



Board Meeting Agenda

December 15, 2023 | 9:00 a.m. – 2:00 p.m.

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Item	Time	Topic	Action	Presenter	Materials
1	9:00 – 9:05 (5 mins)	Call to Order and Land Acknowledgement	-	A. Watt	
2	9:05	Approval of Agenda	Decision (motion)	A. Watt	2.1 Draft Board Meeting Agenda - December 14 & 15, 2023
3	9:05	Declaration of Conflict of Interest and Bias	-	A. Watt	
4	9:05	Consent Agenda 4.1 Draft Board meeting minutes – September 29, 2023 4.2 Executive Committee Report – November 2023	Decision (motion)	A. Watt	4.1 Draft Board meeting minutes – September 29, 2023 4.2 Executive Committee Report – November 2023
5	9:05 – 9:15 (10 mins)	Board Meeting Evaluation Results – September 29, 2023	Discussion	A. Watt	5.1 Briefing Note – Board Meeting Evaluation Feedback – September 29, 2023
6	9:15 – 9:35 (20 mins)	Management Report	Information	M. Woodbeck	6.1 Management Report – December 14 & 15, 2023 6.2 Statement of Operations as at September 30, 2023 6.3 Capital Asset Purchase Report as at September 30, 2023
7	9:35 – 9:50 (15 mins)	Regulatory Trends Report	Information	M. Woodbeck	
8	9:50 – 10:00 (10 mins)	Risk Monitoring Report (Q3)	Information	M. Woodbeck	8.1 Briefing Note – Risk Monitoring Report (Q3)
9	10:00 – 10:25 (25 mins)	Accreditation Recognition Deadline	Decision (motion)	M. Woodbeck	9.1 Briefing Note – Extension of Accreditation Recognition Date
	10:25 – 10:45 (20 mins)		Break		
10	10:45 – 11:05 (20 mins)	Recognition of US Accredited Programs	Decision (motion)	D. Cohen	10.1 Briefing Note – Consultation Results on the Recognition of



					US ACEND Accredited Programs
11	11:05 – 11:30 (25 mins)	Proposed Revisions to the Position Statement: Registration Requirements for Interjurisdictional Practice for External Registered Dietitians	Decision (motion)	D. Cohen	11.1 Briefing Note – Revised Position Statement on Interjurisdictional Registration Requirements
12	11:30 – 12:00 (30 mins)	Peer and Practice Assessment Updates	Information	C. Chatalalsingh D. Candiotta	12.1 Briefing Note – Update on the Peer and Practice Assessment Revisions
	12:00 – 1:00 (60 mins)		Lunch		
13	1:00 – 1:30 (30 mins)	Draft Revisions to the Code of Ethics	Decision (motion)	C. Chatalalsingh	13.1 Briefing Note – Draft Revisions to the Code of Ethics
14	1:30 – 1:40 (10 mins)	Updates to the Executive Committee Terms of Reference	Decision (motion)	M. Woodbeck	14.1 Briefing Note – Draft Executive Committee Terms of Reference
15	1:40 – 2:00 (20 mins)	Registrant Demographics Presentation	Information	D. Cohen	
16	2:00	Adjournment	Decision (motion)		

[0.0 Reference - Land Acknowledgement](#)

[0.0 Board Action List as of November 24, 2023](#)

[0.0 CDO Acronyms](#)

[0.0 Reference - 2020-2025 Strategic Plan - One Pager](#)

[0.0 Reference Doc CDO Board Voting Practices](#)

[Board and Committee Members Completed Annual Acknowledgment Forms](#)

[Board and Committee Members Completed Conflict of Interest Forms](#)



Board Meeting Minutes September 29, 2023

Board Members Present

Ann Watt RD – Chair
Denis Tsang RD
Brenda Murphy, Public Member
Dawn van Engelen RD
Donna Hennyey RD
Julie Slack RD
Ray D'Sa, Public Member
Santhikumar Chandrasekharan, Public Member
Sharanjit Padda, Public Member
Teresa Taillefer RD

Regrets

Navita Viveky RD
John Regan, Public Member

Staff

Melanie Woodbeck - Registrar & Executive Director
Lisa Dalicandro – Director of Governance &
Regulatory Policy
Jada Pierre-Malcolm – Executive Assistant

Guests

Dale Tinkham – Tinkham LLP, Chartered Accountants
Greg Kroeplin - Tinkham LLP, Chartered Accountants
Shannon Eklund - College of Dietitians of Alberta
Mélanie Journoud – College of Dietitians of British
Columbia

1. Call to Order

A. Watt opened the meeting with a Land Acknowledgement.

The meeting was called to order at 9:04 a.m. by A. Watt Chair of the Board.

2. Approval of the Agenda

MOTION to approve the agenda as circulated.

Moved by: J. Slack

Seconded by: D. Tsang

Carried

3. Declaration of Conflict of Interest and Bias

No conflict of interest or bias was declared.



Consent Agenda

4. Board Meeting Minutes

June 15, 2023

June 16, 2023

Executive Committee Report

MOTION to approve the Consent Agenda.

Moved by: D. Tsang

Seconded by: S. Padda

Carried

5. District 7 Vacancy

The Board considered two options for managing the vacancy resulting from the resignation of the district 7 director – leaving the seat vacant for the remainder of the term or running a byelection to fill the seat.

The Board agreed to leave the seat vacant to align with the direction of the Board's future governance state.

MOTION that the district 7 seat remain vacant for the duration of the term.

Moved by: S. Chandrasekharan

Seconded by: T. Taillefer

Carried

Public interest rationale: Managing vacancies ensures that the Board has the capacity to fulfill its governance duties, maintain effective oversight of the organization's operations and achieve its regulatory mandate.

6. Executive Committee Election

The resignation of the district 7 director resulted in a vacancy on the Executive Committee, which must be filled by an election.

Board directors were given two options for declaring their intention of running for the vacant third member on the Executive Committee – notifying the Board in writing ahead to be included in the meeting package or declaring their intention to run at the meeting.



D. Hennyey submitted a statement of interest to be nominated for the position of third member. She was nominated D. Tsang and T. Taillefer and accepted the nomination.

D. Hennyey was acclaimed as third member of the Executive Committee.

Public interest rationale: Managing vacancies ensures that the Board has the capacity to fulfill its governance duties, maintain effective oversight of the organization's operations and achieve its regulatory mandate.

7. Committee Compositions

The resignation of the district 7 director resulted in vacancies on the Executive, Audit, Registrar Performance and Compensation Review, and Professional Practice Committees. The vacancy on the Executive Committee was filled by acclamation, the outcome of which determined the composition of the Audit and Registrar Performance and Compensation Review Committees.

To satisfy the composition requirements, the Board appointed D. Hennyey to the Audit and Registrar Performance and Compensation Review Committees.

The Board agreed with the recommendation from the Executive Committee to appoint Teresa Taillefer to the Professional Practice Committee to fill the vacancy.

MOTION that the Board approve the proposed compositions for the Audit and Registrar Performance and Compensation Review Committees and the appointment of Teresa Taillefer to the Professional Practice Committee for the 2023 – 2024 term.

Moved by: D. Tsang

Seconded by: S. Chandrasekharan

Carried

Public interest rationale: When Committees are fully constituted with the requisite number of public and professional members, they can effectively perform their duties in accordance with their terms of reference and carry out the College's mandate of public protection.

8. Board Meeting Evaluation Results – June 16, 2023

The Board reviewed the results of the June 16, 2023, meeting evaluation and the Executive Committee's feedback on the challenges that arose during the meeting. Themes identified in the evaluation feedback included: video quality offered by the hybrid meeting format; adherence to meeting norms, speaking order and discussion topics, and meeting preparation and participation. The Executive Committee also noted a low completion rate for the evaluation and reminded the Board of its responsibility to fully participate in CDO governance.

Action items:



- To identify solutions to improve the inclusivity of hybrid meetings.

Public interest rationale: Good governance is the foundation for effective regulation and public trust. Best practices in regulation support the ongoing assessment of Board meetings with a focus on interactions, behaviours, and decisions, to evaluate the Board's effectiveness at achieving its mandate. This transparent and reflective performance review demonstrates the Board's commitment to continuous improvement and good governance.

9. Management Report

M. Woodbeck presented the Management Report and highlighted the following:

- Strategic Projects
 - 79% of planned strategic projects on track
 - Relational communications implementation in progress
 - Data governance project underway, which will support work for process documentation
 - Policy cycle incorporating equity impact assessment
- Finance, HR, EDI-B & Operations
 - Q1 surplus of \$1,657
 - Cyber security initiatives and training implemented
 - First Hub 601 collaborative EDI-B training on the use of gender pronouns
 - College of Audiologists and Speech Language Pathologists joining Hub 601 in January 2023
- Communications
 - EDI-B Report complete
 - Public awareness campaign running October and November
 - Website planning underway
- Professional Practice + QA
 - 2023 JKAT had a 100% success rate
 - Competency Assessment transitioned to accessible virtual format
 - Annual Workshops: virtual care, social media & EDI-B planned this fall
 - Revised Code of Ethics to integrate EDI-B principles and AI in progress
- Registration
 - Emergency Class Sealed by Ministry of Health by August 31, 2023.
 - Annual renewal launched with a deadline of October 31
 - 2020 ICDEP integration complete
- Governance + Regulatory News
 - BC amalgamation in progress by June 2024
 - Alliance transitions resulting in additional responsibilities for CDO

The Board accepted the report for information.

Action Items:

- To include Board education around the amalgamation of the College of Dietitians of British Columbia (CDBC) amalgamation with other allied health BC regulators at a future board meeting.



Public interest rationale: The Board has a fiduciary duty to CDO, which includes providing assurance that the College's operations facilitate its public protection mandate.

10. Audit of the Register Report

L. Dalicandro presented the updated policy for auditing the public register and results of the 2023 Audit of the Register. The results of the audit were positive and indicate that the public register data is accurate and reliable.

The Board accepted the report for information.

Public interest rationale: The public relies on the public register to make informed healthcare decisions. Auditing the public register verifies that registrant information is accurate and provides assurance to the public that they can trust the information provided by CDO.

11. Strategic Plan Monitoring Report

M. Woodbeck presented the College's mid-year progress on the strategic plan for fiscal 2023 – 2024. As part of this, M. Woodbeck reviewed the strategic projects and activities planned for 2023 – 2024, including the key performance indicators.

The Board accepted the report for information.

Public interest rationale: The Strategic Plan Monitoring Report enables the Board to monitor the CDO's performance on work aimed at advancing its strategic priorities and public protection mandate. Reporting on the strategic plan on a regular basis holds the College accountable to system partners by providing a clear picture of the College's priorities, goals and operationalization of the Board's direction. The College Performance Measurement Framework (CPMF), which measures how well regulatory Colleges are protecting the public interest, also requires the CDO to identify activities that support its strategic plan.

12. Risk Monitoring Report (Q2)

M. Woodbeck presented the Risk Monitoring Report (Q2) to the Board. No risk and/or mitigation plans were reassessed and no risks were downgraded.

Areas where new risks were identified:

- Examination Integrity

Public interest rationale: In the public's interest, an essential aspect of College's governance and management is to ensure that organizational and risks to the public are identified, assessed and managed efficiently and effectively.

The Board accepted the report for information.



13. Audited Financial Statement Presentation

Auditors D. Tinkham and G. Kroepflin, Tinkham LLP, presented the audited financial statements for the year ended March 31, 2023. The results of the audit concluded that the financial statements fairly present the financial position of the College as at March 31, 2023. No misstatements or unadjusted items were found and there were no recommendations to improve the internal control processes.

At the request of the audit committee members, D. Tinkham shared a recommendation made in a meeting between he and the Audit Committee members: 1) that the investment policy be reviewed and risks to the investment portfolio be evaluated, and 2) whether the College should continue to invest in common and preferred shares or whether fixed income investments would better align with the College's risk appetite. D. Tinkham noted that making these changes to the portfolio in the current market may be challenging and carry its own risks.

MOTION to approve the draft audited financial statements for the year ended March 31, 2023 as presented.

Moved by: D. Tsang

Seconded by: S. Chandrasekharan

Carried

14. Appointment of Auditor

The Audit Committee recommended the reappointment of Tinkham LLP as auditors for the 2023-2024 fiscal year.

The Board discussed the current investment strategy and whether the College needs to reassess its risk tolerance. As this discussion was not included on the agenda, the Board directed that College's investment strategy and risk tolerance be revisited at an upcoming meeting.

MOTION to reappoint Tinkham LLP as the auditors for the fiscal year ending March 31, 2024.

Moved by: D. Hennyey

Seconded by: R. D'Sa

Carried

Action items:

- The Board will revisit investment strategy options and Board risk tolerance.

Public interest rationale: The annual review and approval of an External Auditor serves the public interest by ensuring that the Board provides appropriate governance and oversight on financial matters. The proper review of the College's financial operations will ensure its long-term sustainability and effectiveness at fulfilling its regulatory mandate.



15. Panel on Indigenous Reconciliation with Alberta & British Columbia Dietetic Regulators

In recognition of the National Day for Truth and Reconciliation, M. Journoud, College of Dietitians of British Columbia (CDBC) and S. Eklund, College of Dietitians of Alberta (CDA), shared the efforts undertaken by CDBC and CDA to advance Indigenous reconciliation through a panel discussion moderated by M. Woodbeck.

The Board engaged in the discussion and asked the speakers about the use of “person led care” terminology, food insecurity in Indigenous communities, and Indigenous food offered in hospitals.

Public interest rationale: Supporting Truth and Reconciliation in regulation and the wider healthcare system is one of the ways colleges can address the systemic inequalities and barriers that exist for many individuals.

16. EDI-B Report and Benchmarking

A. Chang provided a status update on the College’s Equity, Diversity, Inclusion and Belonging (EDI-B) activities from 2020 to present. The update included a status report of EDI-B efforts, EDI-B benchmarking and the Health Profession Regulators of Ontario’s equity impact assessment tool.

The Board expressed support for the EDI-B activities accomplished by CDO. There were discussions about CDO’s role in educating dietitians on EDI-B, how EDI-B principles can be incorporated into dietetic workplaces, and expectations for dietitians to advocate for EDI-B principles within their scope of practice and professional standards.

The Board accepted the report for information.

Action items:

- The EDI-B report will be published and shared with system partners.

Public interest rationale: The Equity, Diversity, Inclusion and Belonging (EDI-B) Status report enables the Board to effectively monitor CDO’s performance on informed EDI-B action aimed at minimizing systemic barriers and helping build a more inclusive and equitable health system. Reporting on the progress of CDO’s EDI-B work holds the organization accountable to its commitment to become safer, more equitable and inclusive, thereby supporting the interest of the diverse public it serves.

17. Adjournment

MOTION to adjourn at 2:09 p.m.

Moved by: J. Slack
Carried



EXECUTIVE COMMITTEE REPORT
[December 2023]

Committee Members: Ann Watt RD (Chair), Denis Tsang RD, Donna Hennyey, Santhikumar Chandrasekharan

Supporting Staff: Melanie Woodbeck (Registrar & ED), Jada Pierre, Lisa Dalicandro

Executive Committee met on the following date(s)	Rationale for the Meeting
November 13th	Routine Meeting

Summary of Discussions and Decisions	Decision to be Ratified by Board?
Reviewed the Meeting Evaluation Survey	Will be reviewed at Dec 2023 meeting
Approved the Board agenda for the December Board Meeting	Yes
Approved the Executive Committee Terms of Reference	Yes
Received verbal registrar’s report regarding: meeting with public appointments secretariat, board meeting logistics, Alliance activities and an accreditation onboarding update.	For information only, will be included in board monitoring reports

Respectfully Submitted,
Ann Watt, RD
Board Chair



Board Briefing Note

Topic:	Board Meeting Evaluation, September 29, 2023 Meeting
Purpose:	For discussion
Strategic Plan Relevance:	Governance Modernization and Enhancing Public Trust
From:	Executive Committee

ISSUE

To review the September 29, 2023 Board meeting evaluations and identify any areas for additional learning or development.

PUBLIC INTEREST RATIONALE

Good governance is the foundation for effective regulation and public trust. Board directors are responsible for fully participating in CDO governance. Engaging in performance assessments in a transparent and reflective way that leads to continuous improvement, contributes to public confidence in the Board's decision making and governance framework.

BACKGROUND

At its November meeting, the Executive Committee reviewed the Board's feedback from the September 29 meeting evaluation.

The completion rate for the evaluation was 80%.

CONSIDERATIONS

The Executive Committee identified one comment which indicated that board decisions are made in the interest of the profession under the pretext of the public. The Committee noted that the purpose of the evaluations is to improve the board's effectiveness through focused action, and that the lack of detail contained in the comment makes it difficult to address.

The board has a duty to ensure that its activities and decisions are in the interests of the public first and foremost. As the meeting evaluations are anonymous, the Committee requests that this issue be discussed by the board and/or the individual approaches the chair.

[December 14 & 15, 2023 Meeting]

Changes to the board evaluation are in progress

The Governance Committee is developing a new evaluation framework for board approval, which will proactively address concerns with Board and committee performance by emphasizing ongoing reflection and continuous improvement.

Additional activities already in progress or completed based on the feedback from previous meeting evaluations include:

- Training Session: Regulating in the Public Interest by Deanna Williams, June 2023
- Training Session: Meeting Facilitation and Governance by Facilitation First, June 2023
- Ongoing facilitation coaching for the Board Chair
- Improving the production quality of meetings to provide a better experience for Board directors participating virtually.

RECOMMENDATION

The Board is being asked to consider the feedback from the September 2023 meeting, the Executive Committee's request for further discussion and to determine any actions or areas for additional learning or development.



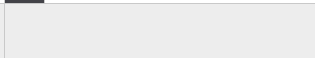

Appendix 1: Board Meeting Evaluation Feedback-September 29, 2023

Board Meeting Evaluation Feedback – September 29, 2023

12 Board Members 2 Absent 10 Attended 8 Completed - 80%

1) All Directors had an opportunity to express their opinions.

Respondents: 8

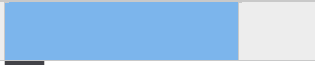

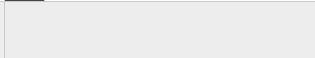

Choice	Percentage	Count	
All of the time	87.50%	7	
Most of the Time	12.50%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
Total	100%	8	

Please add a comment if you selected Most of the Time, Some of the Time or None of the Time.

1 n/a

2) All Directors were prepared and actively participated in the decision-making process.

Respondents: 8

Choice	Percentage	Count	
All of the Time	75.00%	6	
Most of the Time	12.50%	1	
Some of the Time	0.00%	0	
None of the Time	12.50%	1	
Total	100%	8	

Additional Comments:

1 Not all participants appeared engaged

2 Difficult to guess/tell if all the directors were prepared or not prepared.

3) The meeting climate was respectful and exemplified a culture of equity, diversity, inclusion, and belonging.

Respondents: 8

Choice	Percentage	Count	
All of the Time	100.00%	8	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
Total	100%	8	

Additional Comments:

4) Discussions were constructive and focused.

Respondents: 8

Choice	Percentage	Count	
All of the Time	87.50%	7	
Most of the Time	12.50%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
Total	100%	8	

Additional Comments:

1 no comments

5) Time was efficiently managed during the meeting.

Respondents: 8

Choice	Percentage	Count	
All of the Time	87.50%	7	

Most of the Time	12.50%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
Total	100%	8	

Additional Comments:

- 1 I do not have a recording of the meeting to provide specific.

6) Decisions made were summarized after each agenda item.

Respondents: 8

Choice	Percentage	Count	
All of the Time	100.00%	8	
Most of the Time	0.00%	0	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
Total	100%	8	

Additional Comments:

7) All decisions were made in the public interest.

Respondents: 8



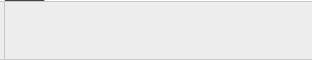

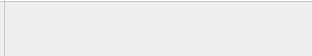
Choice	Percentage	Count	
All of the Time	87.50%	7	
Most of the Time	12.50%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
Total	100%	8	

Additional Comments:

1 The decisions are made in the interest of the Profession under the pretext of the public.

8) The Board considered all perspectives and made decisions on consensus.

Respondents: 8


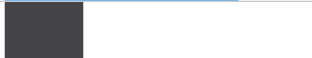
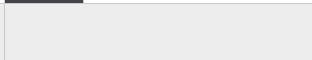

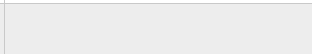
Choice	Percentage	Count	
All of the Time	87.50%	7	
Most of the Time	12.50%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
Total	100%	8	

Additional Comments:

1 no comments

9) The Board had all the information it needed to make the best decision possible.

Respondents: 8

Choice	Percentage	Count	
All of the Time	75.00%	6	
Most of the Time	25.00%	2	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
Total	100%	8	

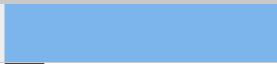

Additional Comments:

1 One area that required a little more conversation to clarify was around the role of the Audit Committee.

2 the board is dependent on the information provided by the Management.

10) The Board’s focus remained on strategy, oversight, governance, and a risk-based approach to regulation.

Respondents: 8

Choice	Percentage	Count	
All of the Time	87.50%	7	
Most of the Time	12.50%	1	
Some of the Time	0.00%	0	
None of the Time	0.00%	0	
Total	100%	8	

Additional Comments:

- 1 The members have been raising concerns about the investment strategy of the college finances.

11) Additional comments or feedback:

Respondents: 2

11) Additional comments or feedback:

- 1 -Great meeting! Great Chair! -I need more education on right touch regulation -Please consider using acronyms less and/or give a cheat sheet
- 2 No Comments

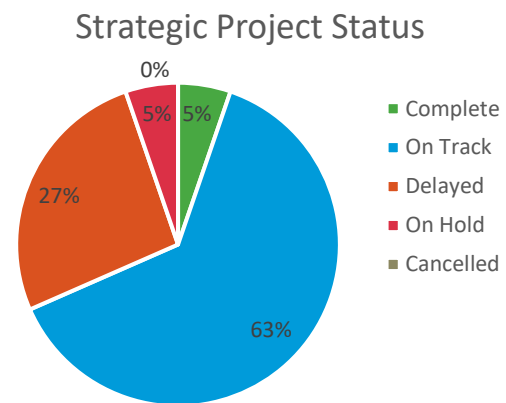
Management Report

SEPTEMBER 16 – NOVEMBER 14, 2023

Strategic Projects

Highlights

- The online application planning project is on hold until next fiscal. In the coming year, the College will complete an analysis to determine the future direction of the database as we consider the various cloud-based tools available and suitable for the College's workflows.
- Work on the governance evaluation framework is delayed by approximately three months. The Governance Committee has reviewed initial plans for the framework, but work has not yet begun due to consultant scheduling. It is expected that work will begin mid-January for potential consideration by the Board in March.
- The documentation of internal and operating procedures/processes project is underway but delayed because of competing priorities and projects. This project addresses the College's data governance strategic project and risks around succession planning and operational documentation, as identified in the risk management report to the Board. Department capability maps have been created, which provides a framework supporting the documentation work. Further, phase 1 of the data governance project will produce a set of policy recommendations to support CDO's data management processes.
- A branding and design firm specializing in public sector and regulatory branding, has been retained to lead a refresh of CDO's brand identity as part of the website transition. A key deliverable of the project is a branding guide that will form part of the College's internal communications style guide.
- The adoption of an EIA framework is in progress but delayed as the College considers how to adapt HPRO's EIA tool within existing processes and frameworks. Equity impact assessments are a consistent and key part of the existing policy development process, however, a formal tool has not yet been adopted.
- The remapping the PBA to the 2020 ICDEP has been paused in order to review options for restructuring the delivery of the PBA to build in efficiencies.



Updates and Upcoming Work

- The election screening process will be reviewed by the Governance Committee on December 19 in time for the launch of the elections cycle in January 2024. This cycle will

be the first for the “all Ontario” district. In addition, as planned for 2024, the College will remove one of the professional director seats.

- The 2024 – 2025 strategic workplan will presented at the March board meeting to support the annual budgeting process. In preparing for the new fiscal year, existing KPIs and associated targets will be reevaluated and updated, and projects will be determined based on strategic goals, organizational needs, and operational capacity. Fiscal 2024-25 is the final year of the Board’s current strategic plan.

<i>Status</i>	<i>Project</i>	<i>Goal</i>
<i>Complete</i>	Update Process for Liability Insurance Compliance	3
<i>On Track</i>	Data Governance Review	1
<i>On Track</i>	Develop a Plan for Collecting EDI Demographic Data	1
<i>On Track</i>	Website Project (Transition Website to a New Platform)	2
<i>On Track</i>	French Translation Initiative	2
<i>On Track</i>	Annual Workshops	2
<i>On Track</i>	Operationalize Virtual Care Standards & Guidelines	2
<i>On Track</i>	Operationalize Social Media Standards & Guidelines	2
<i>On Track</i>	Registration Updates to Reflect ICDEPs 3.0	3
<i>On Track</i>	Advertising & Testimonials Guidelines Planning	3
<i>On Track</i>	Revised Code of Ethics Planning	3
<i>On Track</i>	Update & Pilot PPA	3
<i>On Track</i>	Election Screening Process	4
<i>Delayed</i>	Remap PBA to 2020 ICDEPs	3
<i>Delayed</i>	Governance Evaluation Process	4
<i>Delayed</i>	Implementation: Relational Communications Style Guide	2
<i>Delayed</i>	Document Internal & Operational Procedure/Processes	3
<i>Delayed</i>	Adopt EIA Framework	3
<i>On Hold</i>	Plan & Storyboard Online Application Process	1

Corporate Services

HUMAN RESOURCES, EDI-B, INFORMATION TECHNOLOGY & FINANCE

Highlights

- Mary Gong returned from parental leave and resumed her role as the Professional Practice Program Administrator.
- In November, CDO received a tax exemption refund of \$76,171.41 under the *Employer Health Tax Act* for its 2018 – 2021 claims, following a request to the minister. Further exemptions will be requested on an annual basis to determine whether CDO continues to meet the criteria.

- As part of the College’s continuous analysis and mitigation of IT and cyber security risk, the password policy guidelines updated to include additional standards HUB601 has incorporated a land acknowledgment into its signage outside the office doors. The signage accompanies name plates for all the College collaborating in the HUB. Various indigenous artworks were commissioned for the space and videos about the [artists](#), [art and reconciliation](#) and [symbolism](#) were created to showcase the art.

Updates and Upcoming Work

- Staff successfully completed the first series of cybersecurity awareness training. New training modules are added monthly.
- Work is underway to adopt and operationalize HPRO’s Equity Impact Assessment (EIA) Tool. The EDI-B Working Group continues to meet and discuss options for adapting the tool.
- CDO’s first [EDI-B Status Report](#) will be distributed to system partners on November 23 and published on the College’s website.

EDI-B Training Completed by Staff

CDO employees completed various types of EDI-B training and workshops based on their roles and own self-identified learning goals.

<i>Training</i>	<i>Participation %</i>
<i>Indigenous Reconciliation with CDA & CDBC Dietetic Regulators</i>	100%
<i>Bias and Noise</i>	86%
<i>CNAR Conference: Various EDI-B workshops</i>	46%
<i>Antisemitism in Healthcare</i>	20%
<i>Reconciliation with Indigenous Peoples through Nutrition Research</i>	7%
<i>Misconception of Transgender People</i>	7%
<i>Understanding the Neuroscience of Belonging</i>	7%
<i>Understanding Microaggressions</i>	7%

Finance Updates

- Portfolio market value on October 31 was \$3,700,740.
 - 51% fixed income (GICs)
 - 43% bonds (preferred shares)
 - 6% equities (common shares)
- Earned \$127,122 of income as of October 31, consisting of:
 - Dividend income of \$98,629
 - Interest income of \$28,492
- Statement of Operations (period ended June 30) shows:
 - Surplus of \$15,731
 - Operating profit of \$248,474

- Unrealized losses from investments of \$241,509 due to market volatility and high interest rates.
 - Significant improvement in unrealized losses since September 30, 2022.
- Membership fees are in line with budget and 5% ahead of the actual period last year (September 30, 2022).
- Interest and dividend income are 34% above budget and a material amount of 177% above last year.
- Total operating expenses are 15% below budget and 9% below last year.
 - General administration expenses are 11% below budget. Approximately 50% of the variance is due to salaries and another 20% due to the timing of the communications website project.
 - Program expenses are lower than Q2 budget due to timing and virtual meetings being held. The actuals for 2023 are in line with this time last year (September 2022).

Statement of Operations attached.

Audit Committee

- The Audit Committee will meet on November 27 to review the overall objective of the College's investment policy, ensuring that funds are invested effectively, maximizing returns, and meeting day-to-day cash flow requirements. The investment advisor will present a snapshot of the College's portfolio and investment approach.

Communications

Highlights

- In the quarter, the College responded to two media inquiries from the [CBC](#) and the [Toronto Star](#) regarding CDO's regulation of dietitians who provide sponsored content on social media. In response, a registrar [message](#) was published on the College's website and circulated to registered dietitians and system partners.
- The first French version of the Registration Guide was created.

