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UW Health’s Mission, Vision and Values

UW Health’s reason for being, long-term goals and behaviors we live by are captured in our mission, vision and values. Our mission, vision and values provide purpose and direction, challenge, inspire us, and guide our actions and decision-making.

**MISSION: Remarkable Healthcare**
Advancing health without compromise through:

1. Service
2. Scholarship
3. Science
4. Social Responsibility

**VISION: Our Place in the World**
Working together, UW Health will be a national leader in health care, advancing the well-being of the people of Wisconsin and beyond.

**VALUES: The Ideals we live by**

**Integrity**
Doing the right things at the right time and place. Focus on the best interests of patients. Be honest with patients, learners and each other.

**Innovation**
Finding new and better ways to enhance quality of care and all aspects of our work.

**Compassion**
Treat patients, families, learners and each other with kindness and empathy. Connect with patients and families individually and personally and engage them as partners in their care decisions.

**Accountability**
Be individually and collectively responsible for the work we do and for the outcomes and experience of every patient, every learner, every day.

**Respect**
Honor patients’ right to privacy and confidentiality. Actively listen, encourage feedback and choose the best way to deliver timely and meaningful information.

**Excellence**
Strive to be the best and work continuously to improve performance and exceed expectations.

**Diversity**
Value differences among individuals and groups.
UW Health Dietetic Internship Mission, Vision and Goals

Dietetic Internship Mission
To provide a progressive and effective course of study that integrates supervised dietetics practice and graduate education to develop high-performing RDNs who are lifelong learners and prepared to meet the demands required of future registered dietitian nutritionists.

Dietetic Internship Vision
The UW Health Dietetic Internship will stimulate the continuous development of technical knowledge, professional attributes, and the intellectual curiosity to educate future practitioners integrating evidence-based approach in nutritional practice.

Program Goals

Goal 1: To provide a quality evidence-based post-baccalaureate education that will support all domains of practice.
- 80% of interns completing the program will rate their academic preparation as above average (4) or excellent (5) at their exit survey.
- 80% of employers who hire our interns will rate their academic preparation and professional readiness as above average or exceptional at the 1-year survey to employers following an intern’s graduation.

Goal 2: To provide the foundation needed for the development of high-level problem-solving and critical thinking skills required in all domains of practice.
- 80% of interns completing the program rate their problem-solving and critical thinking skills as above average (4) or excellent (5) upon completion of the program at their exit survey.

Goal 3: To recruit, retain and graduate interns who are able to pursue their career goals successfully.
- Of graduates who seek employment, 80% are employed in nutrition and dietetics or related fields within 12 months of graduation.
- “At least 80% of program students complete the program/degree requirements within 2 years (150% of program length.”
- In the next five years (2016-2021), “(graduates who pass the registration exam within one year of first attempt) on the CDR credentialing exam for dietitians nutritionists Is at least 80%.”
- “The program’s one-year pass rate (graduates who pass the registration exam within one year of first attempt) on the CDR credentialing exam for dietitians nutritionists Is at least 80%.”

Program Data is available upon request
## Rotation Sites

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<tr>
<th>Organization</th>
<th>West Location</th>
<th>East Location</th>
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</thead>
<tbody>
<tr>
<td>Access Community Healthcare</td>
<td>2202 S Park St, Madison, WI 53713</td>
<td>3434 E Washington Ave, Madison, WI 53704</td>
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<tr>
<td>Agrace Hospice Care</td>
<td>5395 East Cheryl Parkway, Madison, WI 53711</td>
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<tr>
<td>Aspirus Langlade Hospital</td>
<td>112 E 5th Ave, Antigo, WI 54409</td>
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<tr>
<td>Aspirus Wausau Hospital</td>
<td>333 Pine Ridge Blvd, Wausau, WI 54401</td>
<td></td>
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<tr>
<td>Capitol Lakes</td>
<td>333 W Main St, Madison, WI 53703</td>
<td></td>
</tr>
<tr>
<td>Columbus Community Hospital</td>
<td>1515 Park Ave, Columbus, WI 53925</td>
<td></td>
</tr>
<tr>
<td>Dane County Public Health: WIC</td>
<td>2300 S. Park Street, Suite 2010, Madison, WI 53713</td>
<td></td>
</tr>
<tr>
<td>Department of Health Services</td>
<td>1 West Wilson St, Room 243 Madison, WI 53701</td>
<td></td>
</tr>
<tr>
<td>Department of Public Instruction</td>
<td>125 S Webster St, Madison, WI 53703</td>
<td></td>
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<tr>
<td>Divine Savior</td>
<td>2817 New Pinery Rd, Portage, WI 53901</td>
<td></td>
</tr>
<tr>
<td>Green County Health Department: WIC</td>
<td>N3150 WI-81, Monroe, WI 53566</td>
<td></td>
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<tr>
<td>Hy-Vee, Inc.</td>
<td>2920 Fitchrona Rd, Fitchburg, WI 53719</td>
<td>675 S Whitney Way, Madison, WI 53711</td>
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<tr>
<td>Madison Metropolitan School District</td>
<td>4711 Pflaum Road, Madison, WI 53718</td>
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<tr>
<td>Independent Living, Inc. Meals on Wheels</td>
<td>West Location: 602 N Segoie Rd. Madison, WI 53705</td>
<td>East Location: 936 Tennyson Ln, Madison, WI 53704</td>
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<tr>
<td>Mercy West</td>
<td>1000 Mineral Point Ave #1, Janesville, WI 53548</td>
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<tr>
<td>Metcalfe’s Market</td>
<td>702 N Midvale Blvd, Madison, WI 53705</td>
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<tr>
<td>Middleton-Cross Plains School District</td>
<td>2130 Pinehurst, Middleton, WI 53562</td>
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<tr>
<td>Mt. Horeb School District</td>
<td>1304 East Lincoln Street, Mount Horeb, WI 53572</td>
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<tr>
<td>Oregon School District</td>
<td>123 E Grove St, Oregon, WI 53575</td>
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<tr>
<td>Sauk Prairie Hospital</td>
<td>333 Pine Ridge Blvd, Wausau, WI 54401</td>
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<tr>
<td>Select Specialty Medical</td>
<td>801 Braxton Place, Madison, WI 53715</td>
<td></td>
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<tr>
<td>St. Mary’s Care Center, SSM Health</td>
<td>3401 Maple Grove Drive, Madison, WI 53719</td>
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<tr>
<td>Aurora- Summit Hospital</td>
<td>36500 Aurora Dr, Summit, WI 53066</td>
<td></td>
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<tr>
<td>Dane County UW- Extension</td>
<td>5201 Fen Oak Dr, Suite 138, Madison, WI 53718</td>
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<tr>
<td>UW Health at The American Center (TAC)</td>
<td>4602 Eastpark Blvd, Madison, WI 53718</td>
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<tr>
<td>UW Health at Swedish American Hospital</td>
<td>1401 E State St, Rockford, IL 61104</td>
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<tr>
<td>UW Health Culinary and Clinical Nutrition Services</td>
<td>600 Highland Ave., F4/120 (MC 1510), Madison, WI 53792</td>
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<tr>
<td>UW Health East Clinic Nutrition</td>
<td>5249 E Terrace Dr. Room 2106, Madison, WI 53718</td>
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<tr>
<td>UW Health University Station</td>
<td>2880 University Ave., Madison, WI 53705</td>
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<tr>
<td>UW Health West Clinic Nutrition</td>
<td>451 Junction Rd., Madison, WI 53717</td>
<td></td>
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<tr>
<td>UW Health Digestive Health Center</td>
<td>750 University Row, Madison, WI 53792</td>
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<tr>
<td>UW Health American Family Children’s Hospital</td>
<td>1675 Highland Ave., Madison, WI 53792</td>
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<tr>
<td>Watertown Regional Medical Center</td>
<td>125 Hospital Dr, Watertown, WI 53098</td>
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<tr>
<td>William S. Middleton Memorial Veterans Hospital</td>
<td>2500 Overlook Terrace, Madison, WI 53705</td>
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2017 Core Competencies for the Registered Dietitian Nutritionist (CRDN)

The Core Knowledge and Competencies are the basis on which the program curriculum and learning activities are built. The UW Health Dietetic Internship program’s curriculum will prepare interns with the following core competencies:

Domain 1. Scientific and Evidence Base of Practice: Integration of scientific information and translation of research into practice.

CRDN 1.1 Select indicators of program quality and/or customer service and measure achievement of objectives.
CRDN 1.2 Apply evidence-based guidelines, systematic reviews and scientific literature.
CRDN 1.3 Justify programs, products, services and care using appropriate evidence or data.
CRDN 1.4 Evaluate emerging research for application in nutrition and dietetics practice.
CRDN 1.5 Conduct projects using appropriate research methods, ethical procedures and data analysis.
CRDN 1.6 Incorporate critical-thinking skills in overall practice.

Domain 2. Professional Practice Expectations: Beliefs, values, attitudes and behaviors for the professional dietitian nutritionist level of practice.

CRDN 2.1 Practice in compliance with current federal regulations and state statutes and rules, as applicable, and in accordance with accreditation standards and the Scope of Nutrition and Dietetics Practice and Code of Ethics for the Profession of Nutrition and Dietetics.
CRDN 2.2 Demonstrate professional writing skills in preparing professional communications.
CRDN 2.3 Demonstrate active participation, teamwork and contributions in group settings.
CRDN 2.4 Function as a member of interprofessional teams.
CRDN 2.5 Assign duties to NDTRs and/or support personnel as appropriate.
CRDN 2.6 Refer clients and patients to other professionals and services when needs are beyond individual scope of practice.
CRDN 2.7 Apply leadership skills to achieve desired outcomes.
CRDN 2.8 Demonstrate negotiation skills.
CRDN 2.9 Participate in professional and community organizations.
CRDN 2.10 Demonstrate professional attributes in all areas of practice.
CRDN 2.11 Show cultural competence/sensitivity in interactions with clients, colleagues and staff.
CRDN 2.12 Perform self-assessment and develop goals for self-improvement throughout the program.
CRDN 2.13 Prepare a plan for professional development according to Commission on Dietetic Registration guidelines.
CRDN 2.14 Demonstrate advocacy on local, state or national legislative and regulatory issues or policies impacting the nutrition and dietetics profession.
CRDN 2.15 Practice and/or role-play mentoring and precepting others.

Domain 3. Clinical and Customer Services: Development and delivery of information, products and services to individuals, groups and populations.

CRDN 3.1 Perform the Nutrition Care Process and use standardized nutrition language for individuals, groups and populations of differing ages and health status, in a variety of settings.
CRDN 3.2 Conduct nutrition focused physical exams.
CRDN 3.3 Demonstrate effective communications skills for clinical and customer services in a variety of formats and settings.
CRDN 3.4 Design, implement and evaluate presentations to a target audience.
CRDN 3.5 Develop nutrition education materials that are culturally and age appropriate and designed for the literacy level of the audience.
CRDN 3.6 Use effective education and counseling skills to facilitate behavior change.
Domain 3. Clinical and Customer Services: Development and delivery of information, products and services to individuals, groups and populations.

