

Evidence Guide for Accreditation of Dietetics Education Programs

Examples of Evidence

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Dietitians Association of Australia ABN 34 008 521 480

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Introduction

The Evidence Guide for Accreditation of Dietetics Programs (the Guide) is one of three documents relating to the accreditation of Australian dietetics education programs. The first is the Accreditation Standards for Accreditation of Dietetics Education Programs (the Standards) and the second is the Processes for Accreditation of Dietetics Education Programs (the Processes). This Guide is designed to provide support for universities to assist them to demonstrate evidence of meeting the Standards in the process of accreditation. Universities may use their discretion to select alternative or additional pieces of evidence for submission as part of the accreditation process. The University Site Visit also forms part of evidence-gathering for the accreditation review process.

The philosophy of the Standards changed with the 2022 release to embrace more of an outcomes-based approach¹. The focus is on evidence of attainment of the learning objectives and outcomes of the degree through a quality program which includes students' successful achievement of competency against the National Competency Standards². When considering the evidence for submission in an Accreditation Application, emphasis should be on providing indicators of student outcomes rather than inputs. However, inputs may be necessary to demonstrate the proposed or demonstrated outcomes, i.e. what was put in place to achieve the outcome. It is inevitable that, in some cases, the planned outcome will not have been achieved. In this case, the evidence provided should focus on the processes that have been implemented and how this will lead to achievement of the outcome in future.

Providing evidence against the accreditation standards detailed here is not intended to duplicate requirements of the Tertiary Education and Quality Standards Agency (TEQSA) but rather provide evidence of requirements to graduate Australian work-ready dietitians.

It is acknowledged that language and terminology will differ between universities, and this should not impact on the evidence provided. An attempt has been made to use generic language where possible in the standard or in the description of the standard. Universities are asked to define terminology where possible as part of their Accreditation Application to assist in clarity of the process.

Using the Evidence Guide

The Evidence Guide provides further definitions of terms used in the Standards and descriptions of the intentions of the standards, as well as examples of evidence that would illustrate achievement of this standard by a university.

The Evidence Guide is intended for use by:

Universities

- to assist in compiling evidence to demonstrate meeting the Standards as part of an Accreditation Application and to understand the breadth and depth of documentation required to demonstrate evidence against the standards
- to ascertain what outcome-focused evidence looks like in the context of accreditation

- to support production of evidence with an emphasis on student outcomes achieved rather than inputs provided and/or delivered.

Review teams

- to assist in assessing the evidence supplied by the university against the Standards
- to support reviewers in seeking outcome-focused evidence
- to assist in gathering examples of outcome-based evidence which can add to the evidence framework.

Review of the document

The Evidence Guide will be updated annually, as needed, with a full review completed in conjunction with review of the Standards and Processes every 5 years. Universities will be provided with an opportunity to submit feedback on the Evidence Guide as part of the evaluation process for an accreditation review, but are also invited to submit feedback as desired via accreditationadmin@dietitiansaustralia.org.au

Standard 1: Program Management	
Standard	Description of standard and examples of evidence
1.1 The university implements program quality improvement processes and integration of changes in relation to intended program outcomes.	Standard intended to explore university's processes for quality improvement of dietetics programs as well as processes for how changes are incorporated into programs. Evidence may include: • documentation of policies and processes in place for quality improvement of the program with examples of how these policies and processes are enacted within the dietetics program and the result of the implementation of these systems of quality improvement. • demonstration of processes in place to conduct student evaluations, internal and external academic and professional peer review, feedback from Aboriginal and Torres Strait Islander people, end user feedback and outcome information from new graduates and their employers. (Employers may be current employers or anyone that may employ graduates.) This may include feedback at the university level and from placement supervisors. In addition to a description of the process detail about how the process is implemented and some recent results of how this data was used to improve quality improvement and changes to the program and its outcomes
1.2 The university implements regular and diverse internal and external consultation as part of continuous quality improvement and evaluation of curriculum, providing evidence of the outcomes of consultation and integration of recommendations.	Consultation as part of continuous quality improvement is expected to be flexible and varied across universities in how it is operationalised. Some universities may use a Program Advisory Committee or External Course Advisory Committee to facilitate consultations or may choose to develop focused advisory groups. Universities may also choose to engage in other methods of meaningful consultation to consider their program's needs and integrate appropriate mechanisms in response to these needs. Diverse internal and external consultation refers to consultation that considers the specific needs of the university and their program. Consultation may include, but will not be limited to, input from experts in their respective fields relating to nutrition and dietetics. This includes Aboriginal and Torres Strait Islander groups, academics, education experts, community groups, consumers, health professionals, government representatives and end users of nutrition and dietetics services. They will provide expert advisory opinion to the university in areas including, but not limited to, curriculum planning, workforce issues, quality, student outcomes and professional placements/experiential learning. Diverse and emerging areas should be considered – some examples are below. Evidence may include:

