ICDR Prior Approval CPEU Program

Provider Policy Manual

Table of Contents

1.0 CDR Mission & Vision	7
2.0 Intent of the CDR CPEU Prior Approval Program	7
3.0 Provider Eligibility	7
4.0 Provider Username	7
5.0 Accountable Contact(s)	8
5.1 Requirements and Responsibilities	8
5.2 Pre-CPE Submission Requirements	8
5.2.1 Training (Step 1)	8
5.2.2 Attestation and Agreement (Step 2)	8
5.2.4 Designating an Accountable Contact or Accountable Contacts (Step 3)	8
5.2.3 Benchmarking Report (Step 4)	8
5.3 Annual Retraining	9
6.0 Provider Responsibility	9
6.1 Notification of Transfer of Responsibility (Relinquishing and Acquiring)	
6.2 Audit Accountability	9
6.3 Web Hosting	9
6.3.1 Provider is Clear to and Contactable by Learners	9
6.3.2 Hosting Restrictions	9
6.4 Submission on Behalf of Other Entities or Providers	9
6.5 Copyright / Non-Original Content	9
7.0 Marketing and Commercial Bias in CPE	10
7.1 Content Containing Products or Services	
7.2 Marketing-Free Physical Space or Virtual Location of the CPE	
7.2.1 In-Person	10
7.2.2 Virtual, Recorded, or Printed	
7.3 Marketing-Free Print and Email Communication	
7.4 Marketing-Free Feedback and CPE Evaluation	
7.5 Management of Other Activities Associated with CPE	
7.5.1 Restrictions	

7.5.2 Informat	ion About the CPE That Does Not Contain Educational Content	
7.6 Confidentiality	y and Use of Learner Names and Contact Information	11
8.0 Relevant Financia	al Relationships and Conflicts of Interest	12
8.1 Collection of D	Disclosure Information	12
8.2 Disclosure of C	Conflicts of Interest to Learners	12
8.3 Retention of D	Disclosure Information	12
9.0 Commercial Supp	oort	13
9.1 Commercial Su	upport Agreement	13
9.2 Management	of Commercial Support	13
9.3 Guidelines for	Use of Commercial Support	13
9.4 Documentatio	on of Commercial Support	13
9.5 Disclosure of C	Commercial Support	13
10.0 Funding		
10.1 Documentati	ion of Funding	14
10.2 Disclosure of	Funding	14
11.0 Equity in CPE Pla	anning, Development, and Presentation	
	anning, Development, and Presentation	
12.0 Quality Monitor		15
12.0 Quality Monitor 12.1 Audit Classifie	ring and Compliance	15 16
12.0 Quality Monitor 12.1 Audit Classific 12.1.1 Randon	ring and Compliance	15 16 16
12.0 Quality Monitor 12.1 Audit Classifie 12.1.1 Randon 12.1.2 Hold Pla	ring and Compliance cations and Processing Times n Audit	15 16 16 16
12.0 Quality Monitor 12.1 Audit Classifie 12.1.1 Randon 12.1.2 Hold Pla 12.1.3 Follow-	ring and Compliance ications and Processing Times n Audit aced on Approval	15 16 16 16 16
12.0 Quality Monitor 12.1 Audit Classifie 12.1.1 Randon 12.1.2 Hold Pla 12.1.3 Follow- 12.1.4 Compla	ring and Compliance ications and Processing Times n Audit aced on Approval Up Audit	15 16 16 16 16 16
12.0 Quality Monitor 12.1 Audit Classifie 12.1.1 Randon 12.1.2 Hold Pla 12.1.3 Follow- 12.1.4 Compla 12.2 Audit Notice,	ring and Compliance Ications and Processing Times n Audit aced on Approval Up Audit aint Audit	15 16 16 16 16 16 16 16 17
12.0 Quality Monitor 12.1 Audit Classifie 12.1.1 Randon 12.1.2 Hold Pla 12.1.3 Follow- 12.1.4 Compla 12.2 Audit Notice, 12.2.1 Audit N	ring and Compliance ications and Processing Times n Audit aced on Approval Up Audit aint Audit , Reminders, Extensions, Non-Submission	15 16 16 16 16 16 16 16 17 17 17
12.0 Quality Monitor 12.1 Audit Classifie 12.1.1 Randon 12.1.2 Hold Pla 12.1.3 Follow- 12.1.4 Compla 12.2 Audit Notice, 12.2.1 Audit N 12.2.2 Non-Su	ring and Compliance ications and Processing Times n Audit aced on Approval Up Audit aint Audit , Reminders, Extensions, Non-Submission lotice	15 1616161616171717
12.0 Quality Monitor 12.1 Audit Classifie 12.1.1 Randon 12.1.2 Hold Pla 12.1.3 Follow- 12.1.4 Compla 12.2 Audit Notice, 12.2.1 Audit N 12.2.2 Non-Su 12.2.3 Extensio	ring and Compliance Ications and Processing Times In Audit aced on Approval Up Audit aint Audit , Reminders, Extensions, Non-Submission Iotice	15 161616161617171717
12.0 Quality Monitor 12.1 Audit Classifie 12.1.1 Randon 12.1.2 Hold Pla 12.1.3 Follow- 12.1.4 Compla 12.2 Audit Notice, 12.2.1 Audit N 12.2.2 Non-Su 12.2.3 Extensio 12.2.4 Notice of	ring and Compliance ications and Processing Times n Audit aced on Approval Up Audit int Audit , Reminders, Extensions, Non-Submission lotice ubmission or Incomplete Materials	15 16 16 16 16 16 16 16 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17
12.0 Quality Monitor 12.1 Audit Classifie 12.1.1 Randon 12.1.2 Hold Pla 12.1.3 Follow- 12.1.4 Compla 12.2 Audit Notice, 12.2.1 Audit N 12.2.2 Non-Su 12.2.3 Extensio 12.2.4 Notice of 12.3 Audit Outcon	ring and Compliance ications and Processing Times n Audit	15 16 16 16 16 16 16 16 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17 17

12.4 Remediation Requirements	
12.4.1 Remediation Agreement	
12.4.2 Remediation Terms and Timeframes	
12.4.2a Withdraw CPE Under Review	
12.4.2b Withdraw, Revise, and Resubmit CPE Under Review	
12.4.2c Submit Previously Approved CPE for Follow-Up Audit	
12.4.2d Submit Future CPE for Follow-Up Audit	
12.5 Remediation Outcomes	
12.5.1 Compliance	
12.5.2 Suspension	
12.6 Appeals	
12.6.1 Basis for Appeal	
12.6.2 Levels of Appeal	
12.6.2a Level 1: CAP Appeal	
12.6.2b Level 2: CDR Appeal	
12.6.2c Level 3: AND Appeal	20
12.7 Complaints	21
12.8 Revocation of Submission Privileges	23
13.0 Reporting	
13.1 Components of the Benchmarking Report	24
13.1.1 Promoting Equity	24
13.1.2 Quality Improvement (Benchmarking QI)	24
13.1.3 Commercial Support and Funding	24
13.1.4 Provider Type	24
13.1.5 Activity Types	25
13.1.6 Number of CPE Offerings	25
13.1.7 Practice Gaps	25
13.1.8 Anticipated Target Audience	25
13.2 Components of the Annual Report	
13.2.1 Promoting Equity	

	13.2.2 Quality Improvement (Annual QI)	
	13.2.3 Commercial Support and Funding	26
	13.2.4 Provider Type	27
	13.2.5 Activity Types	27
	13.2.7 Learner Interactions from Other Professions	28
	13.2.8 Number of CPE Offerings	
	13.2.9 Practice Gaps	
	13.2.10 Anticipated Target Audience	28
	13.3 Non-Submission of Annual Report	29
	14.1 Logo Use	29
	14.2 Credit Designation and Usage	29
	14.3 Credit Statement and Required Language (Approved / Denied / Pending)	29
	14.3.1 CPE Activity Submission Approved (Credit Statement)	29
	14.3.2 CPE Activity Submission Denied	29
	14.3.3 CPE Activity Submission Review Pending	29
	14.4 Submission Review and Timeframes	29
	14.4.1 48-Hour Rule for Submission	29
	14.4.2 CPE Activity Submission Review Timeframe	
1	5.0 Content Criteria	30
1	6.0 Requirements and Framework	
1	7.0 Assignment of Continuing Professional Education Units (CPEUs)	35
	17.1 One Contact Hour (60 minutes) = One (1) CPEU	35
	17.2 CPEU Assignment for Reading-Based CPE	35
	17.3 Provider Minimum CPEU Requirements, Provider Capped CPEU Assignment, and Learner Max CPEUs	
	17.4 Rounding	
1	8.0 Record of Purchase	37
1	9.0 Required Items for Issuance to Learners	37
	19.1 Certificate of Completion	37
	19.2 Evaluation of the CPE	
	19.2.1 Required CDR Feedback Email	

19.2.2 Required Evaluation Components	
20.0 Documents Retention / Record Keeping	
21.0 Activity Approval Periods	
22.0 Fees	
References	40

List of Figures

Figure 1. Audit Process Step 1	. 15
Figure 2. Audit Process Step 2	. 15
Figure 3. Audit Process Step 3	. 16
Figure 4. Levels of Appeal	. 20
Figure 5. Complaint Process Step 1	. 21
Figure 6. Complaint Process Step 2	. 22
Figure 7. Complaint Process Step 3	. 22
Figure 8. Requirements and Framework	. 35
Figure 9. CDR CPEU Prior Approval Program Certificate of Completion	. 38

List of Tables

able 1. Reporting Cohorts	. 23
able 2. Content Criteria	. 31
able 3. Provider Minimum CPEU Requirements, Provider Capped CPEU Assignment, and Learner Maximum CPEUs	s 37
able 4. Examples of When to Round Down	. 37
able 5. Examples of When to Round Up	. 37
able 6. Activity Approval Periods	. 40

1.0 CDR Mission & Vision

Mission: The Commission on Dietetic Registration administers valid, reliable, and rigorous credentialing processes to meet the professional needs of credentialed practitioners and their employers to protect the public.

Vision: The Commission on Dietetic Registration protects and promotes the health of the public by supporting practitioner competence, quality practice, diversity, equity, lifelong-learning, and career advancement.

2.0 Intent of the CDR CPEU Prior Approval Program

The intent of the CDR Continuing Professional Education Unit (CPEU) Prior Approval Program is to facilitate lifelong learning through access to nutrition and dietetics related Continuing Professional Education (CPE) that updates, enhances, or assesses knowledge, skills, and attitudes of professional dietetics practice.1 Each CPE activity should be free from marketing and commercial bias, free from financial influence, and conducted in a way that promotes equity. Activities which are CDR CPEU Prior Approved have the following characteristics:

- Meet Professional Development Portfolio (PDP) Content Criteria
- Comply with CDR CPE Provider Policies
- Conform to Activity Type definitions
- Develop behaviors required for continued competence as outlined in the Essential Practice Competencies

CDR CPEU Prior Approval does not constitute endorsement by CDR of a CDR CPE Provider (referred to hereafter as "Provider"), activities, or materials.

