

## 2024 Graduate Degree Requirement: Challenges, Impact, and Practical Issues for Programs

NDEP Roundtable Discussions at FNCE

October 22, 2018

### Pre-FNCE Questions/Comments/Issues

- If all must have a graduate degree to pursue the credential, how is the integrity of undergraduate programs maintained in a way to ensure a minimum standard of competence if a graduate degree not related to dietetics is earned?
- Will all graduate program be generalist or will specialization be allowed? If specialization is allowed, how is representation of dietetics ensured across multiple areas of practice (for example, food service management)?
- How are programs addressing the challenges related to the graduate degree. Specifically - our program has been an undergrad program for decades which has allowed the dietetics faculty to handle selection independently. In the upcoming years the graduate faculty and graduate school will have a greater input in our selection criteria. Are other programs facing this same kind of change and how is that going? (One concern I have is that students with strong experience but not great grades will not get a chance with us - and I know that some of the students that fit that description in the past are now excellent RDs.)
- We have a graduate program in nutrition that includes a dietetic internship. We only accept applicants with a DPD verification statement from an accredited undergrad institution. Currently our MS curriculum is not accredited by ACEND, just our internship component (we completed our 10 yr site visit in May). I just took over as the Program Director and have questions about the impact of the upcoming 2024 MS degree level program transition on our program.
- Future of ISPPs—will they continue after 2024; how to transition an ISPP into a dietetic internship or coordinated program; what if someone needs the flexibility of an ISPP (but can't be eligible without unsuccessfully applying for a DI first); that sort of thing.

### On-Site Table Questions/Issues/Concerns

1. I'm concerned about ability to retain DI program fees if I move to incorporating MS with DI. We use program fees to support our community preceptors and our contract with our partnering clinical site.
2. Are any BS DPD programs considering changing to Graduate degree or Combined Masters/DI?
  - a. If so:  
What are anticipated benefits/concerns/issues with that change?
  - b. If not:  
How are you explaining this to current/potential students?
3. Think about providing verification statement to individuals completing PhD - when would they receive statement?

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4. Do we change DPD programs to graduate degrees or combined MS/DI?
5. Will ACEND be tracking when DPD close?
6. What pre-requisites are necessary for future graduate programs?
7. Make a single system to collect data from program unit.
8. Are programs with existing DPDs who plan to create coordinate graduate programs going to accept their DPD grads or will the curriculums be too similar?
9. There is a significant number of MS or MPH programs being created to meet the 2024 requirement. Our program **must** make money. We are recruiting both future RDs and non-RDs to survive. Is ACEND worried about the surge in students with a MS degree who need a stand-alone DI?
10. If we have an intern graduating from our internship program who doesn't have a master's, do we need to withhold a verification statement until they complete a master's degree?
11. Which courses belong at undergraduate level for pre-reqs and which belong at graduate level?
12. Compensation issues = HUGE
13. Shortening traditional 4 year degree plus 22-24 month graduate degree = ~ 6 years
14. Moving to a 4 + 1 similar to pharmacy

### Discussion Notes

1. Regarding how to incorporate DI's fees into masters program: fear of increased costs with added costs of graduate degree
2. Concerns regarding what to tell/do with DPD students: need marketing information for students
3. It would be helpful if ACEND figured out what should be pre-requisites for MS-DI or FEM programs.
4. Need standardization of competency assessment tools across programs.
5. Challenge: need to elevate directors to PhD/doctorate level to run programs
6. Verification statement: CDR does not determine either prior to coming to internship or concurrently

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7. For applicant signed up for an online degree: internship would have to verify, but cannot submit them until they have finished online graduate degree.
8. Complexity: what if internship applicant has an MS degree? How many routes?
9. Program has to decide – most have said applicant must have MS prior to internship.
10. What about salary after 6 years?
  - Per CDR: Chicken vs. egg: at entry level MS do make more money
  - Per CNM (clinical nutrition manager): HR has entry level degree for compensation therefor salary is lower
  - Medicare reimbursement is less because of BS degree
11. FEM: fall, spring, summer, fall timeframe; better financial aid for a degree vs. internship only
12. WI: 4 + 1 will only get a MS degree and apply to stand alone internship
13. Internship provides academic credit
14. MS online – Rutgers: interns can transfer 6 credits to professional master degree; elevate to level of other professional schools
15. DPD vs. what courses to have?
  - What do they need in masters program?
16. What do they need for RD exam?
17. At Rutgers: has management courses but not teaching experimental foods, food science
18. What is knowledge vs. competency?
19. ACEND is competency-based in FEM standards
20. CDR: Those that had MS at entry level had better research skill and more autonomy
21. What about NDTR at BS degree level: is this a land grant issue?
  - Difference of DPD prepared vs. associate degree: is this a reason it is not promoted at BS degree?
22. Non-regulated practice grads: can work at WIC, retail

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23. MPH program or online MS in clinical nutrition is revenue generating – want to open to future of MS in nutrition
  - a. This will need a stand alone internship
24. There are large numbers of MS grads who need a DI
  - Will continue to be a need for distance programs
  - Why can't there be an arm of masters with DI?
25. Health and wellness masters
  - a. Characteristics/view of profession = “dietetics light” = a travesty
  - b. ? positions in USDA and school lunch
  - c. Question of whether to make it an RD only as a masters
26. PhD in nutrition: limited without RD; policy; grant-funded; research
  - a. Fellowship in Foundation
  - b. Exam specific to research in education?
  - c. RD with research in education - limits their practice
27. What about teaching at higher level such as MNT with more pharmacy?
28. Management in terms of leadership?
29. Issues with earning masters from a distance program with faculty at a distance
30. General problem with “masters in anything” – won't necessarily be an MPH or MBA
31. What's wrong with a BS degree with DPD prior to internship model?
32. What about 2<sup>nd</sup> career student assessment of DPD