University of Wisconsin – Green Bay
Master of Science in Nutrition and Integrated Health
(MSNIH) Graduate Program
Student Handbook

Table of Contents

The Accreditation Council for Education in Nutrition and Dietetics (ACEND) is the agency tasked with accrediting education programs that prepare students for careers as registered dietitian nutritionists (RDNs). This agency sets the educational standards that programs, such as our graduate program, must adhere to. A competency-based education (CBE) model was adopted by ACEND to equip future nutrition and dietetics professionals with the knowledge and skills needed to meet the increasingly complex food and nutrition needs of individuals and communities.

In brief, CBE is an approach that emphasizes assessment of a student's ability to demonstrate understanding and application of specific knowledge and skills (competencies and performance indicators). In essence assessing "knowledge in action". Put in other words, as a student progresses through a CBE program, the variety of learning activities in traditional (didactic) courses and supervised practice rotations facilitate the student's acquisition of knowledge and skills and ability to integrate their knowledge and skills, with appropriate professional judgement and behaviors in the application of effective, evidence-based food and nutrition services in the clinical, food systems or community/public health arena.

The following tables of competencies and performance indicators are all mapped throughout our curriculum. At appropriate points within the curriculum - some within didactic courses, some within your SEL practicum rotations - students are assessed for their ability to demonstrate achievement of competency for all of the competencies listed in the table below. Some competencies require demonstration at the knows, shows or does level. A variety of assessment strategies (some examples: exams, case-studies, research article analyses, developing and delivery nutrition education, performing counseling, nutrition care using the NCP in the supervised MNT clinical setting, etc.) are used to summatively assess each student on their ability to demonstrate competence. During your orientation to our program and within your courses and SEL practicum rotations, CBE and the competencies and performance indicators will be discussed in more detail.

Future Education Model Graduate Degree
Competencies and Performance Indicators

Knows,   Shows,   Does

Unit 1: Foundational Knowledge	
Applies foundational sciences to food and nutrition knowledge to meet the needs of individuals, groups, and organizations.	
Competencies	**Example Performance Indicators**
1.1 Applies an understanding of environmental, molecular factors (e.g. genes, proteins, metabolites) and food in the development and management of disease. (S)	1.1.1 Analyzes the usefulness and limitations of epidemiological, clinical and other study designs and identifies trends in diet and disease. (S) 1.1.2 Demonstrates general understanding of nutrition and genetics, as it relates to health conditions. (K) 1.1.3 Communicates epidemiological evidence related to the relationship between diet and the development of disease. (S) 1.1.4 Demonstrates an understanding of research techniques and processes used to study the relationship between molecules (e.g. genes, proteins, metabolites) and microbes with disease states. (K) 1.1.5 Identifies the influence of food consumption on the development of diseases. (K)

1.2 Applies an understanding of anatomy, physiology, and biochemistry. (S)	1.2.1 Analyzes the impact of food and nutrition on physiological processes. (S) 1.2.2 Integrates knowledge of anatomy, physiology, and biochemistry to make decisions related to nutrition care. (S)
1.3 Applies knowledge of microbiology and food safety. (S)	1.3.1 Applies food safety principles of microbiological food spoilage and strategies for controlling microbial growth. (S) 1.3.2 Implements key principles and practices to make foods safe for consumption at all stages during the flow of food. (S)
1.4 Integrates knowledge of chemistry and food science as it pertains to food and nutrition product development and when making modifications to food. (S)	1.4.1 Analyzes the role of fundamental chemistry and organic chemistry principles on food, human health and metabolism. (S) 1.4.2 Integrates nutritional biochemistry knowledge to make informed food and nutrition decisions for optimal health. (S) 1.4.3 Evaluates the chemical nature and composition of food on food quality, acceptability and compatibility. (S)
1.5 Applies knowledge of patho-physiology and nutritional biochemistry to physiology, health and disease. (S)	1.5.1 Examines nutritional biochemical indicators specific to the disease process. (K) 1.5.2 Interprets and analyzes the effect of diet, fluids, electrolytes and nutritional status on the development and progress of the disease process. (S) 1.5.3 Interprets and analyzes the effects of disease, clinical condition and treatment on nutritional health status. (S) 1.5.4 Analyzes the correlation between mental health conditions and nutritional health. (S)
1.6 Applies knowledge of social, psychological and environmental aspects of eating and food. (S)	1.6.1 Formulates food and nutrition services considering psychological and social factors to meet the needs of individuals, communities and populations. (S) 1.6.2 Articulates the impact of nutritional health on psychiatric disorders. (S) 1.6.3 Integrates knowledge of maximizing sustainability, food and water waste, reusable/ biodegradable items, local and global produce sourcing and access to food. (S) 1.6.4 Analyzes the environmental factors affecting access to services and/or adequate nutrition. (S)

Unit 1: Foundational Knowledge (cont.)	
Competencies	**Example Performance Indicators**
1.7 Integrates the principles of cultural	1.7.1 Demonstrates knowledge of the cultural competence models. (K) 1.7.2 Applies knowledge of foods, cultural foods, eating patterns and food trends. (S)

competence within own practice and when directing services. (D)	1.7.3 Identifies challenges that arise when different cultures, values, beliefs and experiences exist between clients/patients and nutrition and dietetics professionals. (S)
	1.7.4 Identifies and implements strategies to address cultural biases and differences.
	1.7.5 Applies culturally sensitive approaches and communication skills. (D)
	1.7.6 Develops awareness of one's own personal beliefs, values and biases to better serve clients/patients of different cultures and backgrounds. (S)
1.8* Applies knowledge of pharmacology to recommend, prescribe and administer medical nutrition therapy. (S)	1.8.1 Identifies the classifications of nutraceutical pharmacological agents and the action of the body. (K)
	1.8.2 Demonstrates understanding of pharmacokinetics, absorption, clearance, drug metabolism, latency period, drug and supplement metabolism, accumulation, half-life, and routes of administration. (S)
	1.8.3 Identifies potential drug and food interactions based on physiological responses to pharmacological agents and takes appropriate actions. (S)
1.9* Applies an understanding of the impact of complementary and integrative nutrition on drugs, disease, health and wellness. (S)	1.9.1 Critically evaluates evidence-based literature to inform decisions about use of complementary and integrative nutrition. (S)
	1.9.2 Applies an understanding of the impact of complementary and integrative nutrition on drugs, food, disease states and wellness. (S)
	1.9.3 Identifies indications, use and contraindications of complimentary and integrative nutrition.n(K)
1.10* Applies knowledge of math and statistics. (S)	1.10.1 Chooses appropriate statistical methods, performs statistical analysis and interprets results in various data analysis situations. (S)
	1.10.2 Communicates information on statistical methods, results and interpretation, both orally and in writing. (S)
	1.10.3 Applies math skills to perform food and nutrition calculations. (S)
1.11 Applies knowledge of medical terminology when communicating with individuals, groups and other health professionals. (D)	1.11.1 Interprets and communicates medical terminology to non-health professional audiences. (D)
	1.11.2 Uses acceptable medical abbreviations and appropriate medical terminology in all forms of communication. (D)
1.12 Demonstrates knowledge of and is able to manage food preparation techniques. (D)	1.12.1 Demonstrates understanding of safe work habits and safety hazards and employs preventive safety measures. (K)
	1.12.2 Converts recipes and ingredients based on client/patient's preferences or dietary needs. (D)
	1.12.3 Develops recipes and menus and increases or decreases quantities served from the recipe. (D)
	1.12.4 Evaluates recipes using sensory evaluation methods. (D)

Unit1: Foundational Knowledge (cont.)	
Competencies	**Example Performance Indicators**
1.13* Demonstrates computer skills and uses nutrition informatics in the decision making process. (D)	1.13.1 Analyzes appropriate data in electronic format to make best decisions related to nutrition and diet. (S) 1.13.2 Evaluates accuracy and reliability when accessing and evaluating nutrition information in electronic format. (S) 1.13.3 Operates nutrition informatics systems in practice. (D) 1.13.4 Uses electronic databases to obtain nutrition information and evaluate credible sources in decision making. (D) 1.13.5 Proficiently uses technology and informatics skills to aggregate data and enhance practice and client/patient care. (D)
1.14 Integrates knowledge of nutrition and physical activity in the provision of nutrition care across the life cycle. (D)	1.14.1 Evaluates, integrates and communicates nutritional requirements across the life cycle. (D) 1.14.2 Identifies nutritional risk factors across the life cycle. (D) 1.14.3 Teaches the benefits of physical activity across the life cycle to individuals, groups and populations. (D) 1.14.4 Explains and takes into consideration how nutrients, nutritional supplements and hydration influence physical activity and wellness. (K)
1.15* Applies knowledge of nutritional health promotion and disease prevention for individuals, groups and populations. (S)	1.15.1 Recognizes and communicates the cause of disease and nutrition risks. (K) 1.15.2 Identifies, prioritizes and implements health risk reduction strategies for individuals, groups and populations. (S) 1.15.3 Examines the influence of the determinants of health on health and wellness. (S) 1.15.4 Designs food and nutrition activities for various audiences considering factors relevant to individuals, groups and communities. (S) 1.15.5 Applies behavior change theories for nutritional health promotion and disease prevention. (S)
1.16* Gains a foundational knowledge on public and global health issues and nutritional needs. (K)	1.16.1 Examines the trends and current issues that impact public and global health from existing, new and reemerging diseases that spread through immigration, travel and global trade. (K) 1.16.2 Examines the impact of global food supply and sustainability and related factors. (K) 1.16.3 Examines how globalizing processes impact nutrition, nutrition education and nutrition related diseases in developing countries. (K)