3.0 Provider Eligibility

Provider eligibility is unrestricted by business organization type or location.

4.0 Provider Username

Each Provider will be assigned a unique Provider Username which is used to log in to the Continuing Professional Education (CPE) database. The Provider is responsible for the content and quality of CPE activities / materials provided under the assigned Provider Username. A Provider shall only utilize one Provider Username. Submissions under alternate accounts is not permitted.

The Commission on Dietetic Registration protects and promotes the health of the public by supporting practitioner competence, quality practice, diversity, equity, lifelonglearning, and career advancement.

5.0 Accountable Contact(s)

5.1 Requirements and Responsibilities

The Provider is responsible for designating an Accountable Contact who is the available liaison to CDR staff. The Accountable Contact is responsible for ensuring compliance with Content Criteria, Activity Type definitions, and CDR CPE Provider Policies. A Provider could be an organization or an individual. If the Provider is an organization, it is up to the business to choose an Accountable Contact (internally or externally). If the Provider is an individual, that person may function as the Accountable Contact, or they may find a third party to take on that role. The Accountable Contact need not be a CDR credentialed practitioner.

CPE submission is not permitted until the Accountable Contact has been trained, has attested to an understanding of the policies, and has been designated and approved. The Accountable Contact is responsible for overseeing the following:

- Planning
- Development
- Disclosure (conflicts of interest, commercial support, funding, funder(s)/sponsor(s) of research within CPE discussion)
- Review of CPE content
- Credit assignment
- Submission of CPE activities
- Presentation of CPE
- Informal feedback or formal feedback and assessment
- CPE evaluation
- Certificate issuance
- Quick Response (QR) code issuance
- Document retention
- Quality improvement
- CDR quality processes (audit and complaint)
- Post-CPE withdrawal learner list submission
- Reporting (benchmarking and annual)
- Annual retraining

Noncompliance may result in remediation or suspension of submission privilege. The Provider may contract with a third party or consultant to fulfill the duties of the Accountable Contact. However, the Provider remains the responsible entity. Replacing the Accountable Contact does not absolve the Provider of adverse decisions such as remediation or suspension.

5.2 Pre-CPE Submission Requirements

5.2.1 Training (Step 1)

The Accountable Contact must attend pre-CPE submission training. Training will be virtual, with an expected annual time commitment of less than one hour.

5.2.2 Attestation and Agreement (Step 2)

The Accountable Contact must attest to an understanding of training topics and agree to comply with CDR Content Criteria, Activity Type definitions, and CDR CPE Provider Policies.

5.2.4 Designating an Accountable Contact or Accountable Contacts (Step 3)

The Provider identifies and designates the Accountable Contact, which is required prior to CPE submission. Advanced designation of the Accountable Contact is critical to timely CPE approval. Secondary or tertiary Accountable Contacts may be designated (hereafter referred to in the singular).

The Provider or replacement Accountable Contact is responsible for notifying CDR staff when the Accountable Contact's role is assumed by a new individual.

5.2.3 Benchmarking Report (Step 4)

The Accountable Contact must complete a benchmarking report. See Policy 13.1 Components of the Benchmarking Report.

5.3 Annual Retraining

CDR's Content Criteria, Activity Types, and CDR CPE Provider Policies are subject to review and modification. While changes will be communicated to all Accountable Contacts representing Providers with approved and active (non-expired) CPE, it is required that Accountable Contacts complete an annual retraining no later than one month after the start of a new reporting year. See Policy 13 Reporting. Accountable Contacts shall be notified of training opportunities via email. Training will be virtual, with an expected annual time commitment of less than one hour. Submission of activities will be indefinitely suspended if retraining is not completed within the month following the start of a new reporting year. Submission of activities will be reinstated once the Accountable Contact completes retraining.

6.0 Provider Responsibility

The Provider who has submitted the CPE is responsible for compliance with Content Criteria, Activity Type definitions, and CDR CPE Provider Policies. A Provider acquiring active / approved CPE becomes responsible only after successfully notifying CDR staff of transfer.

6.1 Notification of Transfer of Responsibility (Relinquishing and Acquiring)

Both the relinquishing and acquiring Providers shall notify CDR staff in writing no less than four weeks prior to the transfer of CPE to confirm activity title(s) and the date(s) of transfer of responsibility. Written notification may be sent to PriorApproval@eatright.org.

As of the date of transfer, the acquiring Provider assumes responsibility for the Prior Approved CPE, which includes compliance with Content Criteria, Activity Type Definitions, and CDR CPE Provider Policies.

If not already established, the acquiring Provider's Accountable Contact must be designated and trained, then attest to an understanding of training topics and complete a benchmarking report before any activities (including those transferred) may be offered for CPEUs.

6.2 Audit Accountability

Upon notice of audit, the acquiring Provider supplies CDR staff with audit documentation that substantiates compliance with Content Criteria, Activity Type definitions, and CDR CPE Provider Policies.

6.3 Web Hosting

Web hosting of Prior Approved CPE by CDR CPE Providers other than the CDR CPE Provider who is responsible is permissible. The hosting Provider must be a current CDR CPE Provider with at least five active CPE activities available to learners at the time of hosting.

6.3.1 Provider is Clear to and Contactable by Learners

The Provider who is responsible shall be made clear to learners in approved CPE advertising, CPE content, and on CPE evaluations. The Provider's email address must be located on CPE evaluations.

6.3.2 Hosting Restrictions

Hosting of approved CPE by commercial supporters is restricted. See Policy 9 Commercial Support for additional information.

6.4 Submission on Behalf of Other Entities or Providers

Providers shall neither voluntarily submit nor accept payment for CPE submission to the CDR CPEU Prior Approval Program on behalf of other entities or Providers. The submitting entity is considered the Provider and is responsible for CPE content and quality of any approved CPE activities / materials provided under the assigned Provider Username.

6.5 Copyright / Non-Original Content

Legal permissions shall be obtained by the Provider when applicable. CDR is not liable for copyright infringement or trademark violations.

7.0 Marketing and Commercial Bias in CPE

CPE is not a vehicle for product or service marketing. All attempts to favor, recommend, purchase, use, or promote particular products, product groups, commodity organizations, equipment, devices, services, branded treatment options, diagnostic screening tools, or tests are prohibited. This includes efforts made by Providers, commercial supporters, or funders, as well as individuals involved in planning, development, review, marketing, implementation, presentation, hosting, learner feedback and assessment, and evaluation. The Accountable Contact is responsible for ensuring that the physical space or virtual location of the CPE is free of marketing However, marketing may occur before and after CPE as detailed below.

7.1 Content Containing Products or Services

Verbal, printed, or visual depictions of products or services in CPE content shall be generic, unbranded, and / or de-identified.

Education materials that are part of CPE content such as slides, abstracts, handouts, or evaluation mechanisms, must not contain any marketing including logos, trade names, or product group messages or images.² Provider logo display in CPE content is prohibited for any type of Provider including but not limited to colleges, universities, health systems, foundations, nonprofits, and corporations.

Copyright statements on Provider-owned materials are allowed.

CPE shall not include the following (list is not exhaustive) branded product giveaways, raffles, prize winnings, branded products purchased with Provider-supplied coupons, gift cards, or similar.

The following are exceptions to policy:

- Government entities may be mentioned or otherwise depicted in CPE content. This does not include commodity organizations.
- Peer-reviewed journal articles that are part of a CPE activity may include in-text trade or brand names and/or logos per requirements established by the journals in which they are published.
- Discussion of specific evidence-based, peer-reviewed research that is applicable to nutrition and dietetics practice and occurs within a CPE activity may include mention of branded products or trade names if those branded products and/or trade names are included in specific evidenced-based, peer-reviewed research publication(s). Product group messages and branded product images are not permitted. Citations must be included.

As the intention of the CDR CPEU Prior Approval Program is, in part, to facilitate lifelong learning [via CPE that is] free of marketing, commercial bias, and financial influence, decisions related to the planning, development, presentation, and/or evaluation of an activity must not be made to satisfy the objective of including specific journal articles; CPE content must not be influenced by the objective of including specific journal articles, and should not be modified to accommodate the inclusion of specific journal articles.

Funder(s)/sponsor(s) of the research must be disclosed to learners before the discussion takes place.

• Discussion of specific evidence-based clinical practice guidelines that occurs within a CPE activity may include mention of trade names to give recognition of the organization(s) that published said guidelines and are cited in the presentation.

7.2 Marketing-Free Physical Space or Virtual Location of the CPE

7.2.1 In-Person

Marketing, samples, exhibits, and non-CDR Prior Approved education must not occur in the physical space. (i.e. conference room) utilized for the Prior Approved CPE within 20 minutes before or after a Prior Approved CPE activity.²

7.2.2 Virtual, Recorded, or Printed

Learners must not be presented with marketing while engaged in CPE. Learners must be able to engage with the CPE without having to page through, click through, watch, listen to, or be presented with marketing messages during content.² The link provided for web-based CPE activities must not include access to product or service listings, product or service descriptions, or purchase options for products or services. Commercial breaks are not permitted. Non-CDR Prior Approved education or marketing content offered before or after online CPE must be accessed via a separate link.

7.3 Marketing-Free Print and Email Communication

CPE-related print and email communications shall not include non-CPE branded product images or non-CPE product or service marketing messages.

7.4 Marketing-Free Feedback and CPE Evaluation

Learner feedback and assessment and CPE evaluation opportunities shall not be located on areas of websites, forums, message boards, etc. that include product or service listings, product or service descriptions, or purchase options for products or services.

7.5 Management of Other Activities Associated with CPE

Learners must be able to easily distinguish between CDR Prior Approved CPE and other activities.² Activities that are peripheral to the CPE but are not CDR CPEU Prior Approved must be clearly identified and communicated as such to learners.

7.5.1 Restrictions

Exhibits, product / service marketing, branded product education and / or non-CDR approved education in association with CPE must not²:

- Influence any decisions related to the planning, presentation, and evaluation of the CDR Prior Approved CPE
- Interfere with the presentation of the CDR Prior Approved CPE

7.5.2 Information About the CPE That Does Not Contain Educational Content

Information distributed about CDR Prior Approved CPE that does not include educational content, such as schedules and logistical information, may include Provider and / or supporter logos but may not contain branded product images or product or service marketing messages.²

Certificates of completion may include Provider logos but may not include logos of commercial supporters or contain branded product images or product or service marketing messages.²

7.6 Confidentiality and Use of Learner Names and Contact Information

Learner names and contact information may not be shared with companies, organizations, entities, or agents without the explicit consent of the individual learner.³

Learner names and contact information may not be shared with non-CPE divisions or areas of the Provider's company, parent company, sister company, organization, or affiliated entity or agents without explicit consent of the learner.

