the words "Dietetic Internship Application" to the Dietetic Internship Director at the address below to be postmarked no later than the application deadline in mid-February. Please do not send a resume or any other document supporting your application. All supporting documents MUST be sent through DICAS.
- You are required to participate in the Computer Match; go to [D and D Digital Systems](#) to register online. The fee for the computer match is \$50 and the deadline for the Spring Match is mid-February. We are listed as Herbert H. Lehman College.

Note: DICAS will be available after December 2016 for the spring 2017 Match. The on-line application must be completed on February 15, 2017. The fee to use DICAS is \$40 for the first application submitted and \$20 for each additional application.

*For those students without a DP Verification Statement, enrollment in Lehman's Undergraduate Program is necessary in order to fulfill ACEND's [DP requirements \(Lehman's Option 1\)](#). At Lehman, the following courses: DFN 341 (Life Cycle Nutrition), DFN 330 (Quantity Food Production) or ServSafe, DFN 348 (Nutrition and Disease I), DFN 430 (Food Services Management), DFN 437 (Nutrition Education & Counseling), DFN 445 (Advanced Nutrition), and DFN 448 (Nutrition and Disease II) are the minimum that must be taken. International students must take HSD 266 (US Health Care System).

All successful applicants who have not fulfilled the requirements for the DP Verification Statement by the deadline date but will be completing coursework in the spring semester will receive a provisional acceptance, depending on subsequent successful fulfillment of those requirements.

Students must be eligible to enter Lehman's M.S. in Nutrition Program as a matriculated student to apply to the Dietetic Internship Program. Eligibility is a minimum undergraduate GPA of 3.0 either in the DP courses or overall. Application to the Graduate Program may be made after acceptance into the Dietetic Internship Program.

For assistance with the Application Procedure, consult your DP Director and [the Academy's website](#), where you can download the resources and watch the videos.

Department of Health Sciences
Lehman College
250 Bedford Park Boulevard West
Bronx, NY 10468"

In addition:

Every page has support links to DI Centralized Application System and D and D Digital Systems. The website provides a link to program faculty and contact information for the DI Director.

Program Cost

As of fall 2016 semester, graduate tuition at Lehman is \$425 per credit for NYS residents and \$745 per credit for out-of-state residents.

(Graduate F/T rate-12 Credits: \$4585-8520)

An activity fee of \$54-74 is required per semester for graduate students and technology fee of \$62-125 per semester. These fees are subject to change. Other fees may apply. In addition to tuition and college fees paid by all Lehman students, DI students should be prepared to pay the following:

Graduate Program Application Fee:	\$125
Transportation to and from practices sites (estimated)	\$300+/semester
White laboratory coat	\$ 45+
Calculator	\$ 4+
Academy student membership	\$ 58
Books (estimated)	\$200+

Estimated total cost for NYS residents: 12,400+
(Includes all required graduate credits)

The DI program has been awarded Continued Accreditation by the Accreditation Council for Education in Nutrition & Dietetics (ACEND)

http://www.eatright.org/members/7782_13285.cfm

About the College

Lehman College is set on a beautiful, 37-acre tree-lined campus in the Bronx, New York City. The college is a cultural and recreational center for the region with its Center for the Performing Arts, Lehman College Arts Gallery and The APEX, a world-class center for sports and recreation.

Further Information

Any further questions should be directed to:

DI Director Marina Stopler, MS, RD, IBCLC

Department of Health Sciences

Gillet Hall, Room 432

marina.stopler@lehman.cuny.edu

And/or

Dr. Lalitha Samuel, PhD

Graduate Advisor

Department of Health Sciences

Gillet Hall, Room 421B

lalitha.samuel@lehman.cuny.edu

Lehman College of CUNY

Bronx, New York 10468

718 -960-2421

Dietetic Internship Program

at



Department of Health Sciences
Gillet Hall, Room 431
250 Bedford Park Boulevard West
Bronx, New York 10468-1589
www.lehman.edu/dietetic-internship-program/index.php

Program Mission & Goals

The mission of the Lehman College Dietetic Internship (DI) Program is to provide interns with a comprehensive learning experience with an emphasis on Medical Nutrition Therapy, through which they can acquire the skills, knowledge, and professional practice required of entry-level dietitians.

The program has been planned to allow students to undertake part time employment and complete the DI over a three semester period (12 months), for a minimum of 30 hours weekly.

Upon completion of the DI, graduates will be able to demonstrate the knowledge, skills and competencies acquired during the DI by succeeding in the following:

- A. Employment as an ethical and culturally sensitive entry-level Registered Dietitian.
- B. A graduate program in nutrition and foods or other health-related field.

Program Sites

Lehman College has affiliations with acute and long-term care facilities and community programs in the boroughs of New York City, as well as in Westchester County, upstate New York and Long Island.

Admission Requirements

The DI program will be participating in DICAS. Students who wish to enter the DI must set up an account via the DICAS portal (<https://portal.dicas.org>) & complete/provide the following by the deadline date:

1. The Internship application form
2. A Verification Statement of completion of an accredited DPD or a Letter of Intent to complete the DPD uploaded to DICAS
3. Three references uploaded to DICAS
4. Original undergraduate and/or graduate transcripts (students who attended an undergraduate program abroad must present original transcripts evaluated by the World Education Service or Equivalent.) uploaded to DICAS
5. A Personal Statement (check DICAS instructions)
6. A check for \$50 Application Fee made payable to “Lehman College”, to be sent directly to the DI Director with a cover letter including your name, college & “Dietetic Internship Application” at the top.

In the semester after to the start date, interns must apply for admission into the MS in Nutrition Program at Lehman College as a matriculated student.

Deadline for Application is mid-February

The DI Program participates in the Computer Match administered by D&D Digital at www.dnddigital.com/ada/.

Program Start Date: Start of Fall Semester (end of August)

For more information about DICAS and D & D Digital, including deadline dates, go to the Lehman DI Website, DICAS portal, D&D Digital Website &/or your DPD Director.

Program Requirements

All Interns complete the following 12-credit program of graduate study with a minimum grade of B concurrent with the DI.

DFN641: Community & Public Health Nutrition (3)
DFN 651: Clinical Nutrition (3)
DFN661: Food Service Management (3)
HEA620: Health Counseling (3)

Students who have completed DFN 641, HEA 620 or DFN 661 within two years of entrance into the DI with a grade of B+ or better may request up to two of these co-requisite graduate courses be waived. Therefore, DFN 651 and one other class must be taken at Lehman. All classes must be successfully completed before graduation from the DI.