CRDN 3.7 Develop and deliver products, programs or services that promote consumer health, wellness and lifestyle management.
CRDN 3.8 Deliver respectful, science-based answers to client questions concerning emerging trends.
CRDN 3.9 Coordinate procurement, production, distribution and service of goods and services, demonstrating and promoting responsible use of resources.
CRDN 3.10 Develop and evaluate recipes, formulas and menus for acceptability and affordability that accommodate the cultural diversity and health needs of various populations, groups and individuals.

Domain 4. Practice Management and Use of Resources: Strategic application of principles of management and systems in the provision of services to individuals and organizations.

CRDN 4.1 Participate in management of human resources.
CRDN 4.2 Perform management functions related to safety, security and sanitation that affect employees, customers, patients, facilities and food.
CRDN 4.3 Conduct clinical and customer service quality management activities.
CRDN 4.4 Apply current nutrition informatics to develop, store, retrieve and disseminate information and data.
CRDN 4.5 Analyze quality, financial and productivity data for use in planning.
CRDN 4.6 Propose and use procedures as appropriate to the practice setting to promote sustainability reduce waste and protect the environment.
CRDN 4.7 Conduct feasibility studies for products, programs or services with consideration of costs and benefits.
CRDN 4.8 Develop a plan to provide or develop a product, program or service that includes a budget, staffing needs, equipment and supplies.
CRDN 4.9 Explain the process for coding and billing for nutrition and dietetics services to obtain reimbursement from public or private payers, fee-for-service and value-based payment systems.
CRDN 4.10 Analyze risk in nutrition and dietetics practice.

Medical Nutrition Therapy Concentration Specific Competencies

MNT 1 Assess and interpret growth of pediatric population, ages birth to 18 years.

MNT 2 Calculate nutritional requirements of well and sick children, ages birth to 18 years, for normal and catch up growth.

MNT 3 Identify feeding issues in infants and provide nutrition recommendations identifying appropriate formulas and feeding regimens, and using adaptive feeding devices and protocols, and supplementation/fortification.

MNT 4 Develop nutritional care plans and feeding regimens for acute and chronically ill infants and children, ages birth to 18 years, incorporating modular components, enteral formulas and dietary modifications.

MNT 5 Assess and interpret patients/clients with complex medical conditions, e.g., those with renal disease, multi-system organ failure, and trauma.

MNT 6 Integrate pathophysiology into medical nutrition therapy recommendations.

MNT 7 Develop, monitor and evaluate nutrition care plans that include enteral and parenteral nutrition regimens, transitional feeding, and adaptive feeding devices.

MNT 8 Conduct nutrition counseling and education for patients/clients with complicated health conditions, e.g., those with renal disease, multi-system organ failure, and trauma.
Public Health Concentration Specific Competencies

**Public Health Competency 1.** Identify and apply current, evidence-based or best practice guidelines and methods to assess and interpret individual- and community-level nutritional status to determine priority nutritional needs of target populations across the life course. (Food and Nutrition, FN5. Nutrition Assessment)

**Public Health Competency 2.** Explains the role of cultural, socioeconomic, and behavioral factors in the availability, accessibility, acceptability and delivery of public health services. (Communication, Marketing and Cultural Competence, CMC6. Social Determinants of Health)

**Public Health Competency 3.** Clearly articulates the need for and the value of evidence-based public health nutrition programs and promotes evidence-based public health nutrition programs and services, physical activity, and policies at the individual and population levels. (Advocacy/Education, AE5. Value of Evidence-based Interventions)

**Public Health Competency 4.** Identifies existing public health nutrition services of community-based partners and service areas in order to identify gaps in services (i.e., needs assessments); and contributes to coordinated program and/or intervention planning that supports collective impact and sustainability of services across sectors. (Policy, Systems, and Environmental Change, PSE2. Collective Impact and Sustainability of Resources)

**Public Health Competency 5.** Utilizes evidence-based or best practice methods to design, implement, and evaluate nutrition and physical activity programs or policy, systems, and environmental interventions. (Research and Evaluation, RE6. Developing, Implementing, and Evaluating Programs and Interventions)

**Public Health Competency 6.** Effectively communicates and promotes the role and value of highly qualified nutrition professionals in health and in local, state, national and international public health organizations. (Management and Leadership, ML15. Promoting the Role and Value of Highly Qualified Nutrition Professionals)

Food System Administration Concentration Specific Competencies

**FSA Competency 1 Articulate** the differences and value of distributors of different sizes for health care food systems.

**FSA Competency 2 Demonstrate** value of procurement system with policies and procedures for evaluating and securing products and vendors.

**FSA Competency 3 Articulate** the need for and the value of evidence-based food and nutrition programs that promote evidence-based information and policies at the individual and population levels.

**FSA Competency 4 Identify** existing Food system community-based partners and service areas in order to identify gaps in services (i.e., needs assessments); and contributes to coordinated program and/or intervention planning that supports collective impact and sustainability of services across sectors.

**FSA Competency 5 Utilize** evidence-based or best practice methods to design, implement, and evaluate local food and nutrition community programs or policy, systems, and environmental interventions.

**FSA Competency 6 Effectively** communicates and promotes the role and value of highly qualified nutrition professionals in health and in local, state, national and international culinary, food and nutrition organizations.
Capstone Certificate in Clinical Nutrition – Course Schedule

**Summer Session**
8 week Summer Session begins in June

*Courses*
NS 651: Advanced Clinical Nutrition – Pediatrics (3 cr.) *ONLINE*
NS 652: Advanced Nutrition Counseling and Education (3 cr.) *ONLINE*

**Fall Session**
15 week Fall Session begins in September

*Course*
NS 650: Advanced Clinical Nutrition – Critical Care and Nutrition Support (3 cr.) *ONLINE*

**Spring Session**
15 week Spring Session begins in January

*Course*
NS 653: Clinical Nutrition Research (3 cr.) *ONLINE*
# Required Curriculum

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<tr>
<th>Core Nutrition Courses – Complete all courses</th>
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<tr>
<td>NS 710: Human Energy Metabolism</td>
<td>2 cr</td>
<td>Fall</td>
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<tr>
<td>NS 711: Personalized Nutrition – Genetics, Genomics and Metagenomics</td>
<td>1 cr</td>
<td>Fall</td>
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<tr>
<td>NS 715: Micronutrients: Human Physiology and Disease</td>
<td>3 cr</td>
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<td>NS 720: Advanced Nutrition Assessment</td>
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<td>Fall</td>
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<td>NS 721: Nutrition Informatics</td>
<td>1 cr</td>
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<tr>
<td>NS 725: Advanced Community Nutrition</td>
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<td>EPD 700: Connected Learning</td>
<td>1 cr</td>
<td>2-4 courses</td>
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<td>EPD 701: Professional Writing</td>
<td>1 cr</td>
<td>offered each</td>
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<tr>
<td>EPD 702: Professional Presentations</td>
<td>1 cr</td>
<td>semester. See</td>
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<td>EPD/LIS 703: Managing Information</td>
<td>1 cr</td>
<td>Community of</td>
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<td>EPD/Gen Bus 783: Leading Teams</td>
<td>1 cr</td>
<td>Practice for</td>
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<td>EPD/Gen Bus 784: Project Management</td>
<td>1 cr</td>
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<td>EPD/Gen Bus 782: Marketing for Non-Marketing Professionals</td>
<td>1 cr</td>
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<td>EPD 712: Professional Ethics</td>
<td>1 cr</td>
<td>course</td>
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<tr>
<th>Clinical Nutrition Courses – Complete all courses</th>
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<tr>
<td>NS 650: Advanced Clinical Nutrition: Critical Care and Nutrition Support</td>
<td>3 cr</td>
<td>Fall</td>
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<tr>
<td>NS 651: Advanced Clinical Nutrition: Pediatrics</td>
<td>3 cr</td>
<td>Summer &amp; Fall</td>
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<tr>
<td>NS 652: Advanced Nutrition Counseling and Education</td>
<td>3 cr</td>
<td>Summer &amp; Spring</td>
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<tr>
<td>NS 653: Clinical Nutrition Research</td>
<td>3 cr</td>
<td>Spring &amp; Fall</td>
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<td>NS 875: Special Topics – Nutrition and Aging</td>
<td>3 cr</td>
<td>Fall</td>
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<tr>
<td>NS 875: Special Topics – Gastrointestinal Health and Nutrition</td>
<td>2 cr</td>
<td>Spring</td>
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<tr>
<td>NS 875: Special Topics - Sports Nutrition</td>
<td>2 cr</td>
<td>Summer</td>
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<td>NS 699: Special Problems</td>
<td>1-3 cr</td>
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<tr>
<td>Nursing 746: Interdisciplinary Care of Children with Special Healthcare Needs</td>
<td>3 cr</td>
<td>Fall, Spring</td>
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<td>LSC 560: Writing About Science</td>
<td>3 cr</td>
<td>Summer</td>
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<tr>
<td>LSC 452: Social Media Marketing for the Life Sciences</td>
<td>3 cr</td>
<td>Summer</td>
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<tr>
<td>EPD/Gen Bus 781: Financial Literacy</td>
<td>1 cr</td>
<td>Varies</td>
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<td>EPD 706: Change Management</td>
<td>1 cr</td>
<td>Varies</td>
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<td>EPD/Gen Bus 785: Professional Negotiations</td>
<td>1 cr</td>
<td>Varies</td>
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<tr>
<td>EPD 713: Key Legal Concepts for Technical Professions</td>
<td>1 cr</td>
<td>Varies</td>
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<tr>
<td>EPD 708: Creating Breakthrough Innovation</td>
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<td>Varies</td>
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<tr>
<td>EPD 704: Organizational Communication</td>
<td>1 cr</td>
<td>Varies</td>
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<tr>
<td>NS 670: Nutrition and Dietetics Practicum 1 (Available only to UWHC Dietetic Interns)</td>
<td>3 cr</td>
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<tr>
<td>NS 671: Nutrition and Dietetics Practicum 2 (Available only to UWHC Dietetic Interns)</td>
<td>3 cr</td>
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**TOTAL** 30 Credits
M.S. in Clinical Nutrition – Course Schedule

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<th>Semester</th>
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<td>Summer 2019</td>
<td>EPD 700: Connected Learning</td>
<td>EPD 702: Professional Presentations</td>
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<td>EPD 701: Writing for Professionals</td>
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<td>EPD 708: Breakthrough Innovations</td>
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<td>EPD 785: Effective Negotiations</td>
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<td>Fall 2019</td>
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<td>EPD 702: Professional Presentations</td>
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Dietetic Intern Evaluation Instructions

- There are 5 main types of evaluation:
  - Dietetic intern provides evaluation of the preceptor and rotation,
  - Preceptor provides evaluation of intern performance on the rotation rubric. This is provided to the intern and the program administrative support and/or the Dietetic Internship program manager.
  - Intern performs a self-evaluation
  - Intern performs a peer-evaluation
  - Intern provides a program evaluation

- Rotation rubrics should be provided to the preceptor during the first week of the rotation and submitted to the dietetic internship program manager or department support staff within one week of rotation completion. Rubrics are submitted for each rotation.