Unit 2: Client/Patient Services **Applies and integrates client/patient-centered principles and competent nutrition and dietetics practice to ensure positive outcomes.**	
Competencies	**Example Performance Indicators**
2.1* Applies a framework to assess, develop,	2.1.1 Conducts or coordinates an assessment of the environment, competitive landscape and stakeholder opinions to identify and evaluate data needed to make decisions regarding nutritional products, programs and services. (D)

implement and evaluate products, programs and services. (D)	2.1.2 Designs nutritional products, programs or services that promote consumer nutritional health, dimensions of wellness and lifestyle management. (D)
	2.1.3 Creates a work plan or project plan to implement nutritional programs and services or launch products. (D)
	2.1.4 Conducts an evaluation of a product, program or service by analyzing reasons for variance from expected outcomes and implements new strategies as appropriate. (D)
2.2 Selects, develops and/or implements nutritional screening tools for individuals, groups or populations. (D)	2.2.1 Considers all client/patient factors when selecting, developing nutrition screening tools. (D)
	2.2.2 Evaluates the validity and reliability of the nutrition screening tools and modifies based on current evidence-informed practice. (S)
	2.2.3 Leads the implementation of nutrition screening tools in collaboration with other health professionals. (D)
	2.2.4 Prioritize care based on results of screening considering complexity of care needs. (D)
2.3 Utilizes the nutrition care process with individuals, groups or populations in a variety of practice settings. (D)	Nutrition Assessment
	2.3.1 Selects and implements nutrition assessment tools for individuals, groups or populations. (D)
	2.3.2 Interviews client/patient to collect subjective information considering the determinants of health. (D)
	2.3.3 Conducts a nutrition focused physical exam. (D)
	2.3.4 Takes a food and nutrition related medical history. (D)
	2.3.5 Assesses physical activity and history of physical activity. (D)
	2.3.6 Collects, assesses and interprets anthropometric measures and body composition. (D)
	2.3.7 Orders, collects and interprets biochemical tests. (D)
	2.3.8 Analyzes diagnostic test results relevant to nutrition (e g. diagnostic imaging related to fluoroscopy, swallowing evaluation, enteral feeding tube placement). (D)
	2.3.9 Identifies signs and symptoms of nutrient deficiencies or excesses. (D)
	2.3.10 Determines barriers that might influence a client/patient's nutritional status. (D)
	2.3.11 Determines accuracy and currency of nutrition assessment data. (D)
	2.3.12 Identifies patient appropriate validated formula and performs calculations to determine nutritional requirements. (D)
	Diagnosis
	2.3.13 Analyzes and synthesizes nutrition assessment data to inform nutrition diagnosis(es) and nutritional plan of care. (D)
	2.3.14 Devises PES (problem, etiology and sign symptom) statement and outlines reasons for professional opinion cause and contributing factors. (D)
	2.3.15 Prioritizes the nutrition diagnosis(es). (D)

Unit 2: Client/Patient Services (cont.)	
Competencies	**Example Performance Indicators**
2.3 (cont.)	<u>Intervention</u> 2.3.16 Develops an individualized plan of care that addresses nutritional care needs diagnosis and client/patient nutrition goals in collaboration with the client/patient and team members. (D) 2.3.17 Orders nutrition prescriptions to address nutritional goals. (D) 2.3.18 Implements the nutrition plan of care or nutrition intervention with the client/patient and other team members. (D) <u>Monitoring/Evaluation</u> 2.3.19 Monitors and evaluates impact of nutrition intervention on the nutrition diagnosis. (D) 2.3.20 Develops and applies nutrition care outcome indicators to measure nutrition intervention. (D) 2.3.21 Assesses client/patient's compliance with nutrition intervention. (D) 2.3.22 Identifies barriers to meeting client/patient's nutrition goals and makes recommendations to modify the nutrition plan of care or nutrition intervention, and communicates changes to client/patient and others. (D) 2.3.23 Summarizes impact of nutrition interventions on client/patient's nutrition outcomes, considering client/patient-centered care. (D) 2.3.24 Identifies, analyzes and communicates reasons for deviation from expected nutrition outcomes. (D) 2.3.25 Evaluates the availability of services to support access to nutrition care and to help meet client/patient nutrition goals. (D) <u>Documentation</u> 2.3.26 Documents all elements of the nutrition care process following professional standards and organizational policies. (D) 2.3.27 Demonstrates coding and billing procedures to obtain payment for nutrition services under alternate health care payment models. (D)
2.4* Implements or coordinates nutritional interventions for individuals, groups or populations. (D)	<u>Medical Nutrition Therapy</u> 2.4.1 Manages medical nutrition therapy for clients/patients. (D) 2.4.2 Applies and integrates understanding of foundational sciences to manage medical nutrition therapy, diet and disease management. (D) 2.4.3 Applies foundational science knowledge and medical nutrition therapy principles to establish, order, manage and evaluate the need for nutrition support when prescribing and administering nutritional oral, enteral and parenteral diets. (D) 2.4.4 Considers and applies all relevant factors when recommending the use of oral nutritional supplements. (D) 2.4.5 Refers/transfers care to relevant professionals when client/patient needs or required interventions are beyond personal competence or professional scope of practice. (D)

Unit 2: Client/Patient Services (cont.)	
Competencies	**Example Performance Indicators**
2.4 (cont.) *	Education 2.4.6 Applies education theories, adult learning, pedagogy and education principles when developing, modifying, delivering or implementing education materials. (D) 2.4.7 Assesses audience's readiness to learn and identifies barriers to learning. (D) 2.4.8 Develops or modifies nutrition education materials or delivery methods to meet the needs of the audience. (D) 2.4.9 Develops and provides evidence-informed nutritional wellness and therapeutic diet education to variety of audiences. (D) 2.4.10 Translates basic to advanced food and nutrition science knowledge into understandable language tailored to the audience. (D) 2.4.11 Communicates complex nutrition information to broad and diverse audiences. (D) 2.4.12 Evaluates effectiveness of nutrition education and makes modifications as required. (D) Psychological Counseling and Therapies 2.4.13 Assesses client/patient's nutritional needs and appropriateness for the recommended counseling or therapy. (D) 2.4.14 Applies counseling principles and evidence-informed practice when providing individual or group sessions. (D) 2.4.15 Identifies the indications, contraindications, benefits, risks and limitations of the counseling or therapy. (K) 2.4.16 Demonstrates understanding of transference and counter transference in the therapeutic relationship. (K) 2.4.17 Demonstrates awareness of various appropriate counseling techniques. (K) 2.4.18 Evaluates effectiveness of the counseling or therapy and makes modifications as required. (D) 2.4.19 Refers/transfers client/patient to appropriate health professionals when counseling therapy or client/patient's mental health issues are beyond personal competence or professional scope of practice. (D)
2.5* Prescribes, recommends and administers nutrition-related pharmacotherapy. (S)	2.5.1 Applies knowledge of foundational sciences and disease when determining the appropriateness of the therapy. (S) 2.5.2 Demonstrates awareness of food and drug interactions. (S) 2.5.3 Assesses client/patient factors to determine the client/patient's indication for the nutrition-related pharmacotherapy. (S) 2.5.4 Considers client/patient factors, nutritional impact, indications, side effects, contraindications, benefits, risks, alternatives and foundational sciences when prescribing, recommending and administering nutrition related drug therapy. (S)

	2.5.5 Critically analyzes the potential negative effects of the nutrition therapy or supplement and determines the required knowledge, skill and judgment required to manage negative outcomes. (S)
	2.5.6 Prescribes, recommends and administers nutrition-related pharmacotherapy adhering to the professional standards and evidence-informed practice. (S)
	2.5.7 Applies the standard of practice, legislation, organizational policies and evidence-informed practices for prescribing. (S)
	2.5.8 Applies the principles of safe drug administration. (S)
	2.5.9 Monitors the response and the effects of the nutrition related drugs on the individual and takes the required action to make modifications or adjustments. (S)
	2.5.10 Consults and refers/transfers client/patient to the appropriate health professional when client/patient's needs are beyond personal competence or professional scope of practice. (S)

Unit 3: Food Systems Management

Applies food systems principles and management skills to ensure safe and efficient delivery of food and water.

Competencies	Example Performance Indicators
3.1* Directs the production and distribution of quantity and quality food products. (D)	3.1.1 Manages or oversees the planning, designing and coordination of meals to ensure delivery of nutritionally sound meals. (D) 3.1.2 Analyzes the workflow design and makes recommendations for modifications or approves for implementation. (D) 3.1.3 Communicates the organization's mission and how work activities impact the services and organization. (D) 3.1.4 Establishes and analyzes policies and performance measures for quality and quantity of work. (D) 3.1.5 Implements systems to report on local, state and federal compliance. (D) 3.1.6 Directs and analyzes the evaluation of foodservice production and services to inform, change, and/or budget resources and department or corporate direction. (D) 3.1.7 Establishes a culture that is ethical and free of safety and health hazards. (D) 3.1.8 Investigates and optimizes opportunities to reduce the environmental carbon footprint of foodservice operations and to enhance sustainability. (D)
3.2* Oversees the purchasing, receipt and storage of products used in food production and services. (D)	3.2.1 Follows a matrix or measures to evaluate the need for financial, technical and equipment resources for the provision of foodservices. (D) 3.2.2 Applies ethical decision making to determine the need for reduction or increase in resources. (D) 3.2.3 Creates internal or external professional relations and/or agreements to solve problems in foodservice operations. (D) 3.2.4 Acts as a departmental and organizational liaison between contractual parties involved. (S) 3.2.5 Demonstrates knowledge of inventory control as it pertains to the food and supplies of the foodservice operation. (K)

	3.2.6　Applies the principles of the process of receiving and storing products demonstrating adherence to food safety code, nutrition guidelines and regulations. (D)
	3.2.7　Applies the relationship between forecasting and production as it pertains to recipe needs and organizational demand. (D)
3.3 Applies principles of food safety and sanitation to the storage, production and service of food. (D)	3.3.1　Maintains currency in and follows applicable legislation and guidelines. (D)
	3.3.2　Incorporates the required safety and nutritional health policies and procedures in the organization's mission and policies. (D)
	3.3.3　Develops a plan to minimize vulnerabilities in the food supply chain. (D)
	3.3.4　Takes into consideration food allergies when preparing menus and foods. (D)
3.4 Applies and demonstrates an understanding of agricultural practices and processes. (S)	3.4.1　Has a working knowledge of different agricultural food production systems and related terminology and concepts including potential nutritional impact. (K)
	3.4.2　Understands the local and global food markets and applicable nutrition regulations. (S)
	3.4.3　Identifies and supports partnerships with local and global food growers and producers. (S)

Unit 4: Community and Population Health Nutrition	
Applies community and population nutrition health theories when providing support to community or population nutrition programs.	
Competencies	**Example Performance Indicators**
4.1* Utilizes program planning steps to develop, implement, monitor and evaluate community and population programs. (D)	4.1.1　Recognizes how determinants of health, epidemiological findings, health disparities, political interest, availability of resources, and accessibility influence the nutritional health and well-being of a community and population. (D)
	4.1.2　Conducts community and population based assessments considering all relevant factors. (D)
	4.1.3　Identifies the resources and connects with partners needed for sustainability of the program. (D)
	4.1.4　Develops and implements a program considering relevant data addressing the nutrition needs of the community or population. (D)
	4.1.5　Interprets and uses nutrition surveillance and global health and safety data. (D)
	4.1.6　Evaluates the program using measurement indicators and outcomes. (D)
	4.1.7　Communicates evaluation findings, outcomes, recommendations and research findings to promote change and justify program. (D)
4.2 Engages in legislative and regulatory activities that address community, population and global nutrition	4.2.1　Interprets legal terminology used to establish nutrition regulations and policies for populations. (K)
	4.2.2　Navigates governmental, intergovernmental and nongovernmental organizations to promote nutrition legislation and regulations that address public, population and global nutrition health. (D)
	4.2.3　Analyzes political interests and their impact on program development, goals and objectives. (D)

health and nutrition policy. (D)	

Unit 5: Leadership, Business, Management and Organization
Demonstrates leadership, business and management principles to guide practice and achieve operational goals.