During the DI program, the following courses are taken each semester:

DFN730: Supervised Preprofessional Practice	9– 3 Semesters	9 Credits
DFN731: Concepts & Methods of Dietetic Practice—3 semesters		9 credits
		Total = 18 credits

Concepts & Methods of Dietetic Practice is a seminar and meets weekly, combining didactic and discussion opportunities.

Students are required to maintain a minimum GPA 3.0 throughout the DI.

Program Duration

The program comprises a minimum of 1200 hours of supervised practice to be distributed as follows:

Clinical Rotation	470 hours
Community Rotation	280 hours
Food Service Rotation	300 hours
Research project	150 hours

Appendix Z

Standard 23: Copy of Student Handbook

INTERN HANDBOOK

Dietetic Internship Program

Lehman College, CUNY
Department of Health Sciences
Program in Dietetics, Foods and Nutrition
250 Bedford Park Boulevard West
Bronx, NY 10468

June 2016
Marina Stopler, MS, RD, IBCLC
Dietetic Internship Director
718-960-6713
marina.stopler@lehman.cuny.edu

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INTRODUCTION

This Handbook has been designed to provide a comprehensive description of the Dietetic Internship Program at Lehman College for interns who have been accepted into the Program.

The Program accepts interns who are eligible to be accepted into the Graduate Program in Nutrition. Matriculation into the Graduate Program is mandatory before starting the Dietetic Internship Program.

This Handbook is a guide to and lays down the policies and procedures of the Internship Program. Please review it carefully. It will be required for reference during the Internship.

In addition, please consult the Internship Web Site:

<http://www.lehman.edu/academics/health-sciences/internships.php>

The entire Handbook is posted in the DFN 730 section on Blackboard. This includes all documents and forms that are required during the Dietetic Internship.

MISSION STATEMENT AND PROGRAM GOALS

There is an increasing awareness that the diets people consume contribute to the quality of their life. In addition, studies have shown that people's susceptibility to chronic disease is influenced by their diet. Dietary-influenced chronic disease is not only observed in affluent communities, but is increasingly seen in those that are compromised economically. Lehman College, situated in the Bronx, is uniquely placed to assist in educating interns to develop approaches to support the community to move towards dietary change to optimize health.

The mission of the Lehman College Dietetic Internship (DI) Program is to provide interns with a comprehensive learning experience through which they can acquire the knowledge, skills and practical training require of entry-level dietitians.

The Program has been planned to allow interns who are employed to complete the Dietetic Internship on a part-time basis. The Lehman College DI Program is designed to be completed in 12 months, over three semesters, with not less than 30 hours per week spent in supervised practice.

The goals of the program are as follows:

Upon completion of the DI, graduates will be able to demonstrate the knowledge, skills, and competencies acquired during the DI, according to the Competencies/Learning Outcomes by the Accreditation Council for Education in Nutrition and Dietetics (ACEND) for Dietetic Internship programs with particular emphasis on Medical Nutrition Therapy by succeeding in the following:

Program Goal One:

Employment as an ethical and culturally sensitive entry-level Registered Dietitian Outcome Measures over a 5-year period:

1. Program Completion: 80% of the intern class will complete the DI within 18 months.
2. Pass Rate of First-Time Test Takers of the Registration Examination: 80% of DI graduates will pass the Registration Examination on the first attempt.

3. Graduate Employment: 70% or more of DI graduates who sought employment in dietetics were employed within six months of program completion.
4. Employer Satisfaction:
 - a. 75% of employers will rate DI graduates as performing well.
 - b. 75% of employers will rate DI graduates as ethical and culturally sensitive.

Program Goal Two:

Success in either a graduate program in nutrition and foods or in another health-related field.

Outcome Measure over a 5-year period:

- Enrollment in a Graduate Program: 70% of enrolled interns will succeed in a graduate program in nutrition and foods or other health-related field.

In addition, the intern will be able to:

1. Integrate knowledge and critical thinking skills with practical experience
2. Pass the Registered Dietitian Examination on the first attempt, to become Registered Dietitians
3. Acquire New York State Certification after passing the Registered Dietitian Examination

APPROVAL STATUS

The Dietetic Internship Program at Lehman College has been awarded Continued Accreditation by the Accreditation Council for Education in Nutrition and Dietetics (ACEND), 120 South Riverside Plaza, Suite 2000, Chicago, IL 60606, 312-899-0400, ext. 5400

<http://www.eatrightacend.org/ACEND/content.aspx?id=6442485424>

PROGRAM REQUIREMENTS

In order to integrate knowledge and critical thinking skills with practical experience, interns admitted to the Dietetic Internship are expected to take four courses at the graduate level concurrent with the DI.

These co-requisite courses are:

Credits

DFN 651: Clinical Nutrition (Fall)	3	
DFN 641: Public Health & Community Nutrition (Spring)		3
HEA 620: Health Counseling (Fall or Spring)	3	
DFN 661: Food Service Management (Summer)	3	

Students who have completed DFN 641, HEA 620 and DFN 661 within two years of entrance into the DI with a grade of B+ or better may request that these co-requisite graduate courses be waived. DFN 651 and one other class must be taken at Lehman. All classes must be successfully completed before graduation from the DI.

The following courses are required to be taken concurrent with the Dietetic Internship Program:

DFN 730: Supervised Preprofessional Practice	9 credits
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Interns must register for three credits of DFN 730 and three credits of DFN 731 each semester for a minimum of three semesters. Final transcripts including all the above classes must be provided before graduation will be approved.

Interns are also required to complete the following **BEFORE** starting the program:

1. **IRB training:** the CITI Program providing research ethics education. The Collaborative Institutional Training Initiative must be completed: (<http://www.cuny.edu/research/compliance/training-education.html>), in order to participate in human subject's research. Go to the Research Compliance page, read CITI Training, go to the Instructions, register and complete the **CITI RCR, Human Subjects Protection Basic Course and Conflict of Interest Modules**. A hard copy of the certificates of completion must be provided to the DI Director at orientation.
2. **ServSafe certification:** ServSafe certification must be obtained for a food handler or manager (valid within five years) and a copy brought to orientation. The site may be accessed at <http://www.servsafe.com/home>

Interns are required to maintain a minimum GPA of 3.0 (B grade) average throughout the entire Dietetic Internship Program. Any intern whose GPA drops below 3.0 will be requested to follow a course of remedial study or asked to leave the DI.