Updates and Upcoming Work

- The 2022 – 2023 Annual Report will be published in December.
- The transition of the current website to a new platform is continuing with staff concluding their work on reducing and streamlining the navigation and content.

Engagement

- 133 social media posts were made in both English and French, averaging one post every two days, on all five social media channels.
- Total number of followers/fans is approximately 3,500.

- The best performing post was the announcement of the 2023 workshop on social media and virtual care for professional dietitians. This marks a consistent trend with high engagement with Ontario dietitians.

Professional Practice Program

PRACTICE ADVISORY & QUALITY ASSURANCE

141	-64	Themes
Practice Advisory Service Inquiries	from last reporting period	
80%		
Overall Satisfaction Rate		<ol style="list-style-type: none"> 1. CDO requirements and processes 2. Record keeping 3. Authority mechanisms 4. Scope of practice 5. Private practice

Highlights

- All dietitians are required to complete the Self Directed Learning (SDL) Tool by October 31 each year. To date, 4,259 have been completed and 15 are outstanding. The QA Committee will randomly select 2.5% of SDLs to review, in addition to those who are required to resubmit or who missed the deadline.
- This year’s workshops for dietitians are about *“Building an Inclusive and Equitable Practice Using Virtual Care and Social Media”* Four workshops, which offer guidance on various ethical dilemmas and case scenarios, will run from November – December. The recordings will be available on the registrant portal in January.
- Presentations on CDO jurisprudence topics were delivered to dietetic learners at three universities.

Updates and Upcoming Work

- Competency assessments, which are used to assess dietitians who declare work of less than 500 hours over three years, will be transitioned to a virtual evaluation platform, to increase accessibility and efficiency of delivery, and will allow dietitians to complete the assessments from any location.

Quality Assurance Committee

- Since 2022, the QA’s Peer and Practice Assessment process has been undergoing review to update with risk-of-harm research and right tough regulatory principles. The board will review these program updates at the December meeting. Two newly developed tools, the Risk Reflection Questionnaire and Practice Improvement Assessment will replace the current Multi-Source Feedback (MSF) tool and will undergo field testing with registrants beginning in January 2024.

Professional Practice Committee

- Approved revisions to the Code of Ethics, which will be presented to the Board at the December meeting for the purpose of approving in principle, for public consultation.

Registration Program

Highlights

- Annual renewal closed October 31:
 - 4,357 renewed
 - 135 resigned
 - 22 extensions for renewal granted
 - 49 late notices issued
 - 24 notices of intention to suspend letters issued (failure to pay fees)
- The Canadian Dietetic Registration Exam (CDRE) was administered to 135 Ontario writers on November 2 and 3.
 - 64% pass rate (87 passed, 48 unsuccessful)
- CDO participated in a consultation by the Office of the Fairness Commissioner (OFC) on proposed changes to its annual fair registration practices (FRP) report template. The input will help the OFC design an accessible and user-friendly portal to streamline future FRP reports.

Updates and Upcoming Work

- KCAT results from the September 27 exam will be released in December.
- OFC Risk Information Compliance Framework (RICF) questionnaire will be submitted December 14. In addition to the College's annual FRP report, the RICE questionnaire will help the OFC assess the College's risk profile by identifying any risks that may be impeding the College's fair registration practices, and the steps that have been taken to address them.
- CDO will host the CDRE Standard Setting Committee at HUB601 from January 23 – 26, 2023.

Registration Committee

- An editorial review of 14 registration policies was conducted to ensure policies reflect administrative practices, current legislation, and incorporate quality improvement initiatives. The changes incorporated the full adoption of the 2020 ICDEP, current College-specific and EDI-B terminology, and redacted old policies that were no longer relevant.

3	Dispositions
Files reviewed	1 – Independent Practicum approved
	1 – Credential assessment of academic and practical training refused
	1 – CDRE upgrading action plan approved

Standards & Compliance Program

Inquiries, Complaints & Reports Committee

- The full committee met in September and received training on CDO’s new Social Media Standards and Guidelines, recent case law related to social media and freedom of speech, and training on Bias and Noise from Rebecca Durcan.

2 New matters received (- 3 from last reporting period) 1 Complaint 1 Report 0 QAC referrals 0 Inquiries	0 Matters closed at preliminary review stage	
3 Matters closed by ICRC 2 Complaints 1 Report 0 QAC Referrals 0 Inquiries	ICRC dispositions 2 No further action 1 SCERPs 1 Caution	
9 Matters open 2 Complaints 6 Reports 0 QAC referrals 1 Inquiry	0 Decisions reviewed by HPARB 0 Decisions upheld 0 Decisions returned with recommendations/requirements	239 days Average time for disposal (all matters) 234 days Average time for disposal (complaints)
7 Registrants monitored for compliance 2 Registrants entered undertakings with the College 2 Registrants completing a SCERP directed by the Committee 3 Registrants directed to complete a SCERP that is currently on hold		

Discipline Committee

- Nothing to report.

Fitness to Practice Committee

- Nothing to report.

Patient Relations Committee

- Nothing to report.

Governance

Highlights

- Brenda Murphy was reappointed for a three-year term.

Governance Committee

- The Committee identified a framework to guide its work on updating CDO's governance evaluation. The new framework focuses on ongoing reflection and continuous improvement for the Board and committees.

Updates and Upcoming Work

- In December, the Governance Committee will consider a screening process to operationalize the Competency and Attribute Framework ahead of the next board elections.

Sector News

REGULATORY, GOVERNMENT & DIETETICS

Highlights

Executive Office Meeting with Public Appointments Secretariat (PAS)

In October, the executive office met with the PAS to share the College's governance modernization plans, including the competency and attribute framework, changes to the elections process and the board's desire to have equal representation of public and professional members of the board. Also discussed was the board being minimally constituted with public members, the heavy workload of public members, and the board's feedback around remuneration.

System Partner Updates

With education accreditation no longer part of its activities, Partnership for Dietetic Education and Practice (PDEP) is winding down its activities and are in discussions on how to address its shared intellectual assets, including the competencies/ICDEPs. PDEP is made up of representatives from Canadian dietetic education programs, Dietitians of Canada (DC) and the Alliance. The Alliance remains committed to continued collaboration and information sharing. Accordingly, the CDO registrar has been appointed as the Alliance representee in meetings and discussions as needed with representatives from DC and the dietetic programs.

COLLEGE OF DIETITIANS OF ONTARIO
STATEMENT OF OPERATIONS as at Sept 30, 2023
FISCAL YEAR ENDING MARCH 31, 2024

	6 Months Ended			Comparative		
	Actuals Sept 30 2023	Total Annual Budget Sept 30 2023	Actual vs Budget % Variance	Total Annual Budget Mar 31, 2024	6 Month Actuals Sept 30 2022	Sept 2023 vs Sept 2022 % Variance
REVENUE						
Membership & Other Fees (1)	\$ 1,536,620	\$ 1,529,974	0%	\$ 3,059,784	\$ 1,463,230	5%
Interest & Dividends (2)	95,466	71,500	34%	143,000	(124,713)	-177%
TOTAL REVENUE	1,632,086	1,601,474	2%	3,202,784	1,338,518	22%
EXPENSES (Operating)						
General & Administrative (4)	1,165,584	1,313,940	11%	2,627,880	1,301,341	-10%
Registration Program (5)	94,991	104,439	9%	208,877	72,681	31%
Quality Assurance Program (6)	45,367	62,505	27%	125,010	26,261	73%
Practice Advisory Program (7)	8,217	19,393	58%	38,785	10,825	-24%
Patient Relations Program (8)	-	863	100%	1,725	-	
Standards & Compliance Program (9)	69,453	130,483	47%	260,966	108,809	-36%
TOTAL EXPENSES BEFORE AMTZ'N	1,383,612	1,631,622	15%	3,263,243	1,519,917	9%
EXCESS REVENUE OVER EXPENSES (EXPENSES OVER REVENUE)	248,474	(30,148)		(60,461)	(181,399)	-237%
<i>Less: Non-cash expenses:</i>						
Capital Asset Fund - Amortization (10)	(25,699)	(26,000)	1%	(52,000)	(34,070)	
Realized Gain/(Loss) on Sale of Investments (3)	34,465	-		-	57,304	-
Unrealized FV appreciation (depreciation) of Investments (3)	(241,509)	-			(476,137)	
SURPLUS/(DEFICIT)	15,731	(56,148)		(112,461)	(634,302)	
FUND BALANCES - opening balance	3,496,762	3,496,762		3,496,762	3,896,732	
FUND BALANCES - March 31, 2024	\$ 3,512,493	\$ 3,440,614	\$ 3,512,492	\$ 3,384,301	\$ 3,262,430	

NOTES and HIGHLIGHTS:**REVENUE**

(1) **Revenue** - At the mid-year mark, revenue from members in all categories totaled \$1,536,620. This sum corresponds to our projected budget for this year. This figure is in line with the budget and is 5% higher than the previous year. Membership fees are reported on an accrual basis in order to record revenues received between April 1 and September 30, 2023, but paid in Fiscal 2023. The budget and prior year fees have also been adjusted to recognize 6 months of income earned.

(2) **Investment income (interest and dividends)** from RBC Dominion Securities is \$95,466 in the second quarter.

EXPENSES

(4) **General & Administrative** Expenditures were 11% less than budget. Approximately 50% of the positive variance was due to salaries and another 20% due the timing of the communications website project.

Board costs were 48% less than budget since some in-person meetings were budgeted for included travel, accomodaton and food for out of town Board members

Executive, Audit and Governance Committees all held meetings virtually and therefore only utilized 47% of the budget.

General & Administrative Expenses: Computer expenses were higher than budget since the costs of updating the database annually was budgeted for the full year, but the real expenses happened in Q1 and Q2. Bank charges surpassed the budget since payroll is now outsourced to an external provider.

Membership Dues are greater because the college expensed the majority of membership dues for the current fiscal year as and when it is incurred, rather than recording it as prepaid. For F2024, the yearly Alliance membership fee of \$16,705 was completely expensed.

Insurance was 69% above budget in the second quarter, as the premium paid is for each calendar year.

Professional Fees/Consultants and Legal Fees were underspent in comparison to the budget as a result of scheduling and project timing.

(5) **Registration Program & Committee** expenditures were 9% less than budget owing to program scheduling. A significant amount of administrative spending will be incurred when members renew their licenses online in October 2023.

(6) **Quality Assurance Program & Committee** cost were 27% less than budget due to virtual meetings being held. Some were originally planned for in-person.

(7) **Practice Advisory Program & Committee** costs were 58% less than budget due to timing. The workshops will be primarily virtual and will begin at the fourth quarter. All PPC meetings were held remotely.

(8) **Patient Relations Program & Committee** incurred no expenses.

(9) **Standards & Compliance Program** expenses were 47% less than budget due to timing since the costs of hearings, legal fees and consulting fees are budgeted for the entire year, no hearing was held so far. The investigation and case management costs are lower because the College had less complicated ICRC issues that required case management and investigation than expected. The entire cost of investigations is difficult to forecast and budget for from year to year.

COLLEGE OF DIETITIANS OF ONTARIO
STATEMENT OF OPERATIONS as at Sept 30, 2023
FISCAL YEAR ENDING MARCH 31, 2024

Discipline Committee was underspent due to no meetings.

ICRC Committee was overspent compared to the Q2 budget due to an increase in the number of ICRC meetings, including an all-day meeting of the full committee. More ICRC meetings are planned for later this year.

(10) **Amortization Expense** represents the cost of the decline in value of capital asset purchases over time.

COLLEGE OF DIETITIANS OF ONTARIO
 CAPITAL ASSET PURCHASES DRAFT BUDGET
 FOR THE FISCAL YEAR ENDED MARCH 31, 2024

Board attachment 6.3

	30-Sep		DESCRIPTION
	Budget 2023/2024	Actual Purchases F2024	
I - Computer equipment (hardware) replacements			
7 laptops (5 replacements and 2 contingency) + deployment	\$ 12,194.00	\$ 12,444.19	(6 Laptops)
		\$ 986.71	(1 MS surface tablet board member)
4 Docking Stations	\$ 1,789.69	\$ 1,830.04	(4 Thunderbolt Dock)
Subtotal (Computer Hardware)	\$ 13,983.69	\$ 15,260.94	
II - Leasehold Improvements			
Changes to Office Space - CDO Sign at 175 Bloor	\$ 2,500.00	\$ -	
Subtotal (Leasehold Improvements)	\$ 2,500.00	\$ -	
III - Office equipment			
Office furniture	\$ -	\$ -	
Subtotal (Office Furniture & Equipment)	\$ -	\$ -	
IV - Non-iMIS Software			
Subtotal (Computer Software - non-iMIS)	\$ -	\$ -	
V - iMIS: Visual Antidote Programming Costs (Quote - Use estimate of Average Hours)			
VA: General project management/ongoing fixes/unplanned task, tickets (30 hrs x \$205 x 1.13)	\$ 6,949.50	\$ 4,806.74	
VA: Gen Admin - iMIS Upgrade - PCI Compliance (8 hrs x \$205 x 1.13)	\$ 1,853.20		
VA: iMIS Dev Site Refresh (6 hrs x \$205 x 1.13)	\$ 1,389.90		
QA SDL Tool Updates (57.5 hrs x \$205 x 1.13)	\$ 13,319.88		
QA 10 SSRS Reports (7 hrs x \$205 x 1.13)	\$ 1,621.55		
QA PPA Pre-Assessment and Step 2 (74 hrs x 205 x 1.13)	\$ 17,142.10		
QA Practicing <500 hrs (22 hrs x 205 x 1.13)	\$ 5,096.30		
Registration - Liability Insurance (6 hrs x \$205 x 1.13)	\$ 1,389.90		
Registration - Renewal and Project Management (41 hrs x \$205 x 1.13)	\$ 9,497.65	\$ 12,451.20	
Subtotal (Computer Software - iMIS)	\$ 58,259.98	\$ 17,257.94	
Capital Assets Purchases Budget F'2023-24	\$ 74,743.67	\$ 32,518.88	



Board Briefing Note

Topic:	Quarterly Risk Management Monitoring Report
Purpose:	Monitoring Report
Strategic Plan Relevance:	Regulatory Effectiveness and Performance Measurement Risk-Based and Right-Touch Regulation
From:	Melanie Woodbeck, Registrar & Executive Director

ISSUE

To review the Q3 Risk Monitoring Report.

PUBLIC INTEREST RATIONALE

In the public's interest, an essential aspect of College's governance and management is to ensure that organizational and risks to the public are identified, assessed and managed efficiently and effectively.

BACKGROUND

CDO's updated Risk Monitoring Policy was approved by the Board at its March 25, 2022 meeting. The policy sets out the Board's role around risk management, how the Board will ensure and cultivate a risk management culture and the Registrar's accountability to the Board through quarterly reporting and the establishment of operational procedures.

The Registrar will also report to the Board on any urgent, rapidly developing and critical risks should they arise between Board meetings. Low and frequently monitored risks will be recorded and managed.

The procedures will include staff involvement at all levels to ensure that emerging risks can be identified quickly, and that a strong risk management culture is cultivated throughout the organization.

CONSIDERATIONS

The December 2023 (Q3) Risk Monitoring Report is before the Board for its consideration

(Appendix 1) with updates on the status and progress towards treatment of the various risks identified.

Each risk has been reassessed as situations evolve. Updates on progress with mitigation efforts are provided for *each risk*. No new risks were identified or downgraded.

RECOMMENDATION/NEXT STEPS

For the Board to provide feedback on the current risk assessment and mitigation efforts.

ATTACHMENTS

- Appendix 1: December 2023 (Q3) Risk Monitoring Report

**Q3 Risk Monitoring Report
December 2023**

Risk Area	Risk Identification	Risk Assessment	Risk Response	Current Status/Mitigation Update as of December 2023
Program	Accreditation Provider Transition	<ul style="list-style-type: none"> National education accreditation provider withdrew effective March 31, 2022. EQual approved as new 3rd party accreditation service provider. If programs do not register with EQual, CDO would be required to conduct individualized, labour-intensive equivalency assessments for graduates. Protracted transition time (2+ years) creating additional risks for all partners, including the public. 	<ul style="list-style-type: none"> Continued collaboration with all partners. Monitor the ability of programs to transition by the award extension date approved by all 10 dietetic regulators by December 31, 2023. 	<ul style="list-style-type: none"> All programs have received contracts drafts from EQual and negotiations are ongoing. Only a small number of programs are registered with EQual as the deadline approaches and Ontario programs have requested an extension. The Alliance will not be making a consistent recommendation to extend the deadline. The Alliance continues to meet with EQual monthly to facilitate the transition.
Program	Examination Integrity (CDRE & CDO Assessments)	<ul style="list-style-type: none"> Potential risks include concerns around breach, credibility, reputational, equity and diversity and cheating. Exam development, monitoring, and continuous improvement is human and financially resource intensive. 	<ul style="list-style-type: none"> Work with Alliance, psychometric experts and key partners to identify and mitigate risk and prioritize transparency, security and continuous improvement. Ensure appropriate succession planning in examination development and administration. Review CDO assessments to ensure security and accessibility. 	<ul style="list-style-type: none"> Continue to monitor and mitigate. The KCAT has undergone updates to incorporate the new ICDEPs beginning in 2024. The CDRE and the PBA will be undergoing updates to incorporate the new ICDEPs. PBA format under consideration.
Public Protection	Potential Risk of Harm to Clients/Public	<ul style="list-style-type: none"> Potential risk to the public due to unethical, incompetent, or unprofessional care. Public trust in the College and the profession may be impacted. An increase in the number and complexity of complaints and reports also has an impact on College resources and how they are utilized. 	<ul style="list-style-type: none"> Monitor changes in the practice environment Monitor internal data (ICRC, PAS) to identify patterns, develop and update RD education and standards. Create/use risk-based decision-making tools. Focused registrant communications. Focused training for ICRC 	<ul style="list-style-type: none"> Risk tools created for ICRC are being used consistently. Roll out of new social media and virtual care policies included educational workshops for RDs and training to the ICRC. QA program being revised to link learning to risk of harm. Policy work in progress: code of ethics, advertising standard.

**Q3 Risk Monitoring Report
December 2023**

Risk Area	Risk Identification	Risk Assessment	Risk Response	Current Status/Mitigation Update as of December 2023
Governance	Public Member Appointments and Board Succession Planning	<ul style="list-style-type: none"> • CDO remains fully, but minimally constituted, at 5 public members. • Heavy board and committee workloads may impact CDO ability to: remain constituted, achieve quorum, meet legislative deadlines/internal service-standards, and ensure the critical public voice in decision-making. • At risk are CDO's governance modernization goals and the engagement, satisfaction and wellbeing of CDO public members. 	<ul style="list-style-type: none"> • Communicate risks with Public Appointments Secretariat (PAS) and work with other system partners. • Examine committee TORs and bylaws around composition requirements. • Focus on succession planning to ensure knowledge translation. 	<ul style="list-style-type: none"> • Meeting with PAS in September 2023. • Registrar on HPRO working group of Colleges discussing ways to address this issue.
Governance	Regulatory and Governance Changes	<ul style="list-style-type: none"> • Legislative changes may have significant financial and human resource implications for the College. • It is unclear when governance modernization legislation will be introduced. 	<ul style="list-style-type: none"> • Proceed with CDO's strategic goal of governance modernization and begin preparing for possible legislative changes. • Through regulatory collaboration and networking, stay informed of potential changes. • Continue to work towards fully meeting CPMF measures. 	<ul style="list-style-type: none"> • Monitor and proceed with governance work.
Operational	Cybersecurity Breach	<ul style="list-style-type: none"> • Potential risks include: privacy breaches, organizational/staff downtime, reputation, and financial costs. 	<ul style="list-style-type: none"> • Review cyber security response, credit card incident response plan, and an emergency disaster recovery plan on an annual basis. • Maintain insurance for IT and cybersecurity. • Conduct ongoing security audits, vulnerability testing and staff training. • Internal data governance working group to further identify and mitigate risks through project work. • Investment in software and hardware to protect CDO data and information. 	<ul style="list-style-type: none"> • All response plans will be reviewed and tested this quarter. • Enhanced insurance being explored. • Data governance consultant retained, and records management project is in progress. • Staff engaging in monthly training modules.

**Q3 Risk Monitoring Report
December 2023**

Risk Area	Risk Identification	Risk Assessment	Risk Response	Current Status/Mitigation Update as of December 2023
Operational	Succession Planning/Staff Turnover and Retention	<ul style="list-style-type: none"> Risks around business continuity, retention of institutional knowledge through retirement, leave of absence, or resignation. 	<ul style="list-style-type: none"> Review College HR processes and procedures. Conduct process documentation for key College activities for succession planning. Develop a records management policy to ensure documentation, continuity and accessibility of institutional knowledge. Ongoing review and implementation of supportive technology to streamline and automate. Increased focus on collaboration, training and team culture. 	<ul style="list-style-type: none"> Records management project in progress. HR policy review in progress. Project to begin documenting internal and operational procedures and processes across the organization in progress. Team days in-office established.
Financial	Increasing Costs of Regulation	<ul style="list-style-type: none"> Increased resources required to keep pace with complex and evolving regulatory requirements. Inflation rates are having an impact on price of goods and services CDO relies on. Cost of regulation impacts registrants directly and may impact clients indirectly. 	<ul style="list-style-type: none"> Prudent financial habits and spending are in place. Board and Management regularly monitor expenditures against the approved budget. Internal controls are in place for the highest risk areas and are reviewed annually. Registrant fee increase decision will occur annually. Pursue operational efficiencies (ie. office space, investment in technology, etc...) 	<ul style="list-style-type: none"> Continue to pursue operational efficiencies (tax rebate received in November) Consider whether to increase registrant fee in 2024 renewal as budget cycle approaches. Conduct analysis of registrant database in next fiscal.
Financial	Investment Returns	<ul style="list-style-type: none"> Market downturn and potential recession is presenting a risk to the College’s investment portfolio. 	<ul style="list-style-type: none"> Monitor situation with investment advisor. Diffuse risk and consider stable investments (GICs) and few equities Review risk tolerance in investment approach. 	<ul style="list-style-type: none"> Audit committee met with investment advisor in November and recommends reviewing investment approach and policy.



College of
Dietitians
of Ontario

Board Briefing Note

Topic:	Extension of PDEP Accreditation Recognition beyond December 31, 2023
Purpose:	For Decision
Strategic Plan Relevance:	Risk-Based and Right-Touch Regulation
From:	Melanie Woodbeck, Registrar and Executive Director

ISSUE

To consider a request from Ontario Dietetic Educational Programs for an extension to the accreditation transition deadline of December 31, 2023 until August 31, 2024.

PUBLIC INTEREST RATIONALE

Education program accreditation ensures that Canadian educational programs provide nutrition education in alignment with the national Canadian Integrated Competencies for Dietetic Education and Practice ([ICDEPs](#)) and meet ongoing quality assurance and improvement standards. Registering graduates from accredited Canadian educational programs provides assurance to the College and the public that Canadian dietetic graduates have the requisite knowledge, skill and judgment to provide safe, ethical and competent care to the public.

BACKGROUND

At its meeting on July 5, 2022, the Board passed a motion to accept EQual/Accreditation Canada as the approved national accreditation agency following the withdrawal of the former service provider under the Partnership for Dietetic Education and Practice (PDEP). The withdrawal was announced on September 28, 2021, with an effective date of March 31, 2022.

The Board passed a further motion to continue to recognize PDEP Accreditation awards until August 31, 2023, for the purposes of registration, regardless of the programs' last accreditation and expiry dates.¹

The date of August 31, 2023 allowed one year for the transition and aligned with the date that the new ICDEP are due to be fully incorporated into dietetic education programs. The Canadian Dietetic Registration Examination (CDRE) will be based on the new ICDEP starting in May 2024.

¹ For further information, refer to July 5, 2022 [board materials](#) and [minutes](#).

At its meeting on June 16, 2023, the Board considered a letter dated June 9, 2023, from Ontario dietetic educators seeking an extension of the August 31, 2023 deadline until August 31, 2024.

Given the constraints and challenges facing the programs, and in recognition of the extended period of time with no accreditation framework in place, the Board approved an extension to the deadline to December 31, 2023. The decision was conditional on the programs submitting all outstanding onboarding documentation to EQual and confirming their intentions to negotiate a contract with EQual.² The boards of each dietetic regulator in Canada extended the recognition date to December 31, 2023.

FOR CONSIDERATION

In a letter dated November 21, 2023, Ontario Dietetic Educational Programs request an extension to the deadline, until August 31, 2024, to allow programs to sign on to the new accreditation framework and to have previous PDEP accreditation awards continue to be recognized (*Appendix 1*).

The letter describes ongoing negotiations between universities and EQual. All programs have received contracts from EQual. Three programs have now had their [previous awards recognized](#) by EQual and two new programs are recognized as registered with EQual.

The request must be balanced with the following considerations:

- 1. Timelines associated with the accreditation provider transition*

The protracted delay in resumption of accreditation activities is not an ideal situation for any of the stakeholders affected – students, the public, educators, EQual, the Alliance or the College.

Given the significant shift in the accreditation provider, a fair and transparent transition is necessary and appropriate in the circumstances. However, the previous accreditation provider has not been available to provide accreditation services since September 2021. Many programs have not had the opportunity to have their programs assessed within the usual seven-year cycle. For example, five of the 33 Canadian dietetic programs received accreditation awards eight to ten years ago, and seven programs will be at the eight-year benchmark in 2024.

This is also a critical time in which programs are incorporating the ICDEPs, with no current mechanism to report on any potentially significant changes that have occurred since their last assessment, until such time that the new accreditation framework is in place.

Once a program becomes registered with EQual, their previous accreditation awards will be recognized and they will be formally scheduled for accreditation review in line with their last review date.

² For further information, refer to June 16, 2023 [materials](#) and [minutes](#).
[December 15, 2023 Meeting]

2. *Impact of accreditation recognition*

Completion of accredited dietetic education provides assurance to the College and the public that applicants have met the educational requirements to practise safely as a dietitian in Canada. Accreditation also expedites the process for CDO to issue certificates of registration, as further assessment of an applicant's education is not required.

If dietetic programs are unable or unwilling to become registered with EQual before the current deadline, graduates of those programs who convocate after December 31, 2023 will be required to complete an *individualized* credential or PLAR assessment before gaining eligibility to write the national exam. Engaging in this process can be time consuming and costly, and if any gaps are identified in the individualized assessment; the applicant may be required to undergo additional training or experience. It should also be noted that a significant and sudden increase in the number of applicants requiring individual assessment would challenge current College resources.

3. *Alignment with other Canadian dietetic regulators*

At this point in the accreditation transition, the Alliance is unable to make a consistent recommendation regarding the deadline. Each individual regulator is empowered to make its own decision, and until now, has worked to a consistent approach.

Most Canadian dietetic regulatory boards will be considering extensions up to March 31, 2024. Boards may or may not decide to proceed with an extension or may chose an alternative deadline date.

It should be noted that the College has an obligation to facilitate labour mobility and to ensure registrants in other provinces can seamlessly obtain licensure in Ontario. Any decision the College's board makes would extend to any Canadian program.

OPTIONS

1. **Refuse to grant an extension past the December 31, 2023** deadline for recognition of previous PDEP accreditation awards for the purpose of registration in Ontario.
2. **Approve an extension to August 31, 2024**, for recognition of previous PDEP accreditation awards for the purpose of registration in Ontario as recommended by Ontario Educational Programs.
3. **Approve an extension to March 31, 2024**, for recognition of previous PDEP accreditation awards for the purpose of registration in Ontario in alignment with several Canadian dietetic regulators.

RECOMMENDATION

That the Board continue to recognize PDEP accreditation and awards until March 31, 2024, for the purposes of the College's registration process, regardless of the date of the programs' last accreditation and expiry date. The extension applies to programs who have received a contract and are negotiating with EQual in good faith.

ATTACHMENTS

- Appendix 1: Letter dated November 21, 2023 - Dec. 31st Deadline Extension Request Ontario

November 21, 2023

Dear Melanie Woodbeck and College of Dietitians of Ontario Council members,

We are writing to provide updates about the status of EQual accreditation contract negotiations for our dietetics programs and to request a further extension to the December 31st deadline by which we were to sign an EQual contract or lose our accreditation status.

Programs from across Canada have received their draft EQual contracts and these contracts have been shared with the institutions' lawyers. Consistently, lawyers from universities/programs across Canada have found that these proposed contracts require significant changes before institutions will be willing and able to sign these contracts. On September 29th, programs received a message from EQual acknowledging that they were getting consistent feedback from programs and were making changes to the EQual contract in response to that feedback. They listed 5 changes they were going to make and provided us with a document suggesting the new wording. The five changes were:

1. **The Right to Terminate the Agreement:** the right of either party to terminate the agreement with due advanced notice.
2. **Advanced Notice to Program Modifications:** the process of introducing and communicating program changes.
3. **Limitations and Liability:** the protections available to each party reflecting the degree of risk involved.
4. **Individual End User License Agreement (EULA):** relevance of an individual End User License Agreement (EULA) to this contractual arrangement.
5. **Intellectual Property Rights:** safeguards concerning rights to all intellectual property that is shared with EQual as part of the accreditation process.