Competencies	Example Performance Indicators
5.1* Demonstrates leadership skills to guide practice. (D)	5.1.1 Exhibits self-awareness in terms of personality, learning, leadership style and cultural orientation. (S) 5.1.2 Demonstrates understanding of social cues and team dynamics. (K) 5.1.3 Communicates at the appropriate level and understands emotions and emotional situations. (D) 5.1.4 Develops conversational and interpersonal skills. (D) 5.1.5 Reflects on situations and critically evaluates outcomes and possible alternate courses of action. (D) 5.1.6 Understands the mentoring role and practices mentoring and precepting others. (D)
5.2* Applies principles of organization management. (D)	Planning 5.2.1 Establishes operational plan considering budget, inventory control, labor and regular daily tasks. (D) 5.2.2 Aligns plans with the organizational strategic plan, mission and vision. (D) Organizing 5.2.3 Assigns responsibilities to various team members according to scope of practice and personal competence. (D) 5.2.4 Sets and monitors clear targets for team members, departments and the organization aligned with common objectives and goals. (D) 5.2.5 Demonstrates an understanding of how individuals and groups interact within the organization. (D) 5.2.6 Takes into consideration individual and organizational culture and behaviors when planning and managing. (D) Management 5.2.7 Engages in, manages or leads human resource activities adhering to applicable legislation and regulations. (D) 5.2.8 Integrates change management theories and conflict resolution skills to manage and promote positive change. (S) 5.2.9 Uses persuasive communication skills to influence or produce a desired outcome during negotiations and conflict resolution discussions. (D) 5.2.10 Understands and respects roles and responsibilities of interprofessional team members. (D) Controls 5.2.11 Collects, understands and analyzes financial data to support fiscally responsible decision making. (D)

	5.2.12 Conducts cost effectiveness and cost benefit analyses to identify ways to meet budget priorities. (D)
	5.2.13 Analyzes components of a productivity system including units of service and work hours and makes recommendations. (D)
	5.2.14 Sets controls to analyze the progress and effectiveness of the operational plan and budget. (D)
	5.2.15 Collects and analyzes data to evaluate outcomes and determine if established goals and objectives are met. (D)
	5.2.16 Reevaluates the plan to make modifications to ensure positive outcomes and that goals and objectives are met. (D)

Unit 5: Leadership, Business, Management and Organization (cont.)

Competencies	Example Performance Indicators
5.2 (cont.)	<u>Time Management</u> 5.2.17 Applies principles of time management to monitor and enhance personal productivity and productivity of others. (D) 5.2.18 Prioritizes activities to effectively manage time and workload. (D) <u>Motivation and Recognition</u> 5.2.19 Promotes team involvement and values the skills of each member. (D) 5.2.20 Models behaviors that maximize group participation by consulting, listening and communicating clearly. (D) 5.2.21 Takes innovative approaches to build support and maintain a diverse workforce. (D) 5.2.22 Coaches and advises team leaders on resolving differences or dealing with conflict. (D)
5.3* Applies project management principles to achieve project goals and objectives. (D)	5.3.1 Leads the development and completion of a project plan and budget. (D) 5.3.2 Identifies the project strengths, weaknesses, opportunities and threats. (D) 5.3.3 Identifies and manages potential and real risks to the plan, individuals or organization. (D) 5.3.4 Conducts regular review of project to note strengths and opportunities for improvement and to implement adjusted actions. (D)
5.4 Leads quality and performance improvement activities to measure, evaluate and improve a program's services, products and initiatives. (D)	5.4.1 Identifies and communicates quality and/or performance improvement indicators and benchmarks using evidence-informed practice. (D) 5.4.2 Develops quality and/or performance improvement measurement tools and analyzes data to inform baselines and to identify root causes and potential solutions. (D) 5.4.3 Develops, implements and communicates a quality and/or performance improvement action plan for further improvement and monitors impact. (D) 5.4.4 Develops, implements and communicates an ongoing measuring and monitoring system to ensure ongoing quality and performance improvement. (D) 5.4.5 Applies change management theories and principles to effectively implement change. (D)

5.5	5.5.1	Assesses potential and real risks to an individual, group and or organization. (D)
Develops and leads implementation of risk management strategies and programs. (D)	5.5.2	Identifies and takes action to manage, reduce and or eliminate risk to self, others and the organization. (D)
	5.5.3	Develops risk management plans and protocols. (D)

Unit 6: Critical Thinking, Research and Evidence-Informed Practice

Integrates evidence-informed practice, research principles and critical thinking into practice.

Competencies	Example Performance Indicators
6.1 Incorporates critical thinking skills in practice. (D)	6.1.1 Considers multiple factors when problem solving. (D) 6.1.2 Incorporates the thought process used in critical thinking models. (D) 6.1.3 Engages in reflective practice to promote change and continuous learning. (D)
6.2* Applies scientific methods utilizing ethical research practices when reviewing, evaluating and conducting research. (D)	6.2.1 Identifies, explains and applies the steps of the scientific method and processes. (D) 6.2.2 Articulates a clear research question or problem and formulates a hypothesis. (D) 6.2.3 Identifies and demonstrates appropriate research methods. (D) 6.2.4 Interprets and applies research ethics and responsible conduct in research. (D) 6.2.5 Collects and retrieves data using a variety of methods (qualitative, quantitative) and technologies. (D) 6.2.6 Analyzes research data using appropriate data analysis techniques (qualitative, quantitative, mixed). (D) 6.2.7 Translates and communicates research findings and conclusions through a variety of media. (D)
6.3 Applies current research and evidence-informed practice to services. (D)	6.3.1 Uses research terminology when communicating with other professionals and publishing research. (D) 6.3.2 Critically examines and interprets current research and evidence-informed practice findings to determine the validity, reliability and credibility of information. (D) 6.3.3 Integrates current research and evidence-informed practice findings into delivery of safe and effective nutrition care. (D) 6.3.4 Analyzes and formulates a professional opinion based on the current research and evidence-based findings and experiential learning. (D)

Unit 7: Core Professional Behaviors

Demonstrates professional behaviors and effective communication in all nutrition and dietetics interactions.

Competencies	Example Performance Indicators
7.1 Assumes professional responsibilities to	7.1.1 Demonstrates ethical behaviors in accordance to the professional Code of Ethics. (D) 7.1.2 Engages in self-reflective practice activities to develop and maintain ongoing competence and professional behaviors. (D)

provide safe, ethical and effective nutrition services. (D)	7.1.3 Adheres to nutrition related legislation, regulations and standards of practice. (D)
	7.1.4 Applies client/patient-centered principles to all activities and services. (D)
	7.1.5 Identifies and takes steps to manage unethical, incompetent and unsafe behavior. (S)
	7.1.6 Practices in a manner that respects diversity and avoids prejudicial treatment. (D)
	7.1.7 Adheres to legislative requirements and facility/employer guidelines regarding protection of privacy and security of information. (D)
	7.1.8 Maintains confidentiality and security in the sharing, transmission, storage and management of protected health information. (D)
7.2 Uses effective communication, collaboration and advocacy skills. (D)	7.2.1 Applies effective and ethical communication skills and techniques to achieve desired goals and outcomes. (D)
	7.2.2 Works with and facilitates intraprofessional and interprofessional collaboration and teamwork. (D)
	7.2.3 Participates in advocacy activities to change or promote new legislation and regulation. (D)
	7.2.4 Selects mode of communication appropriate to the messaging to meet the needs of the audience. (D)

University of Wisconsin-Green Bay *MSNIH GP Program* *Policy and Procedures*	Student Performance Monitoring Policy number: 8.1.a

Policy: Student performance monitoring procedures to ensure early detection of academic difficulty, as well as professional and ethical behavior and academic integrity.

Purpose: Monitoring of student performance provides for early detection of academic difficulty or professional and ethical behaviors including academic integrity that need to be addressed to facilitate successful completion of the program, or that require remediation, disciplinary or termination actions.

Procedures:
1. Our program employs gating criteria in the admission process to ensure that students are academically prepared to enter this rigorous and innovative program.
2. It is expected and encouraged that students take ownership of their academic and professional career path in part by monitoring their academic and SEL performance on an ongoing basis and regularly talking with their instructors, preceptors, the program director and clinical care coordinator, especially if they are concerned with their performance or having difficulties.
3. The program director and clinical care coordinator is in day-to-day informal dialogue with nutrition faculty and preceptors as to the academic performance (e.g., course grades, formative and summative assessments, evaluations etc.), and professional and ethical behavior of students and if an area of concern is identified may schedule a meeting with the individual student.
4. One time a year, the program director meets formally with each student individually to discuss their performance and progression by reviewing the student's course grades, instructor input, formative and summative assessments, and preceptor evaluations. If there are areas of improvement identified, the student and program director in consultation with appropriate nutrition faculty and/or preceptor(s) will discuss resources for the student, and additional steps that the student will be required to take.
5. During the professional SEL rotations there are additional components to help monitor student performance:
   - At the beginning of the student's SEL rotation the student will discuss with the preceptor the evaluation and assessment activities and forms that will be completed during the rotation so the student is clear about knowledge and performance expectations. This includes expectations for professional and ethical behavior.
   - Throughout and at the end of the SEL rotation the student and preceptor will discuss the results of their SEL assessments.
   - At the end of the SEL rotation, the student will complete an evaluation of the SEL rotation and preceptor(s).
   - Preceptors will provide day-to-day supervision and feedback to facilitate student progression and achievement of competency.
   - Preceptors will complete summative assessments of the student as applicable to the SEL rotation.
   - Preceptors will formally discuss with the student their formative and summative assessment and evaluation results.
   - Preceptors and/or students will contact the clinical care coordinator and/or program director with any concerns about student performance

University of Wisconsin-Green Bay *MSNIH GP Program* *Policy and Procedures*	Student Remediation and Retention Policy number: 8.1.b

Policy: Remediation and Retention procedures for promptly and adequately addressing concerns when a student's performance in meeting program requirements is concerning.