It is the goal of the interns to receive an evaluation of adequate (B) or better for each component of their supervised practice. The grade received for DFN 730 will be based on the average of the grade(s) received for the appropriate rotation(s) during a semester and assessment by the DI Director of assignments and adherence to policies and procedures related to supervised practice. Any intern receiving an evaluation below adequate or an overall grade below B for any rotation may need to repeat either the entire rotation, or the part of the rotation that is considered to be less than adequate, or be asked to leave the DI. This decision will be made on discussion among the preceptors and the DI Director and the DFN Faculty. Rotations are based on a set of skills that are outlined in the syllabus (Appendix 5) that preceptors and interns use to guide them and are based on a set of increasingly difficult competencies and exercises.

Interns are expected to keep a portfolio of all their accomplishments during each of their rotations. They should include all requirements of the syllabus (competencies) for that particular rotation (Appendix 5), plus lesson plans for presentations, brochures and educational materials developed for that particular population. There should be a cover sheet before each major item and the intern's name on every item developed. The completed portfolio is due *within one week* of the end of the relevant rotation, along with logs of activities, the preceptor evaluations plus grade, and intern site evaluation. If a portfolio and evaluations are not received by the end of the relevant semester, the intern will receive a grade of "incomplete" until such time that the document is produced. All relevant documentation must be submitted before interns can graduate from the DI (See Appendix 9).

Interns are expected to acquire a user name and password in order to access the Blackboard course management system through the CUNY portal (<http://www.cuny.edu>). Interns are required to keep a log of their activities for all rotation components and post them every week on Blackboard in the Discussions Section in the appropriate named Forum in the DFN 730 section for that semester. Hard copies must be included with the portfolios and evaluations on completion. Logs must include the date, the place, the daily and weekly hours spent, the running total for the rotation and the activities performed (Appendix 9).

Reference and textbook that have been recommended in the past:

1. Escott-Stump, S. (2011). Nutrition and Diagnosis-Related Care. (7th Ed.). Lippincott, Williams & Wilkins: Philadelphia, PA
2. Pronsky, Z.M. (2012). Food & Medication Interactions. (17th Ed.).
3. Nelms, N.M., Long, S. & Lacey, K. (2013). Medical Nutrition Therapy: A Case Study Approach. (4th Ed.) Thomson Wadsworth: Belmont, CA
4. International Dietetics & Nutrition Terminology (IDNT) Reference Handbook. (Latest Ed.). Academy of Nutrition & Dietetics, Chicago, IL
5. The following are optional but useful.
6. Stedman’s Medical Dictionary for the Health Professions & Nursing. (7th Ed.). Lippincott, Williams & Wilkins: Philadelphia, PA
7. Basic Carbohydrate Counting. Chicago: Academy of Nutrition & Dietetics.
8. Choose Your Foods: Exchange Lists for Diabetes. Chicago: Academy of Nutrition & Dietetics.
9. A Healthy Food Guide to Kidney Disease, Chicago: Academy of Nutrition & Dietetics.
10. National Renal Diet, Chicago: Academy of Nutrition & Dietetics.
11. Additional textbooks from MNT, Food Service and Community classes are optional, but very useful.

PROGRAM DURATION

The Academy of Nutrition & Dietetics currently requires that Dietetic Interns undertake a minimum of 1200 hours of supervised practice. The Dietetic Internship Program at Lehman College has been designed to allow interns who need to undertake part time employment to complete their hours of supervised practice on a part time basis. It is expected that interns will complete the supervised practice component of the program in three semesters (12 months). If supervised practice experience lasts longer than 12 months, site placement is not guaranteed.

The 1200 hours are divided as follows:

Clinical Rotation:	470 hours
Food Service Management Rotation:	300 hours
Rotation:	280 hours
Research Project:	150 hours

The three supervised practice components take place in a health care facility or community agency for a MINIMUM of 30 hours per week, Monday to Friday during one shift. The community rotation is usually divided in 4 sections to enable interns to experience several different agencies. Research projects will be supervised by faculty and/or preceptors. Interns will also be expected to contribute articles to a Wellness Newsletter that will be published on the DI Web site (Appendix 11).

Additional hours may be required if it is felt that the intern has failed to master the competencies required during that rotation.

MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS

Each dietetic intern is expected to become a student member of the Academy of Nutrition & Dietetics (the Academy) and thence a member of the New York State Dietetic Association and their local

dietetic association. Student members of the Academy will receive the association's professional journal, related materials and legislative updates and have access to the Academy's Evidence Analysis Library. This is to encourage interns to become active members of the Academy of Nutrition & Dietetics upon completion of the Dietetic Internship.

ATTENDANCE AT PROFESSIONAL MEETINGS & VOLUNTEER WORK

Each intern is required to attend at least one professional meeting, seminar or conference (local, state, or national dietetic association) and one volunteer opportunity with a dietetics-related profession such as a dietetic, culinary, lactation, food recovery, or food justice organization. The hours of attendance (minimum 6 hours for conference, 4 hours for volunteer) must not be included in the 1200 hours of supervised practice. A certificate of attendance and a review of the activities must be provided to the DI Director within two weeks of attendance. **A one page summary of the meeting/seminar/conference/volunteer opportunity must also be provided.** Webinars or facility in-services are not appropriate.

PROGRAM COSTS

As of Fall 2016, graduate tuition fees are \$425 per credit for interns who are New York State residents and \$745 per credit for out-of-state residents. All graduate interns must pay an activity fee of \$54.60-74.60 and a technology fee of \$62.50 -125 per semester. All fees are subject to change by the Board of Trustees of the City University of New York. <http://www.lehman.edu/administration/business-office/bursar-office/tuition-and-fees.php>

In addition to tuition and administrative fees paid by all graduate interns, interns should be prepared to pay the following:

Transportation to & from Practice Sites	\$300+ per semester
White laboratory coat(s) for Practice Sites	\$45+
Calculator	\$4+
Academy of Nutrition & Dietetics Student membership	\$58
	Books \$200+
Criminal background checks and fingerprinting:	about \$130 (Many sites will cover the costs, some will not)
Estimated Total for NYS residents for the year	\$12,400+

All interns are expected to own or have access to a home computer (for use when completing assignments, case studies and portfolios), an Internet Service Provider and a dedicated email account to which they have regular access. Blackboard, the CUNY web-based class management platform will be used to access all documents and forms, class information and assignments and the posting of weekly logs of rotation experiences. In order to access library service, class evaluations, etc. interns must have an active Lehman College email account, the password of which must be regularly updated.

Interns are responsible for their own transportation to and from their assigned sites. Neither the college nor the practice sites are liable for costs or safety regarding the interns' transportation. Whenever possible, practice sites will be selected that are geographically desirable, easily accessible and in relatively safe neighborhoods.