On October 19th, EQual held an information meeting to further explain these changes to the contract. Lawyers from several universities/programs were there and they expressed that there were still problems with the contract, even considering the proposed changes. In particular, the section on Intellectual Property Rights was still problematic. Intellectual Property is always a key issue for Universities because it is the main product that Universities produce. Therefore, University lawyers are always protective of intellectual property and will not sign contracts that do not meet their strict requirements. Other issues with the contracts included a general lack of clarity and significant problems with the French language versions of the contract. At this meeting, EQual said that they would be sending out the full revised contract at the end of October or early November. English language programs received their updated EQual contracts with additional documentation on November 15th-16th. University/program lawyers were not able to negotiate without a complete contract in hand, so English language programs are only now resuming contract negotiations with EQual after over a month of delay. Completing a review of the updated documents and completing contract negotiations within a month is not a feasible timeline for University lawyers. The French language program at the University of Ottawa has not received an updated contract as of this date.

At a recent national meeting of dietetics education programs that took place on October 13th, there was unanimous agreement that, given the state of contract negotiations, the current December 31st deadline to sign a contract with EQual is not feasible. We therefore propose an extension to the December 31st deadline. We feel that a deadline of August 31, 2024 would provide adequate time for all interested

parties to negotiate a contract with EQual. We continue to be committed to providing high quality education and training to our students and are willing to continue to provide evidence of our continued communications with EQual.

Thank you for your consideration and we look forward to hearing from you,

Sincerely,

A handwritten signature in black ink, appearing to read 'Laura Forbes'.

Laura Forbes, PhD, RD

Associate Professor and Curriculum Chair in Applied Human Nutrition, University of Guelph

A handwritten signature in black ink, appearing to read 'Pierrette Buklis'.

Pierrette Buklis, MHSc, RD, FDC

Assistant Professor and Director MPH-Nutrition and Dietetics

Dalla Lana School of Public Health, University of Toronto

A handwritten signature in black ink, appearing to read 'Colleen O'Connor'.

Colleen O'Connor, PhD, RD

Associate Professor and Academic Director

School of Food and Nutritional Sciences, Brescia University College

A handwritten signature in black ink, appearing to read 'Sharon Wong'.

Sharon Wong PhD RD

Associate Director and Associate Professor

School of Nutrition, Toronto Metropolitan University

Isabelle Giroux

Isabelle Giroux, PhD, DtP/RD, BÉd, ÉFI/PHEc, FDC

Full Professor and Director, School of Nutrition Sciences

Faculty of Health Sciences, University of Ottawa



Board Briefing Note

Topic:	Recognition of the Accreditation Council for Education in Nutrition and Dietetics (ACEND) Accredited Programs
Purpose:	Decision Required
Strategic Plan Relevance:	Risk-Based and Right-Touch Regulation
From:	Registration Committee

ISSUE

To consider the proposed policy decisions on the future recognition of the United States (US) based Accreditation Council for Education in Nutrition and Dietetics (ACEND) Accredited Programs.

PUBLIC INTEREST RATIONALE

The College is responsible for ensuring Ontario dietitians are qualified to provide safe, competent, and ethical care in the interest of the public. To support this, registration processes require ongoing assessment to incorporate and reflect the standards and competencies of the profession.

BACKGROUND

In the US, there are several types of dietetic training programs that are accredited by ACEND (the accreditation body in the US). Upon completion of one or more of these programs, graduates are eligible to take the US national licensing exam. These program types include:

- Didactic Program in Dietetics (DPD) – like a Canadian dietetic academic undergraduate degree
- Dietetic Internship (DI) – like a Canadian dietetics practical training program
- Combined Program (CP) – like a Canadian dietetic combined program of academic and practical training

- Foreign Dietitian Education Program (FDE) – accredits a program outside of the US (no current similar Canadian program)
- Future Education Model (FEM) – like a Canadian dietetic combined program, but results in a graduate degree (no current similar Canadian program)

Since 1998, the College has recognized applicants who graduated from *all* ACEND accredited programs as meeting the academic and practicum standards for entry-level practise in Canada. These applicants are treated similarly to graduates from Canadian accredited programs, and no further equivalence assessment is conducted. If an ACEND applicant meets all the College’s other [non-exemptible registration requirements](#) they are eligible for a temporary certificate of registration until they write/receive the results of the Canadian national licensing exam.

2020 ICDEP Comparison

As part of the College’s work to transition to the [Canadian 2020 Integrated Competencies for Dietetic Education and Practice \(ICDEP\)](#), a fulsome review between the 2020 ICDEP and ACEND’s program competencies was conducted, using two independent Registration Committee Consultants, who have undergone training in conducting this work. The review was based on documentation provided by ACEND.

Assessment Findings

1. Evidence of substantial equivalence between the Canadian and US entry-level competencies was found between the 2020 ICDEP and the FEM program.
2. Evidence of substantial equivalence between the Canadian and US entry-level competencies was not found between the 2020 ICDEP and the DPD, DI, CP and FDE Programs.¹

At its May 29 meeting, the Registration Committee approved draft policy amendments, for the purpose of consultation, proposing that CDO continue to recognize all ACEND programs for a two-year transition period, until August 31, 2025 (Appendices 4 and 5). FEM graduates would continue to be recognized with no expiry date.

Non-FEM ACEND applicants who complete their training after August 31, 2025, would go through the College’s Prior Learning Assessment and Recognition (PLAR) process to demonstrate they have the requisite knowledge and competence in comparison to the Canadian entry-level standards. Upon successful completion of the PLAR process, applicants would be eligible for registration. It is anticipated that this process would be in place until 2027 when all ACEND accredited programs move to the FEM structure. Based on historical data, this may impact

¹ ACEND informed the College that all dietetic training programs will be moving towards a *Future Education Model* (FEM) designation by 2027.

approximately 20 applicants over two years.

System Partner Consultation

A targeted 30-day system partner consultation was disseminated on October 16, 2023², to obtain feedback on the proposed policy revisions. This included the Ministry of Health (MOH), the Office of the Fairness Commissioner (OFC), the Alliance of Canadian Dietetic Regulatory Bodies (the Alliance), the Dietetic Educators Leadership Forum of Ontario (DELFO), and ACEND.

CONSIDERATIONS

Consultation Results

The consultation survey results are provided in Appendix 1.

Eight responses were received, and most were supportive of the proposed revisions.

Feedback received from ACEND

In response to the consultation request, ACEND provided an additional letter to the College (Appendix 2). It recommends that in the interest of fair registration practices, the College should revisit its competency comparison between the 2020 ICDEP and ACEND's non-FEM programs. ACEND states that they conducted a crosswalk comparison and determined that FEM and non-FEM programs are substantially equivalent (refer to Appendix 3). ACEND also notes that all their programs will follow the FEM structure by 2027, so this continued recognition would only warrant an extension of an additional two years to the Registration Committees' proposed transition period.

In response to ACEND's feedback, the Crosswalk comparing FEM and non-FEM programs was previously reviewed. However, the Crosswalk showed significant gaps as ACEND has highlighted in orange Appendix 3. As the Registration Committee's practice has always been to conduct its own assessments of program equivalence, it was unable to rely on this ACEND Crosswalk comparison, nor did the Registration Committee feel that ACEND's crosswalk or competency documentation provided sufficient evidence of substantial equivalence between the 2020 ICDEP and non-FEM ACEND programs.

While these findings may be attributed to insufficient detail of these ACEND programs' competency documentation, this is often the case for most internationally educated applicants, when they undergo a credential assessment. In the Registration Committee's experience to date, it's rare that a dietetic education program outside of Canada has comparative detail to the competencies and performance indicators as articulated in the ICDEP. For this reason, the College developed its PLAR process, which provides a more fair and valid competency assessment in

² The timing of the consultation was intentional, given other College and system partner priorities related to the Emergency Class approval, the submission of the OFC Fair Registration Practices Report, completion of accredited practical training programs, etc.

comparison to a credential assessment. This is also one of the reasons why amendments to the Registration Regulation to remove the credential assessment option are being proposed.

At the November 29 meeting, the Registration Committee reviewed the consultation feedback and decided to proceed with the proposed policy revisions, which includes a transition period until August 31, 2025.

Considering all the information available, including legal advice, the Registration Committee recommends the Board approve the attached policies (Appendices 4 and 5) which reflects the assessment findings to determine equivalence between the 2020 ICDEP and non-FEM programs. This approach serves to:

- Best protect the public interest,
- Align Registration Committee approaches with applicants from other internationally educated jurisdictions,
- Recognize the College's history of recognizing ACEND accredited programs, and
- Apply a fair approach for non-FEM ACEND applicants by incorporating a two-year transition period.

EQUITY IMPACT ASSESSMENT

CDO must consider whether any proposed policy changes will inadvertently impose barriers for applicants from the US to be registered in Ontario. A transition period balances fairness, transparency, access to registration, and CDO's overarching mandate of public protection.

Handling all applicants educated outside of Canada (beyond the applicable ACEND recognition transition period), through a similar process provides equitable access to College registration and would not favour any one jurisdiction over another.

The Registration Program will monitor the impact of any approved policy changes to ensure there are no unintended consequences for applicants.

RECOMMENDATION/NEXT STEPS

The Registration Committee recommends the Board review and approve its proposed policy revisions, as outlined in Appendices 4 and 5. Pending the Board's decision-making, the proposed revisions as outlined in Appendices 4 and 5, will be updated and communicated accordingly to relevant system partners.

Proposed Motions

THAT the Board approves the proposed revisions to *Policies 2-30: Competency Standards and Accrediting Bodies* and *4-20: Applicants from ACEND Accredited Programs*, as per Appendices 4 and 5, respectively.

OR

THAT the Board approves the proposed revisions to *Policies 2-30: Competency Standards and Accrediting Bodies* and *4-20: Applicants from ACEND Accredited Programs*, as per Appendices 4 and 5, respectively, with the revisions as discussed.

ATTACHMENTS

Appendix 1: ACEND Recognition System Partner Consultation Results

Appendix 2: ACEND Letter to College of Dietitians of Ontario

Appendix 3: ACEND Crosswalk Comparison between FEM and other ACEND Accredited Programs

Appendix 4: Proposed Revisions to Policy 2-30: *Competency Standards and Accrediting Bodies*

Appendix 5: Proposed Revisions to Policy 4-20: *Recognition of ACEND Accredited Programs*

ACEND Recognition - System Partner Consultation
11/16/2023 4:30:30 PM

The College of Dietitians of Ontario is seeking feedback from system partners regarding its future recognition of United States Accreditation Council for Education in Nutrition and Dietetics (ACEND) accredited programs, prior to obtaining final Board approval. Please review the Background document before providing your feedback.

Name of organization responding:

Respondents: 8

#	Respondent	Name of organization responding:
1		Regulator
2		Regulator
3		Educator
4		Accreditation Council for Education in Nutrition and Dietetics
5		Regulator
6		Regulator
7		Educator
8		Regulator

Do you have any feedback on the proposed changes to the College of Dietitians of Ontario's recognition of ACEND accredited programs?

Respondents: 7

- | # | Respondent | Q: Do you have any feedback on the proposed changes to the College of Dietitians of Ontario's recognition of ACEND accredited programs? |
|---|------------|---|
| 1 | | The College of Dietitians of Alberta has assessed US applicants since our inception as a college in 2002. Over that time, we have only had one US applicant go straight to practice following our substantial equivalency assessments. What we have found through our assessments is there are large variances between internship programs in the US. While US academic programs are for the most part, substantially equivalent, it is the internships that are not substantially equivalent to Canadian internship requirements and where US applicants have gaps that we address through our bridging program. We would encourage CDO to closely examine the internships of US applicants as well as the academic programs. |
| 2 | | Thanks for sharing. Decision makes sense based on the analysis completed. Looking forward to hearing how this transition goes. |
| 3 | | We are in favour of all of the recommendations listed in the report (a, b, c, and d). Thank you, Colleen O'Connor, PhD, RD Academic Director Brescia University College |
| 4 | | a. ACEND and the College agree that the Future Education Model Graduate Program (GP) competencies are substantially similar to the Canada ICDEP. b. ACEND conducted a comparison of the Future Education Model GP competencies and its combined DPD-DI/CP competencies and determined that they are substantially equivalent. The Crossmap may be found on the ACEND website. For your consideration: ACEND kindly proposes an alternative approach to terminating the College's education equivalency of all ACEND accredited programs that is in the best interest of Canadians studying in the United States and US citizens. 1. Continue recognizing substantially equivalent education for ACEND's Graduate Program (GP) graduates. 2. Revisit the ICDEP, DPD and DI competency comparison, including the Required Elements and the knowledge and competency domains from both accreditation standards. 3. Consider ACEND's commitment to align all education program competencies to the GP (future education model) by 2027. |
| 5 | | No concerns regarding the proposed changes. |

6

Based on the information provided it seems fair and reasonable.

7

After reviewing this proposal, I understand why the College of Dietitians of Ontario felt a review of the ACEND accreditation standards was useful at this time, as we implement the 2020 ICDEP expectations for new entrants to the profession in this province. I can appreciate that the lack of detailed material about the pre-existing ACEND standards made it challenging to assess the alignment between our current ICDEPs and a set of standards that are also being phased out in their system, but I am very happy to hear that there was continued substantial equivalence between our Canadian entry to practice expectations and the standards of the ACEND system that will be fully in place by 2027. This will encourage excellent candidates from the US to pursue their training and practice here, to the benefit of Ontario residents, and can allow Ontario-trained candidates to pursue career experiences on the US side of the border, promoting job satisfaction and knowledge transfer for Ontario RDs.

Accreditation Council for Education in Nutrition and Dietetics

the accrediting agency for the
 Academy of Nutrition
and Dietetics

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October 26, 2023

Melanie Woodbeck, BA, MPA
Registrar and Executive Director
College of Dietitians of Ontario
175 Bloor Street East
North Tower, Suite 601
Toronto, ON M4W 3R8

Dear Ms. Woodbeck and College of Dietitians of Ontario Board
Members

The Accreditation Council for Education in Nutrition and Dietetics (ACEND®) would like to thank the College of Dietitians of Ontario (College) for seeking consultation regarding its [future recognition of ACEND-accredited programs](#) before obtaining final Board approval. ACEND supports a recognition policy that benefits students and practitioners in both countries.

The College of Dietitians of Ontario currently recognizes academic training through all ACEND-accredited programs as equivalent to Canadian academic education.

The College's Policy 4-20 Applicants from (ACEND) Accreditation Program (1998) outlines a fair and streamlined pathway that allows many Canadians who wish to complete their studies in the United States to return to their home country to practice. In addition, ACEND's international reach is rapidly growing. Such a pathway also benefits students from Canada who wish to complete their education in any of ACEND's international programs. Such a pathway ensures that internationally trained dietetic practitioners are not unfairly disadvantaged in their employment efforts in Ontario.

ACEND is in close contact with the Commission on Dietetic Registration (CDR), the credentialing agency of the Academy of Nutrition and Dietetics. CDR confirmed their interest in continuing the pathway with Canada allowing students who graduate from recognized programs in Canada and who meet CDR's eligibility criteria to continue to sit for the CDR Registered Dietitian credentialing exam. This cross-border recognition presents mutual benefits for students in both countries.

As you are aware, ACEND has established five nutrition and dietetics program accreditation standards and associated academic requirements and competencies that align with the following program models,

1. - Future Education Model Graduate Program (GP)

- a. ACEND has worked closely with our academic programs to create a fully integrated graduate (master's level) competency-based education program that includes enhanced competencies to support increased scope of practice and employment opportunities in a global employment market.
- b. ACEND and the College agree that the GP competencies are substantially similar to the Canada Integrated Competencies for Dietetic Education and Practice (ICDEP).

2. Nutrition and Dietetics Didactic Program (DPD) and Nutrition and Dietetic Internship Program (DI)

- a. The DPD is similar to the Canadian non-integrated program. ACEND has 201 accredited DPD programs.
- b. The DI is a post-baccalaureate program that supports DPD students in obtaining their required practice hours (PDEP-PFPN, 2023). There are 262 accredited DI programs.
- c. The didactic program (DPD) and the dietetic internship (DI) partnership offers students an opportunity to meet the RD/RDN academic requirements and gain supervised practice experience.
- d. ACEND conducted a comparison of the Future Education Model GP competencies and its combined DPD-DI/CP competencies and determined that they are substantially equivalent. The Crossmap may be found on the ACEND website [here](#).
- e. ACEND is fully incorporating the Future Education Model GP competencies and framework into the DPD and DI accreditation standards with partner consultation in 2025 for adoption in 2027.

3. Nutrition and Dietetic Coordinated Program (CP)

- a. The coordinated program has a similar structure to Canada's fully integrated program (PDEP-PFPN, 2023). ACEND currently accredits 57 CPs.
- b. ACEND conducted a comparison of the Future Education Model GP competencies and its combined DPD-DI/CP competencies and determined that they are substantially equivalent. The Crossmap may be found on the ACEND website [here](#).
- c. ACEND is fully incorporating the Future Education Model GP competencies into the CP accreditation standards with partner consultation in 2025 for adoption in 2027.

4. Foreign Dietetic Education Program (FDE)

- a. ACEND is incorporating the GP competencies into the revised International Program accreditation standards with partner consultation in 2025 for adoption in 2027.

For your consideration:

ACEND kindly proposes an alternative approach to terminating the College's education equivalency of all ACEND accredited programs that is in the best interest of Canadians studying in the United States and US citizens. ACEND believes the alternative approach to be objective and fair to internationally educated candidates.

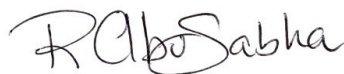
1. Continue recognizing substantially equivalent education for ACEND's Future Education Model Graduate Program (GP) graduates.

2. Revisit the ICDEP, DPD and DI competency comparison, including the Required Elements and the knowledge and competency domains from both accreditation standards found [here](#).
3. Consider ACEND's commitment to align all education program competencies to the GP (future education model) by 2027.

This proposed approach aligns with Ontario's Fairness Commissioner Risk-Informed Compliance Framework and Policy (2022), as the College and ACEND agree that the GP programs provide substantial equivalent education to a Canadian graduate. "Promoting the identification of targeted risk factors to enable necessary mitigation and remediation efforts" supports objective and fair processes and ensures that unfair decisions that place "unnecessary and ill-conceived obstacles in the way" of GP ACEND accredited program graduates are mitigated (Fairness Commission, 2022, para. 2 & 5).

In this letter, we hope ACEND has provided compelling reasons to maintain a mutual recognition of dietetic preparation and credentials with the United States. If you have any questions or would like to schedule a meeting to discuss the issues further, please do not hesitate to contact ACEND's Executive Director, Rayane AbuSabha, PhD, RD, at rabusabha@eatright.org or (312) 899-4780. ACEND appreciates your consideration.

Sincerely,



Rayane AbuSabha, PhD, RD
ACEND Executive Director



Long Wang, MD, PhD, RDN, FAND,
ACEND Board of Directors Chair

cc: John-Paul Cody-Cox, Chief Executive Officer, Dietitians of Canada
Sharon McCauley, Executive Director, Commission on Dietetic Registration

References

1. College of Registered Dietitians of Ontario (1998). Policy name: 4-20 Accreditation Council of Education in Nutrition and Dietetics. Registration Policies.
<https://www.collegeofdietitians.org/programs/registration/registration-policies.aspx>
2. Partnership for Dietetic Education and Practice (PDEP-PFPN) (2023). Accredited Programs in Canada.
<https://www.pdep.ca/accreditation/accredited-program-list.aspx>
3. Fairness Commissioner (2022). Risk-informed compliance framework.
<https://www.fairnesscommissioner.ca/en/Compliance/Pages/Framework.aspx>

Crosswalk of Future Education Model Standards

Important: The crossmap below identifies the similarities between the Future Education Model Standards and competencies in the 2017 Standards. Note that the level of performance is indicated by the letter in parentheses. For instance, for competency 7.1.3 at the does I level, the letter (S) is indicated. This information is provided throughout this document.

Competencies FEM Standards

1.1 Applies an understanding of environmental, molecular factors (e.g. genes, proteins, metabolites) and food in the development and management of disease. (S)

1.2 Applies an understanding of anatomy, physiology, and biochemistry. (S)

1.3 Applies knowledge of microbiology and food safety. (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)

1.5 Applies knowledge of patho-physiology and nutritional biochemistry to physiology, health and disease. (S)

1.6 Applies knowledge of social, psychological and environmental aspects of eating and food. (S)

1.7 Integrates the principles of cultural competence within own practice and when directing services. (D)

1.8 Applies knowledge of pharmacology to recommend, prescribe and administer medical nutrition therapy. (S)

1.9 Applies an understanding of the impact of complementary and integrative nutrition on drugs, disease, health and wellness. (S)

1.10 Applies knowledge of math and statistics. (S)

1.11 Applies knowledge of medical terminology when communicating with individuals, groups and other health professionals. (D)

1.12 Demonstrates knowledge of and is able to manage food preparation techniques. (D)

1.13 Demonstrates computer skills and uses nutrition informatics in the decision making process. (D)

1.14 Integrates knowledge of nutrition and physical activity in the provision of nutrition care across the life cycle. (D)

1.15 Applies knowledge of nutritional health promotion and disease prevention for individuals, groups and populations. (S)

1.16 Gains a foundational knowledge on public and global health issues and nutritional needs. (K)

2.1 Applies a framework to assess, develop, implement and evaluate products, programs and services. (D)

2.2 Selects, develops and/or implements nutritional screening tools for individuals, groups or populations. (D)

2.3 Utilizes the nutrition care process with individuals, groups or populations in a variety of practice settings. (D)

Diagnosis

Monitoring and Evaluation

Documentation

Medical Nutrition Therapy

Education

Psychological Counseling and Therapies

2.5 Prescribes, recommends and administers nutrition-related pharmacotherapy. (S)

3.1 Directs the production and distribution of quantity and quality food products. (D)

3.2 Oversees the purchasing, receipt and storage of products used in food production and services. (D)

3.3 Applies principles of food safety and sanitation to the storage, production and service of food. (D)

3.4 Applies and demonstrates an understanding of agricultural practices and processes. (S)

4.1 Utilizes program planning steps to develop, implement, monitor and evaluate community and population programs. (D)

4.2 Engages in legislative and regulatory activities that address community, population and global nutrition health and nutrition policy. (D)

5.1 Demonstrates leadership skills to guide practice. (D)

5.2 Applies principles of organization management. (D)

Organizing

Management

Controls

Time Management

Motivation and Recognition

5.3 Applies project management principles to achieve project goals and objectives. (D)

5.4 Leads quality and performance improvement activities to measure, evaluate and improve a program services, products and initiatives. (D)

5.5 Develops and leads implementation of risk management strategies and programs. (D)

6.1 Incorporates critical thinking skills in practice. (D)

6.2 Applies scientific methods utilizing ethical research practices when reviewing, evaluating and conducting research. (D)

6.3 Applies current research and evidence-informed practice to services. (D)

7.1 Assumes professional responsibilities to provide safe, ethical and effective nutrition services. (D)

7.2 Uses effective communication, collaboration and advocacy skills. (D)

with 2017 Standards for RDN Competencies

the RDN Future Graduate (FG) competencies in the performance may be different between program type level the only matching statement was KRDN 2.2

Orange highlighted no alignment with the KRDN/ Performance Indicators FEM Standards
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)
1.2.1 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)
1.3.1 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)
1.4.1 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)
1.5.1 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)
1.6.1 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)
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)

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. (D)

1.7.5 Applies culturally sensitive approaches and communication skills. (D)

1.7.6 Develops awareness of one's one personal beliefs, values and biases to better serve clients/patients of different cultures and backgrounds. (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)

1.9.1 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. (K)

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)

1.11.1 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)

1.12.1 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)

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 Uses technology and informatics skills proficiently to aggregate data and enhance practice and client/patient care. (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)
1.15.1 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)
1.16.1 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)

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)

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)

2.2.1 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 Prioritizes care based on results of screening considering complexity of care needs. (D)

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.

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)

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)

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)

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's/patient's nutrition interventions and 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 intervention, 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)

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

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)

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)
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 of professional scope of practice. (D)
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 evidenceinformed 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 beyondpersonal competence or professional scope of practice. (S)

3.1.1 Directs the production and distribution of quantity and quality food products. (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)

3.2.1 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)

3.3.1 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 missions 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)

3.4.1 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)

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)

4.2.1 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)

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)

5.2.1 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)

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)

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)

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)

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)
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)
5.3.1 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)
5.4.1 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)
5.4.4 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)
5.5.1 Assesses potential and real risks to an individual, group and or organization. (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)
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)
6.2.1 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)
6.3.1 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)

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)

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)

7.2.1 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)

encies with Core Knowledge and Competencies

the FEM Standards and RDN (DPD, DI, CP, FDE, IDE) core knowledge areas which impacts how the program incorporates learning activities which is at the knowledge level. There is many such cases

CRDN

Core Knowledge and Competencies 2017 Standards

CRDN 1.4 Evaluate emerging research for application in nutrition and dietetics practice.

KRDN 3.5 Describe basic concepts of nutritional genomics.

Required Element 5.1 - 1 Research methodology, interpretation of research literature and integration of research principles into evidence-based practice

Required Element 5.1 - 6 Role of environment, food, nutrition and lifestyle choices in health promotion and disease prevention

KRDN 4.5 Describe safety principles related to food, personnel and consumers.

CRDN 4.2 Perform management functions related to safety, security and sanitation that affect employees, customers, patients, facilities and food.

Required Element 5.1 - 13 Organic chemistry, biochemistry, anatomy, physiology, genetics, microbiology, pharmacology, statistics, logic, nutrient metabolism, integrative and functional nutrition and nutrition across the lifespan

Required Element 5.1 - 13 Organic chemistry, biochemistry, anatomy, physiology, genetics, microbiology, pharmacology, statistics, logic, nutrient metabolism, integrative and functional nutrition and nutrition across the lifespan

Required Element 5.1 - 5 Principles of medical nutrition therapy and the Nutrition Care Process
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Required Element 5.1 - 14 - Cultural competence and human diversity; human behavior, psychology, sociology or anthropology
CRDN 3.7 Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management.
CRDN 4.6 Propose and use procedures as appropriate to the practice setting to promote sustainability, reduce waste and protect the environment.
Required Element 5.1 - 14 - Cultural competence and human diversity; human behavior, psychology, sociology or anthropology
KRDN 2.6 Demonstrate an understanding of cultural competence/sensitivity.
CRDN 2.11 Show cultural competence/sensitivity in interactions with clients, colleagues and staff.
CRDN 3.10 Develop and evaluate recipes, formulas and menus for acceptability and affordability that accommodate the cultural diversity and health needs of various populations, groups and individuals.

CRDN 2.11 Show cultural competence/sensitivity in interactions with clients, colleagues and staff.
CRDN 3.1 Perform the Nutrition Care Process and use standardized nutrition language for individuals, groups and populations of differing ages and health status, in a variety of settings.
CRDN 3.1 Perform the Nutrition Care Process and use standardized nutrition language for individuals, groups and populations of differing ages and health status, in a variety of settings.
Required Element 5.1 - 13 Organic chemistry, biochemistry, anatomy, physiology, genetics, microbiology, pharmacology, statistics, logic, nutrient metabolism, integrative and functional nutrition and nutrition across the lifespan
CRDN 1.4 Evaluate emerging research for application in nutrition and dietetics practice.
CRDN 1.2 Apply evidence-based guidelines, systematic reviews and scientific literature.
CRDN 1.3 Justify programs, products, services and care using appropriate evidence or data.
Required Element 5.1 - 13 Organic chemistry, biochemistry, anatomy, physiology, genetics, microbiology, pharmacology, statistics, logic, nutrient metabolism, integrative and functional nutrition and nutrition across the lifespan
CRDN 1.5 Conduct projects using appropriate research methods, ethical procedures and data analysis.

CRDN 3.1 Perform the Nutrition Care Process and use standardized nutrition language for individuals, groups and populations of differing ages and health status, in a variety of settings.

CRDN 3.10 Develop and evaluate recipes, formulas and menus for acceptability and affordability that accommodate the cultural diversity and health needs of various populations, groups and individuals.

KRDN 4.6 Analyze data for assessment and evaluate data to be used in decision-making for continuous quality improvement.

CRDN 4.5 Analyze quality, financial and productivity data for use in planning.

CRDN 3.8 Deliver respectful, science-based answers to client questions concerning emerging trends.

CRDN 3.3 Demonstrate effective communications skills for clinical and customer services in a variety of formats and settings.

KRDN 4.5 Describe safety principles related to food, personnel and consumers.