	• description of processes, mechanisms, and/or steps taken by universities working towards inclusion of a voice for Aboriginal and Torres Strait Islander people, such as the establishment of a cultural advisory group and examples of the result of this consultation on the program outcomes, curriculum and/or assessment • documentation of consultation processes or structures with terms of reference for consultations or committees and examples of the result of this consultation on the program outcomes, curriculum and/or assessment • recommendations arising from consultation relevant to program design and management and university action against recommendations and examples of how these recommendations have been evaluated and/or enacted • reports from internal reviews and evaluations describing mechanisms of the review and actions taken in response to feedback received • reports of outcomes from subject and/or program experience questionnaires, or student evaluations of teaching and learning and plans for improvement • outcomes from educational research undertaken that has informed curriculum.
1.3 Processes are in place to ensure students entering dietetics education program(s) meet the necessary entry requirements and standards, including advanced standing requirements.	This standard outlines the minimum standards required for entry into dietetics education programs in Australia. Students enrolled in dietetics education programs must have met the expectations related to studies of bioscience, as these form the backbone of dietetic practice. Postgraduate pathways into dietetics education programs may vary. All students entering postgraduate programs must meet the required levels of study for science and human physiology as outlined in standards 3.1 and 3.2. Evidence that postgraduate students have completed the prerequisite requirements outlined in 3.1 and 3.2 e.g. spreadsheet to show the undergraduate degree completed and individual subjects that meet requirements. Evidence to demonstrate this standard may include: • university policies and procedures that show the decision-making for the various entry points into the program, and outcomes that show how this is a rigorous process • evidence of how the process achieves equivalence for international and domestic students upon entry

	- outcomes of the application of these policies and procedures for advanced standing/credit and/or for assessing prerequisites for postgraduate programs. For example, flow charts or written descriptions of various entry routes or accessible links to the appropriate policies/procedure if this does not contravene university policies (and database) - overview of processes with policies attached and examples from recent students accepted into the program or profile of student's prior study for post-graduate degrees
1.3.1 International students who enrol in the dietetics education program must meet the current National Alliance of Self-Regulating Health Professions minimum English language proficiency requirements for either the International English Language Testing System (IELTS), the Occupational English Test (OET) or equivalent.	This standard outlines the minimum English language proficiency expectations of international students which align with the minimum expectations of National Association of Self-Regulating Health Professions (NASRHP). The NASRHP regulations currently state: IELTS: - An overall score of 7 and a minimum score of 7 must be achieved in all four (4) components - Test results will only be accepted from one test sitting or a maximum of two test sittings in a six-month period only if the applicant achieves: - a minimum score of 7 in each sitting - a minimum score of 7 in each component across the two sittings OET: - The applicant must achieve a minimum of a B in each of the four components - Test results will only be accepted from one test sitting or a maximum of two test sittings in a six-month period only if: - the applicant is tested in all four components in each sitting - a minimum score of B in each component is achieved across the two sittings - no score in any component of the test is below C. Evidence to demonstrate this standard may include: - information provided to students before enrolment that clearly states English language entry requirements - policies and processes in place for collating and recording international student IELTS and OET results - an example table showing how this data is collated for international students enrolled in the program - a template for student declaration where English is the primary language.
1.4 The university implements strategies for recruiting and retaining	This standard aims to increase the diversity, inclusivity and representation of Aboriginal and Torres Strait Islander peoples in the dietetics profession in Australia. Currently, 37 members of Dietitians Australia identify as Aboriginal and/or Torres Strait Islander (0.4% of the profession)⁶ which is well below population parity