Learners must be given the opportunity to consent (i.e. opt in / opt out) to any marketing emails, texts, and / or physical mailers.



8.0 Relevant Financial Relationships and Conflicts of Interest

Conflicts of interest (COI) in CPE arise when individual financial relationships relevant to the CPE content compromise or have the potential to compromise professional judgment and / or impart bias into the CPE content.⁴ Relevant financial relationships shall be disclosed. A financial relationship is relevant if the CPE content that an individual influences, controls, contributes to, or presents relates to business lines, products, services, or commodities that may contribute to that individual's financial or professional gain.⁵

8.1 Collection of Disclosure Information

It is the responsibility of the Accountable Contact to collect information regarding relevant financial relationships and declarations of conflicts of interest. All individuals who influence, control, contribute to, or present CPE content must disclose relevant financial relationships and conflicts of interest to the Accountable Contact to facilitate disclosure to learners.

Roles can include but are not limited to:

- CPE staff
- Planners
- Developers
- Reviewers
- Faculty
- Accountable Contacts

Individuals must disclose all financial relationships occurring within the prior 24 months, regardless of the amount.⁵

Disclosure information must include:

- The name of the company or organization with which the individual has a financial relationship⁵
- The nature of the financial relationship⁵
- Declaration of conflicts of interest or lack thereof

Examples of financial relationships include employee, researcher, consultant, advisor, speaker, independent contractor (including contracted researcher), royalties or patent beneficiary, executive, person with ownership interest, and recipient of in-kind products. Individual stocks and stock options should be disclosed; diversified mutual funds do not need to be disclosed. Research funding should be disclosed by the principal or named investigator even if that individual's institution receives the research grant and manages the funds.⁵

8.2 Disclosure of Conflicts of Interest to Learners

Transparency in CPE is dependent on learner awareness of conflicts of interest or lack thereof by those who influence, control, contribute to, or present CPE content.

Individual conflicts of interest must be disclosed to learners prior to the beginning of the CPE activity, prior to learners' engagement in CPE content. Disclosures of conflicts of interest must be located on the first slide, page, or image following the title slide, page, or image. Learners shall be informed when no conflicts of interest exist. See Policy 9.5 Disclosure of Commercial Support and Policy 10.2 Disclosure of Funding for information regarding other required disclosures.

8.3 Retention of Disclosure Information

Disclosure information must be retained for seven years following the expiration of a CPE activity. Providers shall make individual disclosures of relevant financial relationships available to learners and / or CDR staff upon request.

9.0 Commercial Support

CDR defines commercial support as financial or in-kind support from entities external to the Provider that manufacture, distribute, sell, resell, or promote business lines, products, services, or commodities. Commercial support shall not be utilized in any capacity which influences, controls, contributes to, or impacts CPE content. Providers who choose to accept commercial support must ensure that the CPE content remains independent of the supporter and that the support does not result in commercial bias or influence on CPE content.⁶

9.1 Commercial Support Agreement

The terms, conditions, purposes, and amount of the commercial support must be documented in an agreement between the supporter and the CPE Provider. See Policy 9.4 Documentation of Commercial Support for a list of required information. The agreement must be executed prior to the start of the CPE.

9.2 Management of Commercial Support

The Accountable Contact must manage all commercial support used to pay all or part of the costs associated with the CPE. The CPE Provider must make all decisions regarding the receipt, allocation, and disbursement of funds received. Disbursement of funds must come from the CPE Provider, not the supporter.

9.3 Guidelines for Use of Commercial Support

The CPE Provider may use commercial support to⁶:

- Fund honoraria or travel expenses of planners, reviewers, faculty, teachers, authors, and others involved in CPE content
- Pay for meals for all learners before or after CDR Prior Approved non-enduring CPE activities
- Defray or eliminate the cost of CPE for all learners

The CPE Provider may not use commercial support to⁶:

- Pay for travel, lodging, honoraria, gifts, or other expenses for learners participating in CDR Prior Approved CPE
- Influence, control, contribute to, or impact CPE content

9.4 Documentation of Commercial Support

As a component of the annual report, the Accountable Contact must produce accurate and detailed written documentation of:

- Names and contact information for organizations that provided commercial support
- Dollar amount received from each organization
- Monetary value and description of in-kind support received
- Description of how commercial support was used

9.5 Disclosure of Commercial Support

The name(s) of the organization(s) contributing financial and / or in-kind support must be disclosed to learners in CPE marketing and prior to the beginning of the CPE activity, prior to learners' engagement in CPE content. Disclosure of commercial support must be located on the first slide, page, or image following the title slide, page, or image. Disclosure must not include the supporters' logos, trade names, or product group messages or images.⁶ The supporters' logos, trade names, or product group messages or images shall not appear in CPE content, as outlined in Policy 7 Marketing and Commercial Bias in CPE.

Required language: "Commercial support has been provided by [name of commercial supporter]."

10.0 Funding

CDR defines funding as revenue generated by the Provider (or affiliated parent or sister companies) from the manufacture, distribution, sale, resale, or promotion of non-CPE business lines, products, services, or commodities, which is utilized in the planning, development, review, and presentation of CPE.⁷ Funding, including monetary or in-kind support, shall be disclosed. Funding shall not result in commercial bias.

10.1 Documentation of Funding

As a component of the annual report, the Accountable Contact must produce accurate and detailed written documentation of:

- Names and contact information of organizations that provided funding
- Dollar amount received from each organization
- Monetary value and description of funding received
- Description of how funding was used

10.2 Disclosure of Funding

The names of entities (e.g. parent or sister companies) that contribute funding from non-CPE revenue to CPE planning, development, review, and presentation must be disclosed to learners in CPE marketing and prior to the beginning of the CPE activity, prior to learners' engagement in CPE content. Disclosures of funding must be located on the first slide, page, or image following the title slide, page, or image. Disclosure must not include the funders' logos, trade names, or product group messages or images.⁵ The funders' logos, trade names, product group messages or images or images shall not appear in CPE content, as outlined in Policy 7 Marketing and Commercial Bias in CPE.

Required language: "Funding from non-CPE revenue for CPE planning, development, review, and / or presentation has been provided by [name of funder]."

11.0 Equity in CPE Planning, Development, and Presentation

Providers shall utilize resources and incorporate processes that enable those who influence, control, contribute to present, or participate in CPE content to examine explicit (conscious) and implicit (unconscious) biases, assumptions, privileges, and language. Established models, theories, and frameworks shall be utilized in the planning, development, and presentation of CPE to effectively promote equity.

Equity in CPE applies to:

- Planners, reviewers, faculty, authors
- Content
- RD/DTR learners
- Patients, clients, customers

CPE that promotes equity, with a focus on health equity, acknowledges historical and institutional inequities and is developed and presented to recognize, respect, and include differences in ability, age, creed, culture, ethnicity, gender, identity, political affiliation, race, religion, sexual orientation, size, and socioeconomic characteristics.

CPE is a safe space when approached with cultural humility and an openness to the cultivation of cultural competence. Beliefs, experiences, identities, and differences in abilities, age, size, socio-cultural / socioeconomic characteristics, and political affiliations are considered and respected.

12.0 Quality Monitoring and Compliance

Audit and remediation are quality measures incorporated into the CDR CPEU Prior Approval Program. Unless erroneous, CDR staff shall not modify the terms and timeframes of remediation or suspension. Providers are responsible for complying with CDR policies and criteria, including quality measures. CDR reserves the right to modify its audit requirement checklist to ensure compliance with CDR policies and criteria.

Figure 1. Audit Process Step 1

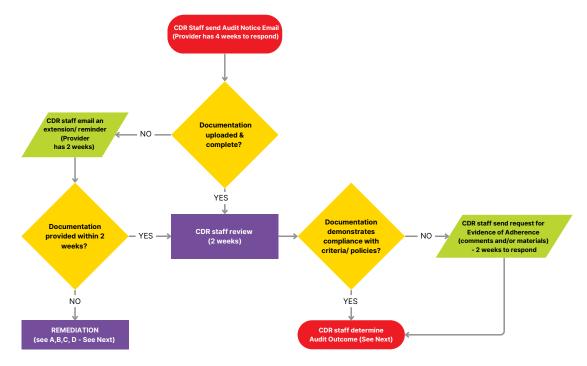


Figure 2. Audit Process Step 2

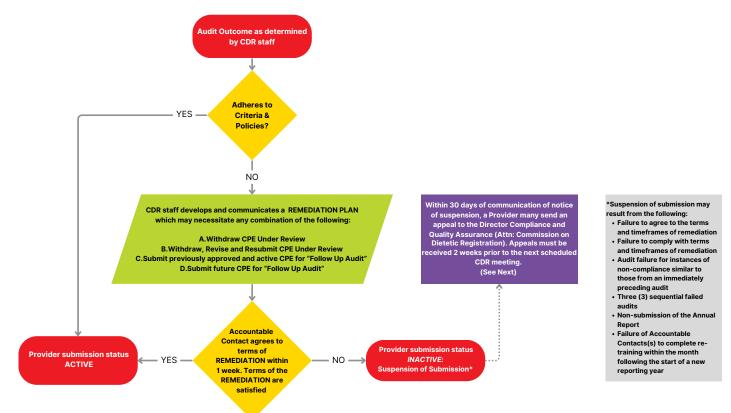
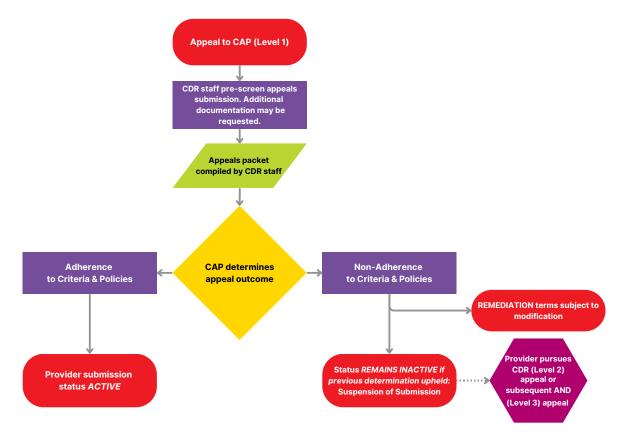


Figure 3. Audit Process Step 3



12.1 Audit Classifications and Processing Times

12.1.1 Random Audit

Approximately 2% of active CDR CPEU Prior Approved activities are randomly audited. Audit percentage is subject to change. Audit timeframes are contingent on the expediency of Accountable Contact submission of complete audit documentation. Random audit generally takes 3 - 8 weeks once completed documentation is received.