Required Element 5.1 - 12 Food science and food systems, environmental sustainability, techniques of food preparation and development and modification and evaluation of recipes, menus and food products acceptable to diverse populations

CRDN 3.10 Develop and evaluate recipes, formulas and menus for acceptability and affordability that accommodate the cultural diversity and health needs of various populations, groups and individuals.

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KRDN 4.6 Analyze data for assessment and evaluate data to be used in decision-making for continuous quality improvement.

KRDN 4.6 Analyze data for assessment and evaluate data to be used in decision-making for continuous quality improvement.

KRDN 1.2 Use current information technologies to locate and apply evidence-based guidelines and protocols.

CRDN 4.4 Apply current nutrition informatics to develop, store, retrieve and disseminate information and data.

KRDN 1.2 Use current information technologies to locate and apply evidence-based guidelines and protocols.

CRDN 4.4 Apply current nutrition informatics to develop, store, retrieve and disseminate information and data.

Required Element 5.1 - 13 Organic chemistry, biochemistry, anatomy, physiology, genetics, microbiology, pharmacology, statistics, logic, nutrient metabolism, integrative and functional nutrition and nutrition across the lifespan

CRDN 3.5 Develop nutrition education materials that are culturally and age appropriate and designed for the literacy level of the audience.

CRDN 3.7 Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management.

CRDN 3.3 Demonstrate effective communications skills for clinical and customer services in a variety of formats and settings.

CRDN 3.6 Use effective education and counseling skills to facilitate behavior change.

KRDN 3.2 Develop an educational session or program/educational strategy for a target population.

CRDN 3.6 Use effective education and counseling skills to facilitate behavior change.

CRDN 1.1 Select indicators of program quality and/or customer service and measure achievement of objectives.
CRDN 3.7 Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management.
CRDN 4.8 Develop a plan to provide or develop a product, program or service that includes a budget, staffing needs, equipment and supplies.
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KRDN 3.1 Use the Nutrition Care Process to make decisions, identify nutrition-related problems and determine and evaluate nutrition interventions.
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KRDN 2.1 Demonstrate effective and professional oral and written communication and documentation.

KRDN 3.1 Use the Nutrition Care Process to make decisions, identify nutrition-related problems and determine and evaluate nutrition interventions.
and determine and evaluate nutrition interventions.

Required Element 5.1 - 11 Coding and billing of nutrition and dietetics services to obtain reimbursement for services from public or private payers, fee-for-service and value-based payment systems

KRDN 4.3 Describe the regulation system related to billing and coding, what services are reimbursable by third party payers and how reimbursement may be obtained.

CRDN 4.9 Explain the process for coding and billing for nutrition and dietetics services to obtain reimbursement from public or private payers, fee-for-service and value-based payment systems.

Required Element 5.1 - 5. Principles of medical nutrition therapy and the Nutrition Care Process

Required Element 5.1 - 5. Principles of medical nutrition therapy and the Nutrition Care Process

CRDN 2.6 Refer clients and patients to other professionals and services when needs are beyond individual scope of practice.

Required Element 5.1 - 3 Principles and techniques of effective education, counseling and behavior change theories and techniques

KRDN 3.2 Develop an educational session or program/educational strategy for a target population.

CRDN 3.4 Design, implement and evaluate presentations to a target audience.

CRDN 3.5 Develop nutrition education materials that are culturally and age appropriate and designed for the literacy level of the audience

CRDN 3.6 Use effective education and counseling skills to facilitate behavior change.

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KRDN 3.2 Develop an educational session or program/educational strategy for a target population.

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CRDN 3.8 Deliver respectful, science-based answers to client questions concerning emerging trends

CRDN 3.3 Demonstrate effective communications skills for clinical and customer services in a variety of formats and settings.

CRDN 3.6 Use effective education and counseling skills to facilitate behavior change.

KRDN 3.3 Demonstrate counseling and education methods to facilitate behavior change and enhance wellness for diverse individuals and groups.

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CRDN 3.6 Use effective education and counseling skills to facilitate behavior change

KRDN 3.3 Demonstrate counseling and education methods to facilitate behavior change and enhance wellness for diverse individuals and groups.

CRDN 2.6 Refer clients and patients to other professionals and services when needs are beyond individual scope of practice.

Required Element 5.1 - 13 Organic chemistry, biochemistry, anatomy, physiology, genetics, microbiology, pharmacology, statistics, logic, nutrient metabolism, integrative and functional nutrition and nutrition across the lifespan

KRDN 2.2 Describe the governance of nutrition and dietetics practice, such as the Scope of Nutrition and Dietetics Practice and the Code of Ethics for the Profession of Nutrition and Dietetics; and describe interprofessional relationships in various practice settings.
CRDN 2.1 Practice in compliance with current federal regulations and state statutes and rules, as applicable, and in accordance with accreditation standards and the Scope of Nutrition and Dietetics Practice and Code of Ethics for the Profession of Nutrition and Dietetics.
CRDN 2.6 Refer clients and patients to other professionals and services when needs are beyond individual scope of practice.
Required Element 5.1 - 7 Management theories and business principles required to deliver programs and services
CRDN 3.9 Coordinate procurement, production, distribution and service of goods and services, demonstrating and promoting responsible use of resources.

CRDN 2.1 Practice in compliance with current federal regulations and state statutes and rules, as applicable, and in accordance with accreditation standards and the Scope of Nutrition and Dietetics Practice and Code of Ethics for the Profession of Nutrition and Dietetics.

CRDN 3.9 Coordinate procurement, production, distribution and service of goods and services, demonstrating and promoting responsible use of resources.

CRDN 4.2 Perform management functions related to safety, security and sanitation that affect employees, customers, patients, facilities and food.

CRDN 4.6 Propose and use procedures as appropriate to the practice setting to promote sustainability, reduce waste and protect the environment.

CRDN 4.5 Analyze quality, financial and productivity data for use in planning.

CRDN 4.7 Conduct feasibility studies for products, programs or services with consideration of costs and benefits

CRDN 3.9 Coordinate procurement, production, distribution and service of goods and services, demonstrating and promoting responsible use of resources.

CRDN 3.9 Coordinate procurement, production, distribution and service of goods and services, demonstrating and promoting responsible use of resources.

KRDN 4.1 Apply management theories to the development of programs or services.

CRDN 3.9 Coordinate procurement, production, distribution and service of goods and services, demonstrating and promoting responsible use of resources.

KRDN 3.4 Explain the processes involved in delivering quality food and nutrition services.

KRDN 4.5 Describe safety principles related to food, personnel and consumers.

CRDN 4.7 Conduct feasibility studies for products, programs or services with consideration of costs and benefits.

CRDN 2.1 Practice in compliance with current federal regulations and state statutes and rules, as applicable, and in accordance with accreditation standards and the Scope of Nutrition and Dietetics Practice and Code of Ethics for the Profession of Nutrition and Dietetics.

CRDN 4.2 Perform management functions related to safety, security and sanitation that affect employees, customers, patients, facilities and food.

KRDN 2.4 Discuss the impact of health care policy and different health care delivery systems on food and nutrition services.

CRDN 3.1 Perform the Nutrition Care Process and use standardized nutrition language for individuals, groups and populations of differing ages and health status, in a variety of settings.

CRDN 3.9 Coordinate procurement, production, distribution and service of goods and services, demonstrating and promoting responsible use of resources.

CRDN 4.8 Develop a plan to provide or develop a product, program or service that includes a budget, staffing needs, equipment and supplies.

KRDN 4.6 Analyze data for assessment and evaluate data to be used in decision-making for continuous quality improvement.

CRDN 1.3 Justify programs, products, services and care using appropriate evidence or data.

Required Element 5.1 - 9 Fundamentals of public policy, including the legislative and regulatory basis of nutrition and dietetics practice

KRDN 2.4 Discuss the impact of health care policy and different health care delivery systems on food and nutrition services.

CRDN 2.14 Demonstrate advocacy on local, state or national legislative and regulatory issues or policies impacting the nutrition and dietetics profession.

CRDN 2.12 Perform self-assessment and develop goals for self-improvement throughout the program.

KRDN 2.1 Demonstrate effective and professional oral and written communication and documentation.

CRDN 2.12 Perform self-assessment and develop goals for self-improvement throughout the program.

KRDN 2.8 Demonstrate an understanding of the importance and expectations of a professional in mentoring and precepting others.

CRDN 2.15 Practice and/or role play mentoring and precepting others

KRDN 4.2 Evaluate a budget and interpret financial data

CRDN 2.5 Assign duties to NDTRs and/or support personnel as appropriate.

KRDN 4.1 Apply management theories to the development of programs or services.
KRDN 4.4 Apply the principles of human resource management to different situations.
CRDN 4.1 Participate in management of human resources.
Required Element 5.1 - 8 Continuous quality management of food and nutrition services
CRDN 4.3 Conduct clinical and customer service quality management activities.
CRDN 2.8 Demonstrate negotiation skills.
KRDN 4.1 Apply management theories to the development of programs or services.
KRDN 2.5 Identify and describe the work of interprofessional teams and the roles of others with whom the registered dietitian nutritionist collaborates in the delivery of food and nutrition services.
KRDN 4.2 Evaluate a budget and interpret financial data
KRDN 4.2 Evaluate a budget and interpret financial data
CRDN 4.5 Analyze quality, financial and productivity data for use in planning.
CRDN 4.5 Analyze quality, financial and productivity data for use in planning.
KRDN 4.6 Analyze data for assessment and evaluate data to be used in decision-making for continuous quality improvement.
CRDN 1.3 Justify programs, products, services and care using appropriate evidence or data.

CRDN 4.8 Develop a plan to provide or develop a product, program or service that includes a budget, staffing needs, equipment and supplies.
CRDN 4.2 Perform management functions related to safety, security and sanitation that affect employees, customers, patients, facilities and food.
CRDN 4.10 Analyze risk in nutrition and dietetics practice
CRDN 1.1 Select indicators of program quality and/or customer service and measure achievement of objectives.
CRDN 1.3 Justify programs, products, services and care using appropriate evidence or data.
CRDN 1.1 Select indicators of program quality and/or customer service and measure achievement of objectives.
CRDN 4.3 Conduct clinical and customer service quality management activities
CRDN 4.3 Conduct clinical and customer service quality management activities
CRDN 4.10 Analyze risk in nutrition and dietetics practice

CRDN 4.10 Analyze risk in nutrition and dietetics practice

KRDN 1.3 Apply critical thinking skills.

CRDN 1.6 Incorporate critical-thinking skills in overall practice.

CRDN 2.12 Perform self-assessment and develop goals for self-improvement throughout the program.

CRDN 1.5 Conduct projects using appropriate research methods, ethical procedures and data analysis

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KRDN 1.2 Use current information technologies to locate and apply evidence-based guidelines and protocols.

CRDN 1.5 Conduct projects using appropriate research methods, ethical procedures and data analysis

CRDN 1.5 Conduct projects using appropriate research methods, ethical procedures and data analysis

CRDN 1.4 Evaluate emerging research for application in nutrition and dietetics practice

CRDN 1.4 Evaluate emerging research for application in nutrition and dietetics practice

Required Element 5.1 - 4 Governance of nutrition and dietetics practice, such as the Scope of Nutrition and Dietetics Practice and the Code of Ethics for the Profession of Nutrition and Dietetics; and interprofessional relationships in various practice settings

KRDN 2.2 Describe the governance of nutrition and dietetics practice, such as the Scope of Nutrition and Dietetics Practice and the Code of Ethics for the Profession of Nutrition and Dietetics; and describe interprofessional relationships in various practice settings.

CRDN 2.10 Demonstrate professional attributes in all areas of practice

CRDN 2.12 Perform self-assessment and develop goals for self-improvement throughout the program.

CRDN 2.13 Prepare a plan for professional development according to Commission on Dietetic Registration guidelines

KRDN 2.2 Describe the governance of nutrition and dietetics practice, such as the Scope of Nutrition and Dietetics Practice and the Code of Ethics for the Profession of Nutrition and Dietetics; and describe interprofessional relationships in various practice settings.

Required Element 5.1 - 2 Communication skills sufficient for entry into professional practice

KRDN 2.1 Demonstrate effective and professional oral and written communication and documentation.

CRDN 2.2 Demonstrate professional writing skills in preparing professional communications.

CRDN 3.3 Demonstrate effective communications skills for clinical and customer services in a variety of formats and settings.

CRDN 2.2 Demonstrate professional writing skills in preparing professional communications.

CRDN 2.3 Demonstrate active participation, teamwork and contributions in group settings.

CRDN 2.4 Function as a member of interprofessional teams

KRDN 2.7 Demonstrate identification with the nutrition and dietetics profession through activities such as participation in professional organizations and defending a position on issues impacting the nutrition and dietetics profession.

CRDN 2.14 Demonstrate advocacy on local, state or national legislative and regulatory issues or policies impacting the nutrition and dietetics profession.

CRDN 3.3 Demonstrate effective communications skills for clinical and customer services in a variety of formats and settings.

Crosswalk of Future Education Model Reformat

Important: The crossmap below identifies the similarities between t and competencies in the 2022 Standards. Note that the level of perf into the curriculum. For instance, for competency 7.1.3 at the does l throughout this document.

Competencies FEM Standards

1.1 Applies an understanding of environmental, molecular factors (e.g. genes, proteins, metabolites) and food in the development and management of disease. (S)

1.2 Applies an understanding of anatomy, physiology, and biochemistry. (S)

1.3 Applies knowledge of microbiology and food safety. (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)

1.5 Applies knowledge of patho-physiology and nutritional biochemistry to physiology, health and disease. (S)

1.6 Applies knowledge of social, psychological and environmental aspects of eating and food. (S)

1.7 Integrates the principles of cultural competence within own practice and when directing services. (D)

1.8 Applies knowledge of pharmacology to recommend, prescribe and administer medical nutrition therapy. (S)

1.9 Applies an understanding of the impact of complementary and integrative nutrition on drugs, disease, health and wellness. (S)

1.10 Applies knowledge of math and statistics. (S)

1.11 Applies knowledge of medical terminology when communicating with individuals, groups and other health professionals. (D)

1.12 Demonstrates knowledge of and is able to manage food preparation techniques. (D)

1.13 Demonstrates computer skills and uses nutrition informatics in the decision making process. (D)

1.14 Integrates knowledge of nutrition and physical activity in the provision of nutrition care across the life cycle. (D)

1.15 Applies knowledge of nutritional health promotion and disease prevention for individuals, groups and populations. (S)

1.16 Gains a foundational knowledge on public and global health issues and nutritional needs. (K)

2.1 Applies a framework to assess, develop, implement and evaluate products, programs and services. (D)

2.2 Selects, develops and/or implements nutritional screening tools for individuals, groups or populations. (D)

2.3 Utilizes the nutrition care process with individuals, groups or populations in a variety of practice settings. (D)

Diagnosis

Monitoring and Evaluation

Documentation

Medical Nutrition Therapy

Education

Psychological Counseling and Therapies

2.5 Prescribes, recommends and administers nutrition-related pharmacotherapy. (S)

3.1 Directs the production and distribution of quantity and quality food products. (D)

3.2 Oversees the purchasing, receipt and storage of products used in food production and services. (D)

3.3 Applies principles of food safety and sanitation to the storage, production and service of food. (D)

3.4 Applies and demonstrates an understanding of agricultural practices and processes. (S)

4.1 Utilizes program planning steps to develop, implement, monitor and evaluate community and population programs. (D)

4.2 Engages in legislative and regulatory activities that address community, population and global nutrition health and nutrition policy. (D)

5.1 Demonstrates leadership skills to guide practice. (D)

5.2 Applies principles of organization management. (D)

Organizing

Management

Controls

Time Management

Motivation and Recognition

5.3 Applies project management principles to achieve project goals and objectives. (D)

5.4 Leads quality and performance improvement activities to measure, evaluate and improve a program services, products and initiatives. (D)

5.5 Develops and leads implementation of risk management strategies and programs. (D)

6.1 Incorporates critical thinking skills in practice. (D)

6.2 Applies scientific methods utilizing ethical research practices when reviewing, evaluating and conducting research. (D)

6.3 Applies current research and evidence-informed practice to services. (D)

7.1 Assumes professional responsibilities to provide safe, ethical and effective nutrition services. (D)

7.2 Uses effective communication, collaboration and advocacy skills.
(D)



ated Standards with 2022 Standards for

the RDN Graduate Program (GP) competencies in performance may be different between program type level the only matching statement was KRDN 2.2

Orange highlighted no alignment with the KRDN/ Performance Indicators FEM Standards
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)
1.2.1 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)
1.3.1 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)

1.4.1 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)

1.5.1 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)

1.6.1 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)

1.7.1 Demonstrates knowledge of the cultural competence models. (K)

1.7.2 Applies knowledge of foods, eating patterns and food trends. (S)

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. (D)

1.7.5 Applies culturally sensitive approaches and communication skills. (D)

1.7.6 Develops awareness of one's one personal beliefs, values and biases to better serve clients/patients of different cultures and backgrounds. (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)

1.9.1 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. (K)

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)

1.11.1 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)

1.12.1 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/pateint'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)

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 Uses technology and informatics skills proficiently to aggregate data and enhance practice and client/patient care. (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)

1.15.1 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)
1.16.1 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)
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)
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)
2.2.1 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 Prioritizes care based on results of screening considering complexity of care needs. (D)

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.

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)
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)
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)

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's/patient's nutrition interventions and 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 intervention, 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)

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

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)

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)
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 of professional scope of practice. (D)

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 evidenceinformed 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)

3.1.1 Directs the production and distribution of quantity and quality food products. (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)

3.2.1 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)

3.3.1 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 missions 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)

3.4.1 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)

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)
4.2.1 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)
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)

5.2.1 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)

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)

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)

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)

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)

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)

5.3.1 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)

5.4.1 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)

5.4.4 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)

5.5.1 Assesses potential and real risks to an individual, group and or organization. (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)

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)

6.2.1 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)

6.3.1 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)

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)

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)

7.2.1 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)

RDN Competencies with Core Knowledge and

the FEM Standards and RDN (DPD, DI, CP, FDE) core knowledge areas which impacts how the program incorporates learning activities which is at the knowledge level. There is many such cases

CRDN

Core Knowledge and Competencies 2022 Standards

CRDN 1.2 Evaluate research and apply evidence-based guidelines, systematic reviews and scientific literature in nutrition and dietetics practice

Required Element 3.1 - 15 Organic chemistry, biochemistry, anatomy, physiology, genetics, microbiology, pharmacology, statistics, logic, nutrient metabolism, integrative and functional nutrition and nutrition across the lifespan

KRDN 3.5 Describe concepts of nutritional genomics and how they relate to medical nutrition therapy, health and disease.

Required Element 3.1 - 1 Research methodology, interpretation of research literature and integration of research principles into evidence-based practice

Required Element 3.1 - 6 Role of environment, food, nutrition and lifestyle choices in health promotion and disease prevention

KRDN 4.5 Apply safety and sanitation principles related to food, personnel and consumers

CRDN 4.2 Perform management functions related to safety, security and sanitation that affect employees, clients, patients, facilities and food

Required Element 3.1 - 14 Food science and food systems, food safety and sanitation, environmental sustainability, global nutrition, principles and techniques of food preparation and development modification and evaluation of recipes, menus and food products acceptable to diverse populations

Required Element 3.1 - 15 Organic chemistry, biochemistry, anatomy, physiology, genetics, microbiology, pharmacology, statistics, logic, nutrient metabolism, integrative and functional nutrition and nutrition across the lifespan

Required Element 3.1 - 15 Organic chemistry, biochemistry, anatomy, physiology, genetics, microbiology, pharmacology, statistics, logic, nutrient metabolism, integrative and functional nutrition and nutrition across the lifespan

Required Element 3.1 - 5 Principles of medical nutrition therapy and the Nutrition Care Process, and clinical workflow elements

Required Element 3.1 - 5 Principles of medical nutrition therapy and the Nutrition Care Process, and clinical workflow elements

Required Element 3.1 - 5 Principles of medical nutrition therapy and the Nutrition Care Process, and clinical workflow elements

Required Element 3.1 - 17 Human behavior, psychology, sociology or anthropology

CRDN 3.11 Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management.

CRDN 4.6 Propose and use procedures as appropriate to the practice setting to promote sustainability, reduce waste and protect the environment.

Required Element 3.1 - 16 Cultural humility, self-reflection, and diversity, equity and inclusion

KRDN 2.6 Demonstrate cultural humility, awareness of personal biases and an understanding of cultural differences as they contribute to diversity, equity and inclusion.
CRDN 2.11 Show cultural humility in interactions with colleagues, staff, clients, patients and the public.
CRDN 3.14 Develop and evaluate recipes, formulas and menus for acceptability and affordability that accommodate the cultural diversity and health needs of various populations, groups and individuals.
KRDN 2.6 Demonstrate cultural humility, awareness of personal biases and an understanding of cultural differences as they contribute to diversity, equity and inclusion.
CRDN 2.12 Implement culturally sensitive strategies to address cultural biases and differences.
CRDN 2.11 Show cultural humility in interactions with colleagues, staff, clients, patients and the public.
CRDN 3.1 Perform Medical Nutrition Therapy by utilizing the Nutrition Care Process including use of standardized nutrition terminology as a part of the clinical workflow elements for individuals, groups and populations of differing ages and health status, in a variety of settings.
CRDN 3.1 Perform Medical Nutrition Therapy by utilizing the Nutrition Care Process including use of standardized nutrition terminology as a part of the clinical workflow elements for individuals, groups and populations of differing ages and health status, in a variety of settings.
Required Element 3.1 - 15 Organic chemistry, biochemistry, anatomy, physiology, genetics, microbiology, pharmacology, statistics, logic, nutrient metabolism, integrative and functional nutrition and nutrition across the lifespan
CRDN 1.2 Evaluate research and apply evidence-based guidelines, systematic reviews and scientific literature in nutrition and dietetics practice
CRDN 1.2 Evaluate research and apply evidence-based guidelines, systematic reviews and scientific literature in nutrition and dietetics practice

CRDN 1.3 Justify programs, products, services and care using appropriate evidence or data.

CRDN 1.4 Conduct projects using appropriate research or quality improvement methods, ethical procedures and data analysis utilizing current and/or new technologies.

CRDN 1.4 Conduct projects using appropriate research or quality improvement methods, ethical procedures and data analysis utilizing current and/or new technologies.

CRDN 3.1 Perform Medical Nutrition Therapy by utilizing the Nutrition Care Process including use of standardized nutrition terminology as a part of the clinical workflow elements for individuals, groups and populations of differing ages and health status, in a variety of settings.

CRDN 3.14 Develop and evaluate recipes, formulas and menus for acceptability and affordability that accommodate the cultural diversity and health needs of various populations, groups and individuals.

KRDN 4.7 Evaluate data to be used in decision-making for continuous quality improvement.

CRDN 4.5 Analyze quality, financial and productivity data for use in planning.

CRDN 3.12 Deliver respectful, science-based answers to client questions concerning emerging trends.

CRDN 3.7 Demonstrate effective communication and documentation skills for clinical and client services in a variety of formats and settings, which include telehealth and other information technologies and digital media.

KRDN 4.5 Apply safety and sanitation principles related to food, personnel and consumers

Required Element 3.1 - 14 Food science and food systems, food safety and sanitation, environmental sustainability, global nutrition, principles and techniques of food preparation and development modification and evaluation of recipes, menus and food products acceptable to diverse populations

CRDN 3.14 Develop and evaluate recipes, formulas and menus for acceptability and affordability that accommodate the cultural diversity and health needs of various populations, groups and individuals.

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KRDN 4.7 Evaluate data to be used in decision-making for continuous quality improvement.

KRDN 4.7 Evaluate data to be used in decision-making for continuous quality improvement.

KRDN 1.2 Select and use appropriate current information technologies to locate and apply evidence-based guidelines and protocols.

CRDN 4.4 Apply current information technologies to develop, manage and disseminate nutrition information and data.

KRDN 1.2 Select and use appropriate current information technologies to locate and apply evidence-based guidelines and protocols.

CRDN 4.4 Apply current information technologies to develop, manage and disseminate nutrition information and data.

Required Element 3.1 - 15 Organic chemistry, biochemistry, anatomy, physiology, genetics, microbiology, pharmacology, statistics, logic, nutrient metabolism, integrative and functional nutrition and nutrition across the lifespan

CRDN 3.9 Develop nutrition education materials that are culturally and age appropriate and designed for the literacy level of the audience.

CRDN 3.11 Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management.

CRDN 3.7 Demonstrate effective communication and documentation skills for clinical and client services in a variety of formats and settings, which include telehealth and other information technologies and digital media.

CRDN 3.10 Use effective education and counseling skills to facilitate behavior change.

KRDN 3.2 Develop an educational session or program/educational strategy for a target population.

CRDN 3.10 Use effective education and counseling skills to facilitate behavior change.

CRDN 1.1 Select indicators of program quality and/or customer service and measure achievement of objectives.

CRDN 3.11 Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management.

CRDN 4.8 Develop a plan to provide or develop a product, program or service that includes a budget, staffing needs, equipment and supplies.

CRDN 4.8 Develop a plan to provide or develop a product, program or service that includes a budget, staffing needs, equipment and supplies.

KRDN 3.1 Use the Nutrition Care Process and clinical workflow elements to assess nutritional parameters, diagnose nutrition related problems, determine appropriate nutrition interventions, and develop plans to monitor the effectiveness of these interventions.

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CRDN 3.2 Conduct nutrition focused physical exams.

KRDN 3.1 Use the Nutrition Care Process and clinical workflow elements to assess nutritional parameters, diagnose nutrition related problems, determine appropriate nutrition interventions, and develop plans to monitor the effectiveness of these interventions.

KRDN 3.1 Use the Nutrition Care Process and clinical workflow elements to assess nutritional parameters, diagnose nutrition related problems, determine appropriate nutrition interventions, and develop plans to monitor the effectiveness of these interventions.

CRDN 3.3 Perform routine health screening assessments including measuring blood pressure, conducting waived point-of-care laboratory testing (such as blood glucose or cholesterol), recommending and/or initiating nutrition-related pharmacotherapy plans (such as modifications to bowel regimens, carbohydrate to insulin ratio, B12 or iron supplementation).

KRDN 3.1 Use the Nutrition Care Process and clinical workflow elements to assess nutritional parameters, diagnose nutrition related problems, determine appropriate nutrition interventions, and develop plans to monitor the effectiveness of these interventions.
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KRDN 3.1 Use the Nutrition Care Process and clinical workflow elements to assess nutritional parameters, diagnose nutrition related problems, determine appropriate nutrition interventions, and develop plans to monitor the effectiveness of these interventions.

KRDN 2.1 Demonstrate effective and professional oral and written communication and documentation.

KRDN 3.1 Use the Nutrition Care Process and clinical workflow elements to assess nutritional parameters, diagnose nutrition related problems, determine appropriate nutrition interventions, and develop plans to monitor the effectiveness of these interventions.

Required Element 3.1 - 13 Coding and billing of nutrition and dietetics services to obtain reimbursement for services from public or private payers, fee-for-service and value-based payment systems

Required Element 3.1 - 11 Individual National Provider Identifier (NPI)

KRDN 4.3 Demonstrate an understanding of the regulation system related to billing and coding, what services are reimbursable by third party payers and how reimbursement may be obtained.

CRDN 4.9 Engage in the process for coding and billing for nutrition and dietetics services to obtain reimbursement from public or private payers, fee-for-service and value-based payment systems.

CRDN 3.5 Explain the steps involved and observe the placement of nasogastric or nasoenteric feeding tubes; if available, assist in the process of placing nasogastric or nasoenteric feeding tubes.

Required Element 3.1 - 5 Principles of medical nutrition therapy and the Nutrition Care Process, and clinical workflow elements

Required Element 3.1 - 5 Principles of medical nutrition therapy and the Nutrition Care Process, and clinical workflow elements

CRDN 3.6 Conduct a swallow screen and refer to the appropriate health care professional for full swallow evaluation when needed.

CRDN 2.6 Refer clients and patients to other professionals and services when needs are beyond individual scope of practice.

CRDN 3.6 Conduct a swallow screen and refer to the appropriate health care professional for full swallow evaluation when needed.

Required Element 3.1 - 3 Principles and techniques of effective education, counseling and behavior change theories and techniques

KRDN 3.2 Develop an educational session or program/educational strategy for a target population.

CRDN 3.8 Design, implement and evaluate presentations to a target audience.

CRDN 3.9 Develop nutrition education materials that are culturally and age appropriate and designed for the literacy level of the audience

CRDN 3.10 Use effective education and counseling skills to facilitate behavior change.

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KRDN 3.2 Develop an educational session or program/educational strategy for a target population.

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CRDN 3.4 Provide instruction to clients/patients for self-monitoring blood glucose considering diabetes medication and medical nutrition therapy plan.

CRDN 3.12 Deliver respectful, science-based answers to client questions concerning emerging trends

CRDN 3.7 Demonstrate effective communication and documentation skills for clinical and client services in a variety of formats and settings, which include telehealth and other information technologies and digital media.