Purpose: To facilitate student progression in the program, prompt and adequate steps are taken to provide the student with resources and support to assist them in successfully meeting the expectations of the program.

Additional details
Procedures:
1) Through monitoring of student performance (policy 8.1.a) via course grades, formative and summative assessments, instructor and preceptor feedback and evaluations, formal meetings one time per year with the program director, early detection of difficulties that a student is having with meeting criteria for progressing in the program can be identified and appropriate remediation or retention/termination actions taken promptly.

Remediation:
1) The student is expected to take ownership of their education and address their academic concerns with appropriate instructors, preceptors, the clinical care coordinator and/or the program director so that prompt actions to address the concerning performance can be put in place to facilitate progression and success in the program. Likewise, instructors across the curriculum encourage student – instructor dialogue when either person sees concern of academic performance.

2) **Verbal counseling** will be the first step in the progressive remediation action. The instructor, preceptor, program director and/or clinical care coordinator will inform the student of the conduct or performance problem or the student may initiate and initial conversation of their concerning performance. An in-person, telephone or zoom counseling will be conducted from program faculty's private office or on SEL location in a private office. The student and the faculty/instructor will each discuss their perceptions of the poor performance and factors that may be contributing. This discussion should help to determine specific appropriate expectations of improved performance or conduct will be outlined for the student. Student support services, as appropriate for the issue of concern, will be discussed and the student will be encouraged to seek their services.

3) **Written counseling** will be the second step in the progressive remediation process. Specific performance or conduct problem(s) will be documented in a letter and reviewed with the student. The student will be given the original letter and a file copy will be kept in the student's official folder. Additional specified remediation activities and expectations will be detailed and appropriate student support services discussed.

4) **Alternate Career Counseling:** If a student is not demonstrating the academic or professional ability to benefit from and succeed in the program, they are advised and counseled by the program director and/or clinical care coordinator and Career Services on career paths that may better align with the student's strengths.

5) **Probation** is the third step in the progressive remediation process. A student may be placed on probation when there is evidence that she/he has difficulty in complying with the standards of a student in good academic standing, professional behavior or personal conduct, or is unable to complete rotation requirements. Not meeting expectations of student academic performance includes the following: 1) graduate GPA, <3.0 results in academic probation status; 2) graduate GPA <2.0 results in academic suspension status. Please see the graduate catalog on academic standing policies (https://catalog.uwgb.edu/graduate/general-information/academic-rules-

regulations/acad-standing/) for details of academic standing procedures, and policy 8.2.k and 8.2l for further details on retention and remediation procedures and disciplinary/termination procedures.

University of Wisconsin-Green Bay *MSNIH GP Program* *Policy and Procedures*	Supervised Experiential Learning Documentation Policy number: 8.1.c

Policy: Procedures for tracking and documenting individual student's supervised experiential learning (SEL) hours, alternate supervised experiential learning, and hours granted for prior learning.

Purpose: It is required by ACEND that the program must establish procedures for tracking individual student's supervised experiential learning (SEL) hours in professional and alternate settings (e.g., simulation, case studies and role-playing). Hours granted for prior learning, if given, also must be documented.

Procedure for tracking professional setting SEL hours:
1. Students must complete a daily time sheet for each site, each day.
    a. Enter the Date, Start time, End Time, subtract out any breaks and enter total daily hours at a precepted site.
    b. Preceptors verifies accuracy of hours and signs the timesheet.

2. Students must complete a different time sheet for each SEL rotation. Each timesheet must be uploaded to the student learning management system for documentation and program tracking purposes.

Procedure for tracking alternate setting SEL hours:
1. Alternate setting SEL hours are embedded within either didactic courses or the didactic component of the Supervised Experiential Learning Practicum courses. As such, the instructors for these courses have determined the number of SEL hours associated with each alternate setting SEL activity (e.g., simulation, case study etc.). The instructor assesses appropriate participation and assesses achievement of competency with the associated assessment rubric for each student for that SEL activity. If the student has appropriately participated and demonstrated competency, the student is granted the hours for that alternate SEL activity.

Documenting prior assessed learning hours – please see Section 8.2.i

University of Wisconsin-Green Bay *MSNIH GP Program* *Policy and Procedures*	Equitable Treatment Policy number: 8.1.d

Policy: Procedures to ensure program support of the diverse needs of students, including providing an inclusive environment.

Purpose: The program has established policies to support the diverse needs of students, ensure an inclusive environment, and to ensure equitable treatment by program faculty and preceptors of students from all backgrounds, including race, ethnicity, national origin, gender/gender identity, sexual orientation, religion, disability, size, socioeconomic status, and age.

Procedures:

1. **Discriminatory behavior** will be subject to the University of Wisconsin-Green Bay's disciplinary process. Verbal or written abuse, threats, harassment, intimidation or violence against persons or property will not be tolerated.
2. The program adheres to the University's Harassment and Discrimination Policy. All members of the University community, including students enrolled in this program, should report incidents of harassment of discrimination, as outlined in the linked policy.
3. **Reporting incidents:** If a student experiences or witnesses an event or behavior that violates the programs and the University's civility and inclusivity mission, a report can be made in the following ways:
    a. Complete a hate-crime bias report.
    b. Follow procedures indicated in the Harassment and Discrimination Policy.
    c. File a Complaint or Grievance.
    d. Report in person to one of the following:
        - Vice Chancellor for Student Affairs and Campus Climate
        - Assistant Vice Chancellor of Equity, Diversity and Inclusion
        - Title IX Coordinator
        - Director of Human Resources
        - Affirmative Action Officer
        - Public Safety

University of Wisconsin-Green Bay *MSNIH GP Program* *Policy and Procedures*	Insurance Requirements Policy number: 8.2.a

Policy: Procedures to ensure students have required insurance coverage throughout the duration of their program.

Purpose: Ensure students have health, automobile and professional liability insurance at the start of the graduate program that remains valid throughout the program.

Procedure:

1. **Health**: All students will need to have health insurance that includes hospitalization coverage. A copy of Verification of Insurance is required.   Students must have $1,000,000.00 minimum coverage per occurrence and $5,000,000.00 aggregate. Some students may be eligible to remain on their parent's plan, while others may not.
2. **Automobile**: Students will need to have their own automobile and insurance. Transportation **will not** be provided by the university. A copy of your driver's license is required.
3. **Professional liability**: The University provides basic coverage for students while in SEL rotations. Some professional SEL rotations require additional coverage which will be the responsibility of each student.   A copy of professional liability insurance is required of students.

UW-GREEN BAY – MASTER OF SCIENCE IN NUTRITION AND INTEGRATED HEALTH
HEALTH INSURANCE FORM

Name: _____
        Last   First   Middle

Birthdate: _____

Social Security Number: _____

HEALTH INSURANCE VERIFICATION:

    Company Name: _____
    Address: _____
                         _____
    Policy Number: _____

Please attach a copy of your insurance card.

University of Wisconsin-Green Bay *MSNIH GP Program* *Policy and Procedures*	Liability Policy number: 8.2.b

Policy: Liability for safety in travel to or from assigned areas

Purpose: To ensure understanding that liability for driving and safety is the responsibility of the individual student.

Procedure: Liability for safety and travel to and from assigned areas/facilities is the responsibility of the student and is not the responsibility of the university or assigned facility. It is necessary that the student have access to an automobile and be able to drive within 90 minutes or 100 miles for certain rotations.

University of Wisconsin-Green Bay *MSNIH GP Program* *Policy and Procedures*	Injury or Illness Policy number: 8.2.c

Policy: Treatment for injury or illness while in a facility for supervised experiential learning is the responsibility of the student. Furthermore, reporting absences due to injury or illness while in the program is the responsibility of the student.

Purpose: To state expectation that student is to carry personal health insurance for the purpose of liability of illness or injury, and that student will report and make up for absences due to injury or illness during the program.

Procedure: Neither the facility nor the university is responsible for liability or expenses incurred from illness nor injuries while the student is at a supervised experiential learning facility. Therefore, the student is required to carry health and car insurance.

Absenteeism/Illness Policy:
Purpose: Assure all students complete program requirements
Procedure:
1. **Contact**: If an illness or absence occurs, the student is responsible for contacting the course instructor, preceptor and director/coordinator within a minimum of 2 hours prior to start time of course or rotation. A phone call should be made to the preceptor. An email to coordinator/director will be sufficient.
2. **Make-up rotation:**
   a. Make-up of SEL experience of a single day will be at the discretion of the preceptor in consultation with the coordinator/director. All make up and or loss of hours will be noted on your rotations time sheets.
   b. If more than 25% of a single rotation is missed due to illness or other reasons, the student will be expected to make up the entire time of the missed rotation. Dates of make–up will occur during holiday breaks or at the end of the entire graduate program if necessary.
3. **Long-term illness or absence: should be. See also policy 8.2.q**
   a. If a long-term illness or absence arises, the method of completion will be at the discretion of the Clinical Care Coordinator and Program Director in consultation with the graduate office.

UNIVERSITY *of* WISCONSIN
GREEN BAY

Name of Student requesting Leave of Absence: _____

Date submitted: _____

Request start date of leave:

_____

_____

_____

_____

Expected return to program date: _____

Approval date: _____

Signature and date of Student: _____

Signature and date of Clinical Care Coordinator and Program Director:

_____

 Letter of request on file and copy provided to student

Documentation of revised student schedule on file and copy provided to student

University of Wisconsin-Green Bay *MSNIH GP Program* *Policy and Procedures*	Drug Testing and Criminal Background Checks Policy number: 8.2.d

Policy: All students enrolled in SEL rotations will be required to complete drug testing and a criminal background check annually.

Purpose: Drug testing is required by all supervised experiential learning (SEL) sites at this time. Ten panel drug test is mandatory for all students who are assigned to health care facilities for SEL. The drug test must come back negative in all areas.