Aboriginal and Torres Strait Islander students	(3.8%). It is recognised that dietetic programs' ability to recruit and retain Aboriginal and Torres Strait Islander students will vary greatly across Australia due to location, resourcing and existing overarching policies in place at universities to recruit and retain Aboriginal and Torres Strait Islander students. Evidence provided may include: • copies of overarching university policies to recruit, retain and support Aboriginal and Torres Strait Islander students and examples of how the dietetics recruitment and selection staff engage with these policies and associated procedures or processes • summary report of the program of study's recruitment, admission, participation and completion of Aboriginal and Torres Strait Islander people. • Evidence of specific initiatives taken by the program of study regarding recruitment, admission, participation, and completion by Aboriginal and Torres Strait Islander people. • Reflections on how effective current policies and procedures are in recruiting Aboriginal and Torres Strait Islander students and plans for improvement or advocacy for change.
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Standard 2: Staffing	
Standard	Description of standard and examples of evidence
2.1 The university must employ an Accredited Practising Dietitian (APD) discipline lead who is committed to the advancement of the profession of dietetics in Australia and who currently meets the following criteria: 2.1.1 Leads original contributions to their field of research/study, which are recognised as outstanding nationally or internationally as leading the profession OR original contributions to teaching, such as contributions to national efforts to enhance curriculum and providing	This standard outlines the key attributes necessary to lead a nutrition and dietetics program in Australia. The requirement for a discipline lead to be an accredited practising dietitian (APD) recognises their commitment to the profession of dietetics in Australia. A university may employ a discipline lead who did not receive their nutrition and dietetics qualification in Australia; however, they must demonstrate commitment to the dietetics profession within the Australian context by successfully completing dietetic skills recognition processes and gaining APD status. Evidence provided must specifically address each criterion 2.1.1 to 2.1.4 and not just provide an overview of what the discipline lead has achieved or plans to achieve. Examples of evidence may include: • representation within senior executive groups, education committees or other structures providing a voice to dietetics education program

high-quality learning experiences in nutrition and dietetics. 2.1.2 A sustained record of effective leadership in teaching teams (curriculum design, implementation and innovations leading to improvements in student learning). 2.1.3 Capacity to lead developments in education quality, which enhance major aspects of the university's operations through program management, curriculum development, faculty and institutional teaching roles. 2.1.4 Capacity to provide leadership with a significant impact on education quality, teaching innovation or curriculum development in their institution.	• summary of what the discipline lead has achieved in their role/is planning to achieve and how this has/will impact student outcomes • key performance indicators for the discipline lead and how these have been met or are planned to be met • shortened curriculum vitae summarising areas of expertise and previous relevant professional work experiences • documentation of support provided to the discipline lead to achieve outcomes • evidence of leadership and impact or contributions to the broader school/faculty structure, and outcomes of this • summary of professional mentoring of staff or mentees external to the university • discipline lead job descriptions • academic workload models showing evidence of adequate time for leadership.
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2.2 The university employs sufficient staff to lead curriculum, research, teaching and assessment that meets the evolving educational, academic, research, and administrative needs of students and the university.	This standard asks for demonstration of how the staffing profile supports students to achieve competence against the National Competency Standards (NCS) and how staff role model expertise across a variety of nutrition and dietetics-related areas. It recognises that the staffing needs of each dietetics education program will vary according to a number of factors, such as location, resources, student enrolments etc. This standard is intended to ensure the overall staffing profile of the dietetics education program is diverse and inclusive of academics at all levels to ensure representation of a variety of nutrition and dietetics areas, and to enable development and role modelling for the development of less experienced academics and teaching staff. It is acknowledged that sessional staff form a crucial part of dietetic teaching teams, and universities may choose to nominate practice area leads within their programs to support sessional staff appointments, retention and professional development. Evidence provided may include: • mapping of the dietetics education team staff profile, including professional qualifications, Equivalent Full Time (EFT), APD status, engagement with the profession/research and teaching and supervision responsibilities • brief curriculum vitae (1 pages) for each staff member, including a summary of their areas of expertise, teaching allocation, previously relevant professional development and work experience • mapping of key skills and expertise of individual staff to the needs of the curriculum. • evidence of the processes by which all staff can access appropriate support and resources, including regular opportunities for professional review and development • demonstration of mix of teaching and research workloads across the team • documented processes in place to manage staffing risks and ensure learning outcomes are achieved.
2.3 All staff with a research allocation are provided with adequate time and supportive leadership to build their research/evaluation capacity and supervise research students.	This standard aims to support staff to pursue research development commensurate to their research experience, role and interests. This may involve someone undertaking a PhD or being involved in a clinical research project without having a PhD (recognising that not every practitioner will want to commit to a PhD but may be research-active within their clinical role). Acknowledgement of the role of dietitians in research is part of advancing the profession, and exposing students to research careers and role models in their training is part of developing the profession more broadly.