12.1.2 Hold Placed on Approval

CDR staff may defer CPE activity submissions directly to audit. Audit timeframes apply which delay processing of CPE submissions. Audit timeframes are contingent on the expediency of Accountable Contact submission of complete audit documentation. Audit / hold placed on approval generally takes 3 - 8 weeks once documentation is received.

12.1.3 Follow-Up Audit

Remediation plans may require submission of previously approved CPE or future CPE for review. Audit timeframes are contingent on the expediency of Accountable Contact submission of complete audit documentation. Follow-up audit generally takes 3 - 8 weeks once documentation is received.

12.1.4 Complaint Audit

Audits may be triggered by complaints filed by those who have completed the CPE activity. Complaints are sent to <u>QualityCPE@eatright.org</u>. Audit timeframes are contingent on the expediency of Accountable Contact submission of complete audit documentation. Complaint audit generally takes 3 - 8 weeks but may require an additional 4 – 6 weeks once documentation is received.

12.2 Audit Notice, Reminders, Extensions, Non-Submission

12.2.1 Audit Notice

The Accountable Contact has four weeks to complete the audit checklist and upload supporting CPE documentation after issuance of an audit notice. Access to CPE materials is provided to CDR staff free of charge.

12.2.2 Non-Submission or Incomplete Materials

If materials are incomplete after four weeks, CDR staff shall email a reminder to the Accountable Contact and grant a two-week extension for submission of all materials.

12.2.3 Extension Deadline Not Met

If the two-week deadline is not met, the Provider will automatically enter remediation. CDR staff will email the terms of the remediation to the Accountable Contact.

12.2.4 Notice of Request for Evidence of Adherence

When materials are received but are insufficient to determine compliance, CDR staff shall email the Accountable Contact and grant two weeks for Accountable Contact to submit comments and / or additional materials to demonstrate evidence of adherence to criteria and policies. CDR staff will review all materials submitted in response to the request for additional materials within two weeks of receipt. If comments / materials are not supplied in the two weeks granted, CDR staff shall determine an audit outcome.

12.3 Audit Outcomes

CDR staff will review the audit submission within two weeks from date of receipt of complete materials. CDR staff will email notification of audit outcome to the Accountable Contact within one week of determination. See below for a list of potential outcomes.

12.3.1 Compliance

If documentation demonstrates compliance with criteria and policies, an email will be sent to the Accountable Contact indicating a successful audit outcome. Provider submission status remains active.

12.3.2 Remediation

If documentation does not demonstrate compliance with criteria and policies or if documentation is not submitted, remediation will result. Provider submission remains active if the Accountable Contact agrees to and complies with terms and timeframes of remediation.

12.4 Remediation Requirements

Remediation results from noncompliant outcomes or non-submission of audit documentation and requires agreement to and compliance with terms and timeframes of a remediation plan.

12.4.1 Remediation Agreement

The Accountable Contact agrees to terms and timeframes of a remediation plan within one week of issuance of notice of remediation. Failure to submit the agreement within one week of notice of remediation will result in suspension of the Provider's submission privileges. See Policy 12.5.2 Suspension.

12.4.2 Remediation Terms and Timeframes

Terms and timeframes of remediation shall be specified in the remediation plan and are based on audit findings or non-submission of documentation. The Accountable Contact's failure to comply with terms and timeframes of remediation will result in suspension of the Provider's submission privileges. Remediation will always require withdrawal of the CPE activity. CDR staff may either bar resubmission or permit revision and resubmission via the audit process.

Learners may claim CPEUs for activities purchased through the withdraw date.

Remediation may require one of any combination of the following:

12.4.2a Withdraw CPE Under Review

The Accountable Contact shall discontinue offering the noncompliant version of an activity for CPEUs as of the date indicated on the remediation plan. All learner-facing messaging (e.g. Provider website and marketing communications) shall be modified no later than 11:59 PM CT on the date of withdraw to reflect that the activity is no longer being offered for CPEUs. CDR staff shall modify the end date in the CPE database. The end date shall be the withdraw date and is considered the expiration of the CPE.

Within one week of withdrawal, the Accountable Contact will be required to submit a list of CDR credentialed practitioners who purchased the CPE activity through its withdraw date. Submission of this list of learners is considered a term of remediation and failure to produce the list within one week will result in suspension of the ability to submit CPE activities.

12.4.2b Withdraw, Revise, and Resubmit CPE Under Review

The Accountable Contact shall discontinue offering the noncompliant version of an activity for CPEUs as of the date indicated on the remediation plan. All learner-facing messaging (e.g. Provider website and marketing communications) shall be modified no later than 11:59 PM CT on the date of withdraw to reflect that the activity is no longer being offered for CPEUs. CDR staff shall modify the end date in the CPE database. The end date shall be the withdraw date and is considered the expiration of the CPE.

Within one week of withdrawal, the Accountable Contact will be required to submit a list of CDR credentialed practitioners who purchased the CPE activity through its withdraw date. Submission of this list of learners is considered a term of remediation and failure to produce the list within one week will result in suspension of the ability to submit CPE activities.

Accountable Contacts who choose the option to revise and resubmit the CPE will be given instructions for resubmission via the audit process. <u>Activities shall not be resubmitted through the CDR CPEU Prior Approval Program process</u>.

Providers will be charged the standard CDR CPEU Prior Approval Program fee for resubmission. Activity approval periods will reflect approval timeframes typical for the Activity Type. The Provider shall ensure that resubmission of the activity not only satisfies terms and timeframes illustrated in the remediation plan, but that all necessary updates are made to CPE content to ensure compliance with Content Criteria and all CDR CPE Provider Policies.

If the activity is revised, resubmitted, and approved, the revised activity shall be marketed in such a way as to illustrate the incorporated revisions.

12.4.2c Submit Previously Approved CPE for Follow-Up Audit

Previously approved CPE may be selected for follow-up audit.

12.4.2d Submit Future CPE for Follow-Up Audit

Future CPE submission may be requested for follow-up audit via the audit process. Submission of CPE via the typical CDR CPEU Prior Approval Process will be suspended until terms and timeframes of remediation are met.

12.5 Remediation Outcomes

12.5.1 Compliance

When terms and timeframes of the remediation plan are satisfied, CDR staff will email the Accountable Contact within two weeks to indicate successful completion of remediation. Provider ability to submit CPE activities remains active.

12.5.2 Suspension

In suspension, Provider ability to submit CPE is rendered inactive until the terms and timeframes of the remediation plan are met or via favorable appeals outcome. Suspension of ability to submit CPE activities may result from the following:

- Failure to agree to the terms and timeframes of remediation
- Failure to comply with the terms and timeframes of remediation (including non-submission of post-CPE withdrawal learner lists)
- Audit failure for repeat instances of noncompliance similar to those from an immediately preceding audit
- Three sequential failed audits
- Non-submission of the annual report*
- Failure of the Accountable Contact to complete retraining within the month following the start of a new reporting year

CDR staff will email the Accountable Contact and indicate the reason for suspension.

Accountable Contacts may appeal suspension. See Policy 12.6 Appeals.

*If Provider remains suspended for one year or more due to non-submission of the annual report, the Provider will be required to meet the terms of remediation and submit a benchmarking report for submission status to be rendered active.

12.6 Appeals

12.6.1 Basis for Appeal

Accountable Contacts may not appeal notice of an audit.

Accountable Contacts may appeal adverse decisions only after being placed on suspension. See Policy 12.5.2 Suspension.

An appeal, as well as the basis for the appeal (including supporting documentation), shall be submitted by the Accountable Contact in writing to the Director of Compliance and Quality Assurance within 30 days of notice of suspension.

12.6.2 Levels of Appeal

12.6.2a Level 1: CAP Appeal

Adverse decisions resulting in suspension can be contested via an appeal to the Competency Assurance Panel (CAP).

Appeals must be received two weeks prior to the next scheduled CAP meeting. If received less than two weeks prior to the next scheduled CAP meeting, appeals will be reviewed at the subsequent CAP meeting.

The Director of Compliance and Quality Assurance will notify the appellant of the decision within 10 business days of the determination.

12.6.2b Level 2: CDR Appeal

Adverse decisions from a Level 1 appeal can be contested via an appeal to the Commission on Dietetic Registration.

Appeals must be received two weeks prior to the next scheduled CDR meeting. If received less than two weeks prior to the next scheduled CDR meeting, appeals will be reviewed at the subsequent CDR meeting.

The Director of Compliance and Quality Assurance will notify the appellant of the decision within 10 business days of the determination.

12.6.2c Level 3: AND Appeal

Adverse decisions from a Level 2 appeal can be contested via an appeal to the Academy of Nutrition and Dietetics Appeals Committee.

Appeals must be received two weeks prior to the next scheduled Academy of Nutrition and Dietetics Appeals Committee meeting. If received less than two weeks prior to the next scheduled AND meeting, appeals will be reviewed at the subsequent AND meeting.

The Director of Compliance and Quality Assurance will notify the appellant of the decision within 10 business days of the determination.

Figure 4. Levels of Appeal



12.7 Complaints

CDR credentialed practitioners who have completed CDR CPEU Prior Approved CPE may communicate complaints that indicate potential noncompliance with Content Criteria or CDR CPE Provider Policies to CDR staff. Complaints are sent to CDR staff via <u>QualityCPE@eatright.org</u> and a complaint form is subsequently issued to the complainant. Complaint forms shall be completed and returned to CDR staff within one week of issuance.

If the complaint form identifies potential noncompliance with criteria or policies, CDR staff shall audit the activity in question.

If the complaint pertains to "Best Available Research Evidence" CDR staff will locate three independent Subject Matter Experts (SMEs) to review the activity in question. The Accountable Contact shall provide CPE access to the SMEs free of charge.

Audit decisions, as determined by CDR staff and potential SME reviews will be presented to CAP for secondary review and determination.

Policies 12.3-12.6 apply. Please note that complaint-related appeals begin at Level 2: CDR Appeal since CAP determines the outcome of a complaint.

Audit outcomes shall be communicated by the Director of Compliance and Quality Assurance.

CDR staff will not communicate audit outcomes to the individual or entity filing the complaint.