Meals are the responsibility of the interns. However, while working in some rotations, meals may be included or available at a reduced price.

POLICIES AND PROCEDURES OF THE DIETETIC INTERNSHIP PROGRAM

Policy 1:

The Dietetic Internship supports the policy of equal opportunity as set out by Lehman College, City University of New York. The Dietetic Internship Program will admit qualified individuals without regard to sex, age, color, national origin, handicap or religion.

Procedure:

Lehman College, City University of New York is an equal opportunity and affirmative employer. The college does not discriminate on the basis of age, sex, sexual orientation, alien status or citizenship, color, national or ethnic origin, race, handicap or religion, veteran or marital status in its admissions or access to programs.

No student will be denied entrance into the Dietetic Internship Program based on sex, age, race, national origin, handicap or religion.

In order to be considered for application to the Dietetic Internship Program, a student must initially attain the minimum requirements to be admitted as a graduate student in the Dietetics, Foods, and Nutrition Program, in the Department of Health Sciences.

Policy 2:

All dietetic interns are expected to abide by the policies and procedures of the Lehman College Dietetic Internship Program, its affiliates, rotation sites and the Academy of Nutrition & Dietetics.

Procedure:

Interns will become familiar with the Professional Code of Conduct for Interns (Appendix 1). It will be discussed in orientation.

Interns are expected to read and follow the policies, procedures and performance requirements of Lehman College, the Dietetic Internship Program and its affiliates, the City University of New York and the Academy of Nutrition & Dietetics.

Policy 3:

It is the policy of the Department of Health Sciences and affiliated Internship sites to use and maintain all sensitive, privileged and restricted information in a strictly confidential manner. Confidential information includes, but is not limited to, that information concerning general departmental business or administration, student information, patient medical information and any other restricted information, data or material in any form.

Procedure:

All dietetic interns will comply with the provisions of this policy and are prohibited at any time during or after their participation in the Dietetic Internship Program from inappropriately accessing, using in any way, revealing or otherwise disclosing either directly or indirectly sensitive, privileged or restricted information, data or material of a confidential nature as defined above.

Dietetic interns may access, use, maintain, reveal or otherwise disclose confidential/privileged information only in the performance of their duties and responsibilities, for legitimate business related to the hospital, community or other setting and with prior appropriate management approval.

It is the responsibility of each dietetic intern to strictly adhere to this policy. Interns violating this policy are subject to corrective action, up to and including immediate dismissal.

A dietetic intern who knows or becomes aware of a violation of this policy is obligated to make immediate full disclosure to their preceptor and the Internship Director of knowledge of any deliberate or inadvertent breach of confidentiality by him/herself or any employee of the facility.

It is also the responsibility of all preceptors to inform their dietetic interns in the use of confidential or privileged information.

Interns will be particularly careful about patient confidentiality. No patient name or defining initials or information shall be used in class assignments or case studies.

Discussions about patients will be limited to closed meetings without visitors.

Policy 4:

Interns will adhere to the Academy of Nutrition & Dietetics Professional Code of Ethics.

Procedure:

Interns will become familiar with the Academy of Nutrition & Dietetics Professional Code of Ethics (Appendix 2) or Journal of the American Dietetic Association, August 2009, Volume 109, No. 8, p 1461.

Interns will discuss ethics issues in class in order to understand their application to each specific setting.

Policy 5:

All dietetic interns have must have professional liability insurance and medical insurance prior to starting the Dietetic Internship Program.

Procedure:

As of July 2014, all interns have professional liability insurance through CUNY. Interns are responsible for securing their own medical insurance for coverage during the course of the Dietetic Internship Program.

CUNY general and professional liability insurance offers students clinical and field placement as part of the curriculum. The general liability coverage applies only with respect to liability arising out of incidents involving agreements between the University and affiliates that specifically provide this coverage and are in full force and effect. Coverage limits are \$3million per claim/occurrence and \$3million in aggregate.

All interns will provide evidence of medical insurance coverage prior to the start of the Program. Medical insurance can be obtained through Lehman College, Student Life.

If a dietetic intern is injured or becomes ill while on duty, he/she will be treated in or at the nearest emergency care center of the current rotation facility at the intern's expense.

Policy 6:

Before beginning the Dietetic Internship, interns are required to sign a contract where they confirm agreement with the terms and requirements of the Dietetic Internship at Lehman College (Appendix 3).

Procedure:

Interns are required to sign a contract to confirm that they will adhere to the code of conduct (Appendix 1) of the DI Program, accept placement at an appropriate site, spend a minimum of 1200 hours at acceptable

institutions, undertake to commit to no more than 15 hours weekly paid employment throughout the DI, perform all coursework required, take the R.D. Credentialing Examination within three months of graduation from the DI and establish an appropriate method of communication with the DI Director. Interns are also required to provide the DI Director with the following by the start of the DI and any other documents required:

1. DPD Verification Statement, if not provided at application.
2. Final original transcripts from DPD program.
3. Copy of the Academy Student Membership card.
4. Copy of Health Insurance card.

Interns cannot start their supervised practice until all documentation is provided.

Policy 7:

Dietetic interns will meet all supervised practice requirements and comply with all policies, procedures and standards of professional behavior in order to graduate from the program.

Procedure:

Dietetic Interns will complete the required hours of supervised practice and hours of didactic instruction as established by the Dietetic Internship Program of Lehman College. Upon starting a rotation, the site primary preceptor will clarify the exact days and hours of attendance with the intern, who will inform the DI Director of the arrangement and adjust their schedule to meet these expectations. Supervised practice hours will take place during working hours, from Monday to Friday. Under New York State Labor law, a lunch break of not less than 30 minutes must be taken.

Learning experiences will be documented according to the Program Requirements. The dietetic intern will be evaluated at the completion of each rotation and, for the clinical rotation, after each area of specialization. Interns will be evaluated on professional competencies related to general dietetic practice. In addition, the intern is expected to provide an evaluation of the site.

In order to successfully complete the program, dietetic interns must receive an evaluation of adequate or above or an overall grade of B or above.

If the above grades are not obtained on any evaluation instrument for any rotation, the intern will have to repeat either the hours or the entire rotation. If the above grades are not obtained for any assignment, then the intern will be given additional assignments, projects or other work and will then be re-assessed on the relevant material. If the additional work is not passed with the appropriate score the second time, the intern will complete another week of the rotation, with the agreement of the site primary preceptor, or complete another case study, assignment or other work prior to being re-tested for the third time. Upon the second instance of failure to pass an assignment or project with the appropriate grade, the dietetic intern will be given a final warning that the next failing score will result in termination from the program.