	Evidence provided may include: • descriptions of processes or policies in place to support research time for staff • descriptions of research leadership/mentoring arrangements within the nutrition and dietetics team • outputs of key research staff over the period since previous accreditation or summary of research impact noting student output in particular • information regarding Higher Degree Research completions/supervision.
2.4 All teaching staff must demonstrate current content knowledge and expertise in their teaching area.	Evidence must be provided of how staff involved in teaching the program work in partnership with students to support achievement of learning outcomes for students. For example, detail and evaluation of: • depth and breadth of staff and evidence of expertise (practical and/or research), in both dietetics and education, experience linked to the curriculum • where in the program guest lecturers are used, i.e. the units they teach in and the content they teach • processes for oversight of content to ensure that it is current and meeting the learning outcomes, including managing staff who are external to the nutrition and dietetics discipline • process to ensure currency in content knowledge • demonstration of continuing professional development in relevant areas of expertise • process to ensure expertise in teaching area e.g. peer review of teaching • learning and teaching opportunities for staff, including Aboriginal and Torres Strait Islander cultural safety.
2.5 University staff partner with Aboriginal and Torres Strait Islander peoples and communities in the development of curriculum content and processes which build students' culturally safe and responsive practice.	This standard recognises the already limited and overworked Aboriginal and Torres Strait Islander health workforce. Non-Aboriginal staff involved in supporting the development of cultural safety and responsiveness of the curriculum should have guidance, input and support from Aboriginal and Torres Strait Islander personnel. It is also recognised that the appointments of Aboriginal and Torres Strait Islander personnel may be considered a broader university matter. Examples of evidence may include: • documentation of existing university Aboriginal and Torres Strait Islander leadership and governance structures. Description of how dietetics staff and educators' partner with Aboriginal and Torres Strait Islander peoples and communities within these structures and align curriculum accordingly. • documentation of processes in place for inclusion of Aboriginal and Torres Strait Islander educators in the curriculum or program and/or more broadly across the university

	• mapping of staffing available at the university to teach across the curriculum: Aboriginal and Torres Strait Islander peoples' history, health, wellbeing and culture; the ongoing impacts of colonisation, privilege, & bias; and upskilling in anti-racism, self-reflexivity and advocacy to respond to and mitigate inequity. • Aboriginal and Torres Strait Islander cultural safety development for dietetics staff. • Processes in place to support placement staff and supervisors to be culturally safe and responsive in working with Aboriginal and Torres Strait Islander peoples and students
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Standard 3: Curriculum	
Standard	Description of standard and examples of evidence
3.1 Program curriculum includes integrated teaching, learning and assessment that meets current and emerging areas of practice, enabling students to meet the National Competency Standards (NCS).	This standard acknowledges that current and emerging areas of practice, and the contexts in which dietitians work, will continue to evolve. It also acknowledges that different practice contributions to a dietetic education program may vary according to geographical location, localised community needs or specific expertise of the university. Programs will be expected to draw upon emerging literature and resources as evidence of their curriculum choices/areas of focus. This must include specific detail for curriculum content as it relates to the broad spectrum of people who are healthy, acutely or chronically unwell or who are living with a disability across the course of their lives. There should be evidence that the curriculum has been developed and delivered in conjunction with those with lived experience. Evidence should include how curriculum has evolved over time as areas of practice and prevalent nutrition problems evolve. Examples include, but are not limited to: ○ recognising the need for health care professionals to be better prepared to work with people with a disability given recent Australian Government Royal Commissions into Disability and inclusion of disability within curriculum and assessment. ○ recent data that shows most of the recent graduate's work in private practice. Evidence may include: • program structure and details, and rationale for any planned changes • mapping of assessment against NCS, including where and how each competency is taught developed and the mechanism for which assessed • demonstration through the mapping document of how the curriculum and the specific assessment tasks scaffold learning from acquiring underlying knowledge through to integration of knowledge and skills in the demonstration of competence • evidence of student preparedness for professional placement • evidence of how assessment tasks provide evidence of outcomes of achievement against NCS. Universities may choose to use the 'DA 2021 NCS Curriculum mapping template' • current subject outlines and assessment tasks where relevant • description of teaching and assessment methods to ensure learning outcomes are achieved, such as through the use of online platforms.