- The intern evaluation (of the preceptor and rotation) is accessible electronically and should be completed on the last day of the rotation.

- Interns have the right to review all evaluations at any time. Evaluations are kept confidential.

- Self-evaluations and peer-evaluations are done throughout the program.

- Program evaluation is performed within the last month of the internship. Results are kept confidential and not analyzed until the intern completes the program.
Overview of the Full-time, Clinical Medical Nutrition Therapy Track

The UW Health Dietetic Internship Program offers 15 full-time positions to qualified DPD program graduates with an interest in clinical nutrition within the MNT concentration track. This concentration offers comprehensive knowledge and skill development in a variety of clinical settings with high acuity and complexity for all aspiring RDNs but especially those with clinical interests.

Interns within the full-time, MNT track complete 1256 supervised practice hours over 39 weeks. This program permits interns to work, as they desire within the UW Health organization or outside of the organization.

Upon successful completion of the program, the intern will be required to:

- Take the Registration Examination for Dietitians within 6 months of completion of the program.
- Pass the exam within one year of program completion.
## Medical Nutrition Therapy, Full-time Track - Rotation Schedule Example

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<th>hours/wk</th>
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<th>Holidays</th>
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Overview of the Part-time, Public Health Track

The UW Health Dietetic Internship Program, in collaboration with the WIC Division of the Wisconsin Department of Health Services offers 5 part-time to full-time positions to qualified DPD program graduates who may or may not be WI WIC nutritionists. The purpose of this cooperative effort is to provide a professional development and career advancement opportunity for WIC staff in Wisconsin.

Interns within the part-time, public health track complete 1228 supervised practice hours over 52 weeks. This program permits interns to continue to work up to 20 hours/week for their WIC local agency during 38 of the 52 weeks of the program (part-time rotations). The employee will need a 14-week educational leave to complete their clinical training, which is 32 hours/week (NS 671).

Upon successful completion of the program, the intern will be required to:

- Take the Registration Examination for Dietitians within 6 months of completion of the program.
- Pass the exam within one year of program completion.
- Maintain employment for an additional two years with their sponsoring WIC local agency after completing their internship.
- Provide high-risk counseling to WIC participants.
# Public Health, Part-time Track - Rotation Schedule Example

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Overview of the Full-time, Food Systems Administration Therapy Track

The UW Health Dietetic Internship Program offers 5 full-time positions to qualified DPD program graduates with an interest in culinary and food system administration within the Food System Administration concentration track. This concentration offers comprehensive knowledge and skill development in a variety of food system settings with an emphasis in program management, cultural competency and community partnerships for all aspiring RDNs but especially those with interests in joining the food system upon graduation.

Interns within the full-time, Food Systems track complete 1256 supervised practice hours over 39 weeks. This program permits interns to work, as they desire within the UW Health organization or outside of the organization.

Upon successful completion of the program, the intern will be required to:

- Take the Registration Examination for Dietitians within 6 months of completion of the program.
- Pass the exam within one year of program completion.
## Food System Administration, Full-time Track - Rotation Schedule Example

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<th>hours/wk</th>
<th>Intern</th>
<th>Holidays</th>
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<td>Food Systems: Administration</td>
<td>End of Program</td>
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Assessment of Prior Learning

The UW Health Dietetic Internship program will assess a current intern’s prior learning up to and not exceeding 300 hours. All tuition and fees for the program will remain the same regardless of prior learning credit awarded.

- Approved prior work experience can be assessed or credited toward the program requirements.
- Concurrent paid work experiences within the internship may be assessed or credited toward the program requirements.
- No prior learning credit will be granted towards clinical medical nutrition therapy rotations.
- Eligible prior learning includes, but is not limited to, pertinent work responsibilities, community partnership activities, international medical missions, employer or armed service training, and approved self-study.
- Dietetic interns having prior graduate courses will not be assessed or credited toward meeting the requirements of the Capstone Certificate in Clinical Nutrition but may be for the M.S. in Clinical Nutrition.

Procedures for Pursuing an Assessment of Prior Learning:

Interns will contact the Program Director by phone or email after acceptance into the UW Health Dietetic Internship Program to request an assessment of prior learning. If request is approved with written confirmation, intern will submit a “Prior Learning Portfolio” by one month before conclusion of their program. The Program Director will provide the intern with the ACEND Learning Objectives & Competencies and associated documents including the program’s student learning outcomes matrices.

Interns applying for credit towards supervised practice hours must meet the following qualifications to be eligible for an assessment of prior learning:

1. Maintain good academic standing within the UW Health Dietetic Internship Program and within the UW-Madison’s Capstone Certificate in Clinical Nutrition Program.
2. All tuition and fees for the UW Health Dietetic Internship program must be paid.

The “Prior Learning Portfolio” must be submitted to the program management by one month before the conclusion of their program.

The Prior Learning Portfolio must include the following:

2. Documentation to support that each competency was met (i.e. job description, performance review, samples of projects, reports, presentations, and professional practice that demonstrates advance knowledge and skill in dietetics, etc.).
3. Letter from immediate supervisor with original signature verifying experience.
4. $50 Evaluation Fee (checks should be made out to: UW Health Dietetic Internship Program).
Policy and Procedures

The goal of procedures is to protect the rights of enrolled students. The policies are consistent with the current practices, policies and procedures of UW Health and UW-Madison.

UW Health

Administrative (Non-Clinical) Policy

This administrative policy applies to the operations, Directors, and employees of the University of Wisconsin Hospitals and Clinics Authority (“UWHCA”), University of Wisconsin Medical Foundation (“UWMF”), and those subsidiaries and affiliates of UWHCA and UWMF that have adopted this administrative policy (each an “Adopting Affiliate”). UWHCA, UWMF and the Adopting Affiliates are referred to in this administrative policy as “UW Health”.

Policy Title: Dietetic Internship Program Management Standards, Guidelines and Procedures

Policy Number: 6.01

I. PURPOSE

A. To establish the requirements, guidelines and procedures for the dietetic internship at the UW Health in coordination with the Capstone Certificate in Clinical Nutrition and M.S. in Clinical Nutrition programs at the University of Wisconsin at Madison.

II. DEFINITIONS

A. UW Health Dietetic Internship Program (UWDI)
B. Accreditation Council for Education in Nutrition and Dietetics (ACEND)

III. POLICY ELEMENTS

A. ADMISSION REQUIREMENTS
B. APPLICATION PROCEDURES
C. WORK HOURS AND ABSENCES
D. ASSESSMENT OF INTERN LEARNING AND PERFORMANCE
E. ASSESSMENT OF PRIOR LEARNING
F. ADHERENCE TO POLICIES AND PROCEDURES
G. DISCIPLINE: PROBATION, SUSPENSION AND TERMINATION
H. ACADEMIC STANDARDS AND PERFORMANCE STANDARDS
I. GRIEVANCE AND COMPLAINT PROCESS
J. WORKERS’ COMPENSATION AND LIABILITY
K. STUDENT RECORDS AND PRIVACY
L. DIETETIC INTERNSHIP PRIVACY POLICY
M. PATIENT AND EMPLOYEE CONFIDENTIALITY
N. PROGRAM COMPLETION REQUIREMENTS
O. LIABILITY INSURANCE REQUIREMENTS
P. SUPPORTING SERVICES
Q. GUIDELINES FOR TRAVEL
R. PRECEPTOR EVALUATION
S. PROGRAM EXPENSES
T. ROTATIONS, SUPERVISED PRACTICE AND EDUCATIONAL RESOURCES
U. AFFILIATION AGREEMENTS FOR SUPERVISED PRACTICE FACILITIES
V. TERMINATION OF INTERNSHIP EXPERIENCE
W. GRADE REMEDIATION PROCESS
IV. PROCEDURE

A. ADMISSION REQUIREMENTS

I. Dietetic Interns must meet the following admission requirements before they will be formally admitted to the program.

a) Capstone Certificate Program: Students admitted to the Capstone Certificate Program in Clinical Nutrition will be enrolled as University Special students. Students will complete the online application through the Division of Continuing Studies at: https://acsss.wisc.edu/apply.

b) Graduate Program: Students admitted to the Online M.S. in Clinical Nutrition program will complete the online application through the Department of Nutritional Sciences at: https://nutrisci.wisc.edu/graduate/online-master-of-science-in-clinical-nutrition/application-process-ms-cn/

c) Applicants will submit the application materials listed below to the Department of Nutritional Sciences:

i. One complete set of official transcripts. This should be from all institutions attended, including UW-Madison. Bachelor’s degree must be posted on the transcript.


iii. Resume of Curriculum vitae

b. Admission criteria for admission to the Dietetic Internship:

i. To apply to the Dietetic Internship, individuals must complete at least a bachelor’s degree and ACEND-accredited coursework requirements (Didactic Program in Dietetics) from an accredited college or university.

ii. Minimum Cumulative GPA $\geq 2.8$ (on a 4.0 scale)

iii. The individual must have taken the GRE, the graduate record examination.

iv. UW HEALTH uses the national online Dietetic Internship Computerized Application System, DICAS. An application is submitted through DICAS at https://portal.dicas.org and are due in February for the spring match process. UW HEALTH accepts applications for the Spring match only.

(1) UW Health admits up to 15 interns annually for the MNT track and up to 10 interns annually for the Public health and Food Systems tracks via a pre-select process which occurs during December and January annually.

v. As part of the centralized process the following is submitted:

(1) A Verification Statement for an ACEND-accredited DPD program within the last three years.

(2) A personal statement.