Dietetic interns must consistently demonstrate compliance with policies, procedures and standards of professional behavior throughout the internship to complete the program, according to the Professional Code of Conduct for Dietetic Interns (Appendix 1). Any lapse in compliance will be addressed with the intern and corrective action will be taken. The first instance of non-compliance will result in a verbal warning, the second instance will result in a written warning and the third instance will result in a final warning. The fourth offense will result in termination.

It is the responsibility of the preceptor to evaluate the dietetic intern in terms of their performance in supervised practice, to document scores and any lapse in compliance with policies, procedures and standards, and to notify the DI Director of evaluation results and behavior issues. It is the responsibility of the DI Director to ensure adherence to this policy.

Upon completion of all Dietetic Internship Program requirements, the DI Director will issue a verification statement to each graduate, whereupon the intern shall complete and sign the RDE form, the Release of Information Form and any other form that is deemed appropriate and necessary.

Policy 8:

Dietetic interns are expected to acquire competencies specific to the Medical Nutrition Therapy concentration of the DI.

Procedure:

Each dietetic intern is expected to undergo appropriate experiences during the Medical Nutrition Therapy rotation that build on core competencies, so that they will be able to:

1. Perform nutrition assessment, formulate a nutrition diagnosis, and plan intervention strategies for patients with complex medical conditions, including but not limited to diabetes, multi-organ failure, trauma, and renal disease.
2. Select, monitor and evaluate complex enteral and parenteral nutrition regimens for patients with complex medical conditions.
3. Develop and implement transitional feeding from enteral and parenteral nutrition support to oral intake.
4. Undertake nutrition counseling and education with patients with complex medical conditions.
5. Observe nasogastric and percutaneous endoscopic gastrostomy placement and care.
6. Participate in the care of patients requiring adaptive feeding devices.

Policy 9:

All dietetic interns are expected to dress according to the Dietetic Internship Dress Code.

Procedure:

All dietetic interns are expected to dress appropriately for their site. In general this is considered to be professional/casual attire. During the food service rotation this includes hosiery or socks; closed, flat-heeled shoes and protective head covering are required.

Long hair must be clipped back securely. Jewelry should be kept to a minimum and nail polish and long nails are discouraged. During the food service and clinical rotation, legs must be covered by pants, hosiery or a long skirt. A lab coat is required unless otherwise indicated by the site Director/preceptors. Jeans, overly casual tops and pants/skirts and open-toed shoes are prohibited. Interns are also expected to provide themselves with a calculator and writing implements. When on duty in the rotation facilities, the intern will follow the regulations for that facility. Identification badges must be worn at all times when on duty. In a health care institution, this may be issued by the facility. The Lehman College Photo ID may be substituted if this is acceptable by the facility.

When attending a seminar or professional meeting representing the Dietetic Internship Program, professional attire is required by everyone.

Policy 10:

Each intern will be required to prepare a clinical case study, according to the Case Study Guidelines (Appendix 7). A paper will be prepared, as well as a PowerPoint Presentation of not more than 30 minutes. This will be presented to the class at a time to be scheduled.

Procedure:

During the clinical rotation, dietetic interns are required to choose a patient in whose management they were involved. The choice should be made based on the degree of involvement with the patient and the unusualness of the case, e.g. either clinically or socially, depending on the medical nutrition therapy. A case study will be prepared based on the Case Study Guidelines in Appendix 7. A PowerPoint presentation will be prepared, of not more than 30 minutes, to be presented to the class at the end of the semester in which the clinical rotation takes place. No more than four interns will present on any week in the fall and spring, and five in the summer. Interns will be assigned to a week. If an intern wishes to change the presentation day they are required to change with another intern, so that no more than the above number of interns present on the same day. All changes must be approved by the DI Director. If any intern fails to present their case study, or makes an inadequate presentation, they will be required to wait until a suitable time in the next semester, to (re)present their case study. In addition, a paper will be prepared outlining the details of the case study and its position in the clinical nutrition and medical field. This is due on the day of the presentation.

Policy 11:

Plagiarism is the appropriation of all or part of the work of someone else and representing it as one's own. Cheating is the unauthorized collaboration on a take home assignment or examination.

Procedure:

All assignments, projects and examinations must be the product of each student. Collaboration is not allowed. Any part of an assignment or project that is the work of someone else must be appropriately attributed. If any intern is found to have committed academic dishonesty by plagiarism or cheating, the intern(s) will be failed for that assignment, project, examination or course. It will result in the intern(s) being asked to withdraw from the DI.

Policy 12:

Vacations and holidays will be planned and included in the Dietetic Internship Rotations.

Procedure:

During each supervised practice rotation, interns are expected to follow the holiday practices in place at the particular site. These comprise but may not include all the following:

New Year's Day	January 1 st
Martin Luther King Day	3 rd Monday in January
President's Day	3 rd Monday in February
Memorial Day	Last Monday in May
Independence Day	July 4 th
Labor Day	1 st Monday in September
Columbus Day	Mid October
Thanksgiving Day	4 th Thursday in November

Christmas Day

December 25th

Interns may take vacation during the Christmas break (3rd week in December to last week in January) and Easter week and/or Passover week (if they do not coincide), when the College is closed or when there are no classes, if they are not scheduled to be present at a practice site. Time off for religious holidays/observances can be arranged according to the policy and procedure of the facility and with the approval of the DI Director.

Attendance at professional meetings may not be included in the supervised practice hours and should be coordinated with the site primary preceptor. Interns are expected to arrange their vacation time in accordance with the above provisions. Vacation time is discouraged during attendance at a supervise practice site, and may only be undertaken in exceptional circumstances with written permission from the DI Director.

Policy 13:

All dietetic interns are responsible for arranging appropriate transportation to their rotation site and for maintaining acceptable attendance and punctuality. Interns who fail to maintain an acceptable standard of attendance or punctuality may compromise the quality of their education and ability to remain in the program.

Procedure:

Dietetic interns are expected to arrange safe and suitable transportation to their rotation site. They are expected to be at their assigned rotations by the designated start time (ready to work). They should also be at scheduled Dietetic Internship classes at designated start times. Interns failing to do so are considered tardy.

Attendance and tardiness records will be monitored on an on-going basis. Appropriate corrective action will be implemented.