3.2 Human sciences must underpin the application of science in nutrition and dietetic practice, taught within an evidence-based paradigm.	This standard outlines the essential science content necessary to the award of a dietetic qualification. A dietetics degree must be underpinned by a strong science base of chemistry, biochemistry, human physiology and pathophysiology while creating opportunities for inclusion of diverse science topics across programs to enable students to meet the NCS. The role of other sciences, such as sociology and psychology, are also acknowledged. An evidence-based paradigm is an approach to practice that integrates the best scientific evidence together with practitioner expertise and judgement, and client perspectives. The human sciences content requirements described in standard 3.2 are intended to specify learning that requires the student to acquire key knowledge and build a foundational science background within, or prior to entry into, the dietetic program. This may be achieved through instructional design whereby this content is acquired and assessed in several subjects or via a course design in which the content is delivered and assessed in a discrete subject. Core concepts, including but not limited to biosciences (key concepts in human physiology, pathophysiology, chemistry and biochemistry), food and nutrition science, nutrition care planning, safe and collaborative health care, promoting and optimising health, professional behaviour and the ability to critically analyse and apply scientific evidence are likely to serve as the foundation and exemplars chosen to reflect prevalent nutrition issues and current and emerging issues in the profession. These concepts and exemplars may change as the profession evolve. Evidence of content that meets the standards may include course outlines and associated assessment. This may be evidenced by the mapping provided in standard 3.1 of how all core concepts are integrated. For examples of suitable human science underpinnings, see Appendix A.
3.3 The university is ultimately responsible for holistic, integrated assessment of students against the NCS.	Competence can be demonstrated in a wide range of simulated and work-based experiences. This standard is based on programmatic assessment³ and principles of best practice assessment. Competency-based assessment should include a range of examples of completed assessments or assessment tools, from multiple stakeholders, against the NCS. Evidence related to this standard should aim to outline the whole assessment process that occurs for students, who is conducting it, the process from start to finish, and the outcomes of the process.

	For example: • the role of university staff and placement supervisors in the final assessment of competence • evidence gathered to demonstrate competency, for example via a portfolio • any relevant university assessment policies and procedures for specific subjects and the impact of these on the outcomes for students • outline of criteria against which students are assessed in subject outlines • program (or map) of assessment tasks/tools, details of the task and how they show evidence of performance against NCS – see example template in Appendix B.
3.4 The university must provide access to adequate and well-maintained physical and electronic resources for education and research to support students achieve the NCS, including, but not limited to: a. digital tools for dietary analysis, and statistics software b. facilities for food skills and experiences with food services and systems c. facilities for laboratory skill technique development d. technologies that provide opportunity to develop enhanced communication skills.	This standard describes the evidence required of how dietetics-specific resources are used in the curriculum to achieve student outcomes. For example: • description and use in the curriculum and associated learning outcomes/results of assessments • evidence of equitable access to the resource, whether this means they are onsite or being hired offsite • explanation and evidence for how the resource is used to achieve student outcomes and that they are accessible and well-maintained • evidence of how resources contribute to the development of competence, for example, telehealth and simulation.
3.5 The program ensures students work with, and learn from and about, other professionals and key stakeholders in nutrition and dietetics, and offers	This standard is focused on interprofessional care, whereby it is intended that students will learn to work in interprofessional teams to co-develop client health plans/goals for improved health outcomes.