(3) Three references.

c. All remaining dietetic internship applicants for the MNT track must participate in computer matching. To do this, students register and submit all the internship programs they plan to apply to D&D Digital Systems, http://www.dnddigital.com by February 15 for the spring match. D&D charges students a fee for the computer matching process.

d. Matched interns must apply for a dietetic intern, or special project assistant, position through the UW HEALTH Human Resource Recruitment Department. Dietetic interns must meet the following requirements before they will be formally admitted to the program:

i. The applicant must either be a citizen of the United States or be able to maintain work authorization throughout the internship while at UW HEALTH. The UW HEALTH does not offer visa sponsorship to candidates for the Dietetic Internship program.

e. Interns must meet UW Hospital and Clinics employment requirements, the Joint Commission, and off-site, agreement-facility requirements, including:

f. Physical Examination (UW HEALTH Employee Health Services) to include:

i. Proof of negative tuberculin test (two-step PPD) within 3 months of admission

ii. Proof of titers (blood tests) showing immunity to Measles, Mumps, Varicella, and Rubella
iii. Tetanus vaccination within the last 10 years
iv. Evidence of Hepatitis B vaccination or signed waiver to decline. Hepatitis B titer may be required from hospital practice site.
v. Drug urine screening
g. Background investigation upon acceptance into the program
h. Health insurance
   i. Interns are responsible for securing their own health insurance. Proof of health insurance is required prior to the program start. Health Insurance is available to all UW-Madison students.
i. Finger printing may be required, as requested by affiliation rotation sites.
j. All fees associated with the application process is the responsibility of the individual applying to the program.
k. REFERENCES
   i. Academy of Nutrition and Dietetics
   ii. Accreditation Council for Education in Nutrition and Dietetics
   iii. UW-Madison Department of Continuing Studies
   iv. UW-Madison Department of Nutritional Sciences

B. APPLICATION PROCEDURES
1. Each applicant must meet the Academy of Nutrition and Dietetics academic requirements for acceptance to a dietetic internship program, which includes completion of a 4-year baccalaureate degree, and ACEND-accredited coursework requirements (Didactic Program in Dietetics) from an accredited college or university.
2. Each applicant must complete the application process to the Dietetic Internship Centralized Application Services, DICAS, https://portal.dicas.org/, with associated fee(s), by the Spring cycle due date (usually February 15).
3. Each applicant must also apply for computer matching and pay the associated fee. Students register and submit all the internship programs they plan to apply to D&D Digital Systems: http://www.dnddigital.com/, by the Spring cycle due date (usually February 15).
4. Each applicant must complete the online application to the Capstone Certificate in Clinical Nutrition – Dietetic Internship, through the Division of Continuing Studies at: https://acsss.wisc.edu/apply, by the Spring cycle due date (usually February 15). The UW-Madison Department of Nutrition Sciences Capstone Certificate Committee will review all applications and will submit a list of acceptable students to the UW HEALTH Dietetic Internship Program Manager/Director. The Dietetic Internship Program Manager/Director is a member of this committee.
5. The Dietetic Internship Program Manager and the UW HEALTH Dietetic Internship Admissions Committee will review all applications received through DICAS. The DNS Certificate Program Director will be a member of this admissions committee. Completed applications will be used to assess candidates based on scholastic achievement, writing ability, work experience, professional activity, leadership ability and character development and strengths. No applicant shall be discriminated against due to age, sex, religion, race, handicap or national origin.
6. Acceptable applicants will be ranked and sent to D&D Digital. The student’s name must be ranked on the list of acceptable candidates by both admissions committees, or they will not be ranked for an internship match.
7. The UW HEALTH Dietetic Internship Manager will be notified of applicants matched to the program (usually April 1) and will notify the DNS Certificate Program Director.
8. The list of the students admitted to the Capstone Certificate in Clinical Nutrition will be conveyed to the Division of Continuing Studies by the Certificate Program Director.
9. Following Applicant Notification Day (matching day, usually April 1) and the Applicant Appointment Day (usually April 5 - the day which interns must accept or decline their match), students will be invited to complete an application for the UW HEALTH Dietetic Intern position made available online through the UW HEALTH Human Resources Recruitment to prepare for the
UW HEALTH DIETETIC INTERNSHIP PROGRAM: INTERN HANDBOOK

onboarding process for supervised practice at UW HEALTH.

10. If the dietetic internship is unable to obtain 12 qualified applicants during the first-round selection, the UW HEALTH Dietetic Internship Program will participate in a second-round selection. Those positions not filled during first round match will be selected from applications and interviews that were reviewed by the program with the first-round match. The Dietetic Internship Program Manager will reach out directly to any unmatched students who have previously applied to the program during the first round to begin the second-round selection. New applications to the program from students who have not previously applied to the UW-Hospital and Clinics Dietetic Internship Program will be taken through DICAS if the program does not fill from first round applications. All application requirements apply to second round applicants.

11. REFERENCES AND COORDINATION:

1. Academy of Nutrition and Dietetics: ACEND Accreditation Standards for Dietitian Education Programs
m. UW HEALTH Dietetic Internship Program Director
n. UW-Madison Certificate Program Director
o. UW HEALTH Dietetic Internship Admissions Committee
p. UW-Madison Department of Nutrition Sciences Capstone Certificate Committee

C. WORK HOURS AND ABSENCES

1. Work Hours

   a. The supervised practice component consists of 20 to 40 hours per week of supervised practice experiences at UW HEALTH and program affiliated sites.
   b. Interns and preceptors jointly configure the schedule, which is typically four days of at least 8-hours each day scheduled Monday through Friday.
   c. Students must be able to accommodate morning to evening shifts within the workday.
   d. Preceptors may request but not mandate weekend participation. Nutrition services are provided in most facilities every day of the year. Preceptors working weekends may request that the intern follow their schedule. Special outreach events during evenings or weekends may be accommodated by shifts in hours to other workdays, but not other rotations. If an intern cannot accommodate special requests, he/she will be expected in rotation to achieve the 32 hours/week.
   e. The program is accredited for 20-40 hours/week for 39 weeks providing over 1200 hours of supervised practice.
   f. Students and managers will adhere to UW HEALTH limitations on work hours according to UW HEALTH Administrative Policy 9.81 Scheduling of Work.

2. Absences

   a. If one day of work is missed due to illness or family emergency, the intern is to:

      i. Contact the preceptor to whom they are assigned, to discuss the need for the absence and determine how and when work will be made up.
      ii. The intern should log the hours in rotation accordingly.
   b. If more than one day of work is missed due to illness or family emergency, the intern is to:
      i. Contact the preceptor to whom they are assigned, to discuss the need for the absence and determine how and when the work will be made up.
      ii. Contact the internship program manager or administrative staff by phone or email notifying them of the reason for absence and of the arrangements for the work to be made up.
   c. The intern should log the hours in rotation accordingly.
   d. Interns who experience illness or family emergency that requires a week or multiple weeks of absence from the internship will be given the opportunity to complete the internship. The
time and location of the experience will be determined by the program manager and will be based on the number of weeks the intern completed in the internship and the availability of internship sites. Arrangements may require an extended internship, but this may not exceed 150% of the internship experience (a total duration of less than 59 weeks start to finish).

e. With consensus from the DI advisory council, achieved via a majority vote, an intern may be eligible to achieve less than the 1248 supervised practice hours, but more than the required 1200 hours.

3. **Leave of Absence**
   a. If a student needs to take a leave of absence during the 10-month program, to the extent that it prohibits them from participating in supervised practice experiences for a period: 30-day minimum, the student needs to request, in writing a leave of absence.
   b. In the case of pregnancy and maternity leave, students have the option to declare their pregnancy in writing to the Program Director. Without written notification, the student is not considered pregnant or on maternity leave.
   i. If delivery occurs during the program, all course work and clinical time must be completed before the student is eligible for graduation. The School cannot guarantee normal program completion time if a pregnancy occurs during training.
   c. Leave of absence requests will be granted on a case by case basis. Supervised practice hours that are missed will be determined by the program management team.
   d. Based on the leave of absence request, the student may be dropped from the program with eligibility to be readmitted in proper academic and clinical sequencing in the following year. The UW Health Dietetic Internship program management team will determine the student’s readmission and date of program completion.

4. **Holidays**
   a. No vacation time is earned or accrued.
   b. Interns break during Christmas and New Year’s Holidays.
   c. Holidays observed during NS 670: Nutrition and Dietetics Practicum I and NS 671: Nutrition and Dietetics Practicum II, during the UW HEALTH Dietetic Internship (Fall and Spring semesters):
      i. Labor Day – Falls on Monday – Internship not in session
      ii. Thanksgiving Day (Thursday) - If taken as a vacation day the hours are to be made up on the previous or following Monday within the rotation. Interns are not expected to work Thanksgiving Day.
      iii. Christmas Eve Day – Internship not in session
      iv. Christmas Day – Internship not in session
      v. New Year’s Eve Day – Internship not in session
      vi. Martin Luther King Jr’s Birthday – Falls on Monday – Internship not in session

5. **Outside work opportunities**
   a. Intern employment during the internship is discouraged due to the required 20-40 hour per weeks needed to fulfill the program requirements. Students must be able to accommodate morning to evening shifts within the workday.
   b. If employment is necessary, it should be arranged in such a way as to not interfere with the internship supervised practice requirements.
   c. No internship experience (supervised hours, grades or credit) will be granted for employment

6. **Inclement Weather**
   a. Interns are expected to work their scheduled shifts during periods of inclement weather.
   b. If, after making a good faith effort to report to work, an intern cannot do so because of road closures, hazardous driving conditions and/or the discontinuance of public transportation, the intern’s rotation time will be allowed for makeup time. See also UW HEALTH Administrative Policy 9.45: Inclement Weather.

7. **REFERENCES AND COORDINATION**
   a. UW HEALTH Administrative Policy 9.81 Scheduling of Work
D. ASSESSMENT OF INTERN LEARNING AND PERFORMANCE

1. Competence of the dietetic intern will be determined at intervals throughout the dietetic internship. At the completion of each rotation, the intern is assessed by the preceptor and a rubric and point system is used to assign a grade that reflects the intern’s achievement. Student progress will be tracked in the Degree Audit Reporting System (DARS), which is part of UW–Madison’s commitment to academic advising. This process provides assurance to the intern, preceptor and program managers that the multi-level competencies are being met.

2. All interns will have access to the unit competencies to review the objectives, learning experiences, competencies and curriculum plan of each unit before beginning experiences in scheduled rotations.

3. Interns in preparation for the rotation will access learning modules and corresponding rubrics electronically. Rubrics provide the scoring elements and a listing of competencies achieved.

4. During rotations, preceptors verbally discuss progress and provide feedback.

5. By the last day of the rotation, the rubric is scored and shared with the student and provided to the program manager and/or Director

6. The supervised practice component consists of 20-40 hours/week for public health track rotations and 32 hours/week of supervised practice experiences for the MNT track at UW HEALTH and the affiliated sites.

7. Interns also complete special projects with assessment by presentation or written paper and graded by use of a rubric, which can be accessed by the student. These include: a case study, a quality improvement project, and an oral exam that includes presentation of an e-portfolio and a performance assessment. Preceptors share graded rubrics with the student and the program manager.

8. As rubrics are completed, the scores are uploaded to the UW-Madison grading system by the program manager, director or appointed program support staff.

9. Rubric scores become part of the intern’s record.

10. Concerns or discrepancies should be discussed initially with the program manager. The program manager will work with the preceptor and student together and/or separately to address the concern. Each student is also assigned to an Academic Advisor at UW-Madison Nutrition Sciences. Student progress will be tracked in the Degree Audit Reporting System (DARS), which is part of UW–Madison’s commitment to academic advising. Advising will be available by phone, email, or other similar technology throughout the Capstone Certificate in Clinical Nutrition.

11. Any discussion regarding scores must take place within one week of the availability of the score. A minimum score of 80% is required for successful completion of each rotation. If less than 80% is received, the preceptor must provide an opportunity to redo the related competency within the timing of the current rotation or within the following two weeks. Failure to successfully complete the final rotation in the program may result in program extension.