A dietetic intern who is unable to report to their rotation site is required to notify the site primary preceptor for the current rotation at least one hour before start time at the designated site. A written excuse, including the number of days of non-attendance must be provided to the DI Director within one week, which will be filed in the intern's folder. This includes non-attendance due to inclement weather. In addition, the intern is required to inform the DI Director by email or voice mail prior to the start time. An intern who is unable to report to class is required to notify the DI Director and provide a written excuse (email is acceptable) as above and appropriate documentation. Lack of attendance at the DI orientation will result in a discharge from the DI unless this is a result of an emergency.

Absence for more than two days in succession requires a physician's note or, if absences are frequent, a physician's note to be provided at the DI Director's discretion. Any absence from class must be accompanied by suitable documentation.

A dietetic intern who fails to report to work or class as scheduled and fails to notify the DI Director and/or preceptor shall be considered absent without leave (AWOL) and may be subject to a letter of final warning. An intern who is AWOL for two or more scheduled consecutive work days or classes without proper notice is considered to have withdrawn from the program, unless there are extenuating

circumstances which are accepted by the DI Director. An intern will be informed of the termination of dietetic intern status whenever practical.

Dietetic interns are required to complete time missed due to absences, tardiness and scheduled time off in both supervised practice and didactic instruction. Repeated absence from class will not only affect the final grade but verification of completion of the Internship Program.

Corrective action standards for occurrences are as follows:

Unscheduled absences from work (i.e. absences that have not been scheduled in advance and approved; absences that are reported to the DI Director and preceptor shortly before scheduled work time) or seminar classes.

<u>No. of occurrences:</u>	<u>Result</u>
one	Oral Warning
two	Written Warning
three	Warning
four	Discharge

Tardiness: (i.e. when an intern has failed to report at the assigned rotation at the beginning of the shift or at the seminar class on time).

<u>No. of occurrences:</u>	<u>Result</u>
three	Oral Warning
five	Written Warning
seven	Final Warning
ten	Discharge

All site preceptors are responsible for monitoring attendance of their dietetic interns and communicating incidences to the DI Director, whose responsibility it is to ensure that this policy is implemented in a consistent manner.

Policy 14:

All interns are expected to achieve and maintain the standards of performance, practice, conduct and proficiency as outlined by the Dietetic Internship Program, Lehman College, City University of New York and the Academy of Nutrition & Dietetics. When standards and policies are not being met, disciplinary action may be imposed. Disciplinary action is defined as a "corrective measure or penalty action taken against an intern for cause involving ineptitude, inefficiency, misconduct or failure to adhere to the Policies and Procedures of the DI at Lehman College."

Procedure:

The DI Director will monitor interns' conduct and performance via personal observation and feedback from preceptors. When a problem is identified with an intern's conduct or performance, the DI Director will first verbally counsel the intern in an attempt to correct the problem. If the problem persists, disciplinary action will follow. For first offenses that are severe infractions and result in probation, suspension or dismissal, disciplinary action will be administered by verbal counseling.

The DI Director will collect all facts leading to disciplinary infractions, including data and student/preceptor interviews. Disciplinary actions of admonishment and first probation do not require committee review. Second probation and dismissal penalties will be brought before the disciplinary committee.

The DI Director will present the intern with a disciplinary memo. The original signed copy of the memo will remain in the intern's folder. The copy with original signatures (DI Director and intern) will be handed to the intern. If the intern refuses to sign the notice, the DI Director will sign and date that line with notation "intern refusal to sign." If the intern refuses to accept the notice, it will be mailed to the intern's address on record "return receipt requested".

Definitions:

Admonishment/Warning: written notice of a single infraction with warning against repetition. Repetition may result in probation.

Probation: written notice of probation for repeated offenses of a similar nature. Based on seriousness and number of offenses can lead to suspension.

Suspension: written notice with enforced temporary absence from duty as a result of repeated offenses beyond probation. Time lost will have to be made up.

Dismissal: dismissal from program for infractions beyond suspension penalty.

The practice site may request the college to terminate the supervised practice rotation of an intern when the health status of that intern is detrimental to services provided at the site, or when the conduct or behavior of the intern is detrimental to the operation of the site and/or patient care. The specific issues will be discussed with the DI Director and the DFN Graduate Faculty. The intern may continue in the Program at the discretion of the DI Director and the DFN Graduate Faculty. In which case, the intern will be requested to find their own rotation site.

An intern may appeal admonishments and probation decisions to the DI Director in writing. Disciplinary actions beyond probation may be appealed in writing to the DI Director, DFN Graduate Faculty and finally to the Department Chair.

Policy 15:

All dietetic interns have the opportunity to resolve Internship-related problems through a conflict resolution process. This process refers to the method by which the Dietetics, Foods, and Nutrition Program facilitates an acceptable relationship between dietetic interns and rotation site personnel.

Procedure:

Dietetic interns are encouraged to voice their concerns to the rotation preceptor. If the issue cannot be resolved with the preceptor, or, if the conflict involves the preceptor, the intern should discuss the issue with the site primary preceptor. If the issue is still unresolved, the intern is encouraged to discuss it with the DI Director.

If the issue is still unresolved, it will be brought to a meeting with the DI Director and DFN Graduate Faculty.

Interns have the right to file a written complaint related to ACEND accreditation standards. Students are advised to submit a complain to ACEND only after other options have been exhausted.

Policy 16:

Dietetic interns are continually evaluated in their rotations by the site preceptors and the DI Director. Progress is measured using a range of approaches during and at the conclusion of the program, in order to verify competence. Interns are undertaking a learning experience and are not permitted to replace regular employees.

Procedure:

The following methods of evaluation will be used throughout the program to verify intern competence:

1. Homework and assignments throughout each rotation
2. Case studies as part of the clinical rotation
3. Projects and presentations throughout each rotation
4. Lesson plan development
5. Checklists of objectives and competencies throughout each rotation with reference to the syllabus for each rotation (Appendix 5)
6. Professional evaluation at the end of each rotation
7. Portfolio at the end of each rotation

Interns must successfully complete each rotation, receiving a grade of B or above on their Professional Practice Evaluation (Appendix 6) and also complete a site evaluation upon completion of the rotation.

All evaluation sheets and portfolios must be delivered to the DI Director within one week of completion of the rotation. If necessary, the DI Director will arrange a meeting with the intern to review the rotation.

The supervised practice component of the DI is an educational and learning experience. Interns are not, under any circumstances, to be used by sites to replace regular employees unless undertaking staff relief. If an intern feels that they are being asked to replace a regular employee, they should inform the DI Director, who will contact the site preceptor.

Policy 17:

All dietetic interns are required to take a test at the end of each semester and a cumulative test at the conclusion of the program and attain a passing score of 80 and above for each test. No intern receiving a score of less than 80 on the final test will be allowed to graduate from the program.