experiences for working and learning in interprofessional teams.	Evidence may include: • curriculum document, including a definition and explanation of intra-professional and interprofessional learning and practice, and how this understanding translates into relevant subject learning outcomes and program content • examples of how students interact with other health profession students and/or other health professionals through the program of study either at university or during workplace learning experiences • example of assessment that demonstrates students working in interprofessional teams • employers' or graduates' perspectives of the work-readiness of graduates from the program to work in interprofessional teams. Opportunities where students are involved in areas of practice where there has been demonstrated need are encouraged. For example, working in interprofessional teams to improve health outcomes for people with cognitive disability as part of interprofessional teams. Universities may like to refer to the curriculum mapping in standard 3.1.
3.6 The university integrates Aboriginal and Torres Strait Islander peoples' history, health, wellbeing and culture across the curriculum such that students can respond respectfully when working with Aboriginal and Torres Strait Islander peoples and communities.	The thoroughness of this statement aims to facilitate holistic integration in curriculum and is aligned with the new NCS and the new Code of Conduct for APDs⁴. With guidance from Aboriginal and Torres Strait Islander personnel, non-Aboriginal staff can support dietetics students to develop culturally safe practise, i.e. ongoing critical reflection of health practitioner knowledge, skills, attitudes, practising behaviours and power differentials in delivering safe, accessible and responsive healthcare free of racism⁷. A strengths-based approach is also recommended for the adoption of curriculum, to protect against deficit-focused implementation which could cause further harm (for example, the inclusion of case studies which reinforce racist stereotypes of Aboriginal and/or Torres Strait Islander people). Curriculum should be informed by the Aboriginal and Torres Strait Islander Health Curriculum Framework⁵⁵. Evidence may include: • examples of learning and assessment, and teaching materials from across the program of study demonstrating the integration of cultural safety and responsiveness, including where issues of anti-racism, privilege and bias are explored, and students achieve relevant outcomes • teaching and learning philosophies that highlight Aboriginal and Torres Strait Islander perspectives and views of health and wellbeing

	• mapping across the program of content and assessment relevant to health outcomes of Aboriginal and Torres Strait Islander peoples based on national health priorities and the structural, political, historical and social determinants behind these health outcomes. • mapping of subject learning outcomes, program content (with examples) and assessment that prepares students to practice cultural safety and work respectfully with Aboriginal and Torres Strait Islander peoples • outlines of practical placement opportunities, how students were engaged and how many, and the outcomes on students' cultural safety practice.
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Standard 4: Professional Placement Program	
Standard	Description of standards and examples of evidence
4.1 The dietetics education program includes supervised workplace learning experiences, organised by the university, that support students to meet the NCS, the duration of which must be a minimum of 100 equivalent working days across the duration of the program.	It is acknowledged that this standard remains input-focused and that the standard does not stipulate how the 100 days should be divided to provide students with appropriate breadth of experiences. The achievement of competence against the NCS is the outcome the placement learning will be assessed against. Evidence that each student completes a minimum 100 placement days may include: • a placement schedule showing when in the curriculum each student completes their 100 days of placement • explanation of how the placement schedule supports students to meet the NCS and readiness to practice in the contemporary Australian context • evidence of how simulation and/or offsite placements allow achievement of NCS • evidence of how the placement program and associated learning activities (or assessment) is designed to support development of competence and in particular the nutrition care process (as described in the NCS) for individuals, groups, organisations, communities and populations across a range of contexts.
4.2 Each student is provided with a variety of workplace learning experiences reflecting socio-ecological approaches to health, major health	Dietitians Australia defines dietetic practice as: 'using professional knowledge in both clinical and non-clinical relationships with patients or clients, communities and populations and can be working in management, administration, education, research, advisory, communication, program development and implementation, regulatory or policy development, food service, food security, food supply, sustainability and any other roles