12. If an 80% is not achieved with a second attempt, the intern works with the program manager using the intern coaching form to establish a plan of action for one last attempt to pass the rotation. Failure to achieve a competency over the duration of the internship will fail to achieve the DI verification form. Grades will be available for continued completion of the Graduate Capstone in Clinical Nutrition and/or the M.S. in Clinical Nutrition without the Dietetic Internship verification form.

13. Grading is as follows:

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<th>Percentage based on earned to total points</th>
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14. Standards for good academic standing in the program are as follows:

15. Students must earn ≥ 3.00 GPA and an ≥ 80% on all rotations within NS 670 and NS 671 to receive DI verification statement and become eligible for the RD examination offered by the Commission on Dietetic Registration.

16. No program courses (NS 650, 651, 652, 653, 670, 671) with grades less than C will be accepted for the Capstone Certificate in Clinical Nutrition program completion.

17. Students receiving an incomplete (I) grade are allowed the subsequent semester of enrollment to complete the course work.

18. REFERENCES AND COORDINATION

a. UW HEALTH Dietetic Internship Learning Modules
b. UW HEALTH Learning Modules and Project Rubrics
c. UW HEALTH Dietetic Internship Rotation Rubrics

E. ASSESSMENT OF PRIOR LEARNING

1. This informs interns of the program’s process for assessing prior learning to validate professional competence in accordance with the ACEND competencies for dietetic internship programs and the present program’s requirements for verification.

2. Dietetic interns within the UW Health Dietetic Internship program are required to complete a minimum of 1200 hours, specifically 1280 hours, of supervised practice. These hours are allocated to progressive rotations within the Dietetic Internship’s supervised practice courses: Nutritional Sciences 670 and 671. Each rotation is inclusive of specific ACEND competencies for dietetic internship programs. The UW Health Dietetic Internship program will assess a current intern’s prior learning up to and not exceeding 300 hours. All tuition and fees for the program will remain the same regardless of prior learning credit awarded.

a. Prior work experience can be assessed or credited toward the program requirements.

b. Concurrent paid work experiences within the internship may be assessed or credited toward the program requirements.

c. No prior learning credit will be granted towards clinical medical nutrition therapy rotations.

d. Eligible prior learning includes, but is not limited to, pertinent work responsibilities, community partnership activities, international medical missions, employer or armed service training, and approved self-study.

e. Dietetic interns having prior graduate courses will not be assessed or credited toward meeting the requirements of the Capstone Certificate in Clinical Nutrition – Dietetic Internship or the UW-Madison M.S. Program.

3. Intern will contact the Program Director by phone or email after acceptance into the UW Health Dietetic Internship Program to request an assessment of prior learning. If request is approved with written confirmation, intern will submit a “Prior Learning Portfolio” by one month before the start of their program.

4. Program Director will provide the intern with the ACEND Learning Objectives & Competencies and associated documents including the program’s student learning outcomes matrices.

5. Interns applying for credit towards supervised practice hours must submit a complete “Prior Learning Portfolio,” to the program management by one month before the conclusion of their program.

6. UW Health Dietetic Internship Program: 600 Highland Ave, F4/120 Madison, WI 53792-1510
7. The Prior Learning Portfolio must include the following:
   b. Documentation to support that each competency was met (i.e. job description, performance review, samples of projects, reports, presentations, and professional practice that demonstrates advance knowledge and skill in dietetics, etc.).
   c. Letter from immediate supervisor with original signature verifying experience.
   d. $50 Evaluation Fee (checks should be made out to: UW Health Dietetic Internship Program).

8. An intern must meet the following qualifications to be eligible for an assessment of prior learning.
   a. Maintain good academic standing within the UW Health Dietetic Internship Program and within the UW-Madison’s Capstone Certificate in Clinical Nutrition Program.
   b. All tuition and fees for the UW Health Dietetic Internship program must be paid.

9. The Dietetic Internship Director will review the prior Learning Assessment application process with any interested intern. Please contact the DI Director to schedule an appointment to review the process.

F. ADHERENCE TO POLICIES AND PROCEDURES
1. Interns are expected to follow all policies and procedures to the UW HEALTH, UW-Madison and those of the affiliation sites. Unprofessional behavior can be interpreted as lack of interest and reflects poorly on the organizations and the profession of dietetics.
2. The UW HEALTH Dietetic Interns will adhere to UW-Madison and UW HEALTH Dietetic Internship and UW HEALTH Administrative Policies and Procedures. Interns will adhere to all host site policies while at affiliated rotation sites.
3. Dietetic interns receive a copy of the UW Health Dietetic Internship Handbook at the start of their internship.
4. The UW HEALTH Handbook is reviewed at UW HEALTH New Employee Orientation and is available on the UW HEALTH Intranet.
5. The UW-Madison policies are available online at www.wisc.edu.
6. Policies are reviewed with the interns during program orientation and referenced as questions arise.
7. Preceptors associated with affiliation agreements will provide the intern with site-specific policies that need to be adhered to while at the rotation site during the beginning of their rotation.
8. The Dietetic Internship program manager and program preceptors will monitor interns’ adherence to policies and procedures.
9. Failure to adhere to UW HEALTH, UW HEALTH Dietetic Internship or UW-Madison policy and procedures may result in discipline including performance improvement plans, suspension, probation, dismissal or termination from the Dietetic Internship Program.

G. DISCIPLINE: PROBATION, SUSPENSION AND TERMINATION
1. Discipline (probation, suspension, termination) will be instituted when conditions indicate non-compliance with program and institutional policy, state employment laws and regulations, unsuccessful program rotation performance as documented on program rubrics, an inability to perform as an entry-level of a dietitian, failing to complete program requirements, and/or misrepresentation of applicant qualification.
2. Students must comply with policies and work rules of the UW HEALTH, the Department of Clinical Nutrition Services and the Dietetic Internship Program, the UW-Madison, affiliation sites, as well as the employment laws and regulations of the State of Wisconsin.
3. Possible reasons for discipline including the termination of a Dietetic Internship experience may include, but are not limited to, the following:
   a. Interns found to have misrepresented applicant qualifications will be disciplined. Interns will be suspended until the qualifications are fulfilled. Inability to meet requirements within 30 days is grounds for program dismissal.
   b. Students who fail to achieve program requirements, such as
i. Interns who fail to show progress or achievement of rotation competencies after attempts of remediation are at risk for termination.

ii. Interns who fall out of academic good standing.

iii. Interns with incomplete competencies or unsatisfactory or unacceptable ratings on internship assignments, projects, and tests.

iv. Interns who fail to achieve the required supervised practice hours (i.e., interns with excessive/blatant absenteeism or excessive tardiness to rotation sites greater than 15 minutes).

v. Inability to perform effectively after a probation period.

vi. Violation or non-compliance of UW HEALTH’s, UW-Madison or affiliation site’s policies or procedures.

vii. Disparagement of UW HEALTH (or its management or employees).

viii. Failure to comply with HIPAA policies including misuse of social media.

c. Student non-compliance to any of the above will initiate an investigation and appropriate action by the Dietetic Internship program manager and the Director of Clinical Nutrition Services, UW HEALTH Human Resources and the UW-Madison Program Manager.

d. Students have the right to appeal suspension/dismissal form the program. See UW HEALTH Administrative Policy 9.54.

e. Fee and/or tuition reimbursement would be as determined by UW-Madison Office of Student Financial Aid, Withdrawals: Refunds and Repayment [link] and the Student Academic Misconduct Policy and Procedures available at [link].

f. Compliance with the policies and procedures, work rules, and applicant qualifications.

i. Students will be informed of policies and work rules of UW HEALTH, the Department of Clinical Nutrition Services and the Dietetic Internship Program, as well as the employment laws and regulations of the State of Wisconsin during orientation week.

ii. Each student is provided with the Dietetic Internship Program Intern Handbook for individual review and ongoing reference. Policies are also available through the hospital intranet and online at [link].

iii. Violation of the policies and work rules will be identified and reported to the Dietetic Internship program manager and/or director.

iv. The Dietetic Internship program manager and/or director shall investigate the reported violation, which will include interviewing the student and witnesses. The student will be informed of these findings.

v. The Dietetic Internship program manager/director, with consultation with the Director of Culinary and Clinical Nutrition and UW HEALTH Compliance and Human Resources, Employee and Labor Relations, will determine to retain by plan of corrective action, suspend or dismiss the student. Following the UW HEALTH Administrative Policy: Work Rules: UW HEALTH Authority (Policy 9.04).

H. ACADEMIC STANDARDS AND PERFORMANCE STANDARDS

1. If upon review of learning assessments, the preceptor determines that the intern is failing to meet performance criteria, the following guides the process:

a. The preceptor conveys the student using the rubric tool competencies or performance that is inadequate. A minimum score of 80% is required for successful completion of each rotation. If less than 80% is received, the preceptor must provide an opportunity to redo the related competency within the timing of the current rotation or within the following two weeks. Failure to successfully complete the final rotation in the program may result in program extension.

b. Any discussion regarding scores must take place within one week of the availability of the score.

c. If an 80% is not achieved with a second attempt, the intern works with the program manager using the intern coaching form to establish a plan of action for the last attempt to pass the rotation.
d. Failure to achieve a competency over the duration of the internship will fail to earn the DI verification form. Grades will be available for continued completion of the Graduate Capstone in Clinical Nutrition or the M.S. in Clinical Nutrition program without the Dietetic Internship verification form.

2. Standards for good academic standing in the program are as follows:
   a. Students must earn ≥ 3.00 GPA and an ≥ 80% on all rotations within NS 670 and NS 671 to receive DI verification statement and become eligible for the RD examination offered by the Commission on Dietetic Registration.
   b. No program courses (NS 650, 651, 652, 653, 670, 671) with grades less than C will be accepted for the Capstone Certificate in Clinical Nutrition program completion.
   c. Students receiving an incomplete (I) grade are allowed the subsequent semester of enrollment to complete the course work.

3. REFERENCES AND COORDINATION
   a. Dietetic Internship Program Management
   b. Director of Culinary and Clinical Nutrition Services
   c. UW HEALTH Compliance
   d. UW HEALTH Human Resources Employee and Labor Relations
   e. UW Hospital and Clinics Administration
   f. UW Health Policies and Procedures
   g. Dietetic Internship Policies and Procedures
   h. UW HEALTH Dietetic Internship Handbook
   i. UW HEALTH Administrative Policy 9.55 Employee Expectations, Disciplinary Action and Appeal
   j. UW HEALTH Administrative Policy 9.54 Formal Appeal Process
   k. UW-Madison Student Academic Misconduct Policy and Procedures
   l. UW-Madison Office of Student Financial Aid, Withdrawals: Refunds and Repayment

4. FORMS USED
   a. Learning Module and Project Rubrics
   b. Program Application Materials

I. GRIEVANCE AND COMPLAINT PROCESS
   1. To provide a process to resolve problems or concerns when interns feel they have been treated unfairly.
   2. To protect both the intern’s and UW Health’s interests and rights serving as a mechanism for interns, preceptors and staff to report grievances.