The State of Wisconsin requires a criminal background check for all students who work in health care facilities. The background check is mandatory for all persons who are employed in the care-giving business and also applies to students who are assigned to healthcare facilities for SELs. The required background check includes a criminal records check and could exclude someone from working in facilities where direct patient/client contact and care is provided if a history of any of crimes or charges for homicides, sexual assault, abuse or arson is found.

Procedures:
1. The student will complete required forms. Forms and fees will be mailed back to the University with the exception of the drug test. The drug test is paid to *Castlebranch* and they will dictate the date and location of the drug test. The University will complete the criminal background check and forward any additional background checks onto the specific facilities. Some facilities will be doing their own background checks in addition to the one completed by the University.

2. If the student's criminal background check is without activity, the student will be allowed to start SEL rotations, as long as all other requirements are met (e.g., health requirements, etc.).

3. If the student's criminal background check has criminal activity as outlined by the policy above, the student must complete the Positive Criminal Background Check Worksheet and Student Release- Criminal History. The student will not be able to start SEL rotations until criminal background information has been accepted by the rotation sites. Additional information is found at the Wisconsin Department of Health and Family Services at https://www.dhs.wisconsin.gov/ . Depending on the criminal background history, the student may be dismissed from the graduate program.

Positive Criminal Background Check Worksheet

Student Name_____ ID #_____

Criminal History Release Form on file:

      ¨ Yes   ¨ No   Date signed:_____

BID properly marked and signed: ¨ Yes   ¨ No If no, student must redo BID form for file.

Supporting document on file (i.e. complaint, police report, judgment, personal statement)

      ¨ Yes   ¨ No   Date received:_____

```
CHARGES




```

Date of Charges:_____

Type of Charges:

_____

_____

_____

Charges located on:

      CCAP ¨ Yes   ¨ No

      DOJ   ¨ Yes   ¨ No

      Other:_____ please explain.