Procedure:

At the end of the fall, spring and summer semesters, interns are required to take an on- line multiple-choice test. A score of 80 or more is expected on all three tests. In the fall, if a score of less than 80 is obtained on the first test, the intern will be required to take another test, in order to proceed into the next semester. The intern will receive an “Incomplete” for DFN 731 until a score of 80 or above is achieved. If a score of 80 or more is not achieved on the second test, the intern may take a third test. If a score of 80 or more is not achieved on the third test, the intern will be asked to withdraw from the program. Interns will only be permitted to take one retest at the end of the spring semester. If a score of a score of less than 80 is obtained on the second test, the intern will be asked to withdraw from the program.

If the intern fails to obtain a score of 80 or above on the summer DI exit exam, the intern will be required to take another test after a time period of not less than three weeks in order to graduate from the program. The intern will be given an opportunity to review the first exam, to ascertain the incorrect responses to the questions. If a score of 80 or more is not achieved on the second summer test, the intern must submit a written application (Appendix 8) to the Dietetic Internship Committee, to justify their performance, the remedial activities that they have undertaken and how these activities will enable them to pass the Registered Dietitian Test. If the appeal is accepted, the intern may take one further test. If a score of 80 or above is not achieved on the third test, the intern will not graduate from the DI program. If the appeal is not accepted, the intern will not be allowed to graduate from the program.

Policy 18:

The three multiple-choice tests, one at the end of each semester, will be taken on-line using the computer and the Blackboard on-line class management program.

Procedure:

Each test is available over a period of two hours during class time on finals week. The tests comprise 100 multiple-choice questions; each test must be completed in 75 minutes. This time period begins as soon as the test is begun and ends at completion of the test or at the end of the 75 minutes times period (Blackboard ends the test automatically at the end of the allotted time period). Tests are accessed in the **Tests** section on Blackboard.

- The questions appear in a different order every time the test is accessed, as do the multiple-choice answers.
- When the test is opened, the instructions and the first question are presented. Read everything carefully.
- Choose the answer; a box will appear asking for answer confirmation.
- When yes/save/continue is clicked, the next question will appear.
- Do not click anything else, let the screen saver start, leave the computer, or cut the internet connection in any way until the end, otherwise the quiz will end and resumption is not permitted unless it is reset.

If there is a problem and the computer “freezes” while taking the test, the administrator of the test will reset the test as long as it is within the two-hour time frame and less than half the questions have been completed. The test may then be reattempted. The intern will check their email for the reply. If more than half the questions have been completed, the intern will only be credited with the questions that have been successfully answered. The test will only be reset once. At the end of the allotted time, Blackboard will submit all completed questions, even if the test is not completed.

Policy 19:

Upon completion of the program, all dietetic interns are required to sign a release form, affirming that they will release their name and test scores to the Department of Health Sciences, Lehman College when taking the Registered Dietitian Examination.

Procedure:

The Dietetic Internship Program at Lehman College is accredited by ACEND and part of the on-going accreditation is the analysis of the number of interns taking the examination and the pass rate. In addition, this information provides the Department with data to facilitate further modification and development of the program.

Therefore, all interns will be required to sign an agreement upon the completion of their internship program stating that when taking the Registered Dietitian Examination, they will check the appropriate box allowing the Examination administrators to release their name and test scores to the College.

Policy 20:

Interns who are practicing nutritionists may request credit towards their rotations from their prior experience. One hundred (100) hours may be received as credit for one rotation only.

Procedure:

Interns must have worked for a minimum of two years to obtain the relevant competencies. The intern will complete the Prior Experience Form (Appendix 4), listing the competencies that they have acquired during their work experience, compared to those listed on the appropriate syllabus. The Form must be signed and dated by the intern's supervisor of these competencies.

The Form will be submitted to the DI Director and, upon acceptance, the intern will be required to sign a form and will be excused from the 100 hours.

If the intern has worked full time for two years or more in a community agency, in a food service operation as a supervisor, dietitian or diet technician or in an acute care, sub-acute or long term care setting as a clinical nutritionist then the intern will either not be required to complete 100 hours in that particular area, or they may subtract 100 hours from the food service rotation or from an agreed component of the clinical rotation.

Policy 21:

A dietetic intern who enters the DI with a CDN Accreditation will be required to complete a minimum of 1200 hours of supervised practice to become a Registered Dietitian. However, under certain circumstances, the intern will also be required to take the Registered Dietitian examination.

Procedure:

Nutritionists are able to gain a Certified Dietitian/Nutritionist (CDN) Accreditation of the State of New York prior to admission into the DI. In order to acquire a CDN accreditation, nutritionists are currently required by the Board of Regents of the State of New York to pass a test, the Registered Dietitian examination administered by the Commission on Dietetic Registration being one of the test options. If the intern enters the DI having passed the Registered Dietitian examination, they must provide the DI Director with evidence of passing and they will not be required to repeat the test on completion of the DI (depending on possible CDR time constraints). However, when the CDN accreditation was introduced, registered dietitians and nutritionists were grandfathered in, therefore nutritionists could obtain the CDN accreditation without taking the Registered Dietitian examination. Nutritionists who acquired the CDN accreditation by grandfathering, will, therefore, be required take the Registered Dietitian examination after completing the supervised practice component of the DI.

Policy 22:

A dietetic intern who voluntarily withdraws from a site will be required to submit a written explanation of their action to the Site Primary Preceptor and the DI Director.

Procedure:

Any intern who, for any reason, voluntarily removes themselves from a site will be required to justify their action in writing, including specific reasons why they feel that they cannot continue their supervised

practice at that site. Sites agree to accept interns after negotiation and discussion and it is imperative that any problems that an intern experiences at a site be brought to the attention of both the Site Primary Preceptor and the DI Director.

Upon consideration of the intern's submission, a decision will be made by the DI Director on whether the intern may return to the site with the agreement of the Site Primary Preceptor. If it is decided that the intern may not return to the site, every effort will be made to find an alternative site, but this is not guaranteed. If it is decided that the intern may return to the site, and the intern does not wish to comply, the intern will be requested either to find an alternative site or asked to withdraw from the program.

Policy 23:

A dietetic intern who fails to be accepted by a site will be required to submit a written explanation of the reasons for the refusal to the DI Director.

Procedure:

Any intern who, for any reason, is not accepted by a site will be required to justify the action in writing, including specific reasons why they feel that they have been refused an experience of supervised practice at that site. Interns accepted into the DI are made aware of the policies and procedures of the DI and the terms under which sites will accept interns for supervised practice. Sites that agree to accept interns very rarely fail to accept an intern sent to them, therefore it is essential that the reason for the failure to be accepted at a site be brought to the attention of the DI Director.