priorities and the broad landscape of dietetic practice, including policy and the provision of services and care to individuals, groups, communities and populations, which allows them to meet the NCS.	that impact on safe, effective delivery of services in the profession and/or using professional skills.’ This is regarded as the broad landscape of dietetic practice. This standard aims to provide flexibility for universities in designing workplace learning experiences for students that will meet this definition of dietetic practice and provide them with a variety of experiences which will enable them to meet the NCS and be ready to practice across settings and population groups. Evidence provided by universities should show where each student went, what they did, where research may have occurred etc. This may be evidenced by: • A description of each placement site, including: ○ criteria by which the university assessed the site for appropriateness for placement ○ learning outcomes achieved at placement. ○ activities students undertake on placement and how learning outcomes are measured • the way in which placement structure and competency assessment is linked to curriculum and individual subject outlines, including assessment of final competence (it is suggested that this refers to the curriculum mapping in standard 4.1) • description of activities, learning and associated relevant learning activities undertaken on placements • evidence of graduate outcomes or employment or data on preparedness for practice across the broad landscape of dietetics practice. Placements may occur across a variety of settings including but not limited to: • acute care facilities, ambulatory care settings such as outpatient clinics, day clinics, community health centres, nursing homes, disability homes, private practice, residential aged-care facilities, disability facilities, boarding schools, military bases, correctional facilities, facilities with clients dependent on the food service, public health units, public and private hospitals, health promotion centres, schools, non-government organisations, community health centres, Aboriginal Community Controlled Health Organisations. The placement experience must be sufficient to demonstrate performance against the NCS. If students complete all of their workplace learning experiences within the one setting, the university must be able to provide evidence of the variety of experiences the student received, how each of these experiences offered opportunities to provide services and care to different end users and how the NCS were met.
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	It is acknowledged that this standard does not stipulate how much time students should be in each placement location. It is expected that the university will draw upon their expertise and the needs of their students and placement providers to design a program of workplace learning opportunities for each student that is both innovative and conducive to allowing students to meet the NCS and be ready for practice across a variety of settings and population groups upon graduation.
4.3 Appropriate governance structures and resources are in place at workplace learning experience sites to ensure adequate supervision, support, teaching, learning and assessment for students, and that supervisors are adequately supported and trained.	Evidence of appropriate governance structures and resources may include: • examples of the documentation that is used to establish a formal agreement e.g. memorandum of understanding that includes: ○ evidence that the site agrees to provide students with an experience to meet the NCS in a safe environment ○ number and timing of student attendance at each site ○ insurance agreements. • policies and procedures for managing placements and the outcomes of these on students' development of competence, including placement manuals and how these are used • processes for clinical education of supervisors • systems in place for universities to support and manage the quality of supervisors in their workplaces/sites • policies and processes for provision of training, workshops or orientation to assessing student competence • examples of where processes have been challenged and how this was managed • systems for evaluating placement experiences and strategies put into place based on this evaluation (e.g. strategies for sites that provide less-than-adequate experience for students). • documentation of risk management plans for placements
4.4 Processes are in place to ensure all supervisors responsible for workplace learning experiences have current qualifications and experience relevant to the areas they are supervising, and APDs undertake any summative assessment of dietetic-specific skills.	This standard acknowledges that APDs are responsible for the assessment of dietetic-specific skills. The University is ultimately responsible for each student's assessment and ensuring that graduates are competent. Final assessment of learning outcomes must be determined by an APD employed by the University Dietetic-specific skills refer to assessment of the nutrition care process across the landscape of dietetics practice and adherence to the profession's code of conduct and ethics. Evidence may include:

	• copies of policies and processes in place for monitoring supervisors' qualifications and experience – this may include APD status; for example, position descriptions highlighting APD as essential criteria • evidence of policies or procedures in place to ensure supervisors have capabilities for supervising students in culturally safe ways, but also to support mentoring of students for the development of skills and knowledge to build competency • communication policies and processes between universities and placement sites • documented procedures for students and supervisors and how these are communicated between the universities and placement sites, such as placement manuals, contract protocols, management of roles and responsibilities and assessment procedures • evaluation of supervisors' ability to support workplace learning.
4.5 The university and placement sites must implement quality management of supervision and assessment.	This standard aims to help address student learning needs, to build upon feedback they may have already received, or areas of focus for development for a particular professional placement experience. There must be clear protocols for exploring student learning needs upon commencement and how the university together with the placement site work together to escalate issues when they arise must be clear. Evidence may include: • details and outcomes of communication policies and processes with placement sites • policies and protocols for escalation of issues, and examples of where this has occurred.
4.6 Should the university wish to use international placement sites, they must demonstrate that the placement experience meets all requirements set out in standards 4.1 to 4.5 and that the placement provides an environment that supports students to demonstrate the NCS.	This standard relates to non-Australian placement sites. For some students, international placements offer rich, immersive learning experiences and support international mobility of Australian dietetics graduates. Given that the accreditation processes result in an Australian dietetics qualification, the need to complete the majority of placement (>50%) in Australia is stipulated. Examples of evidence may include: • those listed under standard 4.2, and details and impact on student outcomes • focus of skills being developed through the international placement (e.g. interprofessional or dietetics specific) • policies and procedures in place at the university as well as the placement provider where appropriate • benchmarking or evaluation activities on the quality of international placements and their impact on students • details of supervision arrangements and supervisor experience and APD status where relevant.
4.7 Students who complete placements at an international site must complete the majority of their placement in an Australian setting.	