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AGENCY CONTACTS




```

UWGB Screening done on:_____. With the following results:

_____

_____

_____

_____

Further documentation required ¨ Yes   ¨ No

 If yes, please indicate what is needed:

_____

_____

Bans (if any):_____

Agencies outside of UWGB contacted/results:

Student Release- Criminal History

I ,_____(print full name), hereby acknowledge that I have been informed about potential difficulties related to clinical placement, licensure and/or employment in dietetics due to my personal record of conviction. Fully aware of the risks I am assuming as a student in the MSNIH program, I do not hold The University of Wisconsin Green Bay responsible for any subsequent difficulties in obtaining clinical placement, licensure and/or employment.

Signature_____Date_____

Witness_____Date_____

University of Wisconsin-Green Bay *MSNIH GP Program* *Policy and Procedures*	The Educational Purpose of SEL Rotations Policy number: 8.2.e

Policy: Students in supervised experiential learning rotations are not to be utilized as employees.

Purpose: To ensure that UW-Green Bay students are not utilized as employees for the purposes of benefiting the organization or providing staffing during their SEL rotations.

Procedures:

1. It is the policy of the UWGB that students are not used to replace employees.   The potential for this to occur is typically during foodservice rotations. While it is not inappropriate for preceptors to use a hands-on approach to familiarize you with the routine of the foodservice operation by having you shadow or work side-by-side with clerks, line workers, etc., there must be specific knowledge or skills you will develop. You should not be used as free labor. Your preceptor may use the methods that are used in employee orientation. Keep in mind, that foodservice directors may themselves fill in for employees when they are short-staffed.

2. Notify the program director and/or clinical care coordinator if you feel that your experience in the kitchen has gone beyond the attainment of knowledge. One of the reasons we "check in" weekly through FB posts or Discussion boards is that the clinical care coordinator and/or program director will use these to gauge your progress and to assess whether you are being given appropriate assignments. Keep in mind that your preceptor is expected to complete their usual job duties in addition to providing your supervised practice experience. You may be occasionally asked to complete tasks that do not appear to have much educational benefit (like filing) so that your preceptor has the time to work with you individually. This is not inappropriate as long as you are then given assignments, which help you meet the competencies.

3. Students may complete SEL rotations where they have been previously or may be currently employed. It is important to establish expectations up front with your preceptor regarding your position as a student, rather than an employee. Contact the clinical care coordinator and/or program director if any issues arise.

University of Wisconsin-Green Bay *MSNIH GP Program* *Policy and Procedures*	Payment During Graduate Studies Policy number: 8.2.f

Policy: Compensation practices for payment during the program must be defined.

Purpose: To outline available compensation during the graduate program.

Procedures: The UWGB MSNIH GP Program is a part of the UWGB graduate school and offers graduate assistantship and scholarships through the graduate office and university advancement office.

Graduate assistantship details can be found on the UWGB website: https://www.uwgb.edu/graduate/students/assistantships/

The Lacey Scholarship was established in spring 2021 from the generous contribution of Karen Lacey, former director of the UWGB DPD program and emeritus senior lecturer. Please contact University Advancement for eligibility.
https://www.uwgb.edu/foundation/about-us/university-advancement/

No other forms of compensation are provided to students. Compensation from facilities may occur in various forms such as complimentary meals or parking. In rare cases, facilities may offer financial compensation. Any form of compensation may vary from year to year and is never guaranteed. As such, it is not tracked by the clinical care coordinator and is not considered in SEL site placement decisions. The student and the rotation site will work out any specifics. The student is responsible for completing any paperwork required by the SEL rotation site and both the student and the preceptor (employer) agree that the student's main responsibility within that SEL rotation is to complete ACEND objectives and program requirements.

University of Wisconsin-Green Bay *MSNIH GP Program* *Policy and Procedures*	Grievance: Policy number: 8.2.g

Policy: The policy will conform to the **Grievance Procedures** for the University of Wisconsin-Green Bay found at https://www.uwgb.edu/dean-of-students/policies-procedures/students/#complaints-grievances. Students will be afforded all rights guaranteed to citizens by the constitution and laws of the United States as well as policies of the University of Wisconsin-Green Bay and recognized standards of the program and the profession for which they are training.

Complaints of discrimination on the basis of race, color, religion, sex (including sexual harassment), national origin, age, or handicap need to be pursued through a formal discrimination complaint as determined or protected by law.

Problems between a graduate student and the MSNIH Program generally are regarding evaluations of performance and misconduct. Grievances may include, but are not limited to, such matters as dissatisfaction with working conditions, work relationships, SEL rotation requirements, class assignments or evaluations.

The program must maintain a record of student complaints for a period of seven years, including the resolution of complaints.

Purpose: To outline the process for filing and handling complaints about the program from students and preceptors that includes recourse to an administrator other than the program director and prevents retaliation.

Procedures:
Students are encouraged to consult with their preceptors or their program coordinator/director when they feel they are having problems meeting program goals, objectives or assignments, if they feel they are being mistreated or if they feel decisions about their status in the program are unfair. If the student is not able to resolve the problem at this level they may proceed to the following steps.

Step 1: Individual conference between the Program Director and the person with whom the problem exists. Every effort will be made to promptly settle the matter at this informal level.

Step 2: If further action is necessary, the student will communicate in writing or verbally to the Coordinator/ Director stating the problem or situation, reason for dissatisfaction and specific changes requested.

Step 3: The Coordinator/Director will contact the appropriate person(s) to review the facts surrounding the situation and submit a decision within five working days of receiving the request for action in Step 2.

Step 4: If the grievance is not resolved at Step 3, the student may forward a copy of the grievance to the Chair Person for Human Biology or CSET Dean who will then attempt to find a solution to the student's grievance. If the dispute is not resolved informally at this step, a hearing shall be conducted. The hearing panel will be appointed by the Dean.

Step 5: In the event the grievance is not satisfied, the University Hearing Officer will assemble a committee to hear the complaint. Their recommendation shall go to the Chancellor of the University for final action.

The Director will keep all written documentation of complaints, progress of the resolution and final decision for seven years. The record of actions and the decision from the grievance will be secured in accordance with UWGB practices on confidential student records.

University of Wisconsin-Green Bay *MSNIH GP Program* *Policy and Procedures*	Grievance reporting to ACEND: Policy number: 8.2.h

Policy: All students have the right to file a written complaint related to ACEND accreditation standards directly to ACEND. The written complaint must be submitted to ACEND directly only after all other options with the MSNIH program and UW-Green Bay have been exhausted. Any individual (student, faculty, dietetics practitioner and/or member of the public) may submit a complaint against any accredited program to ACEND. More information can be found on the ACEND website.

Purpose: To inform students that our accreditation agency (ACEND) has established a process for reviewing complaints against programs to assure the quality and integrity of the educational programs that it accredits.

Procedures:
      Please see the process outlined on the ACEND Website.

University of Wisconsin-Green Bay *MSNIH GP Program* *Policy and Procedures*	**Prior Assessed Learning Documentation** **Policy number: 8.2.i**

Policy: Admitted students may apply for prior assessed learning (PAL) credit to apply toward supervised experiential learning (SEL) hours.

Purpose: To recognize student work and volunteer experiences that meet ACEND competencies and to consistently analyze and document the hours that might contribute to supervised experiential learning (SEL).

Procedure:
The Prior Assessed Learning (PAL) program is designed to grant varying degrees of SEL hours in specific rotations of the program based on the qualified applicant's learning and demonstration of competency associated with the PAL, as demonstrated through paid work or volunteer experiences. The credit is not for the experience, but is given when an applicant demonstrates associated entry-level competency. Experiences considered for PAL must meet competencies required by Accreditation Council for Education in Nutrition and Dietetics (ACEND).

The Program Director and/or Clinical Care Coordinator has the authority to grant credit towards SEL hours from prior learning and/or work experience for those individuals with extensive learning and professional competency acquired outside the academic setting.

LEARNING CREDITS ALLOWED:
Students **cannot** apply for credit towards SEL hours for any of the medical nutrition therapy rotations. Students can apply for credit towards SEL hours for community, WIC, wellness, hospital food service, and school food service rotations. The UWGB MSNIH program is a full-time program; students are required to complete any required SEL hours as a full-time student. Exceptions may be made if program preceptors are available and willing to accommodate anything less than full time. All students will be required to complete all clinical application exams and all RDN prep exams as indicated by syllabi prior to the completion of the program.

PAL SPECIFICS:
If a student is granted PAL:
- Prior learning is only assessed AFTER students are accepted to the program.

- Applications for prior assessed learning must be submitted by fall of year one, so that the individuals can be scheduled to reflect credit that was given.

COMPETENCIES:
The documented learning must be clearly and directly related to the competency statements required by ACEND for completion of the program. It is the responsibility of the student to obtain these competencies from the Program Director and/or Clinical Care Coordinator for that specific SEL rotation they are requesting credit. This will assist the student in preparation of the portfolio and help to demonstrate and clarify completion of competencies.

PORTFOLIO:
While the Program Director and/or Clinical Care Coordinator can provide guidance and assistance, it is the sole responsibility of each student to provide a portfolio of documentation (examples can include but not limited to: projects/assignments/previous job experiences related to the competency statements from post-college work experience) that will serve as the basis for determination of credit towards SEL hours. The student must also obtain a letter verifying this experience from their immediate employer(s)/supervisor(s). The student must present the portfolio to the Program Director and/or Clinical Care Coordinator by the fall they will enter the MSNIH program.

CREDIT EXPLANATION:
The amount of SEL hours to be credited will be dependent upon the number of rotation hours assigned to the rotation being requested. If determined that the student will receive credit hours for prior experience, the length of the SEL rotation will be shortened accordingly. Submission of a request for PAL credit does not guarantee that such credit will be awarded, in full or in part as requested. **Applicants are encouraged to discuss potential PAL experiences with the Program Director and/or Clinical Care Coordinator prior to preparing and submitting the application materials to ensure greatest success**.

AWARDNING CREDIT:
Credit will only be awarded in the following manner:
- A student's SEL hours for that rotation may be reduced dependent on the number of associated competencies for which the student demonstrates entry-level competency as documented in the portfolio

APPLICATION FOR PAL TO INCLUDE:

1. Experiences submitted for PAL evaluation must be classified as: Community Nutrition, WIC, Wellness, Hospital Food Service Management, and School Foodservice Management.

2. Projects, reports, presentations, and educational materials produced by the applicant which demonstrate advanced knowledge and skills will be evaluated for PAL credit. Job descriptions, performance evaluations, letters from clients, and so on, can be used as supporting documentation of knowledge and skills, as applicable.

3. These supporting materials shall be included in an electronic or hard copy portfolio clearly labeled and dated as to which experience(s) they are applicable. They may be neatly bound in a hard copy portfolio or electronic portfolio, provided to the Program Director and/or Clinical Care Coordinator as a single PDF document.

4. Applications will be evaluated in a timely manner, and applicants informed of credit awarded (if any) prior to the start of the program.

5. Additional documentation / clarification of activities must be provided to the Program Director and/or Clinical Care Coordinator upon request. Failure to do so in a timely manner (48 hours of request) may preclude obtaining PAL credit.

PORTFOLIO FORMAT REQUIRED:

1. **Cover Letter:** This letter is a short introduction to the evaluator outlining the area or areas that are covered in the portfolio. The student should list personal information, such as telephone numbers, e-mail address and regular mailing address in case the evaluator needs to make further contact to verify or clarify information with regard to the portfolio date and signature of student.

2. **Table of Contents:** The table of contents should show the headings of the various subdivisions of the portfolio in order to assist the evaluator in reading the portfolio. Each item listed must have an accurate page number in the bottom center of the page. Be sure that the table of contents lists every item included in the portfolio.

3. **Resume:** This is a brief description of personal information, employment, military and educational background. The resume serves as an introduction to the assessor. The resume must be typed and the maximum length should be no more than two pages.

4. **Narrative of How This Area of Prior Learning Relates to the ACEND Competencies:** The applicant will want the narrative in this area to include: (1.) The subject matter for which you are seeking credit; specify how many hours of credit (2.) The area of the SEL rotations into which prior learning credit will fit. Projects with a narrative describing each experience, what was demonstrated, what was learned and how these apply to the ACEND competencies must be included (see example table below for how to specifically include the competencies into your work). Supporting materials such as samples of projects, newsletters, and materials produced by the applicant that demonstrate the competencies described should be included. Supporting materials may be returned to the applicant if requested, after they have been evaluated. The Director and/or Clinical Care Coordinator may copy materials to keep in

student's file for documentation purposes. Original summary form and narrative(s) will be maintained in the program file for the student.

5. A syllabus (provided by Program Director and/or Clinical Care Coorsinator) will highlight necessary competencies to address in your portfolio.

6. An evaluation must be completed by the previous work / volunteer supervisor in the form of a letter and/or performance evaluation. This can be an evaluation provided from the program or a letter from the supervisor describing the student's performance to be satisfactory.