Upon consideration of the intern's submission, the DI Director will decide whether another placement can be found. Every effort will be made to find an alternative site, but this is not guaranteed.

Policy 24:

Interns may be required to undergo an appropriate orientation process at practice sites according to the policy and procedure of the individual sites, which may include drug testing, finger printing and criminal background checks. This time may not be counted towards the rotation hours.

Procedure:

Many practice sites are health care facilities. Interns are usually required to undergo some kind of orientation process prior to starting the rotation and are advised to ascertain from each site primary preceptor exactly what will be required as early as possible. Failure to do this may result in a delay in starting. The orientation may include medical checks, evidence of vaccination status (particularly PPD) and criminal background checks and drug testing. Interns may be expected to cover the expense incurred for background checks and drug testing. This should not be more than \$50 – 70. The process will frequently include an orientation to the facility with other new employees/volunteers. This may take one or more working days. The time spent on the orientation process cannot be counted towards the rotation hours as it does not include the appropriate practical experience. In addition, meal breaks and study days cannot be included in rotation hours.

Lehman College DI cannot be held responsible if a site rejects an intern as the result of a failure to pass any part of the orientation process. Every endeavor will be made to find an alternate placement, but this cannot be guaranteed.

Policy 25:

Dietetic interns are expected to complete all supervised practice requirements for completion of the DI in three semesters (12 months), at a minimum of 30 hours weekly at their supervised practice rotation).

Procedure:

Each dietetic intern follows a prescribed program of didactic education and supervised professional practice with rotations organized in conjunction with site Primary Preceptors and fellow members of their intern class.

If an intern is unable to attend a practice site due to personal circumstances (e.g. medical or personal emergency) or any other reason, but is able to continue to attend the DI seminar, written approval must be requested and obtained from the DI Director to postpone the supervised practice for no longer than one month. Attendance at a practice site may be resumed, depending on the availability of an appropriate site.

If an intern is unable to attend both the seminar class and supervised practice site for more than one month (four weeks) due to personal circumstances, the intern shall be deemed to have withdrawn from the DI. In order to return, the intern would be required to submit a new application packet for the following year, including participation in the computer match. If the absence is less than one month, the intern may resume their didactic and supervised practice program, depending on the availability of an appropriate site for the latter.

If an intern fails to complete their supervised practice experience in 12 months, they will be required to reregister for either or both DFN 730 and 731 and attend the didactic seminar for each of the following semesters until they have completed all requirements, up to and including an additional three semesters. In such situation, a practice site cannot be guaranteed.

If an intern completes the supervised practice component of the DI in the above time frame, but has outstanding requirements yet to be fulfilled at the end of the program, the intern would be required to complete these within two years from entering the DI, or would be considered to have withdrawn from the program.

Policy 26:

Upon completion of all requirements of the Dietetic Internship Program, interns will receive a Verification Statement and their names will be submitted to the Commission on Dietetic Registration in order to receive eligibility to take the RD examination.

Procedure:

In order for interns to be considered as having completed the Dietetic Internship Program at Lehman College and to be eligible to take the R.D. examination, they must meet all the following criteria:

1. Complete a minimum of 1,200 hours of supervised practice rotations in 12 months with passing grades from all preceptors (DFN 730).
2. Complete a minimum of three semesters of DFN 731: Concepts and Methods of Dietetic Practice seminars with grades of B or more.
3. Complete all co-requisite classes with grades of B or more.
4. Complete and submit all portfolios within one week of completing the rotation.
5. Complete and submit all evaluation forms within one week of completing the rotation. Minimum grades of B must be achieved.
6. Pass the Exit Examination (at the end of the Summer semester or at such time that a score of 80 or above is achieved).
7. Appear for an exit meeting with the DI Director at Lehman College.
8. Provide all relevant information and complete all forms required by the CDR and the Lehman

Dietetic Internship program.

A Verification Statement signed by the Dietetic Internship Director will be issued to the intern, a copy placed in the intern's file and details of completion will be transmitted to the CDR.

Policy 27:

All interns have the right to inspect and review their education records according to the Lehman College Records Policy

Procedure:

Students should submit to the registrar, dean, head of the academic department, or other appropriate official, written requests that identify the record(s) they wish to inspect. If the records are not maintained by the College official to whom the request was submitted, that official shall advise the student of the correct official to whom the request should be addressed.

All requests shall be granted or denied in writing within 15 days of receipt. If the request is granted, the student will be notified of the time and place where the records may be inspected. If the request is denied or not responded to within 15 days, the student may appeal. Additional information regarding the appeal procedures will be provided to the student if a request is denied.

Policy 28:

All interns have access to Lehman College student support services, e.g. health services, counseling and testing and financial aid. The Student Health Center, Counseling Center and Financial Aid are available to all interns if required.

Procedure:

The Student Health Center is located in the T-3 Building, Room 118. The center offers a wide range of services, including: primary and acute care and treatment, urgent care, women's health services, required and elective immunizations, and annual, athletic, and job physicals. Basic laboratory services and pharmaceuticals are also available. Health awareness outreach is a key focus. The Student Health Center is supported by the student activity fee and, therefore, most services are free or are offered at a significantly reduced cost. Office hours during the academic year are Monday, Wednesday, Thursday, and Friday from 9 am until 5 pm., and Tuesday from 9am.until 6:30pm. A mid-level practitioner is available at all times. Students with valid IDs may use the services of the center on an appointment basis. Sick walk-in patients are accommodated. For additional information and appointments, call 718-960-8900.

Individual counseling services and group workshops are available to all undergraduate and graduate students. Trained professionals and peer counselors offer confidential assistance with personal obstacles to growth, including difficulties with academic performance, anxiety, time and stress management, depression, family and relationship problems, disordered eating, substance abuse and alcoholism, and other issues of everyday life. Day or evening appointments may be arranged by contacting the Counseling Center at 718-960-8761 or by visiting the Center (Old Gym Building, Room 114).

Located in Room 136 and Shuster Hall, the Office of Financial Aid assists students with all aspects of financing their education, including planning and meeting the expenses associated with attending the College. Information is available on financial assistance programs and on how to maintain eligibility for Federal, State, and City award programs. Financial Aid professionals will work closely with students and their families to put the cost of a Lehman education within reach. The Office also provides students with expanding services through a computer lab,

located in Shuster Hall, Room 131. Students may use the lab to access and complete various online financial aid-related applications. For more detailed information, visit www.lehman.cuny.edu/financialaid.