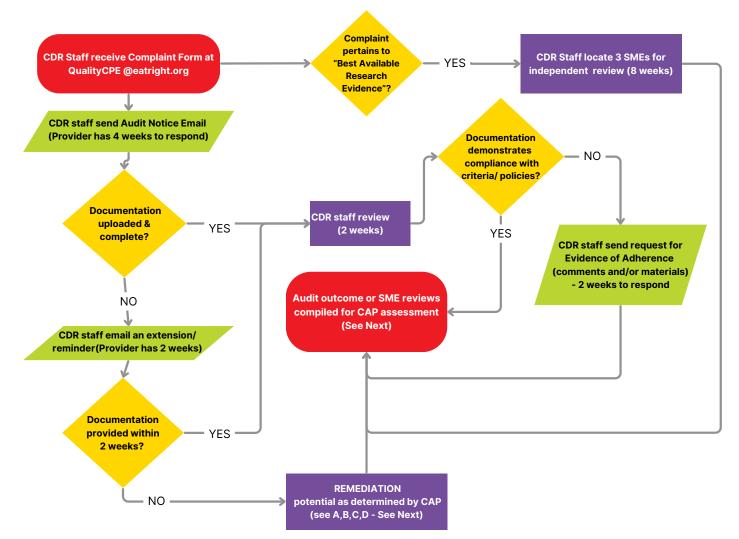


Figure 6. Complaint Process Step 2

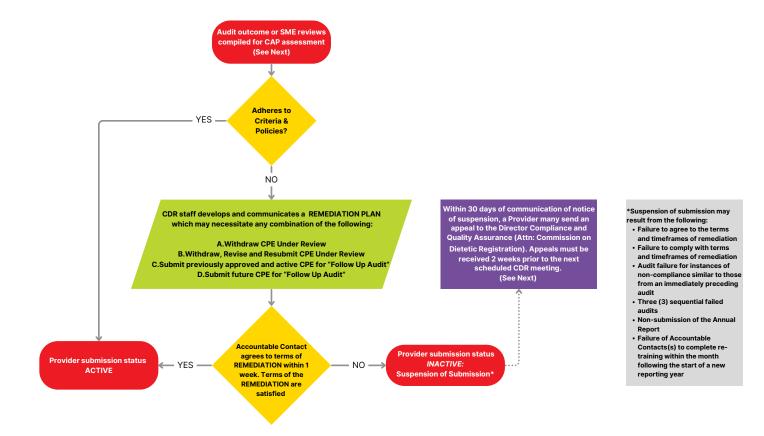
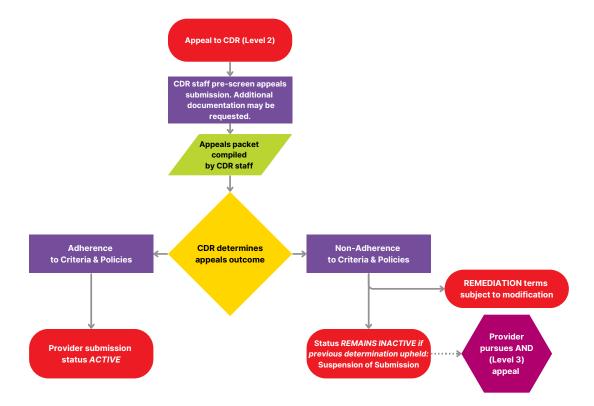


Figure 7. Complaint Process Step 3



12.8 Revocation of Submission Privileges

If, upon investigation, CAP determines that a Provider would not benefit the nutrition and dietetics profession or could constitute a threat to public health, safety, or welfare, submission privileges can be revoked. The Accountable Contact will be notified via email and informed of appeal procedures. Fees will not be refunded.

13.0 Reporting

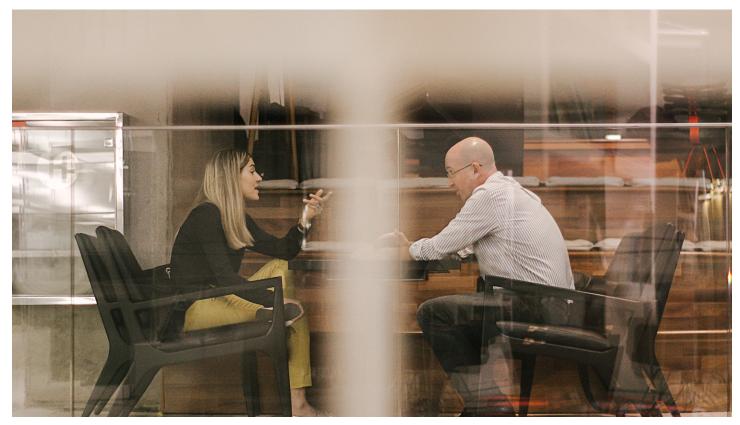
CDR CPE Providers will be placed in one of four reporting cohorts (March, June, September, or December) based on when the benchmarking report is completed. As part of the requisite pre-CPE submission process, the Accountable Contact completes an initial, one-time benchmarking report. The benchmarking report provides a reference point for submission of the annual report. All Providers with active CDR Prior Approved CPE activities in a reporting year will be required to submit an annual report relevant to that year.

Data gathered via the benchmarking and annual reports will be presented to CDR's Competency Assurance Panel and CDR and may be utilized to inform future revisions to Content Criteria and CDR CPE Provider Policies, as well as quality processes.

The table below indicates reporting cohort (and subsequently indicates when the annual report is due). For example, f the benchmarking report is completed between January 1 and March 31, the annual report will be due on March 31 of the following year. Accountable Contacts will be notified by CDR staff via email three months prior to the due date of the annual report.

Table 1. Reporting Cohorts

Benchmarking Report Complete	Annual Report Due the Following Year
January, February, March	March
April, May, June	June
July, August, September	September
October, November, December	December



13.1 Components of the Benchmarking Report

13.1.1 Promoting Equity

If the CPE Provider is currently offering CPE, are principles of equity incorporated? See Policy 11. If so, how? (open-ended question)

13.1.2 Quality Improvement (Benchmarking QI)

The following data shall be collected, analyzed, and used to inform QI measures to improve CPE activities and / or achieve anticipated learning outcomes (see below).

- Participation: attendance or completion
- Satisfaction: post-evaluation of the activity by the learner; required evaluation questions are listed in section 19.2.2 of the CPE Provider Policy Manual; Provider may opt to customize evaluations to seek feedback regarding the following:
 - Achievement of stated objectives
 - o Applicability of the CPE activity to meet the learner's education needs
 - Usefulness of educational material
 - o Quality of faculty
 - Effectiveness of instructional methods
 - Variety of instructional methods
 - Appropriateness of learning feedback and assessment
 - o Likelihood of learner recommending activity to another learner
 - o Likelihood of learner participating in another training from same Provider
- Knowledge: information shared contributes to continued competence in practice
- Application: demonstrated behaviors contribute to continued competence in practice
- Attitude: demonstrated attitudes and critical thinking opportunities contribute to continued competence in practice

Describe quality improvement processes that will be implemented using the above attributes. (openended question)

13.1.3 Commercial Support and Funding

- Has the CPE Provider received commercial support in the 12 months prior to completing this report? (Y/N)
- Does the CPE Provider anticipate using commercial support in the next 12 months? (Y/N)
- Does the CPE Provider manufacture, distribute, sell, resell, or promote non-CPE products, product groups, services, or commodities? (Y/N)
- Has the CPE Provider received funding from non-CPE revenue sources in the 12 months prior to completing this report? (Y/N)
- Does the CPE Provider anticipate using funding from non-CPE revenue sources for the development and offering of CPE activities in the next 12 months? (Y/N)

13.1.4 Provider Type

(drop down)

Advertising, marketing, or communication firm Bio-tech company Device manufacturer or distributor Diagnostic lab Diagnostic lab that manufactures or sells proprietary products or tests Dietary supplement manufacturer or seller Electronic health records company Food distributor Food grower Food grower Food manufacturer Food seller Foodservice equipment manufacturer or seller Government or military agent Group medical practice Health law firm Health profession membership organization Health-related wearable product manufacturer or seller Hospital or healthcare delivery system Infusion center Insurance or managed care company Medical food manufacturer or seller Non-profit Nursing home Pharmaceutical company or distributor Pharmacy Private practice Publishing or education company Rehabilitation center School or university Software or game developer Trade association, board, or council Other

13.1.5 Activity Types

Choose anticipated Activity Types which will comprise the education offered by the CPE Provider in the upcoming reporting year. (drop down)

172 CDR CPEU Prior Approved Live
181 CDR CPEU Prior Approved Posters
231 CDR CPEU Prior Approved Study Groups
161 CDR CPEU Prior Approved Journal Clubs
741 CDR CPEU Prior Approved Enduring
120 CDR CPEU Prior Approved Certificate Programs

13.1.6 Number of CPE Offerings

How many RD/DTR targeted activities does the CPE Provider anticipate offering in the upcoming reporting year?

- 1-10 activities
- 11-20 activities
- 21+ activities

13.1.7 Practice Gaps

Describe the process utilized to identify and address practice gaps in the nutrition and dietetics profession and / or amongst the target audience. (open-ended question)

13.1.8 Anticipated Target Audience

Select the nutrition and dietetics related practice areas¹⁰ of the anticipated target audiences of CPE that will be offered in the upcoming reporting year. Choose all that apply.

Health Care Preventative Care, Wellness, Lifestyle Foodservice Systems, Culinary, Retail Military Service, First Responders, US Public Health Services Sustainable Food and Water Systems Education and Research Other

13.2 Components of the Annual Report

13.2.1 Promoting Equity

Please explain how the CPE Provider has incorporated principles of equity in CPE since the benchmarking report or prior annual report. List two examples. (open-ended question)

List two ways the CPE Provider intends to incorporate principles of equity in CPE in the forthcoming reporting year. An explanation of incorporation will be required in the next annual report. See Policy 11.

13.2.2 Quality Improvement (Annual QI)

- Participation: attendance or completion
- Satisfaction: post-evaluation of the activity by the learner; required evaluation questions are listed in section 19.2.2 of the CPE Provider Policy Manual; Provider may opt to customize evaluations to seek feedback regarding the following:
 - Achievement of stated objectives
 - Applicability of the CPE activity to meet the learner's education needs
 - o Usefulness of educational material
 - o Quality of faculty
 - o Effectiveness of instructional methods
 - Variety of instructional methods
 - Appropriateness of learning feedback and assessment
 - o Likelihood of learner recommending activity to another learner
 - Likelihood of learner participating in another training from same Provider
- Knowledge: information shared contributes to continued competence in practice
- Application: demonstrated behaviors contribute to continued competence in practice
- Attitude: demonstrated attitudes and critical thinking opportunities contribute to continued competence in practice

Using the QI measures described above, how has the CPE Provider improved the CPE activities it offers or will offer to achieve anticipated learner outcomes? (see below)

Option 1: How have activity evaluation submissions informed the development or improvement of CPE activities? Please upload at least two learner evaluations and the corresponding developments or improvements that were made as a result.

Option 2: What improvements has the CPE Provider made to CPE activities based on the collection and analysis of learner feedback and assessments? Please upload at least two examples.