NARRATIVE EXAMPLE:

TYPE OF WORK EXPERIENCE: WIC & Community

DATES: 5/21/2023-5/25/2024 – 20 hours per week – TOTAL HOURS 1000

POSITION: WIC Nutritionist

LOCATION: ABC County WIC

REPORTING TO: Jane Doe, Program Director

PHONE: (250)359-2259

EMAIL: jdoe@wic.org

SUMMARY: From 5/21/23 to 5/25/24 I was employed as a WIC nutritionist in the ABC County WIC office. I worked 20 hours per week for 50 weeks. As can be seen in the attached job description (1), the duties of this position included; providing education and certification to WIC clients obtaining diet histories from and providing nutrition counseling to participants at ABC WIC. I participated in WIC draft pick up. I observed high risk follow up appointments by RDN. I conducted breastfeeding classes with assistance by RDN bi-monthly, wrote articles for a community newspaper read by a diverse population quarterly; prepared hand-outs for a multi-cultural client population on eating healthy for holidays and packing healthy snacks. I participated in healthy weight collation meetings monthly.

PROJECTS WITH NARRATIVE: These activities are documented by the following Supporting Materials:

1. Examples of newspaper articles written by me during this program (4) Handouts for multi-cultural client on eating healthy for holidays and packing healthy snacks;
2. 2 client summaries (1 child, 1 breastfeeding mom) with **names blacked out and no personal information can be included that would violate HIPPA**
3. Work schedule for 2-week period
4. Evaluation by supervisor with supported narrative of experiences
5. Schedule and outline of breastfeeding classes
6. Healthy weight coalition meeting notes noted with my name as attended

WRITTEN SUMMARY: Written summary of experience and learning to include:

1. What was the most important thing learned during experience at WIC and why?
2. What was the most important/challenging thing learned and why?
3. What did you learn about yourself during this time?
4. Other observation summaries to include:
    a. research a current bill or legislative issue
    b. who and how you referred clients to community resources
    c. identify aspects of culture that impact on community nutrition services
    d. budget and data control
    e. identify WIC funding and current legislative issues

SEL HOURS REQUEST: 192 SEL hours for community PAL credit.

ACEND COMPETENCIES: (example of one competency listed, but all competencies requested must be listed)

ACEND competencies	Date, location, hours spent	Describe work/life or professional/continuing education experiences (Excluding college coursework used to complete degree and/or DPD verification.) "What I did"	Describe what was learned. Describe How professional growth was achieved. "What I learned from this experience." Or "How I grew professionally from this Experience…"
C1.13.1 Analyzes appropriate data in electronic format to make best decisions related to nutrition and diet. 1.14.1 Evaluates, integrates and communicates nutritional requirements across the life cycle. 2.3.2 Interviews client/patient to collect subjective information considering the determinants of health.	50 weeks 5/09-5/10 ABC WIC Average 6 clients per day (180 hours)	Completed approximately 300 client summaries, certifications	I learned how to certify clients for WIC referral. I was able to refer to outside agencies such as food share and food pantries. I learned how to interview clients, identify problems and set goals and monitor progress of goals.

University of Wisconsin-Green Bay MSNIH GP Program Policy and Procedures	Student Learning Evaluations Policy number: 8.2.j

Evaluation Policy

Purpose:
To describe the evaluation process of the students in order to provide information for professional development and program improvement. The purpose of this process is to help the students know where their knowledge, skills and demonstration of competency are at and continually develop so they can successfully demonstrate competency to complete the program and be eligible to take the RDN Examination.

Policy:
1. Student should be proactive in seeking feedback from their instructors and/or preceptors on a daily/weekly basis.
2. Instructors and preceptors provide daily/weekly ongoing feedback to facilitate the student's learning process and progression.
3. Instructors and preceptors also provide the student with formative and summative assessment results (e.g., exam grades, performance on all assignment and projects). When there is concern about the level of performance, the student should seek out instructor/preceptor for guidance on strategies for improvement.
4. At the beginning of this Student Handbook is the full listing of Competencies and associated performance indicators (PIs). Throughout the curriculum summative assessments are conducted at appropriate points in the curriculum such that every competency is summatively assessed. Successful demonstration of competency is defined as a score of 3 or higher on the summative assessment rubrics.
5. One time a year each student meets individually with the program director to review the student's progression toward competency. Course grades, individual assignment/project performance results, summative assessments, instructor and/or preceptor feedback and evaluations are all reviewed with the student during these meetings to help guide the student in successful progression through the program.
6. If additional work, assignments, SEL hours are required to facilitate the student's achievement of competency these will be discussed with the student and relevant instructor/preceptor to schedule this.
7. Specific to the professional SEL rotations additional processes help to ensure the student is knowledgeable about expectations for successful completion of the SEL rotations and in this way help to ensure the student achieves competency. Students are required to obtain a 3 or higher rating on the preceptor evaluation of student at each SEL rotation. If a 2 or below is received corrective action and remediation is required in collaboration with the preceptor, Clinical Care Coordinator and/or Director. Please see Student Retention and Remediation Policy number: 8.2.k for more details. These additional processes are as follows:

   - Students are responsible for arranging for the completion of the evaluation process in the appropriate rotations by:
   - Discussing which evaluation forms are to be completed by the preceptor at the beginning of the SEL rotation
   - Discussing the results of the evaluation process with the preceptor
   - Incorporating the results of previous evaluations into the ongoing development plan
   - Completing the on-line evaluation form of the rotation and submitting it via the link to the program

   - Preceptors are responsible for:

   - Ongoing informal feedback throughout the SEL rotation

- Discussing the results of the formal evaluation process with the intern
- Providing specific suggestions for areas of improvement
- Completing the on-line evaluation form/s of the intern and submitting via the link to the program

Definitions:
Feedback - information for development, including positive feedback and feedback for improvement
Competency - application of necessary characteristics, knowledge and skills to produce an excellent output
Knowledge - a learned body of information that is necessary to produce an excellent output
Skill - what an individual must be able to do to produce an excellent output
Characteristics - unique qualities essential to provide superior service

SEL EVALUATION FORMS:
1. To be completed by preceptors – evaluation of student:
   a. Medical Nutrition Therapy (MNT) - Outpatient/Diabetes, Inpatient/Hospital/Dialysis and Long Term Care.
   b. Food Service Hospital/University and School
   c. Community Nutrition and WIC
   d. Education (Group and/or Individual)

2. To be completed by students – evaluation of preceptors:
   a. Evaluation of Rotation and Preceptor

B. PAPER COPIES/ELECTRONIC COPIES
   2. Student's Professional Development (Share with Preceptor)
   3. Portfolio Evaluation (Director/Staff to complete)
   4. Exit Interview (meet w/ Director/Staff)

Procedure:
1. Student's Professional Development is to be completed by the student prior to each practice area (MNT, Foodservice and Community Nutrition) and discussed with the preceptors. This discussion is to assist the preceptors with meeting individual needs of the students.
2. During the SEL rotation, the preceptor will provide timely informal feedback. Being specific with both positive and corrective feedback is most helpful to the student.
3. Evaluation of student (MNT, Foodservice and Community): This is completed by the preceptors and discussed with the student on or before the last day of the rotation.

   EVALUATION TYPES AND PURPOSE:
   a) **Nutrition Education Evaluation**
      This evaluation will be completed by the preceptor and /Director/UWGB Staff when observing the student conduct either a group presentation or individual education to a client or family. This can be used in all SEL rotations where education is conducted.

   b) **Evaluation of SEL Rotation and Preceptor**
      Each student will complete this form at the end of each SEL rotation. This form will be submitted directly to the program for discussion and review. Results will be shared with the facilities and preceptors on a regular basis. Students are encouraged to provide timely feedback while in the rotation to the preceptors as appropriate. Each rotation preceptor will also complete an evaluation on the student.

   c) **Exit Interview with Program Director/Clinical Care Coordinator**
      At the completion of the program director and student will meet to discuss.

4. Electronic copies of evaluation forms will be retained by the program. Tabulations and summary of all evaluations

will be completed and provided to the facilities and students.

University of Wisconsin-Green Bay *MSNIH GP Program* *Policy and Procedures*	**Student Retention and Remediation** **Policy number: 8.2.k**

Policy: Retention and remediation procedures when student performance does not meet criteria for progressing in the program. Also see policy 8.1.b

Purpose: Ensure that students will complete the program in the expected time period and will be provided the resources and support to successfully meet the expectations of the program, or counseled about career paths that are appropriate to their ability.

Procedures:
Through monitoring of student performance (policy 8.1.a) via course grades, formative and summative assessments, instructor and preceptor feedback and evaluations, formal meetings one time per year with the program director, early detection of difficulties that a student is having with meeting criteria for progressing in the program can be identified and appropriate remediation or retention/termination actions taken promptly.

Remediation:
The student is expected to take ownership of their education and address their academic concerns with appropriate instructors, preceptors, the clinical care coordinator and/or the program director so that prompt actions to address the concerning performance can be put in place to facilitate progression and success in the program. Likewise, instructors across the curriculum encourage student – instructor dialogue when either person sees concern of academic performance.

1) **Verbal counseling** will be the first step in the progressive remediation action. The instructor, preceptor, program director and/or clinical care coordinator will inform the student of the conduct or performance problem or the student may initiate and initial conversation of their concerning performance. An in-person, telephone or zoom counseling will be conducted from program faculty's private office or on SEL location in a private office. The student and the faculty/instructor will each discuss their perceptions of the poor performance and factors that may be contributing. This discussion should help to determine specific appropriate expectations of improved performance or conduct will be outlined for the student. Student support services, as appropriate for the issue of concern, will be discussed and the student will be encouraged to seek their services.

2) **Written counseling** will be the second step in the progressive remediation process. Specific performance or conduct problem(s) will be documented in a letter and reviewed with the student. The student will be given the original letter and a file copy will be kept in the student's official folder. Additional specified remediation activities and expectations will be detailed and appropriate student support services discussed.

3) **Alternate Career Counseling** -If a student is not demonstrating the academic or professional ability to benefit from and succeed in the program, they are advised and counseled by the program director and/or clinical care coordinator and Career Services, on career paths that may better align with the student's strengths.

4) **Probation** is the third step in the progressive remediation process. A student may be placed on probation when there is evidence that she/he has difficulty in complying with the standards of a student in good academic standing, professional behavior or personal conduct, or is unable to complete rotation requirements. Not meeting expectations of student academic performance includes the following: 1) graduate GPA, ≤3.0 results in academic probation status; 2) graduate GPA <2.0 results in academic suspension status. Please see the graduate catalog on academic standing policies (https://catalog.uwgb.edu/graduate/general-information/academic-rules-regulations/acad-standing/) for details of academic standing procedures, and policy 8.2l for further details on

disciplinary/termination procedures.

5) Probation status is not less than one semester. During this semester the student will receive guidance and counseling from the program director and/or clinical care coordinator and other appropriate support persons and services to aid her/him in successfully improving performance or behavior to move back to good academic standing.

6) If the student receives an unsatisfactory rating for any reason during the probationary period, fails to comply with standards of professional behavior or personal conduct, or if after a completed probationary period GPA is still below 3.0, the student again fails to meet performance standards and competencies, then the student may then have academic suspension status and be dismissed from the program. (refer to policy 8.2l – disciplinary/termination procedures).

7) At the end of the probationary period, the program director in consult with faculty and the graduate office will determine if the student moves to good academic standing (if graduate GPA >3.0) or if the student moves to academic suspension status and dismissal from the program. The graduate office will send a letter to the student indicating that they have either been removed from probation or have been dismissed from the program. Reasons for the decision will be detailed in the letter. The program director and if needed, the clinical care coordinator will be available by phone or in person to discuss the contents of the letter and any additional counseling on alternate careers.

Policy: Disciplinary/Termination procedures for academic integrity and student misconduct.

Purpose: Academic integrity is a priority for everyone at UW Green Bay. Faculty, students and staff are encouraged to deal with offenders to ensure the grades and degrees awarded to students are respected both on and off campus. Enrollment in the MSNIH program makes the student subject to all university polices.

This policy is a supplement to UWS Chapter 14 (Student Academic Disciplinary Procedures and UWS Chapter 17 (Student Non-Academic Disciplinary Procedures) will also conform to related **campus policies and** procedures for the University of Wisconsin Green Bay. For specific rules please see: UWS 17: https://www.uwgb.edu/UWGBCMS/media/Dean-of-Students/files/UWS-17-2021.pdf and UWS 14: https://www.uwgb.edu/UWGBCMS/media/Dean-of-Students/files/uws-14.pdf.

Disciplinary action will be progressive and be accomplished in a reasonable and constructive manner to encourage improvement in behavior and performance. Discipline or dismissal from the MSNIH program can include but is not limited to: plagiarism, cheating, criminal/illegal activity, unprofessional behavior (noted by facilities as immediate termination) and HIPPA violations.

DISCIPLINARY PROCEDURE: (details: UWS 14.06)
1. Conference will be held with the student and any other campus officials.
2. Determination by the instructor/officials that either:
   a. No academic misconduct occurred.
   b. Academic misconduct occurred.
3. Process following determination by the instructor/officials that disciplinary probation or dismissal may be warranted.