CRDN 3.10 Use effective education and counseling skills to facilitate behavior change.

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CRDN 3.10 Use effective education and counseling skills to facilitate behavior change

CRDN 3.7 Demonstrate effective communication and documentation skills for clinical and client services in a variety of formats and settings, which include telehealth and other information technologies and digital media.

CRDN 2.6 Refer clients and patients to other professionals and services when needs are beyond individual scope of practice.

Required Element 3.1 - 15 Organic chemistry, biochemistry, anatomy, physiology, genetics, microbiology, pharmacology, statistics, logic, nutrient metabolism, integrative and functional nutrition and nutrition across the lifespan

KRDN 2.2 Describe the governance of nutrition and dietetics practice, such as the Scope of Practice for the Registered Dietitian Nutritionist and the Code of Ethics for the Profession of Nutrition and Dietetics

CRDN 2.1 Practice in compliance with current federal regulations and state statutes and rules, as applicable, and in accordance with accreditation standards and the Scope of Practice for the Registered Dietitian Nutritionist, Standards of Practice, Standards of Professional Performance, and Code of Ethics for the Profession of Nutrition and Dietetics.

CRDN 3.4 Provide instruction to clients/patients for self-monitoring blood glucose considering diabetes medication and medical nutrition therapy plan.

CRDN 2.6 Refer clients and patients to other professionals and services when needs are beyond individual scope of practice.

Required Element 3.1 - 7 Management theories and business principles required to deliver programs and services

CRDN 3.13 Coordinate procurement, production, distribution and service of goods and services, demonstrating and promoting responsible use of resources.

CRDN 2.1 Practice in compliance with current federal regulations and state statutes and rules, as applicable, and in accordance with accreditation standards and the Scope of Practice for the Registered Dietitian Nutritionist, Standards of Practice, Standards of Professional Performance, and Code of Ethics for the Profession of Nutrition and Dietetics.

CRDN 3.13 Coordinate procurement, production, distribution and service of goods and services, demonstrating and promoting responsible use of resources.

CRDN 4.2 Perform management functions related to safety, security and sanitation that affect employees, clients, patients, facilities and food

CRDN 4.6 Propose and use procedures as appropriate to the practice setting to promote sustainability, reduce waste and protect the environment.

CRDN 4.5 Analyze quality, financial and productivity data for use in planning.

CRDN 4.7 Conduct feasibility studies for products, programs or services with consideration of costs and benefits

CRDN 3.13 Coordinate procurement, production, distribution and service of goods and services, demonstrating and promoting responsible use of resources.

CRDN 3.13 Coordinate procurement, production, distribution and service of goods and services, demonstrating and promoting responsible use of resources.

KRDN 4.1 Apply management theories to the development of programs or services.

CRDN 3.13 Coordinate procurement, production, distribution and service of goods and services, demonstrating and promoting responsible use of resources.

KRDN 4.6 Explain the processes involved in delivering quality food and nutrition services.

KRDN 4.5 Apply safety and sanitation principles related to food, personnel and consumers

CRDN 4.7 Conduct feasibility studies for products, programs or services with consideration of costs and benefits.

CRDN 2.1 Practice in compliance with current federal regulations and state statutes and rules, as applicable, and in accordance with accreditation standards and the Scope of Practice for the Registered Dietitian Nutritionist, Standards of Practice, Standards of Professional Performance, and Code of Ethics for the Profession of Nutrition and Dietetics.

CRDN 4.2 Perform management functions related to safety, security and sanitation that affect employees, clients, patients, facilities and food

KRDN 2.4 Discuss the impact of health care policy and different health care delivery systems on food and nutrition services.

CRDN 3.1 Perform Medical Nutrition Therapy by utilizing the Nutrition Care Process including use of standardized nutrition terminology as a part of the clinical workflow elements for individuals, groups and populations of differing ages and health status, in a variety of settings.

CRDN 3.13 Coordinate procurement, production, distribution and service of goods and services, demonstrating and promoting responsible use of resources.

CRDN 4.8 Develop a plan to provide or develop a product, program or service that includes a budget, staffing needs, equipment and supplies.

KRDN 4.7 Evaluate data to be used in decision-making for continuous quality improvement.

CRDN 1.3 Justify programs, products, services and care using appropriate evidence or data.

Required Element 3.1 - 9 Fundamentals of public policy, including the legislative and regulatory basis of nutrition and dietetics practice

KRDN 2.4 Discuss the impact of health care policy and different health care delivery systems on food and nutrition services.

CRDN 2.13 Advocate for local, state or national legislative and regulatory issues or policies impacting the nutrition and dietetics profession.

CRDN 5.1 Perform self-assessment that includes awareness in terms of learning and leadership styles and cultural orientation and develop goals for self-improvement.

KRDN 5.5 Promote team involvement and recognize the skills of each member.

CRDN 5.6 Promote team involvement and recognize the skills of each member.

KRDN 2.1 Demonstrate effective and professional oral and written communication and documentation.

CRDN 5.1 Perform self-assessment that includes awareness in terms of learning and leadership styles and cultural orientation and develop goals for self-improvement.

KRDN 5.6 Demonstrate an understanding of the importance and expectations of a professional in mentoring and precepting others.

CRND 5.7 Mentor others.

CRDN 5.8 Identify and articulate the value of precepting.

KRDN 4.2 Evaluate a budget/financial management plan and interpret financial data.

CRDN 5.6 Promote team involvement and recognize the skills of each member.

CRDN 5.6 Promote team involvement and recognize the skills of each member.

CRDN 5.6 Promote team involvement and recognize the skills of each member.

KRDN 4.1 Apply management theories to the development of programs or services.

KRDN 4.4 Apply the principles of human resource management to different situations.

CRDN 4.1 Participate in management functions of human resources (such as training and scheduling).

Required Element 3.1 - 8 Continuous quality management of food and nutrition services

KRDN 4.1 Apply management theories to the development of programs or services.

KRDN 5.4 Practice resolving differences or dealing with conflict.

CRDN 5.5 Demonstrate the ability to resolve conflict

CRDN 2.8 Demonstrate negotiation skills.
CRDN 4.3 Conduct clinical and client service quality management activities (such as quality improvement or quality assurance projects).
KRDN 5.4 Practice resolving differences or dealing with conflict.
CRDN 5.5 Demonstrate the ability to resolve conflict
KRDN 2.5 Identify and describe the work of interprofessional teams and the roles of others with whom the registered dietitian nutritionist collaborates.
KRDN 4.2 Evaluate a budget/financial management plan and interpret financial data.
KRDN 4.2 Evaluate a budget/financial management plan and interpret financial data.
CRDN 4.5 Analyze quality, financial and productivity data for use in planning.
CRDN 4.5 Analyze quality, financial and productivity data for use in planning.
KRDN 4.7 Evaluate data to be used in decision-making for continuous quality improvement.
CRDN 1.3 Justify programs, products, services and care using appropriate evidence or data.
CRDN 5.6 Promote team involvement and recognize the skills of each member.
CRDN 5.5 Demonstrate the ability to resolve conflict.

CRDN 4.8 Develop a plan to provide or develop a product, program or service that includes a budget, staffing needs, equipment and supplies.

CRDN 4.2 Perform management functions related to safety, security and sanitation that affect employees, clients, patients, facilities and food

CRDN 4.10 Analyze risk in nutrition and dietetics practice (such as risks to achieving set goals and objectives, risk management plan, or risk due to clinical liability or foodborne illness).

CRDN 1.1 Select indicators of program quality and/or customer service and measure achievement of objectives.

CRDN 1.3 Justify programs, products, services and care using appropriate evidence or data.

CRDN 1.1 Select indicators of program quality and/or customer service and measure achievement of objectives.

CRDN 4.3 Conduct clinical and client service quality management activities (such as quality improvement or quality assurance projects).

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CRDN 4.10 Analyze risk in nutrition and dietetics practice (such as risks to achieving set goals and objectives, risk management plan, or risk due to clinical liability or foodborne illness).

CRDN 4.10 Analyze risk in nutrition and dietetics practice (such as risks to achieving set goals and objectives, risk management plan, or risk due to clinical liability or foodborne illness).

KRDN 1.3 Apply critical thinking skills.

CRDN 1.5 Incorporate critical-thinking skills in overall practice.

CRDN 5.1 Perform self-assessment that includes awareness in terms of learning and leadership styles and cultural orientation and develop goals for self-improvement.

CRDN 1.4 Conduct projects using appropriate research or quality improvement methods, ethical procedures and data analysis utilizing current and/or new technologies.
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CRDN 1.4 Conduct projects using appropriate research or quality improvement methods, ethical procedures and data analysis utilizing current and/or new technologies.
CRDN 1.4 Conduct projects using appropriate research or quality improvement methods, ethical procedures and data analysis utilizing current and/or new technologies.
KRDN 1.2 Select and use appropriate current information technologies to locate and apply evidence-based guidelines and protocols.
CRDN 1.4 Conduct projects using appropriate research or quality improvement methods, ethical procedures and data analysis utilizing current and/or new technologies.
CRDN 1.4 Conduct projects using appropriate research or quality improvement methods, ethical procedures and data analysis utilizing current and/or new technologies.
CRDN 1.2 Evaluate research and apply evidence-based guidelines, systematic reviews and scientific literature in nutrition and dietetics practice
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Required Element 3.1 - 4 Governance of nutrition and dietetics practice, such as the Scope of Practice for the Registered Dietitian Nutritionist and the Code of Ethics for the Profession of Nutrition and Dietetics, and interprofessional relationships in various practice settings

KRDN 2.2 Describe the governance of nutrition and dietetics practice, such as the Scope of Practice for the Registered Dietitian Nutritionist and the Code of Ethics for the Profession of Nutrition and Dietetics
CRDN 2.10 Demonstrate professional attributes in all areas of practice
CRDN 5.1 Perform self-assessment that includes awareness in terms of learning and leadership styles and cultural orientation and develop goals for self-improvement.
CRDN 5.3 Prepare a plan for professional development according to Commission on Dietetic Registration guidelines
KRDN 2.2 Describe the governance of nutrition and dietetics practice, such as the Scope of Practice for the Registered Dietitian Nutritionist and the Code of Ethics for the Profession of Nutrition and Dietetics
Required Element 3.1 - 2 Communication skills sufficient for entry into professional practice
KRDN 2.1 Demonstrate effective and professional oral and written communication and documentation.
CRDN 2.2 Demonstrate professional writing skills in preparing professional communications.
CRDN 3.7 Demonstrate effective communication and documentation skills for clinical and client services in a variety of formats and settings, which include telehealth and other information technologies and digital media.
CRDN 2.2 Demonstrate professional writing skills in preparing professional communications.
CRDN 2.3 Demonstrate active participation, teamwork and contributions in group settings.
CRDN 2.4 Function as a member of interprofessional teams
KRDN 2.9 Defend a position on issues impacting the nutrition and dietetics profession.

CRDN 2.13 Advocate for local, state or national legislative and regulatory issues or policies impacting the nutrition and dietetics profession.

CRDN 3.7 Demonstrate effective communication and documentation skills for clinical and client services in a variety of formats and settings, which include telehealth and other information technologies and digital media.



Assessment of Requirements

Competency Standards and Accrediting Bodies

2-30

Page 1 of 1

Established: January 23, 1998

Reviewed: July 6, 2002

Revised: April 30, 2013, December 14, 2015, January 23, 2023

Policy Statement

Consistent with the current [Registration Regulation](#), the competency standards recognized as “approved by the Council” are the Integrated Competencies for Dietetic Education and Practice (ICDEP).

Council (the Board) recognizes the following accreditation bodies for academic and practical training programs in Canada:

- Education Quality Accreditation Canada (EQual)
- Partnership for Dietetic Education and Practice (PDEP), until December 31, 2023

The Board also recognizes the United States-based Accreditation Council for Education in Nutrition and Dietetics (ACEND), until August 31, 2025, where the accreditation award entitles the graduates of the program to sit the licensure examination in the United States. Following this two-year transition period, the College will only recognize ACEND accredited programs, as articulated in [Policy 4-20: Applicants from ACEND Accredited Programs](#).

Applicants Trained Outside Canada

Applicants from Accreditation Council for Education in Nutrition and Dietetics (ACEND) Accredited Programs

4-20

Page 1 of 2

Established: March 20, 1998

Reviewed: April 17, 2004

Revised: June 10, 2000, October 26, 2012, April 30, 2013, June 1, 2018; October 7, 2019, November 23, 2020, March 22, 2021, April 5, 2023

POLICY

As per [Policy 2-30: Competency Standards and Accrediting Bodies](#), until August 31, 2025, the College recognizes programs accredited by the United States-based Accreditation Council for Education in Nutrition and Dietetics (ACEND¹) as equivalent to programs in Canada, where the accreditation award entitles the graduates of the ACEND programs to sit the licensure examination in the United States (US).

Until August 31, 2025, the Registrar (or designate) shall make the decision regarding eligibility to write the Canadian Dietetic Registration Exam (CDRE) and for Temporary Registration of applicants from the following ACEND accredited dietetics academic and/or practical training programs:

- Mainland US;
- Puerto Rico; and
- International Dietetics Education (IDE) programs.

Beyond August 31, 2025, only the ACEND Future Education Model Program will be recognized as equivalent to a program in Canada. Applicants from other ACEND accredited programs will be required to undergo a College equivalence assessment.

If an applicant completed their ACEND accredited academic and/or practicum programs on or before August 31, 2025, the applicant will be deemed to meet the College's current academic and practical training requirements.

The Registrar will refer an applicant to the Registration Committee according to the provisions in the

¹ Formerly the Commission on Accreditation for Dietetics Education.

Health Professions Procedural Code, being Schedule 2 to the [Regulated Health Professions Act, 1991](#), if reasonable doubt exists as to any of the applicant's qualifications.

Applicants who did not complete a College-recognized ACEND accredited academic program but gained registration with the Commission on Dietetic Registration (CDR) via a reciprocity route (except Canadian trained) will be referred to the Registration Committee for a credential assessment or required to undergo the [Prior Learning Assessment and Recognition \(PLAR\) process](#), subject to [Policy 2-10: Assessing Academic & Practical Training Requirements](#).

PROCEDURE

In addition to completing the application form, the applicant must arrange for the College to receive (as applicable):*

1. Proof of current registration and a *Verification of Registration Form* from the Commission on Dietetic Registration;
2. Certification of Standing and a *Verification of Registration Form* from the state licensing body;
3. *Verification of Registration Form* from an international regulatory body;
4. Official university transcript(s);
5. Verification statement of successful completion of academic and/or practical training accredited by ACEND; and
6. If the applicant's ACEND accredited training was completed more than three (3) years prior to their application, the applicant must demonstrate currency as per [Policy 3-30: Currency for Applicants](#), and provide documentation as per [Policy 3-10: Verification of Dietetic Practice](#).

* Items 1-6 must be sent directly to the College from the institution either by mail or through secure electronic means.



College of
Dietitians
of Ontario

Board Briefing Note

Topic:	Revised Position Statement: Interjurisdictional Registration Requirements
Purpose:	Decision Required
Strategic Plan Relevance:	Risk-Based and Right-Touch Regulation
From:	Registration Committee

ISSUE

To review and approve the proposed revisions, in principle for the purpose of consultation, to the Position Statement: Interjurisdictional Registration Requirements.

PUBLIC INTEREST RATIONALE

CDO's mandate is public protection. As per the [Dietetics Act, 1991](#), CDO must ensure that only dietitians licensed in Ontario use the title of dietitian and hold themselves out as someone authorized to practice dietetics in Ontario, including during the provision of online dietetic services.

Legal advice maintains that the location of the client is the primary consideration in determining the location of dietetic practice, especially when assessing and establishing nutrition care goals with clients. In limited circumstances, in the Canadian context, exceptions for continuity of care may be warranted, given all the circumstances and when it's in the client's best interests.

BACKGROUND

In 2019, the Board approved a Position Statement: [Registration Requirements for Interjurisdictional Practice](#), which states:

"It is the position of the College of Dietitians of Ontario to require registration for externally-registered Dietitians who are using the title dietitian and/or providing dietetic services to Ontario residents. This includes:

- Dietitians who are externally-registered and located outside of Ontario providing telepractice [virtual] dietetic services to clients, or groups of clients, who reside in Ontario; and
- Dietitians who are externally-registered and are physically in Ontario providing dietetic services to Ontario residents or using the title dietitian in Ontario.”

The rationale for CDO’s 2019 position statement, which included legal advice, was that the location of the client was the primary factor that determines whether the dietitian is practising dietetics in Ontario.

The COVID-19 Pandemic

The pandemic dramatically changed the healthcare landscape, including dietetic practise. Virtual care has become the norm in many circumstances, and often the preferred choice of clients and practitioners alike. In some cases, virtual care has improved access to dietetic services that wouldn’t have otherwise been available to clients, especially those in remote or underserved areas.

While specific data on virtual care inquiries is not available, over the past few years, CDO has received more feedback from externally licensed dietitians about the need to provide virtual dietetic services to clients in Ontario, as follows:

- **Continuity of Care**
Continuity of care is often required when a client received care in-person in another (often neighbouring) province and has returned home to Ontario. For many reasons, clients are challenged with physically returning to the original in-person care location for follow-up, when virtual care can be delivered quickly, easily, and safely, without compromising the quality of care.
- **Niche Areas of Practice**
While Ontario has the largest registrant pool of dietitians in Canada, some external dietitians have “specialized”¹ expertise in certain areas that are not offered by Ontario dietitians, such that clients in Ontario specifically seek out their services.
- **Ease of Registration**
Notwithstanding that externally registered RDs can register in Ontario through [Labour Mobility fairly quickly and easily](#)², applying for licensure in Ontario to provide virtual care for one or a very limited number of clients for continuing care may be a barrier.

¹ There are currently no credentialled “specialities” within dietetics, and Canadian dietetic regulators do not have formal specialty classes of licensure. Dietitians may decide to focus their practice and gain expertise in a particular area of practice/condition.

² Once all the documentation has been received, labour mobility applicants typically become registered with the College within a few days.

- **Financial Impact**

Registering in Ontario to provide virtual follow-up care to one or a very limited number of clients is a consideration in whether needed care is actually provided and how quickly. Employers (e.g., hospitals) may not typically cover the application and registration fees.

At the November 2022 Executive Committee Meeting, interjurisdictional practice was discussed, and the Registration Committee was asked to further explore options for the Board's consideration, given the growing requests from externally licensed dietitians to provide virtual care to Ontario residents.

Through 2023, various discussions were held with the Alliance and with individual provincial dietetic regulators to determine whether a national policy on interjurisdictional practice could be developed, similar to other professions. Due to differing provincial legislation, this type of policy approach was not possible.

At the November 29, 2023, meeting, the Registration Committee considered and approved a draft position statement (Appendix 1) for recommendation to the Board.

CONSIDERATIONS

In its decision making, the Registration Committee considered the following:

Environmental Scan

The registration requirements for virtual practice of health regulators in Ontario and other dietetic regulators in Canada were reviewed to explore varying approaches. Despite the shift towards increased virtual health care delivery, since 2019, more Ontario health regulators and other Canadian provincial dietetic regulators are now requiring registration for interjurisdictional virtual practice (e.g., College of Physicians and Surgeons of Ontario (CPSO), Saskatchewan Dietetic Association, CDM, and New Brunswick Association of Dietitians (NBAD)).

In some cases, however, exceptions are offered for continuity of care (e.g., CPSO, CDM, NBAD, and College of Dietitians of Prince Edward Island) specialized and/or emergency care (e.g., CPSO), and for clients temporarily residing in the respective province for a defined period (e.g., ODNQ)¹. Other regulators (e.g., College of Audiologists and Speech Language Pathologists of Ontario) have implemented temporary short-term licenses, at reduced fees which are reserved specifically for virtual practice. These exceptions are provided in the context of Canadian practise only, and do not extend to jurisdictions outside of Canada.

Access to Dietitian Services & Public Protection

While the Ontario public has the right to choose who they receive dietetic services from, health professions are provincially regulated in Canada. Under the *Dietetics Act, 1991*, the College has a responsibility to protect use of the dietitian title and ensure anyone who is holding out as

someone authorized to practice dietetics in Ontario is licensed with the College, including through the provision of virtual services.

The College does not have regulatory jurisdiction over a dietitian who isn't licensed in Ontario, although there are circumstances in which the College could commence an unauthorized practice prosecution. If the dietitian isn't licensed in Ontario, clients who reside in Ontario would not be able to exercise their right to file a complaint with the College. There may also be limits for residents of Ontario to file a complaint related to virtual practise with the externally licensed dietitian's regulatory body.

Legal Advice

The College obtained updated legal advice based on recent case law and the current health care delivery landscape. The advice maintains that the location of the client is a primary consideration in determining where the dietitian is practising, especially when providing virtual dietetic services (e.g., conducting an assessment and providing nutrition advice). However, in limited circumstances, exceptions for continuity of care that was initially provided to a client in another Canadian province outside of Ontario by an externally licensed dietitian in Canada but is subsequently provided through virtual means when the client is in Ontario, may be warranted, given all the circumstances, and when it's in the client's best interests to do so.

Limitations

The College is unable to remedy any perceived challenges to health professional regulation in Canada, nor is it within our mandate to respond to the financial challenges of externally licensed dietitians.

The proposed continuity of care exception is intended to improve access to care in a manner that best serves the public interest. Limiting the exception to only include Canadian externally registered dietitians provides assurance that these dietitians who are providing continuity of care to clients in Ontario have met the standards for safe, ethical and competence dietetic practice in Canada. These standards are identical or substantially similar to those of CDO.

For clarity, this exception would apply to circumstances when:

- a) Dietetic care originated, in person or virtually, in another Canadian province outside of Ontario by an externally located and licensed Canadian dietitian,
- b) At the time the care originated, the client was in another Canadian province outside of Ontario where the externally registered Canadian dietitian was licensed, and
- c) The client then returns home to Ontario, or is temporarily in Ontario, and virtual continuity of care is necessary and is provided by the Canadian externally licensed (and located) dietitian.

EQUITY IMPACT ASSESSMENT

The draft policy removes barriers to clients in obtaining follow-up care. The College will consider the impact of any approved revisions to the *Position Statement: Interjurisdictional Registration Requirements* to ensure there are no unintended consequences.

RECOMMENDATION/NEXT STEPS

That the Board approves the proposed revisions to the College's *Position Statement: Interjurisdictional Registration Requirements*, in principle for the purpose of consultation, as recommended by the Registration Committee.

Upon Board approval of the proposed revisions to the College's *Position Statement: Interjurisdictional Registration Requirements*, as per Appendix 1, staff will prepare the position statement for circulation to system partners. The consultation feedback will then be considered by the Registration Committee and Board, prior to final approval.

ATTACHMENTS

- Appendix 1: Proposed revisions to the *Position Statement: Interjurisdictional Registration Requirements*



Position Statement

Registration Requirements for Interjurisdictional Practice

Externally registered dietitians must hold a certificate of registration to practise in Ontario to use the title dietitian in Ontario and/or provide dietetic services in Ontario. This includes:

- Dietitians who are externally registered and located outside of Ontario providing virtual dietetic services¹ to individual clients, or groups of clients, in Ontario, and
- Dietitians who are externally registered and are physically in Ontario providing dietetic services in Ontario or using the title dietitian in Ontario.

Exceptions²:

The College does not require registration in Ontario for externally registered Canadian dietitians under the following circumstances³:

- **Virtual Continuity of Care***: When dietetic services were initially provided to a client who was physically located in the externally registered Canadian dietitian's primary jurisdiction, the client then returns home to Ontario or is temporally located in Ontario, and:
 - it is in the client's best interests to receive follow-up dietetic services virtually,
 - follow-up care is not readily available from a dietitian registered in Ontario, and
 - the client urgently needs ongoing dietetic care

*The exception for continuity of care does not permit externally registered Canadian dietitians to circumvent the College's registration requirements and primarily practise virtually in Ontario.

¹ Virtual dietetic services (also referred to as telepractice, telehealth, e-health, e-services) provides dietetic services, including nutrition assessment and/or treatment/intervention, to clients, groups of clients, substitute decision-makers, and caregivers, using technology (such as telephone, videoconferencing, or other electronic communication). Refer to the College's [Virtual Care Standards and Guidelines](#) for more information.

² Exceptions are only permitted if an externally registered dietitian's connection to Ontario is minimal. If the connection to Ontario is substantial (i.e., a significant number of clients are in Ontario), registration in Ontario is required.

³ Dietitians must also comply with the rules of the Canadian jurisdiction in which they are registered – the regulator in that jurisdiction may prohibit practice outside of that jurisdiction unless the dietitian is also registered in that second jurisdiction.

This exception is intended to allow for the delivery of limited virtual care by dietitians registered in other Canadian jurisdictions in circumstances where there is an urgent need, services are not readily available from an Ontario dietitian, and virtual care is in the Ontario client's best interests.

- **Occasional Meetings/Conferences/Media Events:** When an externally registered dietitian is attending occasional meetings, speaking at conferences, or attending media events relating to the practice of dietetics in Ontario,
- **Resource Development/Communications Work:** When an externally registered dietitian is developing print/online resources or engaging in communications work relating to the practice of dietetics in Ontario, and not seeing individual clients or groups of clients directly, or
- **General Nutrition Education:** When an externally registered dietitian is providing general online education (e.g., webinar) that does not include individualized nutrition assessment and/or treatment.

These exceptions require the externally registered dietitians to be clear and transparent with all parties about where they are registered as a dietitian and with respect to the fact that they are not registered in Ontario.

Non-Compliance

Failure to comply with the requirements may constitute a breach of the following provisions of the *Dietetics Act, 1991*:

Restricted titles

7. (1) No person other than a member shall use the title "dietitian", a variation or abbreviation or an equivalent in another language.

Representations of qualification, etc.

(2) No person other than a member shall hold himself or herself out as a person who is qualified to practise in Ontario as a dietitian or in a specialty of dietetics.

If the College becomes aware of concerns about virtual services provided to a client in Ontario, or circumstances under which an externally licensed dietitian is not appropriately complying with the registration requirements or exceptions, it may share that information with the regulatory authority where the dietitian is licensed or take such action as authorized under the *Regulated Health Professions Act, 1991*.

Nothing in this Position Statement is intended to limit the application of the provisions regarding use of title or representation of qualifications in section 7 of the [Dietetics Act, 1991](#).

Please contact the College if further clarification is needed:

Registration Program
registration@collegeofdietitians.org
416-598-1725/1-800-668-4990, ext. 395

DRAFT



Board Briefing Note

Topic:	Update on the Peer and Practice Assessment (PPA) revision
Purpose:	For Information
Strategic Plan Relevance:	Regulatory Effectiveness and Performance Measurement Effective and Transparent Communication Risk-Based and Right-Touch Regulation
From:	Quality Assurance Committee

ISSUE

To provide an update regarding the revisions to the Peer and Practice Assessment (PPA) as approved by the Quality Assurance Committee (QAC) for field and pilot testing in 2024.

PUBLIC INTEREST RATIONALE

The College strives for a balanced approach to regulating the dietetic profession in Ontario, ensuring the right level of regulation for public protection. The Professional Practice Program, mainly through Quality Assurance (QA), demonstrates dietitians' commitment to continuous improvement.

BACKGROUND

The [Peer and Practice Assessment](#) (PPA) is a regulatory requirement, with the QA Committee designing the form of the assessment and how registrants are selected to participate.¹ The purpose of the PPA is to assess the competencies of registrants based on the [Integrated Competencies for Dietetic Education and Practice](#) (ICDEP) and other College standards and encourage registrant learning and self-reflection.

Currently, the PPA is a two-step process. In the existing program, 10% of registrants are randomly selected to complete the PPA each year. In step 1, registrants complete a self-assessment which is compared with feedback surveys completed by peers and patients (if

¹ See 29 of the [Dietetics Act](#)
[December 14 & 15 Meeting]

applicable). The survey scores are then compared to the established cut score. Registrants who fall below the cut score are required to engage in step 2, a Behaviour Based Interview (BBI) with a peer assessor.

Since February 2022, the PPA has been under redevelopment to incorporate principles of right touch regulation, the updated ICDEP and align with regulatory best practices. A timeline of the work is provided in Appendix 1.

To guide this work, the QA Committee has worked with a 3rd party research consulting firm, a psychometrician consultant and registrants, and has developed a Working Purpose Statement: “the QA program aims to foster and support all dietitians' continuing competence and quality improvement through education and assessment. We will prioritize new areas of dietetic knowledge and practice areas posing the highest risk to the public.”

CONSIDERATIONS

The Quality Assurance Committee has approved that the Step 1 MSF process will be replaced by two new tools: The Practice Improvement Assessment (PIA) and a Risk Reflection Questionnaire (RRQ).