Describe the quality improvement processes to be employed during the upcoming year. (open-ended question)

13.2.3 Commercial Support and Funding

 Has the CPE Provider received commercial support (financial or in-kind) in the past 12 months? (Y/N)

If yes, please provide accurate and detailed written documentation of commercial support utilized in the past 12 months. The commercial support agreement (see Policy 9.2 Management of Commercial Support) should include the following:

- Names and contact information of organizations that provided commercial support
- Dollar amount received from each organization
- o Monetary value and description of in-kind support received
- o Description of how commercial support was used
- Does the CPE Provider anticipate using commercial support in the next 12 months? (Y/N)
- Does the CPE Provider manufacture, distribute, sell, resell, or promote non-CPE products, product groups, services, or commodities? (Y/N)
- Has the CPE Provider received funding from non-CPE revenue sources in the past 12 months? (Y/N)

If yes, please provide accurate and detailed written documentation of funding from non-CPE revenue sources in the past 12 months. Include:

- o Names of organizations that provided funding
- Dollar amount received from each organization
- o Monetary value and description of in-kind support received
- o Description of how funding was used
- Does the CPE Provider anticipate using funding from non-CPE revenue sources for the development and offering of CPE activities in the next 12 months? (Y/N)

13.2.4 Provider Type

(drop down) Advertising, marketing, or communication firm **Bio-tech company** Device manufacturer or distributor Diagnostic lab Diagnostic lab that manufactures or sells proprietary products or tests Dietary supplement manufacturer or seller Electronic health records company Food distributor Food grower Food manufacturer Food seller Foodservice equipment manufacturer or seller Government or military agent Group medical practice Health law firm Health profession membership organization Health-related wearable product manufacturer or seller Hospital or healthcare delivery system Infusion center Insurance or managed care company Medical food manufacturer or seller Non-profit Nursing home Pharmaceutical company or distributor Pharmacy Private practice Publishing or education company Rehabilitation center School or university Software or game developer Trade association, board, or council Other

13.2.5 Activity Types

Choose anticipated Activity Types which will comprise the education offered by the CPE Provider in the upcoming reporting year. (drop down)

172 CDR CPEU Prior Approved Live
181 CDR CPEU Prior Approved Posters
231 CDR CPEU Prior Approved Study Groups
161 CDR CPEU Prior Approved Journal Clubs
741 CDR CPEU Prior Approved Enduring
120 CDR CPEU Prior Approved Certificate Programs

13.2.6 RD / DTR Learner Interactions

How many CPE activities offered by the CPE Provider in the past reporting year were completed by RDs or DTRs? (fill in question)

13.2.7 Learner Interactions from Other Professions

Please select non-RD / DTRs who completed CPE activities offered by the CPE Provider in the past reporting year.

Physicians Nurses Pharmacists Dentists **Psychologists** Physician assistants Psychiatrists Optometrists Social workers Physical therapists Athletic trainers Speech/language pathologists Public health Lactation consultants Certified diabetes care and education specialists Chefs/foodservice staff Certified dietary managers Case managers Chiropractors

Other

13.2.8 Number of CPE Offerings

How many RD/DTR targeted activities does the CPE Provider anticipate offering in the upcoming reporting year?

- 1-10 activities
- 11-20 activities
- 21+ activities

13.2.9 Practice Gaps

- What practice gaps were addressed based on the objectives and anticipated outcomes of the CPE activities offered in the previous year? (open-ended question)
- Please describe any changes the CPE Provider has made to the process utilized to identify and address learning needs / gaps in the nutrition and dietetics profession and / or amongst target audience.

13.2.10 Anticipated Target Audience

Select the nutrition and dietetics related practice areas¹⁰ of the anticipated target audiences of CPE that will be offered in the upcoming reporting year. Choose all that apply.

Health Care Preventative Care, Wellness, Lifestyle Foodservice Systems, Culinary, Retail Military Service, First Responders, US Public Health Services Sustainable Food and Water Systems Education and Research

Other

13.3 Non-Submission of Annual Report

Providers who do not comply with the annual report submission deadline will be placed on suspension until the completed report is submitted to CDR staff. Providers may appeal suspension.

14.0 CDR Logo, Credit Statement, Submission and Review Timeframes

14.1 Logo Use

The only authorized use of the CDR logo is on the CDR CPEU Prior Approval CPE certificate. CDR does not permit the use of its logo under any other circumstances.

14.2 Credit Designation and Usage

CDR's credit designation is "Continuing Professional Education Units" or "CPEUs". "Continuing Professional Education Units" or "CPEUs" may not be used outside the context of Prior Approved CPE in the promotion of products or services.

14.3 Credit Statement and Required Language (Approved / Denied / Pending)

14.3.1 CPE Activity Submission Approved (Credit Statement)

Upon notification of completed CDR staff review and approval of CPEUs, Providers shall use the following language:

"[Title of activity] awards [number of CPEUs] CPEUs in accordance with the Commission on Dietetic Registration's CPEU Prior Approval Program."

14.3.2 CPE Activity Submission Denied

If an activity submission is denied by CDR staff, Providers shall notify learners of denial using the following language:

"[Title of activity] was not Prior Approved by CDR for CPEUs." 14.3.3 CPE Activity Submission Review Pending

If an activity submission has not been reviewed by CDR staff, Providers shall notify learners using the following language:

"The CPE activity application for [title of activity] is pending CDR review and approval for [number of CPEUs] CPEUs."

14.4 Submission Review and Timeframes

14.4.1 48-Hour Rule for Submission

CDR requires all CDR CPEU Prior Approval CPE activity applications be submitted to CDR staff at least 48 hours prior to the start of the CPE activity. If the CPE submission has not been reviewed by CDR staff prior to the activity being offered, Providers shall notify learners that the submission review is pending using the language above (Policy 14.3.3 CPE Activity Submission Review Pending). If the activity submission is denied by CDR staff, Providers shall notify learners using the language above (Policy 14.3.2 CPE Activity Submission Denied).

Exceptions for late CPE activity submissions will not be made.

14.4.2 CPE Activity Submission Review Timeframe

Final review of complete CPE applications and approval or denial for CPEUs takes 4-6 weeks.

CDR staff are unable to honor requests to expedite review of CPE activities.

15.0 Content Criteria

Content Criteria applies to CDR CPEU Prior Approved CPE and CDR CPEU Eligible CPE. Content Criteria has been divided into Core and Supplement for purposes of clarity. Content Criteria (Core) describes the required characteristics of Continuing Professional Education (CPE). Content Criteria (Supplement) further defines those characteristics.

All CPE, besides that which is offered by Providers accredited by Joint Accreditation for Inter-professional Continuing Education TM, must abide by Content Criteria.

Table 2. Content Criteria

Content Criteria (Core) Content Criteria (Supplement)	
Describes the required characteristics of CPE	Defines the required characteristics of CPE
1. Continuing Professional Education (CPE) Defined CPE is nutrition and dietetics- related and updates, enhances, or assesses knowledge, skills, and attitudes of professional dietetics practice.	Nutrition and Dietetics: Nutrition and Dietetics reflects the integration of Nutrition—which encompasses the science of food, nutrients and other substances contributing to nutrition status and health, with Dietetics—which is the application of food, nutrition and associated sciences, to optimize health and the delivery of care and services for individuals and groups and as defined by the Essential Practice Competencies.
2. Stated Objectives & Anticipated Outcomes Stated learning objectives and anticipated outcomes apply to professional or inter-professional nutrition and dietetics practice or intended practice as defined by Essential Practice Competencies.	 Objectives: Statements that define the goal(s) of an educational activity.¹¹ Learning objectives are appropriate for a target audience's practice area. Essential Practice Competencies provide a structured guide to help learners meet their educational goals. Outcomes: Outcomes reflect levels of knowledge, competence, and performance and address educational needs that contribute to narrowing practice gaps.¹¹ Providers implement methods for measuring outcomes to assess learners and to evaluate and improve the effectiveness of the CPE activity. Performance Indicators describe sets of behaviors that can be evaluated to determine competence and can be used to illustrate anticipated outcomes. Assessment methods are dependent on the Activity Type and setting.
 Relevance of Educational Content Educational content is relevant to knowledge, skills, and attitudes of professional nutrition and dietetics practice¹ and provides learning outcomes that apply to professional, inter-professional, or intended practice of the target audience. 	Educational Content: CPE activities are developed to address an educational need or to narrow a practice gap that is relevant to the scope of practice of RDs and DTRs. Learners may discern if the CPE applies to practice based on the availability of the following descriptors: A. Activity Description B. Target audience* C. Objectives D. Performance Indicator suggestions for CDR CPEU Prior Approved Activities *CDR CPEU Prior Approved Activities will denote a target audience based on practice areas described in the Revised 2017 Scope of Practice for the Registered Dietitian Nutritionist. ¹⁰ See below:
	RD/DTR Practice Area Health Care Preventative Care, Wellness, Lifestyle Foodservice Systems, Culinary, Retail Military Service, First Responders, US Public Health Services Sustainable Food and Water Systems Education and Research Other

4. CPE Content Development, CPE Presentation, Informal Feedback, Formal Feedback and Assessment, CPE Evaluation

Those responsible for CPE content have appropriate academic training, certification, and / or demonstrated expertise in the relevant subject area. Methods for providing informal feedback or formal feedback and assessment to the learner or learners are included for live and enduring activities. Planning and instructional methods are appropriate for the Activity Type / setting and support learning objectives and promote outcomes.

CPE activities are evaluated by Providers for quality improvement. Learners may communicate quality concerns regarding CDR CPEU Approved activities to QualityCPE@ eatright.org. Those responsible for CPE content*:

Planners

Examples: Planning committees, CPE staff, editors, activity directors¹² Roles: Making decisions related to the scope and direction of the CPE content, educational goals, identification of practice gaps and needs, selecting speakers, authors, reviewers

Reviewers

Examples: Peer reviewers, editors, CPE staff¹²

Roles: Making decisions related to the scope and direction of the CPE content, educational goals, identification of practice gaps and needs, selecting speakers, authors, reviewers

Faculty/ Teachers

Examples: Speakers, panelists, instructors, trainers, coaches, educational consultants¹² Roles: Teaching, writing, producing, and presenting education

Authors

Examples: Writers, editors, instructional designers, CPE content developers, educational researchers, CPE staff¹²

Roles: Teaching, writing, producing, and presenting education *If the personnel listed above are not responsible for CPE content but fulfill other ancillary roles, academic training, certification, or demonstrated expertise may not apply

Academic training: Academic degrees of those responsible for CPE content should be relevant and from a university accredited by a USDE-recognized accrediting agency. Foreign academic degrees accredited by foreign equivalent institutions are accepted on the condition that they have been verified by one of the agencies listed on the Independent Foreign Degree Evaluation Agencies list.