3. PROCEDURES
   a. Interns are notified of the Grievance Procedure during the internship program orientation.
   b. It is the sole responsibility of the intern to pursue all steps of the grievance procedure.
   c. No intern will be reprimanded, harassed or punished for initiating a grievance.
   d. Before initiating the formal, written grievance, interns use an informal, verbal process, which is initiated within three business days of the occurrence of the problem.
   e. The informal verbal procedure used in resolving grievances is as follows:
   f. The intern speaks to the parties involved.
   g. If there is no resolution, the intern speaks next to the Dietetic Internship Program Manager.
   h. If the grievance is regarding the Program Manager, the intern speaks to the Director of Clinical Nutrition Services
   i. If by 10 days after initiation of the informal grievance resolution has not occurred, the formal written grievance is initiated, following the UW HEALTH Administrative Policy 9.54 Formal Complaint and Appeal Process: Non-Represented UW HEALTH Authority Regular Employees.
   j. In the event an unresolved grievance is related to the Accreditation Council for Education in Nutrition and Dietetics (ACEND) accreditation standards, the intern may submit a complaint
to ACEND. The intern must have first exhausted all options with the program and institution prior to submitting the complaint to ACEND. The procedure for complaints against an accredited program can be found at: https://www.eatrightpro.org/acend/public-notices-and-announcements/filing-a-complaint-with-acend

4. **FORMS**
   a. Department Grievance and Complaint Form
   b. ACEND Complaint Request Form

5. **REFERENCES AND COORDINATION**
   a. Hospital Administrative Policy 9.54-Formal Appeal Process
   b. Accreditation Council for Education in Nutrition and Dietetics (ACEND)

6. **WORKERS’ COMPENSATION AND LIABILITY**
   1. To establish and provide a description of the professional liability coverage provided by the UW Health (UW HEALTH) and by the University of Wisconsin (UW)-Madison.
   2. Students are not covered by the worker's compensation program.
   3. Interns are responsible for securing and maintaining health insurance. Proof of health insurance is required prior to the start of the dietetic internship.
   4. Dietetic interns, working within the role of the program, are covered by the State of Wisconsin Self-Funded Liability Program while acting within the scope of their duties.

7. **PROCEDURE**
   a. Follow procedures as outlined in reference, Liability Protection for Health Professionals at UW Health.
   b. If an employee sustains a work-related injury during Employee Health Services (EHS) business hours (7:00 a.m. - 4:30 p.m. M-F) and needs medical attention, he or she should report to EHS. At other times or in an emergency, the employee should report to the UW HEALTH Emergency Department (ED).
   c. **REFERENCES**
      i. Liability Protection for Health Professionals UW Health Authority and the University of Wisconsin-Madison
      ii. UW Health Risk Management on U-Connect

8. **STUDENT RECORDS AND PRIVACY**
   1. It is the policy of the dietetic internship to maintain confidential personal records on every intern. These records located physically in the Dietetic Internship program manager’s office or secured electronically with UW-Madison or UW HEALTH information systems, are private and are to be treated as confidential.
   2. The dietetic internship will use only ethical and lawful means to gather information directly from an applicant or intern and recognizes its responsibility to provide adequate safeguards to maintain confidentiality.
   3. Confidentiality of interns’ records refers to the collection, use, access, dissemination and retention of information maintained in the personal records.
   4. Procedures
      a. The following information shall be maintained in files separate from the personnel files of UW HEALTH Human Resources in a secure location.

<table>
<thead>
<tr>
<th>Document</th>
<th>Timeline</th>
<th>Mode</th>
</tr>
</thead>
<tbody>
<tr>
<td>DI Verification Form</td>
<td>permanent</td>
<td>Hard copy until scanned electronically</td>
</tr>
<tr>
<td>RDE Miss-Use Form</td>
<td>permanent</td>
<td>Hard copy until scanned electronically</td>
</tr>
<tr>
<td>Registration Eligibility</td>
<td>One-year beyond registration eligibility</td>
<td>Hard copy until scanned electronically</td>
</tr>
<tr>
<td>Application</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DPD Verification Statement</td>
<td>One-year beyond</td>
<td>Hard copy</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
i) The information collected and maintained in the personal record will be
(1) Used with discretion and in accordance with this policy.
(2) Limited to that use which is necessary for routine business practices
(3) Used as required by law.

b) REFERENCES
i) UW-Madison University Relations: Policy on Use of University Information Technology Resources
ii) UW HEALTH 9.64 Maintenance of Employee Personnel Records

L. DIETETIC INTERNSHIP PRIVACY POLICY
1. To provide dietetic interns at UW Health the right of privacy concerning their educational
   records and their right to withhold disclosure of categories of directory information routinely
   released to the public.
2. The UW HEALTH Policy 9.27 Equal Employment Opportunity covers students. It is the policy
   of UW HEALTH to maintain confidential personal records on every intern.
   a. These records, located in the Internship Director’s office, are private and are to be treated as
      confidential.
3. The UW HEALTH Dietetic Internship will use only ethical and lawful means to gather
   information directly from an applicant or intern and recognizes its responsibility to provide
   adequate safeguards to maintain confidentiality.
4. Confidentiality of intern records refers to the collection, use, access, dissemination, and retention
   of information maintained in the personal records.
5. PROCEDURE
   a. During orientation, students will be informed of the location of the office where departmental
      student educational records are kept.
   b. The information collected and maintained in the personal record will be:
      i. Used with discretion, in accordance with this policy.
      ii. Limited to that use which is necessary for routine business practice.
      iii. Used as required by law.
   c. Personal records will be maintained with appropriate security.
   d. A current or former intern’s right to privacy will be reasonably protected in all the Distance
      Dietetic Internship’s dealings with other business and government organizations.

M. PATIENT AND EMPLOYEE CONFIDENTIALITY
1. All interns in the UW HEALTH Dietetic Internship will consider the privacy and dignity of all
   patients/clients and fellow employees when performing their duties at the host site as well as all
   affiliate sites.
2. PROCEDURE
   a. Interns are not to discuss any patient/client’s medical information in a public area, i.e.,
      hallway, elevator, cafeteria.
   b. Interns are to knock first on a patient/client closed door before entering.
   c. Interns will sign a confidentiality statement for the host site and additional sites, as requested,
      to be retained in their file.
Interns adhere to UW HEALTH and facility policies governing the use and disclosure of confidential information, including the Health Insurance Portability and Accountability Act (“HIPAA”).

Interns will receive HIPAA training by UW Health and may receive training by the host site and/or additional sites. Certification of such training will be retained in their file.

Interns are to comply with UW HEALTH Administrative Policy 6.30: The Minimum Necessary Rule.

**N. PROGRAM COMPLETION REQUIREMENTS**

1. Dietetic interns pursuing the Capstone Certificate in Clinical Nutrition will be granted this certificate when the courses (NS 650, 651, 652, 653, 670 and 671) are achieved with no grades less than C.
2. Dietetic interns pursuing the M.S. in Clinical Nutrition will be granted this degree and the verification statement when all courses are achieved with no grades less than C.
3. A Dietetic Internship Verification will be provided when the intern with a masters-degree or higher completes the capstone courses or the intern without the masters-degree successfully completes the M.S. with no grade less than C and no grade less than a B in NS 670 and NS 671 with achievement of a minimum of 1200 supervised practice hours.
   a. These courses are designed so students to demonstrate competence in the ACEND Dietetic Internship Competencies for Dietitian Education Programs. This is a requirement to maintain competence to become an entry-level dietitian.
4. Standards for good academic standing in the program are as follows:
   a. Students must earn ≥ 3.00 GPA and an ≥ 80% on all rotations within NS 670 and NS 671 to receive DI verification statement and become eligible for the RD examination offered by the Commission on Dietetic Registration.
   b. No program courses (NS 650, 651, 652, 653, 670, 671) with grades less than C will be accepted for the Capstone Certificate in Clinical Nutrition program completion.
   c. Students receiving an incomplete (I) grade are allowed the subsequent semester of enrollment to complete the course work.
5. Opportunities exist to repeat unsuccessful rotation learning of competencies. Failure to achieve a competency or pass a rotation experience over the duration of the internship will fail to achieve the DI verification form. It is possible that grades of B or BC in NS 670 and/or NS 671 will contribute to completion of the Graduate Capstone in Clinical Nutrition, but without the Dietetic Internship verification form.
6. After the accredited dietetic internship program is completed (NS 670 and 671 ≥ 80%/B), along with the Capstone Certificate in Clinical Nutrition (NS 650, NS 651, NS 652, and NS 653 with ≥ 70%/C), the Dietetic Internship program manager will sign the DI Verification Statement.
7. Once program requirements are met, the Dietetic Internship program manager will sign five (5) copies of the Dietetic Internship Verification Statement. This form is used to verify that all academic and supervised practice requirements are met for the Academy of Nutrition and Dietetics. The student will receive four (4) copies of the Dietetic Internship Verification Statement. The verification is necessary to take the Commission on Dietetic Registration Examination for Dietitians. The Dietetic Internship program manager will notify CDR when interns have completed all requirements for eligibility for the Registration Examination. Upon notification from CDR, it will be the graduate’s responsibility to pay fees and arrange to take the exam.
8. Successful completion of an ACEND accredited dietetic internship program and successful testing at the Registered Dietitian exam by the Commission on Dietetic Registration completes the requirement to be a Registered Dietitian Nutritionist.
9. If circumstances extend the internship, this may not exceed 150% of the internship time-allotment (15 months for MNT concentration and 18 months for Public Health and Food Systems concentrations).

10. REFERENCES
UW HEALTH DIETETIC INTERNSHIP PROGRAM: INTERN HANDBOOK

11. FORMS
   a. Dietetic Internship Verification Statement from the Commission on Dietetic Registration

O. LIABILITY INSURANCE REQUIREMENTS
   1. To establish the liability insurance requirements for dietetics interns, working within the role of
      the program, are covered by the State of Wisconsin Self-Funded Liability Program while acting
      within the scope of their duties.
   2. Follow procedures as outlined in reference, Liability Protection for Health Professionals at UW
      Hospital and Clinics.

3. REFERENCES
   a. Liability Protection for Health Professionals, UW Health
   b. Authority and the University of Wisconsin-Madison
   c. UW Health Risk Management on U-Connect

P. SUPPORTING SERVICES
   1. To enable interns to have access to support services providing personal and educational support
      in order to facilitate the learning process of the UW HEALTH Dietetic Internship program.
   2. Dietetic interns who also hold a special project appointment have access to the Employee
      Assistance Program (EAP). The EAP offers all employees, their family members, or significant
      others who live within their households confidential and professional counseling, legal advice,
      help with eldercare and childcare issues, financial counseling, or assistance with other family
      concerns. UW HEALTH encourages dietetic interns and family members who are experiencing
      problems to take advantage of the assessment counseling and referral services available on a
      voluntary basis through the EAP.