Practice Improvement Assessment (PIA)

The PIA is a competency, case-based, multiple choice assessment to identify learning needs, provide resources for learning, enable reflection and prompt the development of goals and action plans for practice improvements. The PIA is designed to enhance the quality of care provided by dietitians by encouraging reflective practice. By critically examining their practice, dietitians can identify areas for improvement, leading to better client outcomes and overall healthcare quality. All dietitians who are randomly selected for the PPA will complete the PIA.

Risk Reflection Questionnaire (RRQ)

The RRQ is a tool to assess risk and factors mitigating risk in practice. It will be used by dietitians and assessors in the step 2 BBI. This questionnaire will identify dietitians or practices with a higher risk profile. After completion of the BBI, dietitians can then receive targeted discussions or coaching to support the BBI, helping to mitigate potential risks and improve overall practice safety.

Field testing is recommended to integrate the PIA and RRQ effectively, allowing for consultation, identification of improvement opportunities and reports that can be incorporated into registrants' practice improvement plans. The pilot plan will be finalized based on the feedback received during field testing.

Appendix 2 provides a summary of the PPA tool re-development for each stage of the tool development process (scoping, blueprinting, draft RRQ, item writing, sampling and project planning).

EQUITY IMPACT ASSESSMENT

The redevelopment of the PPA is fully in line with the principles of equity, right-touch regulation, and the QA Working Purpose Statement. The draft assessment Blueprint is grounded in the ICDEP and places a strong emphasis on incorporating principles of Equity, Diversity, and Inclusion in its design and implementation. We are committed to an ongoing editorial review to ensure that fairness, language, and consistency are maintained throughout the process.

RECOMMENDATION/NEXT STEPS

For information and board feedback.

ATTACHMENTS

- Appendix 1: Summary of PPA Re-Development (Timeline)
- Appendix 2: Summary of PPA Re-Development

Appendix I: Summary of PPA Re-development (Timeline)

YEAR	ACTION	OUTCOME	ADDITIONAL NOTES
2020	The PPA was postponed due to the COVID-19 pandemic.		
2021	A new selection process for the Behaviour Based Interview (BBI) and chart review/stimulated recall was approved.	Codified in Policy 4-20 and Policy 4-25	
2022	A multi-year project began to upgrade the PPA with Right-Touch processes, EDI-B principles, and more. This included incorporating the 2020 ICDEP, enabling registrants' critical reflection, and using evidence-informed strategies. Consultants conducted feasibility reviews, registrant surveys and interviews were conducted in September.	<p>In October 2022, the consultants presented their findings.</p> <ul style="list-style-type: none"> • Step 1 MSF was problematic and costly. • A new purpose statement for the QA program prioritized competence and quality improvement. Right-touch and risk-based regulation would lead to different approaches for different dietitians. • Critical reflection tools proposed to replace Step 1 	<p>In November 2022, priority areas for QA assessments were identified, and a psychometrician was engaged to develop competency-based assessments and a risk-based questionnaire to support critical reflective tools.</p> <p>Other considerations included exploring the virtual delivery of BBI and integration with the 2020 ICDEP and SDL Tool.</p>
2023	The Scoping and Blueprinting of ICDEP competencies began, involving collaboration with the Psychometrician, the Professional Practice Committee (PPC), and PPA	<p>In March 2023, the QAC received an update on this progress.</p> <p>In June 2023, the</p>	Reference Reports 1-4

	<p>Assessors. Scoping defines the assessment as "ingredients," while Blueprint sets the assessment as "recipe." Collaboration with other HPRO Colleges on assessment design and problem-solving has been ongoing.</p>	<p>QAC approved the draft Design and Development Step 1 – PPA, which integrates critical reflection, assessment, learning, and quality improvement indicators in line with research recommendations, the QA program's purpose statement, equity considerations, right-touch, risk-based regulation, and psychometric guidance. This transforms the previous Step 1 into a Practice Improvement Assessment (PIA) and a Risk-Reflection Questionnaire (RRQ).</p>	
2023	<p>PIA Development - Recruit subject matter expert item writers, editorial content, bias, and language review</p>	<p>Refine the draft Blueprint with the PPC, Psychometrician and QAC.</p>	<p>Reference Reports 2-6</p>
2023	<p>Risk Reflection Questionnaire</p>	<p>Develop a registrant reflective questionnaire to assess risk and factors mitigating risk and incorporate this into the assessment process</p>	<p>Reference Reports 2-6</p>
2023	<p>PPA random and stratified sampling</p>	<p>Refine procedure for Risk Stratification</p>	<p>Reference Reports 4-5</p>

		and Random Selection for the BBI.	
2024 Projections and beyond	<ul style="list-style-type: none"> • Field test with a smaller cohort of dietitian registrants and system partners, gather feedback and make content revisions as needed. • Refine the entire PPA process, from registrant selection to completion. • Collaborate with Registration to collect risk data and update the stratified random selection. • Finalize the assessor interview manual, provide assessor training on PIA and RRQ content, and link it to the BBI. • Present completed tools and the final blueprint for approval to the QAC. • Create a communication and education plan for registrants. • Pilot the program with RD registrants 2025-2028. • Provide regular updates and seek approvals at QAC meetings. • Present PPA revisions to the Board as recommended by the QAC. 	<p>Develop support tools for BBI assessors to identify and mitigate practice risks.</p> <p>Work with IT to update the PPA process.</p> <p>Revise QA policies.</p>	Reference Report 5

Appendix II – Summary of Reference Reports 1-6 of PPA Re-Development

Scoping (Reference 1)

On February 23, 2023, and March 3, 2023, two Working Groups convened to determine the scope of Step 1 (Practice Improvement Assessment (PIA) as part of revising Step 1 of the Peer and Practice Assessment (PPA). The PPA is designed to confirm continued competence. The PIA supports learning and quality improvement for dietitians who are randomly selected for the PPA.

To determine content coverage ('the ingredients') of the PIA, Working Groups comprised of participants from the Professional Practice Committee (PPC), including dietitians, public members and PPA Assessors, determined the scope of the PIA in two separate sessions. Each working group independently applied chosen criteria for risk and frequency in practice and rated the Professionalism and Ethics, Communication and Collaboration, and Management and Leadership Practicum Performance Indicators (PIs) at their respective sessions. While all the PIs are important, participants were asked to identify any that they felt were critical/essential to dietetic practice. The process to determine the scope of the PIA began by selecting the criteria to rate the 83 Practicum/Internship PIs in the Integrated Competencies for Dietetic Education and Practice (ICDEP).

At the time, it was intended that a specified score would be the primary criterion for moving on to Step 2. However, with development and learning, it was decided that initially dietitians will be randomly selected to Step 2, and data will be gathered to determine if a risk based approach to proportion sample may be considered in future. The QA Committee will have the discretion to set policy based on the results of field and pilot testing for future PPA administration.

Before the Working Group, it was determined that since the goal of Step 1 is for dietitians to reflect and self-assess practice, including quality improvement initiatives, high-risk, critical incidents and mitigating factors, the "Does" performance indicators (PIs) of the ICDEP (based on Miller's Pyramid) will help therefore narrow the scope of the PIA-Q (i.e., what performance indicators ["observable behaviours"] will support the self-assessment process. The competencies that apply to every dietitian, regardless of practice setting, were scoped for Step 1 and included Professionalism and Ethics, Communication and Collaboration and Management and Leadership.

After the session, the Professional Practice Program (PPP) completed its independent rating. Each group's ratings are provided in the Scoping Report. A final matrix was developed by taking the ratings of each group and assigning a numeric value (i.e., Low Risk = 1, Moderate Risk =2, High Risk=3). Ratings that spanned risk areas were given half-score (i.e., Low-Moderate = 1.5). The overall average score was provided for risk for

each performance indicator, and each group's ranking for frequency is provided in the table.

The Practice Competencies for Nutrition Care, Population Health Promotion and Food Provision were not scoped in the Working Groups. However, these competencies are assessed, together with others (e.g., Professionalism and Ethics, etc.) in Step 2 of the BBI.

Draft Blueprinting the PIA-RRQ (Reference 2-5)

On May 8, 2023, the Blueprinting Working Group was convened with the same participants as the Scoping Working Group. The Blueprinting Report (Reference 2) provides a summary of the Blueprinting Working Group – including scope, test purposes, format, test content and the distinction between the PIA-RRQ and other assessments (e.g., JKAT, CDRE).

Validation of any discrepancies identified in scoping was completed, and the working group determined which PIs should be included or excluded within the scope of the PPA.

The Working Group was asked – which PIs should be selected for inclusion (e.g., Should anything that is a moderate risk or greater be included?). This exercise informed the development of the overall Blueprint for the PIA.

Through psychometric input and internal organizational review, a key consideration is how the PIs will be assessed in the PPA. The primary assessment method for the PIA is a case-based multiple choice assessment for learning/practice improvement and a focused questionnaire (risk-based assessment and management).

The working group concluded that every performance indicator scored two or greater (moderate risk or higher) should be assessed on the PIA. In addition, performance indicators noted as critical/essential should be at least one item on the assessment.

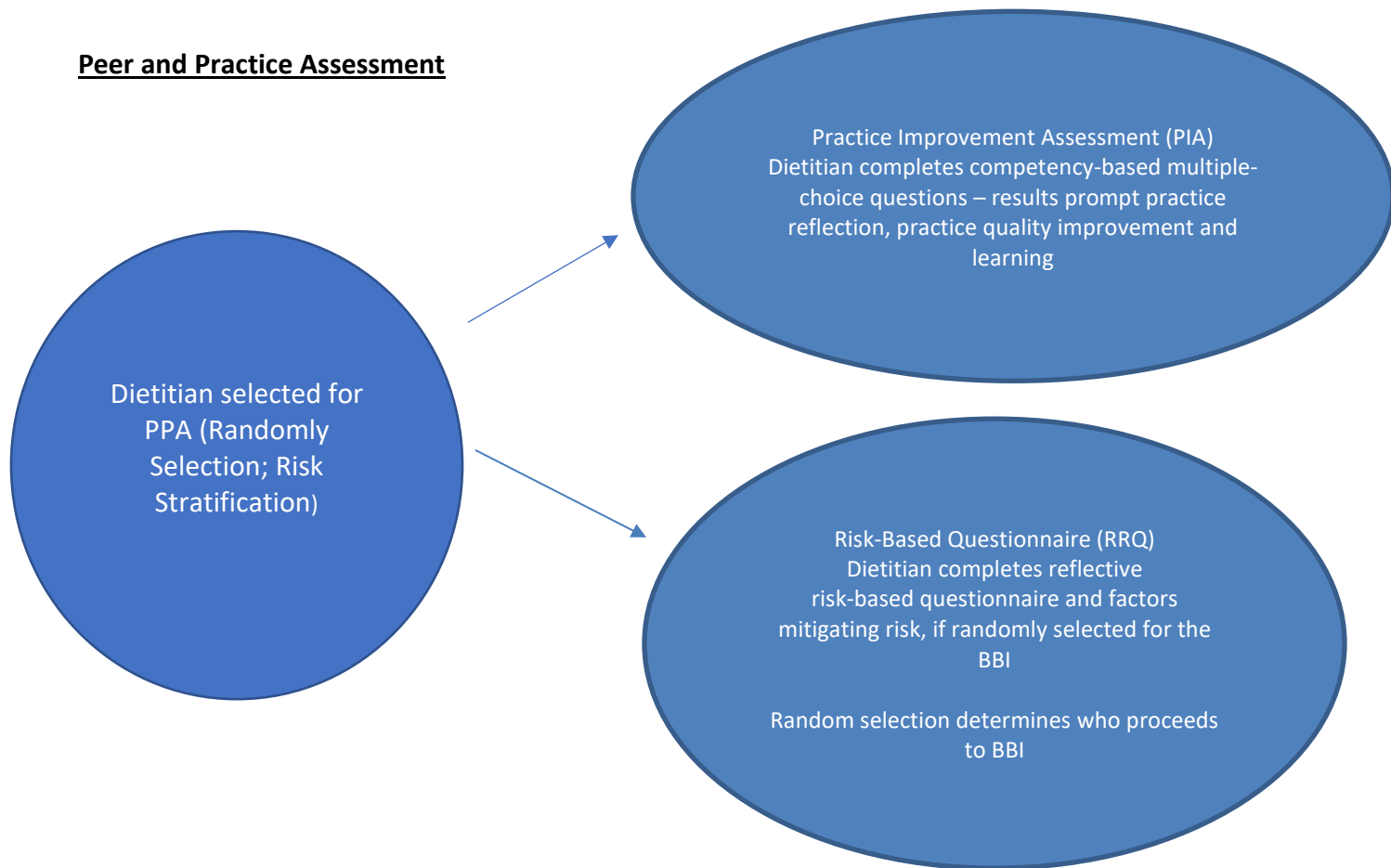
It is recommended that further assessment in Step 2 will be informed by the dietitian's risk profile (potential risk indicators/categories like practice risk, isolation risk, etc.). These risk-based indicators are drawn from regulatory research and informed by the research completed in the first phase of the PPA re-development. A dietitian will be selected randomly but will have an opportunity to discuss risk and how they mitigate risk with a peer assessor for quality improvement and client safety (Reference 4 and 5)

After the BBI has been completed, suppose the risk reflection questionnaire data identifies high risk. The risk questionnaire will help dietitians reflect on factors that mitigate risk in their practice. With this information, the dietitian and peer assessor can discuss how and when to apply protective factors to mitigate risk, identify

learning opportunities, and improve quality practice.

Consequently, through this process, the dietitian can reflect on their continued competence and identify strengths and areas for improvement. These results can then be used to complete the self-assessment against the competencies through the Self-Directed Learning Tool (SDL), set learning goals, and practice quality improvement (Practice Improvement Plan).

Peer and Practice Assessment



With the assessment method selected, the PIs scoped, and the inclusion/exclusion criteria determined, the next step was to develop the draft blueprint for the PPA. The blueprint is a publicly available document that delineates how the competencies/Pis are expressed in the assessment. The blueprint is then used to guide assessment content development.

At the Blueprinting Working Group, Pis to be included in the PPA were identified. Based on this, blueprint category weightings were developed per the number of Pis. For example, if 50% of Pis are based on Professionalism and Ethics Competencies, the draft blueprint will indicate that 50% of the assessment content will be based on this category.

Aside from weighting (% distribution of content and minimum items), the discussion was held to inform the number of items, length, possible practice settings, cognitive level, etc.

As noted earlier, the Working Group determined that anything ranked as moderate risk or higher be included in the PIA (54 performance indicators and 31 minimum one item (critical/essential) (Reference 3).

A revised draft Blueprint is presented in Reference 3, which has been reviewed by the Psychometrician. This was recommended to the Quality Assurance Committee (QAC) and approved in June 2023.

Item Writing – PIA Content Development (Reference 6)

Two item writing workshops were conducted as part of the development of the PIA. The objective of the item writing workshops was to develop test items according to the specifications of the PIA blueprint (described earlier in Reference 2 and 3). CDO staff together with John Wickett, psychometrician, facilitated the training sessions with a recruited team of 8 dietitian item writers. Participating item writers were recruited and selected by the CDO. Each eligible writer was in good standing with the CDO and knowledgeable in the blueprinted topic areas (nutrition care, population health promotion, food provision, including education, research, policy, management and/or leadership roles in any area of dietetic practice). Additionally, participants had a good understanding of the Integrated Competencies for Dietetic Education and Practice, a combination of various experiences such as precepting dietetic students, and experience developing test questions. The item writing team included a diverse group of dietitians. Best-practice guidelines for writing multiple choice questions (MCQs) were followed (See Reference 6).

The necessary number of MCQ items, as required by the blueprint, have been produced over the next with feedback after each submission. Following the content development by the item writers, two review processes were coordinated with the CDO Project Coordinator and Project Director and John Wickett. This is to ensure all items reflect the blueprint while ensuring that the content is relevant, current and in keeping with standards of practice. After completion of all items, a language and bias review with a third party consultant will ensure an equity, diversity and inclusion lens will be applied.

Next steps – Field & Pilot Testing (Reference 5)

The next step - Field Testing - will provide both qualitative and quantitative information on the assessment. Data will be collected from participants who will be recruited to test the assessment tools. The results of the Field Test will identify any difficulties associated with the assessment logistics, such as timing and layout. Some analysis of test item performance may be performed in order to identify faulty items that might require review.

Pilot testing with dietitians in 2025 for the PPA will yield results that will be analyzed in further depth. The recruitment of an appropriate number of dietitians will be critical to the success of the pilot. While this is not a high stakes assessment, our objective is to ensure the reliability of the assessment and to support its validity and defensibility.



Board Briefing Note

Topic:	Draft Revisions to the Code of Ethics
Purpose:	Decision Required
Strategic Plan Relevance:	Regulatory Effectiveness and Performance Measurement Effective and Transparent Communication Risk-Based and Right-Touch Regulation
From:	Professional Practice Committee

ISSUE

To review and approve draft revisions to the Code of Ethics (Code), as recommended by the Professional Practice Committee (PPC), for consultation with registrants and system partners.

PUBLIC INTEREST RATIONALE

The College ensures safe, ethical, and competent dietetic practice in Ontario. Proposed Code of Ethics revisions align with CDO's Equity, Diversity, Inclusion and Belonging (EDI-B) principles, emphasizing cultural safety, population health, advertising, conflict of interest, evidence-informed practice, and emerging technologies.

BACKGROUND

In March 2019, the Board approved revisions to the Code to articulate the application of four ethical principles guiding dietetic practice in healthcare: beneficence, non-maleficence, respect, autonomy and dignity, and justice (*Appendix 1*).

FOR CONSIDERATION

In line with evolving practices and regular policy reviews, in 2023, the Professional Practice Committee began assessing the Code's effectiveness. This involved aligning it with EDI-B principles based on recommendations from a working group, an environmental scan, language and inclusivity updates, legal compliance checks, alignment with the ICRC's work, review by a

medical, bioethics, and health policy researcher, and input from the Citizen Advisory Group for public feedback on content and clarity.

The Board is being asked to consider a draft revised Code of Ethics (Appendix 2). The draft revised version includes the following amendments:

- Clarity regarding client choices and rights, evidence-informed practice, cultural safety, and cultural ways of knowing.
- Inclusive language to align with EDI-B principles.
- Ethical considerations when using artificial intelligence (AI)
- Considerations for record keeping, collaboration, legal requirements, and client confidentiality.
- Reference to the Ontario Human Rights Code¹ for equitable care.
- Inclusion of responsibilities to individual clients, the public, and the profession.
- Focus on concepts related to promoting population/public health, advertising and conflicts of interest, transparency, and accountability.

EQUITY IMPACT ASSESSMENT

CDO's commitment to EDI-B underpins the revisions to the Code to create comprehensive guidelines for dietitians, encompassing healthcare ethics and evidence-informed practice in line with the College's mandate to protect the public.

RECOMMENDATION

- Approve the draft Code of Ethics (Appendix 2), in principle, as presented (or with amendments if determined by board), for consultation with Registrants and system partners.

NEXT STEPS IF APPROVED:

1. Circulate to registrants and system partners for feedback.
2. Review and incorporate consultation feedback as necessary.
3. Seek final Board approval and formally adopt the new code of ethics.
4. Publish and widely communicate the code's content, including educational implementation with registrants and the public.
5. Ongoing policy effectiveness evaluation and monitoring.

¹ The Ontario Human Rights Code (OHRC) is a provincial legislation in Ontario, Canada, that provides legal protections against discrimination and harassment based on certain grounds. It sets out the rights and responsibilities related to human rights in various areas of public life, including employment, housing, goods and services, and education.

ATTACHMENTS

- Appendix 1: Current Code of Ethics for Dietitians in Ontario (2019)
- Appendix 2: Draft Code of Ethics for Dietitians in Ontario

CODE OF ETHICS

Approved by the Council March 29, 2019

Dietitians have a fundamental responsibility to act in an ethical manner. Ethics is about the values that guide dietitians' decisions and actions in various contexts. This *Code of Ethics* has been developed to clearly articulate the application of four healthcare ethical principles: beneficence (to do good), non-maleficence (do no harm), respect for persons/justice and respect for autonomy all of which guide evidence-based dietetic practice.

All members are responsible for applying the *Code of Ethics* requirements in the context of their own specific professional working environments. The College holds members accountable for adhering to the Code of Ethics and will inquire into allegations of a breach and take appropriate action(s) in relation to the severity of the breach.

The *Code of Ethics*, standards of practice and all relevant legislation, policies and guidelines are companion documents and none of these should be read or applied in isolation of the others. It is not unusual for there to be duplication within these documents as requirements may be both ethical and legal.

1. RESPECT FOR AUTONOMY: DIETITIANS WILL TREAT CLIENTS AND/OR THEIR SUBSTITUTE DECISION-MAKER AS SELF-GOVERNING DECISION-MAKERS.

Application: A registered dietitian demonstrates this principle by ensuring that they:

- a. acknowledge and accept client's choices when obtaining informed consent for nutrition treatment and knowledgeable informed consent for collecting, using and disclosing personal health information; and
- b. consider the specific needs, wants and goals of clients to provide client-centered services. Be open to client input, respect decisions, accommodate choices and document the treatment accordingly.

2. BENEFICENCE - TO DO GOOD: DIETITIANS WILL ACT IN THE BEST INTEREST OF CLIENTS AND SOCIETY.

Application: A registered dietitian demonstrates this principle by ensuring that they:

- a. demonstrate professionalism, constructive dialogue and civility in all communications, including when using social media;

- b. report inappropriate behavior or treatment of a client by fulfilling reporting obligations;
- c. take responsibility by being accountable for one's actions when practising dietetics;
- d. bill clients to reflect the extent of delivered services and maintain financial records whenever billing occurs in dietetic practice;
- e. practice using an evidence-based approach to meet a client's needs. Evidence-based practice refers to using the best evidence in balancing anticipated benefits and risks in supporting decisions for optimizing client-centered dietetic services; and
- f. collaborate with interprofessional colleagues, participate in and contribute to decisions that affect the well-being of clients.

3. NON-MALEFICENCE - DO NO HARM: DIETITIANS WILL AVOID AND MINIMIZE HARM TO OTHERS.

Application: A registered dietitian demonstrates this principle by ensuring that they:

- a. provide accurate and truthful information in all communications;
- b. refrain from communicating false, fraudulent, deceptive, misleading, disparaging or unfair statements or claims;
- c. refrain from verbal/physical/emotional/sexual harassment;
- d. uphold professional boundaries and abstain from sexual relationships with any clients;
- e. avoid conflicts of interest. Identify and manage potential situations that may lead to conflicts of interest, including any financial interests in products or services that are recommended. Refrain from accepting gifts or services which potentially influence or which may give the appearance of influencing professional judgement;
- f. implement appropriate measures to protect personal health information and safeguard client confidentiality according to current legislation, regulations and standards;
- g. practice within the limits of individual competence and scope of practice, know when to refer and collaborate with the inter-professional team;
- h. remain conscious of the need to be risk-aware and to identify any potential type of harm when practicing dietetics;
- i. identify risk of harm characteristics:
 - i. type of harm;
 - ii. the likelihood of the risk (rare, unlikely, possible, almost certain);
 - iii. frequency (almost never, sometimes, every day, monthly, always);
 - iv. impact or severity of harm (low, moderate, high, extreme);

- v. duration (one-time, short, long or indefinite period of time);
 - vi. determine whether the risk of harm is perceived (irrational beliefs or emotions) or rational.
- j. determine how best to mitigate the risk of harm in the specific situation, respond with appropriate actions and apply protective factors as applicable:
- i. deciding to do nothing may be a viable risk response but avoiding a response or ignoring a risky situation may lead to harm or professional misconduct. Communication and networking may be necessary for the implementation of effective protective factors in response to mitigating risk;
 - ii. determine whether others (interprofessional care team, organization, regulatory college, professional association or other stakeholders) need to be involved in the decision-making process, development and implementation of the protective factors.

4. RESPECT FOR PERSONS/JUSTICE: DIETITIANS WILL SHOW RESPECT AND TREAT OTHERS FAIRLY AND EQUITABLY.

Application: A registered dietitian demonstrates this principle by ensuring that they:

- a. act in a caring and respectful manner and treat people with dignity;
- b. provide culturally safe and culturally competent care. Refocus one's behaviour, attitude, awareness, knowledge, skills and policies to better serve the interests of the public;
- c. collaborate with others to reduce health disparities and protect human rights; promote fairness and equitable treatment;
- d. maintain objectivity, which is essential for any dietitian in order to exercise professional judgement;
- e. be collegial, have an understanding of how to work effectively with others and to manage conflicts; and
- f. contribute knowledge, skills and judgement and a professional attitude focused on client welfare to activities that promote safe, client-centred dietetic practices.

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Draft Code of Ethics

PURPOSE

The Code of Ethics guides ethical dietetic practice for dietitians registered with the College of Dietitians of Ontario. It defines values, principles and expectations applicable across all contexts and decision-making levels. It articulates the ethical standards for dietitians, dietetic practicum students and applicants to the college and is used to help clients, colleagues, and the public understand ethical commitments.

ETHICAL PRINCIPLES

The College has adopted a value-based Code of Ethics, which applies healthcare principles to guide evidence-informed¹ and culturally safe² dietetic practice. These principles align with professional values like cultural humility³, integrity, responsibility, excellence, and trustworthiness. Key principles include:

- **Respect for autonomy:** Acknowledges the decision-making rights of individuals and ensures client⁴-informed consent.
- **Beneficence (doing good):** Promoting population/public health, equity, and accountability.
- **Non-maleficence (not harming):** Emphasizes harm reduction.
- **Respect for persons/justice:** Advocates for fair treatment and just and equitable distribution of resources and services to benefit society.

USING THE CODE OF ETHICS

The Code of Ethics aligns with other College standards, legislation, policies, and guidelines. It forms an ethical framework for dietetic practice, supporting informed decisions, upholding care and professionalism and building trust in dietitians. Ethical expectations are organized into responsibilities to the client, the public, the individual practitioner (self), and the profession.

¹ Evidence-informed practice brings together the best available research evidence and the dietitian's experiential knowledge, along with the client's preferences, context, and available resources in the decision-making process (Integrated Competencies for Dietetic Education and Practice (ICDEP), 2020)

² Cultural safety is an outcome based on respectful engagement that recognizes and strives to address power imbalances inherent in the healthcare system. It results in an environment free of racism and discrimination, where people feel safe receiving health care (ICDEP, 2020).

³ Cultural humility is a process of self-reflection to understand personal and systemic biases and to develop and maintain respectful processes and relationships based on mutual trust. Cultural humility involves humbly acknowledging oneself as a learner when it comes to understanding another's experience." (First Nations Health Authority (n.d.)).

⁴Client is defined as the recipient of dietetic service regardless of setting (e.g., an individual, population, employee, business, employer, or agency etc.) A client-centred approach emphasizes respect for the individual and focuses on the therapeutic or counselling relationship between the dietitian and the client.

A registered dietitian demonstrates this expectation when making ethical choices by ensuring:

1. RESPONSIBILITY TO CLIENTS

- a. Acknowledge, respect and uphold the client's choices and rights for informed consent, research and personal health information.
- b. Treat each question and comment uniquely, avoiding assumptions about backgrounds or beliefs. Seek clarification and respond empathetically to create a safe and supportive environment.
- c. Commit to acknowledge and honour each client's inherent worth, value and cultural beliefs without discrimination, respecting their ways of knowing⁵.
- d. Consider clients' specific needs, wants and goals to provide client-centred services. Be open to client input, respect decisions, accommodate choices and document the treatment accordingly.
- e. Bill clients accurately in a manner that reflects the services that were delivered and maintain financial records whenever billing occurs in dietetic practice.
- f. Uphold professional boundaries and abstain from personal relationships with clients, including sexual relationships and conduct that could be perceived as sexual.
- g. Create an inclusive environment by actively including diverse individuals in decision-making, addressing power imbalances and recognizing the whole person beyond labels or roles.
- h. Implement measures to protect personal health information, ensuring confidentiality and privacy according to current legislation, including when using artificial intelligence, social media, and virtual care.
- i. Act caringly, respect client dignity, and treat people⁶ with empathy and compassion. Strive to create a welcoming, trusting, respectful and safe environment.
- j. Offer trauma-informed, culturally sensitive, anti-oppressive care by understanding and respecting cultural beliefs, addressing trauma, facilitating healing, and preventing re-traumatization.
- k. Contribute knowledge, skills, judgement, and a professional attitude focused on client welfare to promote safe, client-centred dietetic practices.
- l. Provide equitable care to all clients regardless of personal attributes such as race, ethnicity, gender identity and gender expression⁷, sexual orientation, body size/weight, age, religion, or socioeconomic status.
- m. Collaborate respectfully with colleagues, clients, caregivers, and relevant partners (including spiritual leaders and elders) to provide care that meets specific client needs.

⁵ Cultural ways of knowing refers to how “different cultures and communities acquire, interpret, and apply knowledge. It recognizes that knowledge is not universally acquired or understood in the same way across all cultures, and it emphasizes the importance of respecting and valuing diverse ways of knowing”.