Certification: Credentials maintained by those responsible for CPE content are issued by relevant, recognized, and accredited programs that meet national or international standards.

Demonstrated Expertise: Demonstrated expertise may be established via publications in scientific, peer-reviewed professional journals or presentations relevant to CPE topics at scientific, peer- reviewed conferences.

Informal Feedback or Formal Feedback and Assessment: Based on Activity Type, objectives, outcomes, educational content, and the size and composition of the target audience, Providers are required to incorporate informal feedback and / or formal feedback and assessment.

Informal Feedback Examples:

- Pretests
- Polling
- Surveys
- Observation: Instructor, Peer, or Self
- Scheduled Q&A, Discussion Boards, or Chat (which include the presenter or instructor)
- Checks for understanding (all participants)
- Games

Formal Feedback and Assessment Examples:

- Reflection paper or video
- Presentation
- Project
- Simulation
- Role Play
- Case Study
- Pre-test and post-test
- Post-test
- Performance based / application in an educational or practice setting
- Portfolio of work
- Oral exam or interview

Planning and instructional methods are appropriate:

Provider utilizes appropriate planning and instructional methods to achieve the educational objectives and / or measure learning outcomes. Those responsible for CPE planning and presentation are trained in instructional methods appropriate for adults.

Continued.	Evaluation and Improvement of CPE activities: CPE activities shall incorporate an evaluation. Providers of CDR CPEU Prior Approved activities are required to collect and analyze feedback, assessments, and CPE evaluations to improve the quality of CPE activities to promote anticipated learning outcomes. Quality improvement of CPE is based on the following:
	 Participation: Attendance or completion Satisfaction: Post-evaluation of the activity by the learner Knowledge: Information shared contributes to continued competence in practice Application: Demonstrated behaviors contribute to continued competence in practice Attitude: Demonstrated attitudes and critical thinking opportunities contribute to continued competence in practice
	Quality Concerns: Activity evaluations issued by Providers of CDR CPEU Prior Approved Activities must state: "RDs and DTRs may share information with CDR staff regarding the quality of this or any CDR CPEU Prior Approved Activity by emailing <u>QualityCPE@eatright.org</u> ." Poor evaluations or quality concerns may result in Provider audit by CDR staff.
5. Valid Content Educational content is based on the best available research evidence which is supported by documentation from reputable, peer-reviewed, scientific journals. Areas of doubt, uncertainty, and / or controversy are clearly identified and communicated. Referenced content supports safe, effective customer care or service.	Best Available Research / Evidence: Refers to the strongest data available on a particular topic as determined by effectiveness of the study design and size. CPE Providers should utilize the Best Available Research / Evidence when developing content. When available, evidence-based guidelines and systematic reviews are considered the best sources of research / evidence. Study designs from least to most effective: case studies / series, ecological studies, cross-sectional studies, case-control studies, clinical trials. ¹³
	Referenced Content: Reference lists / bibliographies are supplied to learners in a form that is readable and retrievable. For example, references shall be viewable by the learner and are located on a slide or within content that relates to a stated learning objective. References shall be made available to learners after the conclusion of a CPE activity.
	Safe, effective customer care or service: Recommendations for customer care or service in continuing education are based on current science and evidence and promote critical thinking and evidence-based decision making in practice while considering the customer. ¹⁴ Risk versus benefit information is conveyed when appropriate. Controversial or disputed issues are presented as such. ¹⁵ Although CPE activities are an appropriate place to discuss, debate, and explore new and evolving topics, these areas need to be clearly identified. It is the responsibility of Providers to educate on these topics without advocating for, or promoting, practices that are not, or not yet adequately based on current science, best available evidence, and clinical reasoning. ¹ All scientific research referred to, reported, or used in CPE in support or justification of customer care or service recommendations must conform to the generally accepted standards of experimental design, data collection, analysis, and interpretation. ¹⁶
6. Commercial Bias, Marketing, Commercial Support, and Disclosure	Commercial Bias: Content or format in a CDR CPEU Prior Approved activity or its related educational materials that promotes products or business lines. ¹⁷
Educational content is absent of commercial bias and marketing.	Marketing: The action or business of bringing or sending a product or commodity to market; the action, business, or process of promoting and selling a product, etc., including market research, advertising, and distribution. ⁷
Disclosure of commercial support as well as disclosure of conflict of interest or lack thereof, are provided before learner participation in the CPE activity.	Commercial Support: Financial or in-kind support from entities external to the Provider that manufacture, distribute, sell, resell, or promote products, services, or commodities. Commercial support shall not be utilized in any capacity which influences, controls, contributes to, or impacts CPE content. ¹⁸
	Conflict of interest: A personal or financial interest or a duty to another party which may prevent an individual from acting in the best interests of CDR credentialed practitioners, and patients, clients, and customers. Conflicts of interest may arise in continuing education since the potential exists for professional judgment and practice to be biased by an economic interest in, or personal benefit from, professionally related commercial enterprises.
	1

Rounding: CPEUs are awarded in whole, half, or qu See below for examples on when to round down o Examples of when to round down:	uarter numbers (ex 2.0, 2.25 or 2.5). or up.
	CPEUs
	1 CPEU
	1.25 CPEUs
	1.5 CPEUs
	1.75 CPEUs
Examples of when to round up:	
Total Time of Activity	CPEUs
53 minutes – 1 hour	1 CPEU
1 hour 8 minutes – 1 hour and 15 minutes	1.25 CPEUs
1 hour 23 minutes – 1 hour 30 minutes	1.5 CPEUs
1 hour 38 minutes – 1 hour 45 minutes	1.75 CPEUs
1 hour 53 minutes – 2 hours	2 CPEUs
 Nutrition and Diet Topics: Topics focused on the s substances intended for intake or infusion^{7,19}; the a of food, nutrients, and other substances in relation processes by which food, nutrients, and other subtransported, utilized, and excreted. Exclusions: Joint Accreditation Accrediting Organizations Activities offered by Providers accredited by Joint / Organizations (Accreditation Council for Continuin Accreditation Council for Pharmacy Education [ACI Center [ANCC], American Academy of Physician Associal Work Boards [ASWB], American Dental Asso Recognition Program [ADA CERP], American Psych: Certification for the Athletic Trainer [BOC], and Ass Optometry's Council on Optometric Practitioner Education Education for the Athletic Trainer [BOC], and Ass Optometry's Council on Optometric Practitioner Education and dietetics-related academic coursework at a university accredited by a USDE recognized ac CPEUs. Under the activity description in your Activ coursework was taken during a semester, trimeste that qualifies for CPE credit must be started after y DTR and must be completed in your current recert completion date shall not extend beyond the last of DTRs concluding a 5-year recertification of succ successful notice must be received by May 31 of the cycle. Other organizations Activities offered by American Board of Medical Sp Academy of Family Physicians (AAFP), American Ac (AANP), American Psychiatric Association (APA), ar Association (APHA) 	Accreditation Accrediting g Medical Education [ACCME], PE], American Nurses Credentialing isistants [AAPA], Association of ociation's Continuing Education ological Association [APA], Board of sociation of Regulatory Boards of ducation [ARBO/COPE]) ork, including distance learning, crediting agency can be awarded 'ity Log, indicate whether the r, or quarter. Academic coursework /ou have become an RD or cification cycle and the course day of the term. For those RDs or date of completion of academic essful course completion. However, he last year of the recertification codemy of Nurse Practitioners
	See below for examples on when to round down of Examples of when to round down: Total Time of Activity 1 hour – 1 hour and 7 minutes 1 hour 16 minutes – 1 hour 22 minutes 1 hour 31 minutes – 1 hour 37 minutes 1 hour 46 minutes – 1 hour 52 minutes Examples of when to round up: Total Time of Activity 53 minutes – 1 hour and 15 minutes 1 hour 8 minutes – 1 hour and 15 minutes 1 hour 38 minutes – 1 hour 30 minutes 1 hour 38 minutes – 1 hour 45 minutes 1 hour 38 minutes – 1 hour 45 minutes 1 hour 53 minutes – 2 hours Nutrition and Diet Topics: Topics focused on the s substances intended for intake or infusion ^{7,19} ; the s of food, nutrients, and other substances in relation processes by which food, nutrients, and other substances in relation processes by which food, nutrients, and other substances in relation processes by which food, nutrients, and other substances in relation processes by which food, nutrients, and other substances in relation processes by which food, nutrients, and other substances in relation processes by which food, nutrients, and other substances in relation processes by which food, nutrients, and other substances in relation processes by which food, nutrients, and other substances in relation processes by which food, nutrients, and other substances in relation processes by which food, nutrients, and other substances in relation processes by which food, nutrients, and other substances in relation processes by which food, nutrients, and other substances in relation processes by which food, nutrients, and other substances in relation processes by which food, nutrients, and other substances in relation processes by which food, nutrients, and other substances in relation processes by which food, nutrients, and other substances in relation Center (ANCC), American Academy of Physician As Otypered by Joint / Accreditation Council for Continuin Accreditation Council on Optometric Practitioner E Joint Accreditation Accredited Providers Academic Coursework (Activity Type 100) 100 – Academic

16.0 Requirements and Framework

All live and enduring activities are required to include methods of informal feedback or formal feedback and assessment. Certificate programs are required to include formal feedback and assessment.

Figure 8. Requirements and Framework

Informal Feedback Or Formal Feedback And Assessment	Activity Evaluation Components Utilized For Quality Improvement (Qi):
Learning objectives and corresponding assessments are designed to develop knowledge and behaviors required for continued competence (knowledge, skill, and attitude). Providers are required to incorporate a variety of methods of informal feedback or formal feedback and assessment. Examples of feedback and assessment are listed below, but are not limited to the following: Informal Feedback	By completing an initial benchmarking and annual reports, CPE Providers are required to collect and analyze feedback, assessments, and CPE evaluations to improve the quality of CPE activities to promote anticipated learning outcomes. Quality improvement of CPE is based on the following: A) Participation: Attendance or completion
 Pretexts Pretexts Polling Surveys Observation: Instructor, Peer, or Self Scheduled Q&A, Discussion Boards, or Chat (which include the presenter or instructor) Checks for Understanding (all participants) Games Formal Feedback & Assessment* Reflection paper or video Presentation Project Simulation Role Play Case Study Pre-test and post-test Post-test Performance based/application in an educational or practice setting Portfolio of work Oral exam or interview * Formal documentation of participant results is required. Enduring activities which exceed 35 CPEUs (>/=35.25 CPEUs) must be developed/ submitted to CDR as Certificate of Training Programs which can be a minimum of 10 CPEUS and have no cap. See the definition for Activity Type 120 for additional details. 	 B) Satisfaction: Post-evaluation of the activity by the learner. Required evaluation questions are listed in section 19.2.2 of the CPE Provider Policy Manual. Providers may opt to custom-tailor evaluations to capture information such as: Achievement of stated objectives Applicability of the CPE activity to meet the learner's educational needs Usefulness of educational material Quality of faculty Effectiveness of instructional methods variety of instructional methods used Appropriateness of learning assessments Likelihood of recommending this training to another Likelihood of learner participating in another training from this Provider in the future C) Knowledge: Information shared contributes to continued competence in practice E) Attitude: Demonstrated behaviors contribute to continued competence in practice E) Attitude: Demonstrated attitudes and critical thinking opportunities contribute to continued competence in practice

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17.0 Assignment of Continuing Professional Education Units (CPEUs)

17.1 One Contact Hour (60 minutes) = One (1) CPEU

The Accountable Contact is responsible for CPEU assignment based on the clock hour. CPEU assignments for non-enduring and non-reading based enduring CPE shall correspond to submitted timing outlines. Timing outlines shall include time for informal feedback or formal feedback and assessment.