   a. Probation may include: an extension of the MSNIH program, additional program fee's applied to cover additional instruction time, and or additional assignments or rotations to ensure completion of all the necessary program competencies. Details on the program probation (that may extend the SEL rotation schedule) will be provided to the student in a formalized letter that will be both emailed and mailed.

DISMISSAL PROCEDURE:
6) Dismissal is the final step in the progressive disciplinary action. A student may be dismissed from the program when he/she has been unable to satisfactorily complete program requirements in a three-year period, has had one significant incidence of unethical behavior or misconduct, more than one incidence of noncompliance with professional standards of ethics or behavioral misconduct, or is unable to satisfactorily complete rotation requirements after the probationary period.

7) A committee that will include but not limited to Program Director, Chair of the Department of Human Biology and Representative from the Student Services Office and any other campus officials as required will assist in making the final decision for dismissal.

8) The Graduate Office will notify the student in a letter and email that they have been dismissed. A copy of the letter of dismissal will be placed in the student's file.

9) The student may request an appeal of the dismissal as defined in either UWS 14.08 for academic misconduct, or through UWS 17.12 for non-academic misconduct within ten calendar days of receiving the letter of dismissal.

10) If the student feels that the policy has not been followed, they may also submit a signed complaint to ACEND in writing; however, the ACEND board does not intervene on behalf of individuals in matters of admission or dismissal of students. It acts only upon a signed allegation that the program may not be in compliance with the accreditation standards or policies.

11) Should a student be dismissed, all Withdrawal and Refund Policies will apply.

University of Wisconsin-Green Bay *MSNIH GP Program* *Policy and Procedures*	**Program Completion Requirements** **Policy number: 8.2.m**

Policy: Program Completion Requirements

Purpose: To ensure that students understand all the steps required to successfully complete program requirements.

Procedure:

Steps toward the Degree:

1) Prospective student applies to the Master of Science in Nutrition and Integrated Health program by completing all application requirements.
2) Applicant meets all admission requirements and is admitted to the Nutrition and Integrated Health graduate program.
3) Student successfully completes all the required didactic coursework and supervised experiential learning practicums. Successful completion requires: 1) earning a C grade or higher in all coursework; 2) maintaining an overall graduate GPA for 3.0 or higher; 3) completing all SEL practicum hours; 4) obtaining a 3 or higher on all SEL practicum preceptor evaluations of student; 5) successfully demonstrating competency (scoring 3 or higher on summative assessments) for all competencies; and 6) completing the Capstone project.
4) Student develops a capstone project or thesis which is defined in consultation with program faculty and adviser.
5) The student files an *Application for Graduation* with the Registrar's Office through the Student Information System (SIS). The application must be completed and submitted to the Office of the Registrar in the fall semester for spring and summer semester graduates.
6) Upon successful completion of the Capstone project or thesis and all other required coursework requirements, the Master of Science degree is awarded and graduate receives the MS diploma.
7) Upon successful completion of all the supervised experiential learning practicums, and the minimum 1000 hours of professional site SEL hours, and demonstration of entry-level competence for all ACEND competencies, a GP verification statement is awarded.
8) Awarding of the MS degree and FG verification statement allows the graduate to sit for the Commission on Dietetic Registration examination to obtain the Registered Dietitian Nutritionist (RDN) credential.

University of Wisconsin-Green Bay *MSNIH GP Program* *Policy and Procedures*	**Verification to take the RDN Exam** **Policy number: 8.2.n**

Policy: Verification to take the registration examination

Purpose: To ensure that students understand the minimum criteria for obtaining a FG verification statement by the UW-Green Bay MSNIH program for eligibility to take the Registration Examination for Dietitians.

Procedure:

1) Beginning in January 1, 2024, students must have a master's degree and FG verification statement from an accredited program to be eligible to take the Registration Examination for Dietitians to obtain the RDN credential.
2) As described in policy 8.2m students earn a master's degree upon successful completion of steps 1 through 6 in policy 8.2m.
3) Upon successful completion of all the supervised experiential learning practicums, including a minimum 1000 hours of professional site SELs and demonstration of entry-level competence for all ACEND competencies, a verification statement is awarded.
4) Awarding of the MS degree and GP verification statement allows the graduate to sit for the Commission on Dietetic Registration examination to obtain the Registered Dietitian Nutritionist (RDN) credential.

University of Wisconsin-Green Bay *MSNIH GP Program* *Policy and Procedures*	**Distance Learning** **Policy number: 8.2.o**

Purpose: To provide transparent information related virtual learning opportunities in the UWGB MSNIH program.

Procedure: The UWGB MSNIH offer some of its didactic courses in a virtual on-line setting. Some of the didactic courses can be taken in an online virtual format that will be embedded in the course Canvas site. There are resources and instructional technology support staff for students that are found at this link: Canvas resources for students. The student is expected to maintain a weekly pace of watching (synchronously or asynchronously) the weekly lectures, and completing all assignments by their due date that are posted in the canvas course site. Office hours and additional appointments with the instructor are held virtually through Zoom sessions.   Per UW-Green Bay fee policy, a $25.00 per credit Distance Education Fee will apply to distance education credits in addition to tuition.

The instructor can work with online students to arrange a suitable day and time for the exam. If needed, a teacher or facility (e.g., a nearby college) may proctor the exam and verify student identity, provided the student presents a photo ID. This arrangement must be coordinated with the course instructor prior to the scheduled exam.

University of Wisconsin-Green Bay *MSNIH GP Program* *Policy and Procedures*	**Withdrawal and/or Refund:** **Policy number: 8.2.p**

Withdrawal and/or Refund Policy:

Purpose: Ensure all students understand refund policy in the event of withdrawal from the program for any reason.

Procedure:
The MSNIH program follows the graduate school tuition refund policy: https://www.uwgb.edu/student-billing/refunds/

University of Wisconsin-Green Bay *MSNIH GP Program* *Policy and Procedures*	Scheduling and Program Calendar Policy number: 8.2.q

Procedure:

The UWGB MSNIH program follows the UWGB academic calendar for classroom instruction. This information is available on the UWGB website: https://www.uwgb.edu/registrar/calendars/

The UWGB MSNIH program abides by the guidelines set by the university regarding short-term and long-term leaves of absences. Specific guidelines can be obtained below:

https://www.uwgb.edu/dean-of-students/assistance-advocacy/temporary-impairments/

https://www.uwgb.edu/dean-of-students/assistance-advocacy/extended-absences/;

Specific scheduling for the SEL rotations:

1. Orientation will begin in Fall semester of year 1 of the MSNIH program. Professional SEL rotations are generally scheduled weekly Tuesday, Wednesday and Thursday during the academic year and Monday through Thursday during the summer. There may also be some scheduled activities on occasional weekends and evenings with advanced notice. The student will receive a detailed SEL rotation schedule during the Fall semester year 1 for the next semester's (Spring) SEL rotations and prior to the start of each subsequent summer/semester. The SEL rotation schedule is subject to change at the discretion of the Clinical Care Coordinator/Director to accommodate changes in preceptor availability, guest speakers, or facility needs.

2. Please refer to policy 8.2.c for the Leave of Absence form.

University of Wisconsin-Green Bay *MSNIH GP Program* *Policy and Procedures*	**Protection of Privacy Policy** **Policy number: 8.2.r**

Purpose: The policy will ensure the privacy of all students in the program

Procedures:

1. Release of information forms will be completed by all students. Release of Information forms state: I, the undersigned, hereby authorize the Program Director or Clinical Care Coordinator to provide information about my performance, health and educational records to a third party. This information would be used as a requirement for placement in rotations, recommendation/reference as part of employment seeking or continuing education.

2. Consent to Copy Form will be completed by all students. Consent to copy form states: I, the undersigned, hereby authorize the Program Director or Clinical Care Coordinator to copy any or all of the following pieces of information: MSNIH Application form, Application letter, SEL care plans, SEL projects, abstracts, and WIC Client Profiles, portfolios. These copies would be limited to use within the MSNIH Program to provide reasonable examples and thus assist in advising other interns or for reaccreditation purposes.

3. These forms will be kept in the student's permanent file.

UW-Green Bay (UWGB) Master of Science in Nutrition and Integrated Health Program
Release of Information & Consent to copy Form

I, the undersigned, hereby authorize the Director/UWGB Staff to provide information about my performance, health and educational records to a third party. This information would be used as a requirement for placement in rotations, recommendation/reference as part of employment seeking or continuing education.

Name_____

Date_____

Consent to copy form states: I, the undersigned, hereby authorize the Program Director or Clinical Care Coordinator to copy any or all of the following pieces of information: MSNIH Application form, Application letter, DI care plans, SEL projects, abstracts, and WIC Client Profiles, portfolios. These copies would be limited to use within the MSNIH Program to provide reasonable examples and thus assist in advising other students or for reaccreditation/self-study purposes.

Name_____

Date_____

University of Wisconsin-Green Bay *MSNIH GP Program* *Policy and Procedures*	**Access to Personal Files** **Policy number: 8.2.s**

Purpose: Assure students understand their rights regarding their personal files.

Procedure:

Students have the right to inspect their admission records on request before and/or after graduation under provisions of the Federal Educational Rights and Privacy Act, as amended in December 1974. Students may request to see all other records on file by appointment during normal working hours. The program director or staff will provide the record to the student upon written request. Students are required to examine their records within the director's office. If a student wants to contest the accuracy or completeness of information, they may do so. A written request for corrective action or rebuttal should be submitted to the program director within five working days of examination of records. Records kept on file by the program director in the department will include:

1. Complete application materials for admission.
2. Letters of recommendation (accessible to student only if rights or confidentiality has not been waived).
3. Current address, telephone number, and person to be notified in case of emergency.
4. Record of projects/portfolios completed. Portfolios are found electronically on the University's web-based learning environment.

All evaluations are kept on electronic file. No one will have access to records without permission from program director. All records stored in program offices and capable of being locked.

University of Wisconsin-Green Bay *MSNIH GP Program* *Policy and Procedures*	**Access to Student Support Service** **Policy number: 8.2.t**

Policy: Provide and connect students to the services within the UWGB campus community.

Purpose: Ensure the students understand that as a UWGB student, they have access to all student services within the University.

Procedure: Students have access to a range of services to support their academic, professional and personal growth and well-being.

1. Student support services for academic and professional growth, including Academic Advising, The Learning Center, Accessibility Services, UW-Green Bay Library resources and Career Services .

2. Student support services for personal growth and well-being, including Wellness, Counseling and Health Services, The Phoenix Cares program, and the Multi-Ethnic Student Affairs Office.

3. Student support services for students experiencing concerns, crisis, discrimination or threats to their personal safety or in need of childcare, food or housing resources have access to The Phoenix Cares program and The Dean of Students Office.

4. Student support services for financial aid – the Financial Aid Office.

5. **Human Biology Office Supplies:** Many times, you will be working in the community teaching lessons and educating clients. UWGB Human Biology department has some office supplies that can be utilized. It is expected that the usage is only for benefiting the program and community. Please ask the Director or Clinical Care Coordinator for any of these administrative supply needs.

University of Wisconsin-Green Bay *MSNIH GP Program* *Policy and Procedures*	**Selection and Evaluation of Supervised Experiential Learning Sites** **Policy number: 8.2u**

Policy: Selection and Evaluation of Supervised Practice Sites

Purpose: Selection criteria, evaluation process and timeline for evaluation of adequacy and appropriateness of supervised experiential learning sites, including distance sites, sites selected by students and international sites.

Procedure:
1) Site recruitment will be undertaken through a variety of approaches including referrals from advisory committee members, program faculty and staff, networking at state and local Academy of Nutrition and Dietetics meetings, current preceptors, students and program graduates. The clinical care coordinator and/or program director will contact potential sites through site visits, phone calls and/or emails to discuss competencies and the capacity of sites to meet the program requirements to ensure that students will receive the types of experiences and supervision to facilitate achievement of relevant competencies. In some cases this may involve an on-site visit to the facility early on.
2) The program staff will meet with the primary preceptor to more review the types of SEL experiences that can occur at the facility and review with the preceptor the corresponding competencies and associated performance indicators that would be assessed and met through these experiences.
3) Program staff and the preceptor will review scheduling procedures, length of a SEL rotation, any scheduling constraints the facility may have to then mutually come to an initial agreement in partnering with our program
4) Once it is determined that the site is capable of meeting the necessary requirements for precepting students, the clinical care coordinator works with the UW-Green Bay Contracts Officer to begin the process of establishing a formal Affiliate Agreement delineating rights and responsibilities of both parties. Affiliation agreements are reviewed and signed by the appropriate University and site personnel. These agreements are in place before students are on site with both parties maintaining a copy of the signed affiliation agreement
5) On a mutually agreed upon cycle, the affiliation agreement is renewed, often on a yearly basis between UW-Green Bay and the site.
6) UWGB does not require Affiliate Agreements when SEL rotations are held at sites considered within the University of Wisconsin System. If agreed upon by the both partners, a Memorandum of Understanding will be established to delineate the rights and responsibilities of both the sponsoring organization and affiliating institution, organization and/or agency.
7) Preceptors and affiliation sites are evaluated by students via their end of SEL rotation evaluations at each site, and informal on-going communication with and periodic site-visits by the Clinical Care Coordinator and/or program director.