⁶ “Peoples” means a distinct group of persons who are linked by a common identity, culture, history, and collective interests.

⁷ The Ontario Human Rights Code (OHRC), a provincial legislation in Ontario, Canada, provides legal protections against discrimination and harassment based on certain grounds. It sets out the rights and responsibilities related to human rights in various areas of public life, including employment, housing, goods and services, and education.

- n. When utilizing artificial intelligence⁸ (AI) tools like Chatbots and virtual assistants⁹, ensure they are consistent with equity, diversity and inclusion principles, serving all clients impartially, free from bias based on attributes such as sex, gender, or race.
- j. Practise using an evidence-informed approach to meet a client's needs and combine evidence with a client's preferences and traditions for client-centred dietetic services.
 - i. Optimize food and nutrition decisions by considering benefits and risks while prioritizing each client's unique needs and values, making their requirements the primary focus.
 - ii. acknowledge the limitations of evidence-informed practice, including that research evidence is only one type and often reflects Western knowledge and methodologies. Consider all relevant contexts, traditions, and knowledge.
 - iii. Recognize that clients may approach their health and wellness, food and nutrition in various ways. Be aware of personal, social, economic and environmental factors determining individual and population health¹⁰. Dietitians may need to learn and unlearn to honour and respect client knowledge, cultural and Indigenous ways of knowing¹¹ in client practices and be mindful of the uniqueness and complexity of clients' experiences and realities.

2. RESPONSIBILITY TO THE PUBLIC

- a. Demonstrate professionalism, constructive dialogue, integrity, and civility in all communications, including virtual care and on social media.
- b. Act transparently and ethically in all professional and business dealings, including concerning fees, advertising, and managing conflicts of interest.
 - a. Transparently, publicly, and comprehensively disclose any financial or material relation with for-profit or not-for-profit third parties whose interests may be affected by the content of the advertising.
 - b. Uphold ethical integrity by avoiding conflicts of interest¹². Identify circumstances that could result in a conflict of interests, particularly those involving financial, contractual, or material relationships with commercial

⁸ Artificial Intelligence (AI) tools are software applications or systems that leverage and generate various artificial intelligence techniques to perform specific tasks or functions. These tools are designed to mimic human cognitive functions such as learning, problem-solving, reasoning, and decision-making, often in an automated or semi-automated manner.

⁹ AI-powered chatbots and virtual assistants use natural language processing (NLP) to engage in text or voice-based conversations with users, answer questions, and provide assistance.

¹⁰ The main determinants of health include income and social status, employment and working conditions, education and literacy, childhood experiences, physical environments, social supports and coping skills, healthy behaviours, access to health services, biology and genetic endowment, gender, culture or race/racism (Government of Canada, 2022).

¹¹ Preferred by many Indigenous scholars, recognizing Indigenous rights, reconciliation and the importance of addressing historical injustices and working toward a more equitable future for Indigenous peoples. Cultural or Indigenous ways of knowing refers to how cultures develop diverse worldviews over time. There is no single way of “knowing,” and different cultures may approach knowledge in different ways.

¹² A conflict of interest is defined as a situation in which the existence of secondary interests or obligations risks compromising (or appearing to compromise) an individual's primary obligation to make decisions in the public's interest and on the basis of the best available evidence.”

(Rodwin M. A. (2018). Attempts to redefine conflicts of interest. *Accountability in research*, 25(2), 67–78. <https://doi.org/10.1080/08989621.2017.1405728>).

entities that have an interest in the outcomes of dietetic practice. These relationships represent a high risk for influencing or undermining the dietitian's primary obligation to exercise professional judgment on a patient's or the public's behalf. Conflicts of interest should be prevented wherever possible (i.e., by eschewing gifts or payments from interested third parties). If not possible, conflicts of interest should be decisively managed publicly and comprehensively disclosed.

- c. Act in a trustworthy manner at all times.
- d. Be aware of potential harm when practising dietetics and identify risk characteristics, including the type, likelihood, frequency, impact, duration, and whether they are perceived as rational or irrational¹³.
 - a. Determine the best way to mitigate harm in the situation, take appropriate actions and apply protective factors, such as ongoing education and training to enhance cultural competence, safety, and humility, including a grasp of equity, diversity, inclusion and belonging principles.
 - b. While taking no action can be a valid risk response, avoiding or ignoring risks can lead to harm. Effective protective measures may involve communication and collaboration with interprofessional care teams, organizations, regulatory colleges, professional associations, or other system partners.
- k. Approach technology, including AI tools, to uphold human autonomy, ensuring individuals retain decision-making authority, especially regarding person-centred outcomes. When using AI in healthcare, integrate it responsibly and ethically, improving dietetic services with professionalism and compassion.
- l. Complete and organize record keeping for easy access, promote collaboration with other healthcare providers, adhere to legal requirements, and safeguard client confidentiality.
- e. Comply with reporting duties by promptly reporting inappropriate behaviour or treatment, including self-reporting as required by law¹⁴
- f. Provide optimal care to reduce health disparities, protect human rights, and promote fairness and equity. Eliminate barriers to culturally safe care for equity-deserving¹⁵ groups, contribute to improving access to dietetic care when possible, and contribute to addressing and preventing systemic racism and discrimination in healthcare.
- g. Operate efficiently within the healthcare system while demonstrating responsible resource management.
- h. Regularly evaluate the quality and effectiveness of services.

¹³ refers to whether the perceived risk or harm is based on logical, evidence-based reasoning or if it is driven by emotional, unfounded, or irrational beliefs and fears. When assessing potential harm in dietetics, it's important to consider whether the concerns are grounded in sound reasoning and evidence, or if they are based on irrational or emotional reactions that may not be supported by evidence.

¹⁴ Mandatory reports are legally mandated, necessitating submission to the designated authority for specified reasons.

¹⁵ Equity-deserving groups" refer to communities or individuals who have historically experienced disadvantages, discrimination, or inequities in society. These groups may include but are not limited to racial and ethnic minorities, 2SLGBTQIA+ individuals, people with disabilities, indigenous populations, and other marginalized communities. The term emphasizes the need for equitable treatment and opportunities to address historical and systemic disparities.

3. RESPONSIBILITY TO SELF AND THE PROFESSION

- a. Be accountable for one's actions when practising dietetics. Be aware of one's power, position and privilege. Avoid exploiting power imbalances. Ensure that any public platform represents independent expertise and is exercised in the interest of public health.
- b. Engage in reflective practice, identify learning needs and participate in continuing education, ongoing training, and staying updated on best practices, including AI ethics and technology change for continued competence, quality assurance and quality improvement, professional growth and currency. Support and foster learning together with colleagues and students.
- c. Maintain awareness of contexts when interacting with individuals and technology to uphold a compassionate approach in professional conduct.
- d. Assume responsibility for your physical and mental well-being and avoid practising dietetics when your capacity to deliver appropriate and competent services is compromised.
- e. Provide accurate and truthful information in all communications. Avoid conveying falsehoods, fraudulent content, deceptive messages, misleading information, disparaging remarks, hateful content or unfair statements or claims.
- f. Ensure decision-making remains independent of third-party interests, accountable to clients, and client-focused (i.e., putting the client's interests first) to foster trust and credibility.
- g. Be reflexive and aware of personal biases and work to mitigate them in interactions with people, including clients and colleagues, to promote equity and inclusivity.
- h. Practise within the limits of individual competence and scope of practice. Know when to refer and collaborate with an inter-professional team to support collaborative care, communication, and respect for colleagues.
- i. Maintain independence and commit to continuing learning to support a dietetic practice that is sound and grounded in the best available evidence and client-centred care., which is essential to exercise professional judgment.
- j. Refrain from verbal/physical/emotional/sexual harassment.
- k. Be collegial, understand how to work effectively with others and manage interpersonal and collaborative relations.
Refrain from harassing, abusing, or discriminating against others, such as colleagues, employees, or students.

For questions, please feel free to contact the College's Practice Advisory Service:
practiceadvisor@collegeofdietitians.org 416-598-1725 / 1-800-668-4990, ext. 397.

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Board Briefing Note

Topic:	Amendments to the Executive Committee's Terms of Reference
Purpose:	Decision Required
Strategic Plan Relevance:	Governance Modernization and Enhancing Public Trust
From:	Executive Committee

ISSUE

To consider amendments to the Executive Committee's terms of reference to reduce the Committee's role in alignment with CDO's governance modernization goals.

PUBLIC INTEREST RATIONALE

Governance best practices support reducing the role of the Executive Committee in favour of utilizing the collective competencies and attributes of the Board and allowing for greater transparency, accountability and inclusivity in decision making. Aligning the structure of the Executive Committee with governance best practices will strengthen the Board's ability to fulfill its oversight role and will reinforce CDO's commitment to its public protection mandate.

BACKGROUND

At its June 2022 meeting, the Board approved a governance modernization roadmap that reflects best practices in regulatory governance, including the reduction of the Executive Committee's role. This governance structure is designed to further the CDO's public protection mandate while strengthening public trust.

At its November 2023 meeting, the Executive Committee considered an amended draft terms of reference (*Appendix 1 & Appendix 2*) and made a recommendation to the Board for approval.

CONSIDERATIONS

The College is required to have an Executive Committee, as set out in the [Health Professions Procedural Code](#) (the Code). The Committee's statutory mandate is to act on matters requiring immediate attention between meetings of the Board, except to make, amend or revoke

[December 14 & 15, 2023 Meeting]

regulations or bylaws. The Code does not require the Executive Committee to meet, only that it exists.

In 1991, when the legislation was adopted, technology to facilitate remote meetings was not as accessible as it is currently, which would have created challenges for the Board to meet quickly on urgent matters outside of scheduled meetings. The Board's adoption of virtual meeting technology coupled with its gradual reduction in size, makes the Board nimbler and able to quickly assemble to address pressing matters.

The proposed amendments to the Executive Committee's Terms of Reference, if approved, will require some responsibilities to be redistributed to the Governance and Audit Committees. Doing so will also require future amendments to the terms of reference of those respective committees.

Proposed Redistribution of Executive Committee Tasks

The proposed redistribution of responsibilities aligns with the evolving roles of the Governance and Audit Committees and expands on their current expertise.

The following responsibilities can be redistributed to the Governance Committee:

- Facilitating the effectiveness of Board governance by reviewing processes related to the governance and making recommendations to the Board.
- Recommending membership of committees to the Board.
- Making appointments to committees to fill vacancies.

The following responsibilities can be redistributed to the Audit Committee:

- Recommending annual operating and capital budgets to the Board.
- Making recommendations to the Board on the College's financial management policies.
- Making recommendations relating to the financial reserves of the College.
- Reporting to the Board on the financial affairs of the College.

If the reduced role of the Executive Committee is approved, along with the redistribution of responsibilities to the other committees, Bylaw 1 will require amendments to empower the Board to operate with limited involvement by the Executive Committee, meet more quickly, and to address the committee roles specified within it. These responsibilities will also be considered when developing committee specific competencies and attributes in the future.

Amendments to the Executive Committee's Terms of Reference, if approved, would come into effect after the June Board meeting, when Bylaw 1 is anticipated to be considered and approved.

RECOMMENDATION

To approve the amended Executive Committee Terms of Reference as presented.

Should the recommendation be approved, amendments to the Governance and Audit Committee Terms of Reference will be drafted for committee approval and subsequent consideration by the Board. Amendments to Bylaw 1 will also be drafted for consideration by the Board at its June meeting.

ATTACHMENTS

- Appendix 1: Draft Executive Committee Terms of Reference – Tracked
- Appendix 2: Draft Executive Committee Terms of Reference – Clean

Draft Executive Committee Terms of Reference

Committee Category

Statutory

Overview/Mandate

The Executive Committee ~~is a statutory committee of Council that promotes governance excellence and facilitates the effective functioning of the College. The Committee acts on behalf of Council~~ the Board in circumstances requiring immediate action.

Regulatory Limitations

- Cannot make, amend or revoke bylaws or regulations.
- Cannot appoint or remove an officer of the College.
- Must report to the Board at the next meeting anytime Board powers are exercised.

Additional Parameters

- Only meets as set out below and as necessary for matters requiring urgent attention.
- Wherever possible, the Executive Committee makes recommendations to the Board rather than making decisions on behalf of the board.

Duties and Responsibilities

In addition to its legislative mandate, the Executive Committee is responsible for the following:

Governance – Facilitating Effective Council Functioning

Facilitating effective Board functioning

- ~~1. Facilitates the effectiveness of Council governance by reviewing processes related to the governance of Council and making recommendations to Council.~~
1. Reviews and approves the agenda for Council/Board meetings as prepared by College staff for clarity, priority, and alignment with strategic goals.
2. Monitor Board and committee evaluation reports on an ongoing basis and consider relevant issues and opportunities.
- ~~3. Reviews the evaluations of Council meetings to identify process improvements for recommendation to the board.~~
- ~~4. Reviews the annual committee evaluations to identify concerns and identify process improvements.~~
- ~~5. Reviews Council member self-reflection~~
- ~~6. Receives updates on key trends and issues in the regulatory environment.~~
- ~~7. Participates in the strategic planning process.~~
3. Acts in an advisory capacity to Council on the financial affairs of the College, in accordance with by-law 1, article 11.2.

Registrar relations

- ~~8.4. Makes recommendations to Council/the Board on the appointment of the Registrar & Executive Director.~~
- 9.5. Approves the terms of the employment contract of the Registrar & Executive Director.
- 10.6. Liaise with and provide support to the Registrar & Executive Director.

Managing Board and committee conduct

1. Receive and assess concerns about Board directors to determine whether matters warrant Board consideration.
2. Notify Board directors if a concern has been raised about them that meets the criteria for disqualification, and ensures due process is followed in the management and resolution of concerns.
3. Facilitate the removal of committee appointees.

Governance — Facilitating Effective Committee Functioning

- ~~1. Recommends membership of committees, other than the Executive Committee, to Council in June, based on committee composition requirements.~~
- ~~2. Makes appointments to statutory committees to fill vacancies, other than the Executive Committee, including appointments from the College's roster of eligible members.~~
- ~~3. Removes an appointed committee member in accordance with the provisions of by-law 1, article 9.3.~~
- ~~4. Assigns duties as required to non-statutory committees.~~

Financial Oversight

- ~~1. Recommends annual operating and capital budgets to Council.~~
- ~~2. Makes recommendations relating to the financial reserves of the College.~~
- ~~3. Reports at least annually to the Council on the financial affairs of the College.~~

Matters Relating to Councillor Conduct

- ~~1. Receives written reports from Councillors if there is a belief that an elected or public Councillor meets one or more of the criteria for disqualification under by-law 1, article 4.10.~~

Membership Committee Composition

The Executive Committee is composed of ~~four Councillors, as follows:~~the Chair of the Board, the Vice-Chair and two other members of the Board. There must be at least one public director on the committee.

- ~~• The President~~
- ~~• The Vice-President~~
- ~~• Third member~~
- ~~• Fourth member~~
- ~~• At least one of which is a public councillor~~

Term of Office

~~The term of office for members of the Executive Committee is approximately one year. All members of the Executive Committee are elected by the Council at the first Council meeting of the year, among the members of Council.~~
The members of the committee are elected annually by the Board.

Quorum

A majority of committee members constitutes a quorum for a meeting of a committee. A committee vacancy is not counted in determining whether a quorum is present.

Decision Making

The Committee will endeavour to arrive at decisions by consensus and all committee members will be involved in the consensus-making process. Where a decision cannot be reached by consensus, the decision will be made by a majority of the votes.

Chair

The ~~President of the Council~~Chair of the Board will serve as the chair of the Executive Committee.

Reporting

The Committee reports on its activities at every Board meeting. The Committee prepares an annual report of its activities at the end of each fiscal year.

Resources

The Committee is supported by the Registrar & Executive Director. Other staff may provide support to the Committee from time to time.

Meeting Frequency

Virtual meetings

- ~~• Approximately six times a year~~
- ~~• Additional meetings scheduled as required~~
- ~~• Approximately two hours in length~~

In-person meetings

- ~~• Approximately two times a year~~
- ~~• Additional meetings scheduled as required~~
- ~~• Full-day meeting~~

Staff Support

- ~~Registrar & Executive Director~~
- ~~Manager of Governance and Operations~~
- ~~Executive and General Duties Administrative Assistant~~

Executive Committee Terms of Reference

Committee Category

Statutory

Mandate

The Executive Committee acts on behalf of the Board in circumstances requiring immediate action.

Regulatory Limitations

- Cannot make, amend or revoke bylaws or regulations.
- Cannot appoint or remove an officer of the College.
- Must report to the Board at the next meeting anytime Board powers are exercised.

Additional Parameters

- Only meets as set out below and as necessary for matters requiring urgent attention.
- Wherever possible, the Executive Committee makes recommendations to the Board rather than making decisions on behalf of the board.

Duties and Responsibilities

In addition to its legislative mandate, the Executive Committee is responsible for the following:

1. Facilitate effective Board functioning.
2. Review and approve the agenda for Board meetings as prepared by College staff for clarity, priority, and alignment with strategic goals.
3. Monitor Board and committee evaluation reports on an ongoing basis and consider relevant issues and opportunities.

Registrar Relations

1. Make recommendations to the Board on the appointment of the Registrar & Executive Director.
2. Approve the terms of the employment contract of the Registrar & Executive Director.
3. Liaise with and provide support to the Registrar & Executive Director.

Managing Board and Committee Conduct

1. Receive and assess concerns about Board directors to determine whether matters warrant Board consideration.
2. Notify Board directors if a concern has been raised about them that meets the criteria for disqualification, and ensures due process is followed in the management and resolution of concerns.
3. Facilitate the removal of committee appointees.

Committee Composition

The Executive Committee is composed of the Chair of the Board, the Vice-Chair and two other members of the Board. There must be at least one public director on the committee.

Term of Office

The members of the committee are elected annually by the Board.

Quorum

A majority of committee members constitutes a quorum for a meeting of a committee. A committee vacancy is not counted in determining whether a quorum is present.

Decision Making

The Committee will endeavour to arrive at decisions by consensus and all committee members will be involved in the consensus-making process. Where a decision cannot be reached by consensus, the decision will be made by a majority of the votes.

Chair

The Chair of the Board will serve as the chair of the Executive Committee.

Reporting

The Committee reports on its activities at every Board meeting. The Committee prepares an annual report of its activities at the end of each fiscal year.

Resources

The Committee is supported by the Registrar & Executive Director. Other staff may provide support to the Committee from time to time.



College of Dietitians of Ontario (CDO) Land Acknowledgement

Board attachment 0.0

We acknowledge that the College of Dietitians of Ontario's office is located on the traditional territory of many nations including the Mississaugas of the Credit, the Anishnabeg, the Chippewa, the Haudenosaunee and the Wendat peoples and is now home to many diverse First Nations, Inuit and Métis peoples. We also acknowledge that Toronto is covered by Treaty 13 with the Mississaugas of the Credit.

We are acknowledging the traditional keepers of these lands as part of a deeper commitment to Ontario's Indigenous communities. As provincial health regulators, we have a large role to play in reconciliation to meet the broader goal of public protection.

Mission

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Vision

The College of Dietitians of Ontario delivers regulatory excellence to contribute to the health of Ontarians.

Values

Integrity | Collaboration | Accountability | Transparency | Innovation | EDI-B

Board Action List

Actions as of November 24, 2023				
Meeting Date	Agenda Item	Action	Status	Notes
September 29	6. Executive committee election	Onboarding and orientation for new Executive Committee member	Complete	
	7. Committee compositions	Onboarding and orientation for new committee appointee	Complete	
	9. Management report	Provide additional information regarding amalgamation at future board meeting.	Complete	Included in December 15, 2023 regulatory trends presentation.
	14. Appointment of auditor	Revisit investment strategy - options - audit committee consideration	Complete	Audit committee considered on November 27, 2023.
		Advise auditor reappointment.	Complete	
	15. Indigenous Panel	Include College of Dietitians of Alberta standard as a follow up to share with board in future management report.	In progress	Resources not yet available.
	16. EDI Report and Benchmarking	Publish EDI-B report	Complete	

Acronyms	Definition	Board Attachment 0.0		
ACEND	Accreditation Council for Education in Nutrition in Dietetics (United States)			
BBI	Behaviour Based Interview			
CAG	Citizens Advocacy Group			
CDR	Commission on Dietetic Registration (United States)			
CDRE	Canadian Dietetic Registration Examination			
CLEAR	Council on Licensure, Enforcement and Regulation			
CNAR	Canadian Network of Agencies for Regulation			
COI	Conflict of Interest			
CPMF	College Performance Measurement Framework			
DA	Dietitians Australia			
DC	Dietitians of Canada			
DELFO	Dietetic Education and Leadership Forum of Ontario			
EDI-B	Equality, Diversity, Inclusion & Belonging			
HIROC	Healthcare Insurance Reciprocal of Canada			
HPARB	Health Professions Appeal and Review Board			
HPRO	Health Profession Regulators of Ontario			
ICDEP	Integrated Competencies for Dietetic Education and Practice			
ICRC	Inquiries, Complaints and Reports Committee			
IPC	Information and Privacy Commissioner (Ontario)			
JKAT	Jurisprudence Knowledge & Assessment Tool			
KCAT	Knowledge and Competence Assessment Tool (part of Registration program's PLAR process)			
MAID	Medical Assistance in Dying			
MOH	Ministry of Health (Ontario)			
OFC	Office of the Fairness Commissioner (Ontario)			
PAPA	Practice Advisor and Policy Analyst			
PBA	Performance Based Assessment			
PDEP	Partnership for Dietetic Education and Practice			
PHIPA	Personal Health Information Protection Act, 2004			
PLAR	Prior Learning Assessment and Recognition process (part of Registration program)			
PPA	Peer and Practice Assessment (part of QA) – may transition to PIA = Practice Improvement Assessment			
PPC	Professional Practice Committee			
QA	Quality Assurance			
QAC	Quality Assurance Committee			
RD	Registered Dietitian			
RHPA	Regulated Health Professions Act, 1991			
SCERP	Specified Continuing Education Remediation Program			
SDL	Self-Directed Learning Tool (part of QA program)			
SMART	(Goals) specific, measurable, attainable, realistic, timebound			
TCL	Term, Condition and Limitation			
Health Regulatory Colleges				
Acronyms	Definition			
CASLPO	College of Audiologists and Speech-Language Pathologists of Ontario			
CCO	College of Chiropractors of Ontario			
CDHO	College of Dental Hygienists of Ontario			
CDO	College of Denturists of Ontario			
CDO	College of Dietitians of Ontario			
CDTO	College of Dental Technologists of Ontario			
CMLTO	College of Medical Laboratory Technologists of Ontario			
CMO	College of Midwives of Ontario			
CMRITO	College of Medical Radiation and Imaging Technologists of Ontario			

CMTO	College of Massage Therapists of Ontario			
CNO	College of Nurses of Ontario			
COCOO	College of Chiropodists of Ontario			
COKO	College of Kinesiologists of Ontario			
CONO	College of Naturopaths of Ontario			
COO	College of Optometrists of Ontario			
COO	College of Opticians of Ontario			
COTO	College of Occupational Therapists of Ontario			
CPO	College of Physiotherapists of Ontario			
CPO	College of Psychologists of Ontario			
CPSO	College of Physicians and Surgeons of Ontario			
CRPO	College of Registered Psychotherapists of Ontario			
CRTO	College of Respiratory Therapists of Ontario			
CTCMPAO	College of Traditional Chinese Medicine Practitioners & Acupuncturists of Ontario			
OCHM	College of Homeopaths of Ontario			
OCP	Ontario College of Pharmacists and Pharmacy Technicians			
RCDSO	Royal College of Dental Surgeons of Ontario			
Universities				
Acronyms	Definition			
NOSM	Northern Ontario School of Medicine (affiliated with NODIP)			
TMU	Toronto Metropolitan University			
UofG	University of Guelph			
UofO	University of Ottawa			
UofT	University of Toronto			
UWO	University of Western Ontario			
Practicum Programs				
Acronyms	Definition			
MAN	Master of Applied Nutrition (UofG)			
MHSc	Master of Health Science (TMU)			
MPH	Master of Public Health (UofT)			
MScFN	Masters of Science in Food and Nutrition (Brescia, UWO)			
NODIP	Northern Ontario Dietetic Internship Program (affiliated with NOSM)			
PMDip	Professional Masteres Diploma in Dietetics (TMU)			
Alliance of Canadian Dietetic Regulatory Bodies				
Acrolnym	Definition			
CDBC	College of Dietitians of British Columbia			
CDA	College of Dietitians of Alberta			
SDA	Saskatchewan Dietitians Association			
CDM	College of Dietitians of Manitoba			
CDO	College of Dietitians of Ontario			
ODNQ	Order of Dietitians and Nutritionists of Quebec			
NBAD	New Brunswick Association of Dietitians			
NLDC	Newfoundland and Labrador College of Dietitians			
NSCDN	Nova Scotia College of Dietitians and Nutritionists			
CDPEI	College of Dietitians of Prince Edward Island			

Goal 1: Regulatory Effectiveness & Performance Measurement	Goal 2: Transparent & Effective Communications	Goal 3: Risk-Based & Right Touch Regulation	Goal 4: Governance Modernization & Enhancing Public Trust
			
The CDO will Measure and Report our Regulatory Performance to the Public	The CDO will Communicate Effectively to Support Understanding of our Mandate, Services & Resources	The CDO will Make Decisions in Accordance with a Risk (Harm Reduction) Framework	The CDO will Update its Governance Model in Accordance with Evidence-Based Practices

These four goals will be accomplished through the following strategies:

<ul style="list-style-type: none"> Enhance IT systems and data governance to support data collection, analysis, reporting and security. Convey information about College effectiveness in clear, concise, transparent, and accessible reporting formats. 	<ul style="list-style-type: none"> Increase our understanding about the public and RDs and use learnings to design communication and educational initiatives. Enhance College consultation, outreach processes, and communication methods in a way that considers equity, diversity and inclusion (EDI), and right-touch regulation. Refresh College branding and use communication methods that are engaging, accessible and meet the evolving needs of the public, members, and other groups we engage with. 	<ul style="list-style-type: none"> Develop risk-based and right-touch regulation tools and processes for College decision-making. Align standards and resources for Registered Dietitians with risk-based, right-touch and EDI principles. Leverage organizational data and external information to identify and act on areas of risk. 	<ul style="list-style-type: none"> Implement governance initiatives that promote regulatory excellence, accountability and EDI principles. Operationalize EDI in College processes, policies and decision-making.
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CDO Board Voting Practices

Board directors have a fiduciary duty to the College and are required to act honestly, in good faith and in CDO's best interests. Directors exercise reasonable diligence and accountability and ensure that the public interest is at the forefront of all decision making.



Quorum. The minimum number of individuals required to have a meeting. For Board meetings, it is the majority of directors (50% +1) and does not require a specific composition of professional and public members. Vacancies do not count when determining quorum.

Motion. To introduce a new idea or action which is voted on.

Voting Options



For. You are comfortable moving forward with the proposed motion.



Against. You do not agree that the proposed motion is the best course of action for CDO.



Abstain. Is not a vote for or against.

You do not have enough information to make a decision.

You have a conflict of interest or bias.



Consensus is preferred.



Majority is required.