17.2 CPEU Assignment for Reading-Based CPE

CPEUs assigned for reading-based, enduring CPE shall be determined by time for informal feedback or formal feedback and assessment plus word count of printed materials in relation to a standardized reading speed of 100 words per minute.

Time is calculated and converted to CPEUs via the conversion rate of one contact hour = one CPEU.

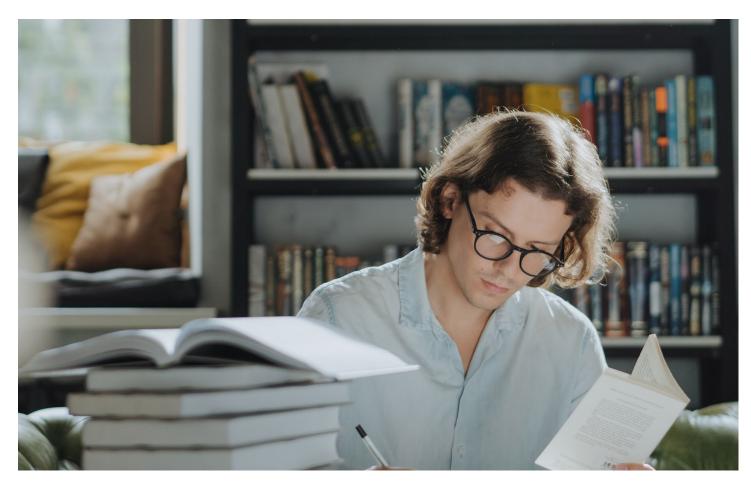
Example:

Activity includes reading a 70,000-word book

70,000 words/100 words per minute = 700 minutes

700 minutes/60 minutes per hour = 11.67 hours or 11 hours and 40 minutes

11 hours and 40 minutes = 11.75 CPEUs



17.3 Provider Minimum CPEU Requirements, Provider Capped CPEU Assignment, and Learner Maximum CPEUs

Table 3. Provider Minimum CPEU Requirements, Provider Capped CPEU Assignment, andLearner Maximum CPEUs

Activity Type	Provider Minimum CPEU Requirements	Provider Capped CPEU Assignment	Learner Maximum CPEUs
CDR CPEU Prior Approved Certificate Program (120)	10	None	None
CDR CPEU Prior Approved Posters	0.5	None	15 (RDs)
(181)			10 (DTRs)
CDR CPEU Prior Approved Journal Clubs (161)	1.0	None	None
CDR CPEU Prior Approved Study	1.0	None	50 (RDs)
Groups (231)			35 (DTRs)
CDR CPEU Prior Approved Live (172)	1.0	None	None
CDR CPEU Prior Approved Enduring (741)	0.5	35	None

17.4 Rounding

CPEUs are awarded in whole, quarter, or half numbers (example: 2, 2.25, or 2.5 CPEUs). See below for information regarding rounding down or up.

Table 4. Examples of When to Round Down

Total Time of Activity	CPEUs
1 hour – 1 hour and 7 minutes	1 CPEU
1 hour 16 minutes – 1 hour 22 minutes	1.25 CPEUs
1 hour 31 minutes – 1 hour 37 minutes	1.5 CPEUs
1 hour 46 minutes – 1 hour 52 minutes	1.75 CPEUs

Table 5. Examples of When to Round Up

Total Time of Activity	CPEUs
53 minutes – 1 hour	1 CPEU
1 hour 8 minutes – 1 hour and 15 minutes	1.25 CPEUs
1 hour 23 minutes – 1 hour 30 minutes	1.5 CPEUs
1 hour 38 minutes – 1 hour 45 minutes	1.75 CPEUs
1 hour 53 minutes – 2 hours	2 CPEUs

18.0 Record of Purchase

Providers shall retain records of purchase of CPE for seven years.

19.0 Required Items for Issuance to Learners

19.1 Certificate of Completion

A certificate of completion is provided to the learner for activities submitted via the CDR CPEU Prior Approval Program. Providers may utilize sign-in sheets, login history, and / or completed learner assessment components to establish completion as applicable. Certificates of completion are maintained by the Provider for seven years. Procedures will be established by the Provider so that CDR credentialed practitioners can receive documentation, in a timely manner, of their completion of a CPE activity. To facilitate learner entry of completed Prior Approved CPE, the activity number shall be included on all certificates of completion; Providers may choose to include a system-generated QR code.

CDR CPEU Prior Approval CPE certificates of completion will be available in the CPE Provider account and may not be edited or adjusted, beyond inputting the requested information. CPE Providers of CDR CPEU Prior Approved Activities may choose to create and distribute their own certificates of completion, which must include:

- Participant name
- Registration number
- Provider code
- Activity title
- Activity number
- Date completed
- Number of CPEUs awarded
- Performance indicator(s)
- Provider signature
- QR code (optional)

CDR certificates of completion will include the CDR logo and may include the CPE Provider logo. CPE Providercreated certificates of completion may not contain the CDR logo. Supporter logos are not permitted.

Figure 9. CDR CPEU Prior Approval Program Certificate of Completion

Commission on Dietetic Registration		al Education Certificate of Attendance Attendee Copy-
the credentialing agency for the Academy of Nutrition and Dietetics	۱	Antenace copy
	Participant Name:	
	Participant CDR Number:	
	Provider Name:	Provider Code:
	Activity Title:	
RCode		
	Activity Number:	
	Date Completed:	Number of CPEUs Awarded:
	Performance Indicator(s):	
ovider Logo		
-		
rovider Signature		Retain Original Copy for Records

19.2 Evaluation of the CPE

Providers will offer an opportunity for learners to evaluate CPE activities. Furthermore, Providers will regularly use this important feedback to continually improve the activities / materials offered. See Policy 13.1.2 Quality Improvement (Benchmarking QI) and Policy 13.2.2 Quality Improvement (Annual QI).

19.2.1 Required CDR Feedback Email

Evaluations must state the following:

"RDs and DTRs may share information with CDR staff regarding the quality of this or any CDR CPEU Prior Approved Activity by emailing <u>QualityCPE@eatright.org</u>."

19.2.2 Required Evaluation Components

While Providers may develop evaluations that suit the activity or meet the needs of Providers, any evaluation must include the following:

- CDR requires that Providers utilize evaluations to promote quality improvement in their CPE activities. Completing this evaluation assists Providers, learners, and CDR.
- Provider:
- Name of CPE activity completed:
- Date completed:
 - Select Yes or No to describe attributes of the Continuing Professional Education:
 - Utilized best available research evidence
 - o Included ample peer-reviewed references to substantiate content
 - Expertise of Provider / presenter contributed to content quality
 - Target audience was appropriate
 - o Met educational needs and / or addressed practice gaps
 - o Included practical information for implementing changes to practice
 - Provided a balanced perspective / stated benefits and shortcomings
- Please describe any other noteworthy attributes of the CPE activity (open-ended question)
- If you selected No for any of the above, please elaborate (open-ended question)
- Select Yes or No to describe if the CPE activity enhanced knowledge, skills, and behaviors as described in CDR's Essential Practice Competencies for Ethics or Health Equity:
 - Included materials and content which emphasized and included diverse representation in the learning group
 - Included a focus on differences that may vary within and between patient / client populations
 - Established an environment or facilitated interactions which encouraged and respected diverse and divergent experiences and viewpoints
 - Encouraged reflection on bias and privilege and the promotion of personal growth.
- If you selected No for any of the above, please elaborate (open-ended question)
- Select Yes or No or No Answer to describe the language in the materials / presentation:
 - o Free of bias
 - Non-discriminatory
 - o Inclusive
 - o Conscious of honoring how individuals choose to identify themselves
 - Free of microaggressions
- Unfamiliar with one or more of the concepts presented above (check box)
- As a result of the education do you plan to: (select all that apply)
 - Share the information / collaborate with colleagues
 - o Review supplementary information to support or expand your learning
 - Seek additional CPE activities related to the topic
 - o Alter the methods in which you care for patients / clients / customers
 - o No action
 - o Other (describe)
- Please complete and return this evaluation and any additional comments to the CPE Provider (Provider email required). RDs and DTRs may share information with CDR staff regarding the quality of this or any CDR CPEU Prior Approved Activity by emailing <u>QualityCPE@eatright.org</u>.

20.0 Documents Retention / Record Keeping

Each of the documents outlined below shall be retained electronically for seven years following the expiration of a CPE activity.

- All documents affiliated with the CPE activity including planning and review
 - List of personnel who influence, control, contribute to, or present CPE, including:
 - o Planners

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- o Developers
- o Reviewers
- o Faculty
- o Accountable Contacts
- Records of purchase
- Activity evaluations
- Formal documentation of participant assessment results
- Levels / scoring for passing, proficiency, or performance
- Certificates of completion
- Disclosure forms
- Commercial support agreements
- Documentation of funding
- Accountable Contact attestations and agreements
- Remediation plans
- Remediation agreements
- Letters of appeal

21.0 Activity Approval Periods

Table 6. Activity Approval Periods

Activity Category	Activity Sub-Group	Activity Types	Approval Period
CDR CPEU Prior Approved CPE	Non-Enduring	172-Live160-Journal Club180-Posters230-Study Groups	1 year from date of approval
	Enduring	741 Enduring	3 years from date of approval
	Certificate Program	120 Certificate Program	3 years from date of approval

22.0 Fees

.5-10.75 CPEUs = \$50 per activity submission

11-24.75 CPEUs = \$100 per activity submission

25 or more CPEUs = \$150 per activity submission

Live in-person or live virtual events such as symposiums or meetings that include 10 or more sessions must be submitted as conferences = \$250 per activity submission

Non-USDE (United States Department of Education) academic degree processing fee - \$50 additional per activity submission*

*Required for confirming foreign degree verification or relevant expertise of those responsible for CPE content

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