3. PROCEDURE
   a. Assessment and Counseling: Unlimited 24-hour, toll-free telephone problem assessment and
      counseling, up to three (3) hours of scheduled face-to-face problem assessment and referral
      services are provided free of charge. The toll-free telephone number is 1-800-634-6433. Assessment
      includes sessions with a licensed counselor to help determine the nature of the situation and evaluate
      options. Individuals may then be referred to an appropriate outside resource for follow-up care that
      fits the identified need. Expenses incurred in follow-up diagnosis and treatments are the responsibility
      of the individual and may be covered by the individual's health insurance plan. Problems that might
      be addressed to the EAP include:
         i. Balancing work and personal life
         ii. Stress, anxiety, depression
         iii. Conflicts with a spouse/significant other or other family member
         iv. Problems with alcohol and drug use
         v. Legal concerns (excluding employment and international laws)
         vi. Financial or budgeting difficulties
         vii. Parenting and child/elder care questions or concerns
         viii. Crisis situations at home or work
   b. Financial Consultation: The EAP provides free financial counseling via telephone for a wide
      range of issues. The EAP counselor will assess the situation and provide immediate access or
      schedule a convenient telephone appointment with a certified consumer credit counselor.
      Financial issues may include:
         i. Setting up a budget
         ii. Credit report interpretation
         iii. Negotiation with creditors
         iv. Specialized financial counseling
         v. Advice on debt management and consolidation
         vi. Other services as delineated above.
Dietetic interns are not eligible for financial aid since this is a hospital-based program.

**REFERENCES**

a. UW Health Administrative Policy 9.15 - Employee Assistance Program

**Q. GUIDELINES FOR TRAVEL**

1. To inform interns of their responsibilities concerning transportation to rotation sites and the procedures to follow during inclement weather or other emergencies.
2. Interns are responsible for their own transportation expense and safe travel to rotation sites. Dietetic Interns driving personal vehicles for work related activity must have motor vehicle liability insurance on the vehicle in accordance with the requirements by Wisconsin state law.
3. Dietetic Interns will obtain and maintain car insurance on their personal car that is used to travel between rotation sites.
4. Travel to and from rotation sites is at the cost of the intern.
   a. A university-issued bus pass is available during the internship program.

**R. PRECEPTOR EVALUATION**

1. This procedure will guide the orientation, training and evaluation of UW HEALTH Dietetic Internship Program preceptors and to inform preceptors of intern feedback through evaluation of staff and rotation experiences.
2. Preceptor orientation will be on-going based on an employee’s start date. Training will be held annually, and additional training will be provided on an on-going basis with refresher courses offered annually. Preceptor evaluation will be incorporated into a preceptor’s annual employee evaluation. Preceptors will also meet with program management following each program semester to discuss intern evaluations of individual preceptors and their designated rotations.
3. **PROCEDURE**
   a. New preceptors will be oriented and trained individually by the program management team, specifically the program manager or program director.
      i. Orientation will be on going and will occur as part of the employee’s new employee orientation and onboarding experience.
   b. Preceptor training will occur annually via a mandatory seminar.
      i. The seminar will include the Academy’s preceptor training points but will be individualized to include information related to the present program.
      ii. Training will include, but is not limited to content on program structure, ACEND competencies, ACEND accreditation, program outcomes, evaluation procedures, roles and responsibilities and resources for additional training.
      iii. The annual training will be recorded for viewing at any point throughout the subsequent program year.
   c. Preceptor evaluation data will be collected via surveys completed by individual interns following their rotation experiences with individual preceptors.
      i. Intern evaluations of preceptors will be kept in the program manager’s files, during the internship year, to assure intern confidentiality during all phases of the program.
      ii. The program manager and/or program director will verbally provide feedback to the site and/or preceptors as program management deems necessary throughout the program year.
      iii. Annually, the program manager or program director will complete a summation of the written and verbal feedback received from interns for preceptors. This written summation will be sent to the preceptor and their manager after the intern completes the internship program.

4. **FORMS**
   a. Qualtrics Survey: Intern Evaluation of Rotation and Preceptor

**S. PROGRAM EXPENSES**

1. Program applicants and accepted interns [intern] to budget and prepare for expenses incurred during the dietetic internship program; Expenses for the UW HEALTH Dietetic Internship program will be clearly defined to the intern.
2. Interns will be responsible for books, living expenses, and transportation during the internship program.
3. Interns will be able to purchase meals at an employee discount price when that site provides meal discounts to employees.
4. Approximate program expenses are as follows. Should the intern choose to withdraw, tuition/program fees will not be refunded after 30 days in the program.

<table>
<thead>
<tr>
<th>Expense</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Application Fee (non-refundable)</td>
<td>$45</td>
</tr>
<tr>
<td>Program Research Fee</td>
<td>$1000</td>
</tr>
<tr>
<td>Prior Learning Evaluation Fee (Public Health concentration only)</td>
<td>$50</td>
</tr>
<tr>
<td>UW-Madison Document Fee</td>
<td>$65</td>
</tr>
<tr>
<td>DI Capstone Certificate Program Fee, covering 18 credits</td>
<td>$14,400 –</td>
</tr>
<tr>
<td>Combined DI and M.S. in Clinical Nutrition Program Fee, covering 34</td>
<td>$27,200</td>
</tr>
<tr>
<td>credits</td>
<td></td>
</tr>
<tr>
<td>Books and supplies</td>
<td>$300</td>
</tr>
<tr>
<td>Medical, car and rental insurance</td>
<td>$500-$700</td>
</tr>
<tr>
<td>Professional organization and Affiliate Membership fees</td>
<td>$60-100</td>
</tr>
<tr>
<td>AND Membership Required</td>
<td></td>
</tr>
<tr>
<td>Professional meetings or workshops</td>
<td>$100-$200</td>
</tr>
<tr>
<td>Housing ($800-$1,200 per month)</td>
<td>$8,000-$12,000</td>
</tr>
<tr>
<td>Utilities, phone, Internet, etc. ($80-$120 per month)</td>
<td>$800-$1,200</td>
</tr>
<tr>
<td>Transportation ($30-$60 per month)</td>
<td>$300-$600</td>
</tr>
<tr>
<td><strong>Total Estimated Costs, inclusive of variable housing and transportation expenses:</strong></td>
<td><strong>$25,570-$43,460</strong></td>
</tr>
</tbody>
</table>

T. ROTATIONS, SUPERVISED PRACTICE AND EDUCATIONAL RESOURCES
1. Provides a foundation for individual evidence-based instruction, mentoring and role modeling and authentic learning within clinical, ambulatory, community and food service rotations to support professional development and skillset related to overall professionalism and intern’s learning progression throughout the program.
2. During clinical, food service management, and community rotations, interns will be assigned to qualified preceptors throughout the experience.
3. PROCEDURE
   a. The dietetic internship schedule is formalized in the months preceding (June-July) the dietetic internship academic year, which commences in August.
   b. The dietetic internship program manager addresses academic progression within the rotation schedule by providing each intern with rotations that function to orient students to the academic and clinical environments and procedures early in their experiences. These include rotations such as Clinical Skills and MNT for Chronic Disease. The program manager reserves more difficult rotations such as Critical Care and Supervised Staff Relief and Management rotations for later in the program.
   c. Rotations are divided into Ambulatory/Community experiences (NS 670) and Inpatient/Clinical experiences (NS 671). This is to facilitate ease of scheduling and travel for the intern.
   d. The dietetic internship program manager individualizes each schedule to the intern’s individualized preferences for ambulatory and community-based experiences.
UW HEALTH DIETETIC INTERNSHIP PROGRAM: INTERN HANDBOOK

V. TERMINATION OF INTERNSHIP EXPERIENCE

1. Provides interns with parameters and procedures for dismissal from the internship program.

U. AFFILIATION AGREEMENTS FOR SUPERVISED PRACTICE FACILITIES

1. The UW Health Dietetic Internship Program seeks and maintains affiliation agreements with preceptors and facilities within and surrounding Madison, WI. A standardized approach to this agreement process and policy documented the procedure is required by the governing body of dietetic internships, the Accreditation Council for Education in Nutrition and Dietetics (ACEND).

2. The UW HEALTH Dietetic Internship Program will adhere to ACEND and UW Health Administrative policies and procedures for securing and maintaining affiliation agreements.

3. PROCEDURE

4. Affiliations with preceptors or sites are made after discussing the program’s mission, goals and objectives, ACEND core competencies and the concentration (MNT, Public Health and Food Systems Administration) competencies, proposed educational experiences and learning activities, and expectations of the rotations with nutrition personnel at the outside facility.

5. Upon agreement, affiliation agreements are drafted and finalized via the UW HEALTH legal services and confirmed by the outside facility.

6. All affiliation agreements are stored electronically on-site.

7. Resumes or CV’s for preceptors at affiliated sites must be obtained and kept on file.

8. The Program Manager, Director and Advisory Committee will use feedback from the program assessment procedures, intern evaluations, and surveys from graduates and employers, as well as input from preceptors to monitor the rotation experience at the affiliated site.

9. The UW HEALTH DI program management team will assess affiliated sites annually to ensure that interns have a learning experience consistent with the program’s mission, goals, objectives and rotation’s competencies.
2. UW Health reserves the right to discontinue the Dietetic Internship experience of any intern when it is deemed necessary or appropriate to do so. A dietetic intern may be dismissed from the program when there is evidence of inability to function or behave effectively as an intern.

3. The termination will be conducted in a manner that is considerate of the intern, does not interfere with the intern’s rights, and fully protects the interests of the UW Health.

4. PROCEDURE
   a. Before action is taken, the intended termination must be presented by the Dietetic Internship Director and agreed upon by the UW HEALTH Human Resources Manager.
   b. The Director and Program Manager of the Dietetic Internship will notify the intern verbally and in writing of dismissal.
   c. A letter stating the reason for the dismissal and the effective date will be given or sent to the intern by the Internship Director.
   d. A copy of the letter will be placed in the intern’s file and a copy to the Director of the Dietetic Internship.
   e. The intern may present a written or verbal appeal of the dismissal to the Director of Clinical Practice within 5 working days.
   f. The Director of Clinical Practice in conjunction with the Human Resources Manager, Human Resource Director will consider the appeal and respond in writing within five working days. The decision made by the committee will be final.
   g. Tuition/fees are non-refundable.