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<Original signed by>

Signature

Ann Watt

Name

August 2, 2023 | 8:08:25 PM EDT

Date



ANNUAL ACKNOWLEDGEMENT AND CONFIRMATION

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<Original signed by>

Signature

Arundhati Joshi

Name

July 20, 2023 | 1:46:29 PM EDT

Date



ANNUAL ACKNOWLEDGEMENT AND CONFIRMATION

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<Original signed by>

Signature

Barbara Grohmann

Name

July 22, 2023 | 9:13:56 AM EDT

Date



ANNUAL ACKNOWLEDGEMENT AND CONFIRMATION

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<Original signed by>

Signature

Barbara Major-McEwan

Name

July 20, 2023 | 8:12:58 PM EDT

Date



ANNUAL ACKNOWLEDGEMENT AND CONFIRMATION

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<Original signed by>

Signature

Brenda Murphy

Name

July 21, 2023 | 10:59:32 AM EDT

Date



ANNUAL ACKNOWLEDGEMENT AND CONFIRMATION

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<Original signed by>

Signature

Cindy Tsai

Name

July 20, 2023 | 4:43:03 PM EDT

Date



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<Original signed by>

Signature

Dawn van Engelen

Name

July 21, 2023 | 12:56:34 PM EDT

Date



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<Original signed by>

Signature

Denis Tsang

Name

July 20, 2023 | 12:29:31 PM EDT

Date



ANNUAL ACKNOWLEDGEMENT AND CONFIRMATION

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<Original signed by>

Signature

Donna Hennyey

Name

July 21, 2023 | 3:25:53 PM EDT

Date



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<Original signed by>

Signature

Hannah Chan

Name

July 24, 2023 | 9:50:50 AM EDT

Date



ANNUAL ACKNOWLEDGEMENT AND CONFIRMATION

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<Original signed by>

Signature

Jane Lac, RD

Name

July 22, 2023 | 9:42:57 PM EDT

Date



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<Original signed by>

Signature

John Regan

Name

July 23, 2023 | 5:46:02 AM EDT

Date



ANNUAL ACKNOWLEDGEMENT AND CONFIRMATION

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<Original signed by>

Signature

Julie Slack

Name

July 24, 2023 | 9:01:03 AM EDT

Date



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<Original signed by>

Signature

Khashayar Amirhosseini

Name

August 2, 2023 | 8:59:01 AM EDT

Date



ANNUAL ACKNOWLEDGEMENT AND CONFIRMATION

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<Original signed by>

Signature

Laura Bjorklund

Name

July 25, 2023 | 8:28:02 AM EDT

Date



ANNUAL ACKNOWLEDGEMENT AND CONFIRMATION

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<Original signed by>

Signature

NAVITA VIVEKY

Name

July 26, 2023 | 3:46:47 PM EDT

Date



ANNUAL ACKNOWLEDGEMENT AND CONFIRMATION

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<Original signed by>

Signature

Raynold D'Sa

Name

July 25, 2023 | 12:20:14 PM EDT

Date



ANNUAL ACKNOWLEDGEMENT AND CONFIRMATION

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<Original signed by>

Signature

Riley Aldrich

Name

July 20, 2023 | 2:10:45 PM EDT

Date



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<Original signed by>

Signature

Ruchika Wadhwa

Name

July 25, 2023 | 10:41:03 AM EDT

Date



ANNUAL ACKNOWLEDGEMENT AND CONFIRMATION

Board directors and committee members have a duty to understand and abide by their obligations to the College, as outlined in the Board's Code of Conduct policy. To achieve this, Board directors and committee members are expected to review the Board's governance policies and other materials.

I acknowledge and confirm that as a director of the Board or as a member of a Board committee:

1. I have read and am familiar with the College's by-laws and governance policies.
2. I stand in a fiduciary relationship with the College.
3. I am bound by and must comply with the by-laws and policies that apply to the Board, including the College's Code of Conduct and other established governance policies, by-laws relating to conflict of interest, the confidentiality policy, and the applicable role statements.
4. I must act in the public interest when making decisions on behalf of the College.
5. I am aware of my confidentiality obligations under section 36 of the RHPA and understand that it is an offence to breach section 36, with a fine upon conviction of up to \$25,000 for the first offence.

<Original signed by>

Signature

Santhikumar Chandrasekharan

Name

July 20, 2023 | 1:20:31 PM EDT

Date



ANNUAL ACKNOWLEDGEMENT AND CONFIRMATION

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4. I must act in the public interest when making decisions on behalf of the College.
5. I am aware of my confidentiality obligations under section 36 of the RHPA and understand that it is an offence to breach section 36, with a fine upon conviction of up to \$25,000 for the first offence.

<Original Signed by>

Signature

Sasha Miles

Name

July 20, 2023 | 12:29:25 PM EDT

Date



ANNUAL ACKNOWLEDGEMENT AND CONFIRMATION

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<Original signed by>

Signature

Sharanjit Padda

Name

July 25, 2023 | 10:54:48 AM EDT

Date



ANNUAL ACKNOWLEDGEMENT AND CONFIRMATION

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I acknowledge and confirm that as a director of the Board or as a member of a Board committee:

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2. I stand in a fiduciary relationship with the College.
3. I am bound by and must comply with the by-laws and policies that apply to the Board, including the College's Code of Conduct and other established governance policies, by-laws relating to conflict of interest, the confidentiality policy, and the applicable role statements.
4. I must act in the public interest when making decisions on behalf of the College.
5. I am aware of my confidentiality obligations under section 36 of the RHPA and understand that it is an offence to breach section 36, with a fine upon conviction of up to \$25,000 for the first offence.

<Original signed by>

Signature

Teresa Taillefer

Name

July 20, 2023 | 1:11:09 PM EDT

Date



Annual Conflict of Interest Declaration for Board and Committee Members

Board and committee members have a fiduciary duty to the CDO in which they must avoid situations where their personal, professional or financial interests or relationships conflict with their duties to the College. Board and Committee members should avoid situations where the duties they owe to the CDO may conflict with duties they owe to other organizations or individuals. The definition of 'conflict of interest', and obligations relating to conflicts of interest, are set out in CDO

[By-law 1: General By-law](#), Article 16:

16.1 Definition of Conflict of Interest

A conflict of interest exists if a reasonable person would conclude that a director or committee member's personal, professional or financial interest or relationship may affect his or her judgement, impartiality or the discharge of his or her duties to the College. A conflict of interest may be real or perceived, actual or potential, or direct or indirect.

16.2 Duty to Avoid and Consult

Directors and committee members must whenever feasible avoid situations in which they have or might have a conflict of interest. If a director or committee member is in doubt about whether he or she has or might have a conflict of interest, the director or committee member must consult with an appropriate person, for example the Chair of the Board, Registrar or legal counsel (if the conflict arises in a hearing setting).

16.3 Process for Resolution of Conflicts

If a director or committee member believes that he or she may have a conflict of interest in any matter relating to Board or committee business the director or committee member must consult with an appropriate person such as the Chair of the Board, Registrar or legal counsel (if the conflict arises in a hearing context). If there is any doubt as to whether a conflict exists the member must declare it to the Board of Directors or the committee and accept the Board of Director's or committee's decision as to whether a conflict exists. For adjudicative matters, a committee member should disclose the conflict at the earliest opportunity and in any case before the committee considers the matter.

A director or committee member who has a conflict of interest must:

- a) before any consideration of the matter, disclose the fact that he or she has a conflict of interest,
- b) not participate in any discussion of the matter,
- c) not attend any meeting of part or part of a meeting involving the matter, and
- d) not vote on the matter, or influence or try to influence the vote.

16.4 Undeclared Conflict

If a director or committee member believes another director or committee member has not declared a conflict of interest (despite information notification or inquiry) the director or committee member who has that belief must advise an appropriate person such as the Chair of the Board, Registrar or legal counsel (if the conflict arises in a hearing context). If Board of Directors or a committee chair concludes that a director or committee member respectively has an undeclared conflict of interest, the Board of Directors or the chair may direct the director or committee member to immediately comply with clauses (b), (c) and (d) of section 16.3.

DECLARATION OF CONFLICT OF INTEREST (COMPLETE ALL THAT APPLY)

I **have not** held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

I **do not** have any conflicts of interest to declare.

I **have** an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

Organization	Role

I **have** an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

--

I **have** changed my employment (job function, employer, etc.), volunteer involvement, or affiliations with other organizations within the past year.

Organization	Role

Ann Watt

I _____ have read the Board Code of Conduct, the CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

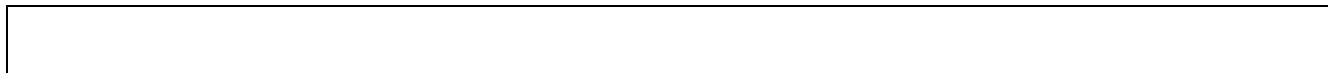
I confirm that if any information reported in this declaration changes, I will advise the Chair of the Board (or Registrar) immediately and prior to participating further in any ongoing Board and/or Committee discussion, correspondence, or business; and will also advise the Board at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Board and/or committee meetings should they arise.

DECLARATION OF OFFENCES, CHARGES AND BAIL CONDITIONS

***To be completed by public council members only.** *Elected council and committee members are required to make a declaration of offences, charges and bail conditions as part of their annual renewal process with the College and on an ongoing basis.*

I **have not** been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.

I **have** been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:



<Original signed by Ann Watt>

August 2, 2023 | 8:08:25 PM EDT

Signature

Date

DECLARATION OF CONFLICT OF INTEREST (COMPLETE ALL THAT APPLY)

I **have not** held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

I **do not** have any conflicts of interest to declare.

I **have** an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

Organization	Role

I **have** an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

--

I **have** changed my employment (job function, employer, etc.), volunteer involvement, or affiliations with other organizations within the past year.

Organization	Role

Arundhati Joshi

I _____ have read the Board Code of Conduct, the CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Chair of the Board (or Registrar) immediately and prior to participating further in any ongoing Board and/or Committee discussion, correspondence, or business; and will also advise the Board at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Board and/or committee meetings should they arise.

DECLARATION OF OFFENCES, CHARGES AND BAIL CONDITIONS

***To be completed by public council members only.** *Elected council and committee members are required to make a declaration of offences, charges and bail conditions as part of their annual renewal process with the College and on an ongoing basis.*

I **have not** been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.

I **have** been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:



<Original signed by Arundhati Joshi>

July 24, 2023 | 2:37:58 PM EDT

Signature

Date

DECLARATION OF CONFLICT OF INTEREST (COMPLETE ALL THAT APPLY)

I **have not** held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

I **do not** have any conflicts of interest to declare.

I **have** an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

Organization	Role

I **have** an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

--

I **have** changed my employment (job function, employer, etc.), volunteer involvement, or affiliations with other organizations within the past year.

Organization	Role

Barbara Grohmann

I _____ have read the Board Code of Conduct, the CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

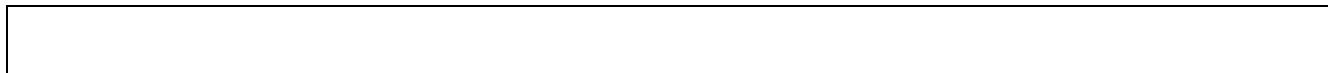
I confirm that if any information reported in this declaration changes, I will advise the Chair of the Board (or Registrar) immediately and prior to participating further in any ongoing Board and/or Committee discussion, correspondence, or business; and will also advise the Board at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Board and/or committee meetings should they arise.

DECLARATION OF OFFENCES, CHARGES AND BAIL CONDITIONS

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I **have not** been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.

I **have** been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:



<Original signed by Barbara Grohmann>

July 22, 2023 | 9:13:56 AM EDT

Signature

Date

DECLARATION OF CONFLICT OF INTEREST (COMPLETE ALL THAT APPLY)

I **have not** held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

I **do not** have any conflicts of interest to declare.

I **have** an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

Organization	Role

I **have** an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

--

I **have** changed my employment (job function, employer, etc.), volunteer involvement, or affiliations with other organizations within the past year.

Organization	Role
Clinton Family Health Team	Executive Director

Barbara Major-McEwan
I _____ have read the Board Code of Conduct, the CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

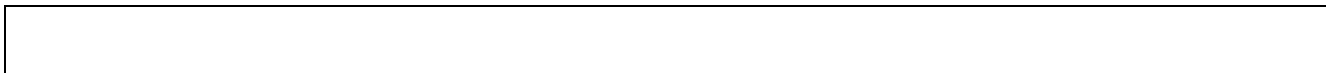
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DECLARATION OF OFFENCES, CHARGES AND BAIL CONDITIONS

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I **have not** been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.

I **have** been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:



<Original signed by Barbara Major McEwan>

July 20, 2023 | 8:12:58 PM EDT

Signature

Date

DECLARATION OF CONFLICT OF INTEREST (COMPLETE ALL THAT APPLY)

I **have not** held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

I **do not** have any conflicts of interest to declare.

I **have** an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

Organization	Role

I **have** an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

--

I **have** changed my employment (job function, employer, etc.), volunteer involvement, or affiliations with other organizations within the past year.

Organization	Role

Brenda Murphy

I _____ have read the Board Code of Conduct, the CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Chair of the Board (or Registrar) immediately and prior to participating further in any ongoing Board and/or Committee discussion, correspondence, or business; and will also advise the Board at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Board and/or committee meetings should they arise.

DECLARATION OF OFFENCES, CHARGES AND BAIL CONDITIONS

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I **have not** been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.

I **have** been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:



<Original signed by Brenda Murphy>

July 26, 2023 | 2:33:11 PM EDT

Signature

Date

DECLARATION OF CONFLICT OF INTEREST (COMPLETE ALL THAT APPLY)

I **have not** held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

I **do not** have any conflicts of interest to declare.

I **have** an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

Organization	Role

I **have** an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

--

I **have** changed my employment (job function, employer, etc.), volunteer involvement, or affiliations with other organizations within the past year.

Organization	Role

Cindy Tsai

I _____ have read the Board Code of Conduct, the CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Chair of the Board (or Registrar) immediately and prior to participating further in any ongoing Board and/or Committee discussion, correspondence, or business; and will also advise the Board at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Board and/or committee meetings should they arise.

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I **have not** been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.

I **have** been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:



<Original signed by Cindy Tsai>

July 20, 2023 | 4:43:03 PM EDT

Signature

Date

DECLARATION OF CONFLICT OF INTEREST (COMPLETE ALL THAT APPLY)

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I **do not** have any conflicts of interest to declare.

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Organization	Role

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I **have** changed my employment (job function, employer, etc.), volunteer involvement, or affiliations with other organizations within the past year.

Organization	Role

Dawn van Engelen

I _____ have read the Board Code of Conduct, the CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Chair of the Board (or Registrar) immediately and prior to participating further in any ongoing Board and/or Committee discussion, correspondence, or business; and will also advise the Board at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Board and/or committee meetings should they arise.

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I **have** been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:



<Original signed by Dawn van Engelen>

July 21, 2023 | 12:56:34 PM EDT

Signature

Date

DECLARATION OF CONFLICT OF INTEREST (COMPLETE ALL THAT APPLY)

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I **do not** have any conflicts of interest to declare.

I **have** an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

Organization	Role

I **have** an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

--

I **have** changed my employment (job function, employer, etc.), volunteer involvement, or affiliations with other organizations within the past year.

Organization	Role
Ontario Health	Lead, Clinical Programs

Denis Tsang

I _____ have read the Board Code of Conduct, the CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

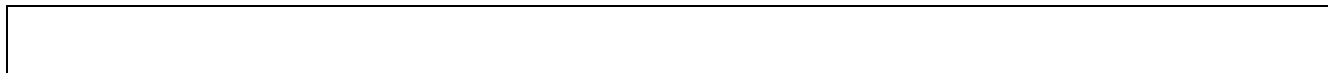
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I **have not** been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.

I **have** been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:



<Original signed by Denis Tsang>

July 24, 2023 | 8:27:21 AM EDT

Signature

Date

DECLARATION OF CONFLICT OF INTEREST (COMPLETE ALL THAT APPLY)

I **have not** held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

I **do not** have any conflicts of interest to declare.

I **have** an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

Organization	Role

I **have** an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

--

I **have** changed my employment (job function, employer, etc.), volunteer involvement, or affiliations with other organizations within the past year.

Organization	Role

Donna Hennyey

I _____ have read the Board Code of Conduct, the CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

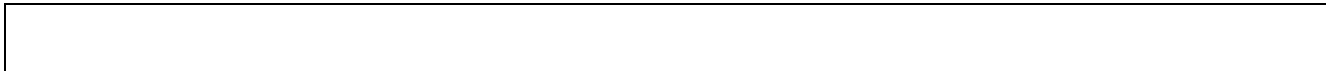
I confirm that if any information reported in this declaration changes, I will advise the Chair of the Board (or Registrar) immediately and prior to participating further in any ongoing Board and/or Committee discussion, correspondence, or business; and will also advise the Board at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Board and/or committee meetings should they arise.

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I **have not** been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.

I **have** been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:



<Original signed by Donna Hennyey>

August 4, 2023 | 8:58:40 AM EDT

Signature

Date

DECLARATION OF CONFLICT OF INTEREST (COMPLETE ALL THAT APPLY)

I **have not** held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

I **do not** have any conflicts of interest to declare.

I **have** an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

Organization	Role

I **have** an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

--

I **have** changed my employment (job function, employer, etc.), volunteer involvement, or affiliations with other organizations within the past year.

Organization	Role
Ontario Public Service - Ontario Cabinet Office	Senior Advisor

Hannah Chan

I _____ have read the Board Code of Conduct, the CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

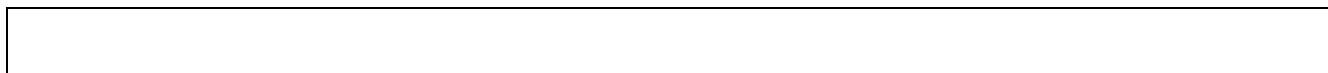
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I **have not** been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.

I **have** been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:



<Original signed by Hannah Chan>

July 24, 2023 | 9:50:50 AM EDT

Signature

Date

DECLARATION OF CONFLICT OF INTEREST (COMPLETE ALL THAT APPLY)

I **have not** held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

I **do not** have any conflicts of interest to declare.

I **have** an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

Organization	Role

I **have** an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

--

I **have** changed my employment (job function, employer, etc.), volunteer involvement, or affiliations with other organizations within the past year.

Organization	Role
College of Dietitians of Ontario	Professional Practice Committee Member
College of Dietitians of Ontario	Item Writer (Independent Contractor)

Jane Lac
I _____ have read the Board Code of Conduct, the CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Chair of the Board (or Registrar) immediately and prior to participating further in any ongoing Board and/or Committee discussion, correspondence, or business; and will also advise the Board at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Board and/or committee meetings should they arise.

DECLARATION OF OFFENCES, CHARGES AND BAIL CONDITIONS

***To be completed by public council members only.** *Elected council and committee members are required to make a declaration of offences, charges and bail conditions as part of their annual renewal process with the College and on an ongoing basis.*

I **have not** been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.

I **have** been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:



<Original signed by Jane Lac>

July 24, 2023 | 1:35:01 PM EDT

Signature

Date

DECLARATION OF CONFLICT OF INTEREST (COMPLETE ALL THAT APPLY)

I **have not** held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

I **do not** have any conflicts of interest to declare.

I **have** an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

Organization	Role

I **have** an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

--

I **have** changed my employment (job function, employer, etc.), volunteer involvement, or affiliations with other organizations within the past year.

Organization	Role

John Regan

I _____ have read the Board Code of Conduct, the CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Chair of the Board (or Registrar) immediately and prior to participating further in any ongoing Board and/or Committee discussion, correspondence, or business; and will also advise the Board at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Board and/or committee meetings should they arise.

DECLARATION OF OFFENCES, CHARGES AND BAIL CONDITIONS

***To be completed by public council members only.** *Elected council and committee members are required to make a declaration of offences, charges and bail conditions as part of their annual renewal process with the College and on an ongoing basis.*

I **have not** been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.

I **have** been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:



<Original signed by John Regan>

July 27, 2023 | 7:08:58 AM EDT

Signature

Date

DECLARATION OF CONFLICT OF INTEREST (COMPLETE ALL THAT APPLY)

I **have not** held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

I **do not** have any conflicts of interest to declare.

I **have** an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

Organization	Role

I **have** an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

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I **have** changed my employment (job function, employer, etc.), volunteer involvement, or affiliations with other organizations within the past year.

Organization	Role

Julie Slack

I _____ have read the Board Code of Conduct, the CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

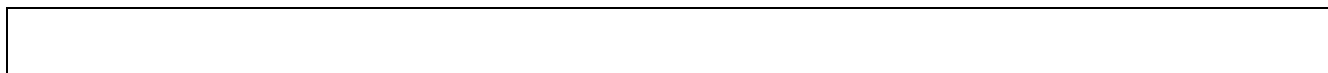
I confirm that if any information reported in this declaration changes, I will advise the Chair of the Board (or Registrar) immediately and prior to participating further in any ongoing Board and/or Committee discussion, correspondence, or business; and will also advise the Board at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Board and/or committee meetings should they arise.

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I **have not** been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.

I **have** been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:



<Original signed by Julie Slack>

July 24, 2023 | 9:01:03 AM EDT

Signature

Date

DECLARATION OF CONFLICT OF INTEREST (COMPLETE ALL THAT APPLY)

I **have not** held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

I **do not** have any conflicts of interest to declare.

I **have** an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

Organization	Role

I **have** an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

--

I **have** changed my employment (job function, employer, etc.), volunteer involvement, or affiliations with other organizations within the past year.

Organization	Role

I Khashayar Amirhosseini have read the Board Code of Conduct, the CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Chair of the Board (or Registrar) immediately and prior to participating further in any ongoing Board and/or Committee discussion, correspondence, or business; and will also advise the Board at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Board and/or committee meetings should they arise.

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***To be completed by public council members only.** *Elected council and committee members are required to make a declaration of offences, charges and bail conditions as part of their annual renewal process with the College and on an ongoing basis.*

I **have not** been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.

I **have** been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:



<Original signed by Khashayar Amirhosseini>

August 2, 2023 | 8:59:01 AM EDT

Signature

Date

DECLARATION OF CONFLICT OF INTEREST (COMPLETE ALL THAT APPLY)

I **have not** held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

I **do not** have any conflicts of interest to declare.

I **have** an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

Organization	Role

I **have** an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

--

I **have** changed my employment (job function, employer, etc.), volunteer involvement, or affiliations with other organizations within the past year.

Organization	Role

Laura Bjorklund

I _____ have read the Board Code of Conduct, the CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

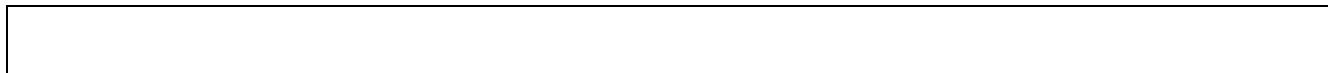
I confirm that if any information reported in this declaration changes, I will advise the Chair of the Board (or Registrar) immediately and prior to participating further in any ongoing Board and/or Committee discussion, correspondence, or business; and will also advise the Board at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Board and/or committee meetings should they arise.

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***To be completed by public council members only.** *Elected council and committee members are required to make a declaration of offences, charges and bail conditions as part of their annual renewal process with the College and on an ongoing basis.*

I **have not** been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.

I **have** been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:



<Original signed by Laura Bjorklund>

July 25, 2023 | 8:28:02 AM EDT

Signature

Date

DECLARATION OF CONFLICT OF INTEREST (COMPLETE ALL THAT APPLY)

I **have not** held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

I **do not** have any conflicts of interest to declare.

I **have** an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

Organization	Role

I **have** an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

--

I **have** changed my employment (job function, employer, etc.), volunteer involvement, or affiliations with other organizations within the past year.

Organization	Role

Viveky Navita

I _____ have read the Board Code of Conduct, the CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Chair of the Board (or Registrar) immediately and prior to participating further in any ongoing Board and/or Committee discussion, correspondence, or business; and will also advise the Board at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Board and/or committee meetings should they arise.

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***To be completed by public council members only.** *Elected council and committee members are required to make a declaration of offences, charges and bail conditions as part of their annual renewal process with the College and on an ongoing basis.*

I **have not** been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.

I **have** been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:



<Original signed by Navita Viveky>

August 1, 2023 | 10:25:30 AM EDT

Signature

Date

DECLARATION OF CONFLICT OF INTEREST (COMPLETE ALL THAT APPLY)

I **have not** held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

I **do not** have any conflicts of interest to declare.

I **have** an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

Organization	Role

I **have** an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

--

I **have** changed my employment (job function, employer, etc.), volunteer involvement, or affiliations with other organizations within the past year.

Organization	Role

Ray D'Sa

I _____ have read the Board Code of Conduct, the CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Chair of the Board (or Registrar) immediately and prior to participating further in any ongoing Board and/or Committee discussion, correspondence, or business; and will also advise the Board at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Board and/or committee meetings should they arise.

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***To be completed by public council members only.** *Elected council and committee members are required to make a declaration of offences, charges and bail conditions as part of their annual renewal process with the College and on an ongoing basis.*

I **have not** been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.

I **have** been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:



<Original signed by Raynold D'Sa>

July 25, 2023 | 1:35:15 PM EDT

Signature

Date

DECLARATION OF CONFLICT OF INTEREST (COMPLETE ALL THAT APPLY)

I **have not** held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

I **do not** have any conflicts of interest to declare.

I **have** an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

Organization	Role

I **have** an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

--

I **have** changed my employment (job function, employer, etc.), volunteer involvement, or affiliations with other organizations within the past year.

Organization	Role

Riley Aldrich

I _____ have read the Board Code of Conduct, the CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Chair of the Board (or Registrar) immediately and prior to participating further in any ongoing Board and/or Committee discussion, correspondence, or business; and will also advise the Board at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Board and/or committee meetings should they arise.

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I **have not** been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.

I **have** been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:



<Original signed by Riley Aldrich>

July 20, 2023 | 2:10:45 PM EDT

Signature

Date

DECLARATION OF CONFLICT OF INTEREST (COMPLETE ALL THAT APPLY)

I **have not** held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

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Organization	Role

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--

I **have** changed my employment (job function, employer, etc.), volunteer involvement, or affiliations with other organizations within the past year.

Organization	Role

Ruchika Wadhwa

I _____ have read the Board Code of Conduct, the CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Chair of the Board (or Registrar) immediately and prior to participating further in any ongoing Board and/or Committee discussion, correspondence, or business; and will also advise the Board at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Board and/or committee meetings should they arise.

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I **have not** been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.

I **have** been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:



<Original signed by Ruchika Wadhwa>

July 25, 2023 | 11:51:50 AM EDT

Signature

Date

DECLARATION OF CONFLICT OF INTEREST (COMPLETE ALL THAT APPLY)

I **have not** held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

I **do not** have any conflicts of interest to declare.

I **have** an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

Organization	Role

I **have** an actual or potential conflict of interest to declare relating to another personal, professional or financial interest or relationship, as follows:

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I **have** changed my employment (job function, employer, etc.), volunteer involvement, or affiliations with other organizations within the past year.

Organization	Role

Santhikumar Chandrasekharan

I _____ have read the Board Code of Conduct, the CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Chair of the Board (or Registrar) immediately and prior to participating further in any ongoing Board and/or Committee discussion, correspondence, or business; and will also advise the Board at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Board and/or committee meetings should they arise.

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I **have not** been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.

I **have** been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:



<Original signed by Santhikumar Chandrasekharan>

July 20, 2023 | 1:20:31 PM EDT

Signature

Date

DECLARATION OF CONFLICT OF INTEREST (COMPLETE ALL THAT APPLY)

I **have not** held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

I **do not** have any conflicts of interest to declare.

I **have** an actual or potential conflict of interest to declare relating to the following organizations which have a mandate or that could potentially conflict or be seen as conflicting with the mandate of the CDO:

Organization	Role

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I **have** changed my employment (job function, employer, etc.), volunteer involvement, or affiliations with other organizations within the past year.

Organization	Role

sasha miles

I _____ have read the Board Code of Conduct, the CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

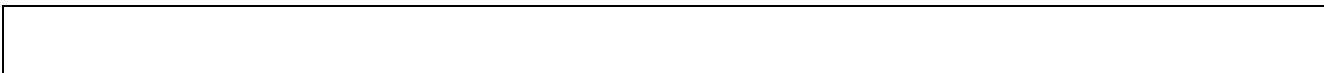
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I **have not** been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.

I **have** been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:



<Original signed by Sasha Miles>

July 20, 2023 | 12:29:25 PM EDT

Signature

Date

DECLARATION OF CONFLICT OF INTEREST (COMPLETE ALL THAT APPLY)

I **have not** held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

I **do not** have any conflicts of interest to declare.

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Organization	Role

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I **have** changed my employment (job function, employer, etc.), volunteer involvement, or affiliations with other organizations within the past year.

Organization	Role

I Sharanjit Singh Padda

_____ have read the Board Code of Conduct, the CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Chair of the Board (or Registrar) immediately and prior to participating further in any ongoing Board and/or Committee discussion, correspondence, or business; and will also advise the Board at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Board and/or committee meetings should they arise.

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I **have not** been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.

I **have** been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:



<Original signed by Sharanjit Padda>

July 25, 2023 | 10:54:48 AM EDT

Signature

Date

DECLARATION OF CONFLICT OF INTEREST (COMPLETE ALL THAT APPLY)

I **have not** held a leadership, employment, or contractual role with an international, national or provincial association or organization that advances the interests of dietitians, has policy making responsibilities for dietitians or oversees the regulation of dietitians, in the previous year.

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Organization	Role

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--

I **have** changed my employment (job function, employer, etc.), volunteer involvement, or affiliations with other organizations within the past year.

Organization	Role
Mattawa and Area Police Services Board	Member

Teresa Taillefer

I _____ have read the Board Code of Conduct, the CDO by-laws and the Governance Manual and declare that the information is true and accurate to the best of my knowledge.

I confirm that if any information reported in this declaration changes, I will advise the Chair of the Board (or Registrar) immediately and prior to participating further in any ongoing Board and/or Committee discussion, correspondence, or business; and will also advise the Board at its next meeting. I understand that this declaration is not a substitute for declaring any actual or potential conflicts of interest for specific matters discussed at a Board and/or committee meetings should they arise.

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I **have not** been found guilty of any offences and there are no outstanding charges of bail conditions pending against me.

I **have** been found guilty of the following offences in the last year and/or the following outstanding charges or bail conditions are pending against me:



<Original signed by Teresa Taillefer>

July 20, 2023 | 1:11:09 PM EDT

Signature

Date