Appendix A. Example curriculum structures for undergraduate 3-year prerequisite entry-degree (or 3 years of 4-year Bachelor degree) for postgraduate dietetics qualification.

Introductory level

- Introductory bioscience courses (usually 0.5 Equivalent Full Time Study Load (EFSTL)) (examples include chemistry, biology, bioscience, introductory physiology)
- Introductory nutrition (usually 0.25 EFSTL)

Intermediate to advanced level

- Intermediate to advanced bioscience courses (usually 0.5 EFSTL) (examples include biochemistry, nutritional biochemistry, human physiology, pathophysiology)
- Intermediate nutrition (usually 0.25 EFSTL)

Advanced-level courses may be included in a postgraduate program of study or required as a prerequisite to the degree.

Appendix B. Examples of how to map competency-based assessment to NCS.

Please contact accreditationadmin@dietitiansaustralia.org.au for templates

Key Tasks/Elements	Performance indicators (observable and/or measurable actions)	Subject/Unit	Subject/Unit	Subject/Unit
Domain 1				
1.1	1.1.1	Description of Assessment Task (including if mandatory/hurdle) and if pass/fail or summative/formative (if summative what % of total)	If there are multiple assessment tasks that assess this performance criteria, describe additional tasks here	
	1.1.2			
	1.1.3			
	1.1.4			
	1.1.5			
	1.1.6			

Or alternatively

Description of assessment task (including if mandatory/hurdle) and if pass/fail or summative/formative (if summative what % of total)	Unit/Subject	Elements and performance indicators (observable and/ or measurable actions) of NCS demonstrated by this task

Glossary

APD: Accredited Practising Dietitian.

Client: a person, group of people, patients (and their families and/or carers where relevant), consumers, communities, organisations, institutions, businesses and any other entity for which a dietitian may normally provide services (within the dietitian's scope of practice) who has entered into a therapeutic and/or professional relationship with a dietitian.

Discipline Lead: The senior person responsible for providing leadership, and for mentoring, but not necessarily managing, the other academics in the discipline.

IELTS: International English Language Testing System.

NCS: National Competency Standards.

OET: Occupational English Test.

Subject: A specific unit of study within a dietetics program (also known as 'unit' or 'course').

TEQSA: Tertiary Education Quality Standards Agency.

References

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- ² Dietitians Australia. National Competency Standards for Dietitians in Australia with Guide 2021. (Available from https://dietitiansaustralia.org.au/sites/default/files/2022-03/DA_NationalCompetencyStandards_2021%20%28PDF%2C%20236KB%29.pdf, accessed 28 March 2022)
- ³ Palermo C, Gibson SJ, Dart J, Whelan K, Hay, M. Programmatic assessment of competence in dietetics: a new frontier. Journal of the Academy of Nutrition and Dietetics. 2017; 117(2), 175-179.
- ⁴ Dietitians Australia. Code of Conduct for Dietitians & Nutritionists. (Available from <https://dietitiansaustralia.org.au/sites/default/files/2022-02/2021-Code-of-Conduct-for-Dietitians-Nutritionists.pdf>, accessed 28 March 2022)
- ⁵ Australian Government, Department of Health. Aboriginal and Torres Strait Islander Health Curriculum Framework. (Available from <https://www.health.gov.au/sites/default/files/documents/2020/12/aboriginal-and-torres-strait-islander-health-curriculum-framework.pdf>, accessed 28 March 2022)
- ⁶ Dietitians Australia Innovate Reconciliation Action Plan 2022-2024 <https://dietitiansaustralia.org.au/sites/default/files/2022-08/Dietitians%20Australia%20Reconciliation%20Action%20Plan%202022-24.pdf>
- ⁷**The National Scheme's Aboriginal and Torres Strait Islander Health and Cultural Safety Strategy 2020-2025**
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