W. GRADE REMEDIATION PROCESS
   1. Establishes a process for grade remediation to prevent discrepancies in verification of an intern’s successful completion of the supervised practice experiences (NS 670 and NS 671).
   2. Academic integrity is a shared mission of the University of Wisconsin-Madison and the UW Health Dietetic Internship Program. Interns are expected to perform all academic and professional assignments and duties in an ethical, honest, and respectful manner. Interns are deemed in good academic standing if they:
      a. Achieve an 80% or higher on all graded assignments, projects, modules and rotations throughout the supervised practice experience.
      b. Maintain a 3.0 GPA for both supervised practice courses: NS 670 and NS 671.
      c. Maintain a 2.0 GPA for all four Capstone Certificate in Clinical Nutrition (CCCN) courses.
      d. Do not partake in academic misconduct as defined by state law, UWS Chapter 14. Academic misconduct includes, but is not limited to: plagiarism, forging of academic documents, impedance of another’s academic work or progress, falsifying a student’s academic performance or assisting another with the acts.
      e. If an intern falls out of good academic standing, procedures are taken to remediate the situation.
   3. PROCEDURES
      a. If an intern does not achieve an 80% or higher on a graded assignment, project, module or rotation [assignment], they may repeat said assignment until an 80% or higher grade is achieved. They may repeat coursework up to 30 days following their program graduation date.
      b. If an intern does not achieve an 80% or higher on a supervised practice course (NS 670, NS 671), program management staff will review the intern’s file to identify the deficient coursework and/or rotation. The intern will be permitted to repeat the coursework and/or rotation up to 30 days following their program graduation date.
      c. If an intern does not achieve an 80% or higher on a graded assignment and/or supervised practice course (NS 670, NS 671) by 30 days following their program graduation date, they will not be permitted to graduate. The program management team will not sign their Accreditation Council for Education in Nutrition and Dietetics (ACEND®) Verification Statement. This form is used to verify that all academic and supervised practice requirements are met.
      d. If a preceptor or faculty suspects an intern of academic misconduct, the preceptor or faculty may contact the intern directly. They must also notify the program manager and director of these suspicions. If academic misconduct is confirmed, the program management team will determine the consequences. Consequences may include verbal reprimand to program termination.
      e. The UW HEALTH Dietetic internship upholds the UW-Madison procedure for academic misconduct, which can be accessed at: https://conduct.students.wisc.edu/academic-integrity/student-resources/

4. REFERENCES
VII. COORDINATION
Sr. Management Sponsor: Dennis Maher, Vice President, Supply Chain Services
Author: Cassie Vanderwall, Prog Mgr, UW Health Dietetic Internship Prog Director
Reviewers: Megan Waltz, Director, Culinary and Clinical Nutrition

Approval committee: UW Health Administrative Policy & Procedure Committee

SIGNED BY
Elizabeth Bolt, UW Health Chief Operating Officer
Inclement Weather Policy Number: 9.45
Effective Date: December 1, 2016

I. PURPOSE: To provide guidelines for employee attendance, make-up time and use of benefit time during and after periods of inclement weather or emergency conditions that severely impact or limit our employees’ ability to get to and from UW Health Facilities.

II. POLICY ELEMENTS
   a) UW Health has an obligation to continue providing health care services to the people of our communities during periods of inclement weather or emergency conditions, while ensuring the safety of our employees.
   b) All employees are expected to work their scheduled shifts during inclement weather/emergency conditions.
   c) If, after making a good faith effort to report to work, an employee cannot do so because of road closures, hazardous driving conditions and/or the discontinuance of public transportation, the employee’s time will be handled in accordance with Section IV of this policy.
   d) After receiving a directive from UW Health CEO or designated Administrator on Call, (Corporate, Local or Facility Manager - see policy 1.12 for additional information on these roles), supervisors and managers may allow employees to leave work because of inclement weather/emergency conditions, provided that patient care and the operations of UW Health facilities are not compromised. Time off for employees released from work early will be handled in accordance with Section IV of this policy. Supervisors and managers may require that employees remain at work until relieved or may reassign staff to work at another UW Health location, if work is available.
   e) Any absence incurred as a result of inclement weather/emergency conditions will be considered excused.

III. PERSONS AFFECTED
   a) This policy applies to persons performing work for University of Wisconsin Hospitals and Clinics (UWHC) and the University of Wisconsin Medical Foundation (UWMF), including regular employees, temporary or contract employees and Graduate Medical Education trainees. For purposes of this policy, these persons will be collectively referred to as “employees.”

IV. PROCEDURE Non-Exempt Employees (hourly)
   a) No Official Closing:
      i) Employees unable to make it into work due to the inclement weather/emergency conditions, may use benefit time (excluding sick time) or can choose to make up the time with supervisor approval. Employees arriving to work late, due to inclement weather/emergency conditions will be paid for actual hours worked.
   b) Official Closing:
      i) Employees who remain at work until their site officially closes or come in for a “late start” day, will be paid for their regularly scheduled shift.
ii) Employees who choose to leave prior to an official closing, or not come into work on a “late start” day, will receive regular pay for their actual hours worked. Employees may use benefit time, excluding sick leave, for the scheduled hours they did not work.

iii) Any paid time for hours not worked will be paid at the employee’s base rate of pay only and will not be included in the calculation of overtime.

c) Exempt Employees (Salaried)

i) An exempt employee is expected to make arrangements in advance with his/her supervisor, to perform the essential job functions of his/her position during an inclement weather/emergency event.

ii) In some cases and with prior approval, an exempt employee could be authorized to perform the essential functions of his/her position, at an alternative site or from home, when inclement weather/emergency conditions occur.

iii) If work cannot be performed from an alternative site or from home and the employee does not work, he/she may use appropriate benefit time to cover the absence. Exempt employees are not required to use paid time off for absences of less than one-half day.

V. REFERENCES

a) Hospital Administrative Policy 9.14-Recording Paid Time Code Gray – Severe Weather

VI. MODIFICATIONS

a) This Policy creates no rights, contractual or otherwise. Statements of policy obtained herein are not made for the purpose of inducing any person to become or remain an employee of UW Health, and should not be considered "promises" or as granting "property" rights. UW Health may add to, subtract from and/or modify this Policy at any time. Nothing contained in this Policy impairs the right of an employee or UW Health to terminate the employment relationship at-will.

VII. COORDINATION

a) Senior Management Sponsor: VP, Human Resources

b) Author: Director, Employee Relations Approval

c) Committee: UW Health Administrative Policy & Procedure Committee

VIII. SIGNED BY Elizabeth Bolt UW Health Chief Administrative Officer
**Employee Expectations, Disciplinary Action and Appeal Policy Number: 9.55**

Effective Date: July 8, 2019  
Chapter: Human Resources Version: Revision

I. **PURPOSE:** This policy establishes employee performance and behavioral expectations and outlines the disciplinary and appeals processes for UW Health employees.

II. **DEFINITIONS:** This policy applies to all regular full and part-time employees of UW Health.
   
   a) Exceptions: Probationary employees, Graduate Medical Education trainees and physicians are excluded from the disciplinary process.
   
   b) Probationary employees, Graduate Medical Education trainees, physicians and those in supervisor and above titles are excluded from the appeal process.

III. **POLICY ELEMENTS**

   a) Disciplinary action is a corrective process to ensure acceptable job performance and adherence to UW Health policies. Disciplinary action should be directed towards improving employee performance and/or behavior. It ensures that the interests of UW Health, its patients and their families, and employees are considered in the application of discipline. The appeal process is a mechanism through which an employee may appeal disciplinary decisions in a timely fashion.

IV. **PROCEDURE**

   a) EMPLOYEE EXPECTATIONS Employees are expected to conduct themselves in a manner that supports UW Health, reflects our values and is conducive to efficient operations. An employee whose actions contradict the rules of common sense and/or decency, violates a UW Health policy or procedure, fails to perform obligations under UW Health’s Code of Ethics and Code of Conduct or violates the behavioral standards set forth below, may face disciplinary action up to and including termination. The following are some examples of conduct that demonstrate disregard for UW Health’s behavior standards and may lead to disciplinary action, up to and including termination.

   i) Disorderly conduct, including but not limited to, horseplay; gambling; use of abusive, intimidating, threatening, or profane language or offensive materials towards others.

   ii) Careless, negligent or inefficient performance of duties including failure, inability or lack of effort to maintain performance standards; behavior that negatively impacts the patient and/or customer experience.

   iii) Failing to adhere to the work schedule established by management, including unauthorized overtime, or refusal to take call without a reasonable explanation.

   iv) Exceeding the authorized number or length of scheduled meal, breaks or wash-up periods.

   v) Use of personal cell/smart phones or other personal electronic devices is generally prohibited while working in all patient care and/or public areas.

   vi) Misuse of e-mail, Internet, and/or intranet via UW Health resources.

   vii) Performing unauthorized personal work during scheduled working hours.

   viii) Smoking or use of tobacco or e-cigarettes in prohibited areas.

   ix) Eating and/or drinking in unauthorized areas.
x) Unauthorized possession of weapons while on UW Health premises.

xi) Unwillingness to cooperate, assist and work in collaboration with others; discourteous conduct that may create tension among coworkers, patients or visitors.

xii) Insubordination, including disobedience, failure or refusal to carry out written or verbal assignments, instructions or policies.

xiii) Unauthorized use, defacement, destruction or neglect of UW Health owned or leased property, or another person's property or equipment including, but not limited to: vehicles, medical equipment, information systems resources, telephones, uniforms, identification badges, permits, keys, supplies, materials, facsimiles or mail service.

xiv) Receiving or soliciting tips, favors, or gifts from patients/customers, visitors, vendors or contractors of the organization.

xv) Unauthorized possession, theft or removal of any UW Health owned or leased property, or another person’s property without authorization (including damaged goods, scrap material and packages) from UW Health premises or concealing such material on UW Health premises.

xvi) Failure to submit to and/or cooperate with a security officer or member of UW Health administration in the inspection of materials, equipment (including such things as lockers, desks and file cabinets), packages, vehicles, or personal affects brought onto, stored on, or removed from UW Health premises.

xvii) Unauthorized entry to UW Health property, including unauthorized entry outside of assigned work hours or entry to restricted areas, and/or allowing/facilitating entrance of an unauthorized person onto UW Health premises.

xviii) Unsafe or unauthorized use of UW Health's machines, tools, or equipment or use of materials, tools, or equipment for commercial use or personal gain. This includes telephone and computers.

xix) Dishonesty, including but not limited to: falsification of any report, records or other organizational-related documentation and theft or misappropriation of UW Health property or that of an employee, visitor or patient.

xx) Deliberate misconduct that could or does result in damage to any person or property.

xxi) Failure to cooperate and provide accurate and complete information when required by an authorized person.

xxii) Misusing UW Health funds or accepting UW Health funds under false pretenses, including but not limited to, sick pay, disability and workers’ compensation payments and/or failing to notify and make prompt payment to UW Health of overpayments or missed payments.

xxiii) Gross negligence or reckless behavior in the performance of assigned duties, and/or intentional mistreatment or neglect of a patient.

b) DISCIPLINARY STEPS UW Health takes steps to promote appropriate workplace behavior and to correct any behavior/actions that are not appropriate. Leaders are expected to pay close attention to the development of their employees, and work with them to correct any issues. Leaders should also communicate the consequences that will result if the inappropriate behavior/actions continue. However, a manager’s failure to do so does not excuse the behavior or prevent a manager from issuing appropriate discipline. In order to promote compliance with workplace behavioral expectations and policies, UW Health will
use the following progressive disciplinary steps after considering appropriate mitigating and aggravating factors:

i) Verbal Warning
ii) Written Warning
iii) Final Written Warning
iv) Termination
v) When there are multiple, repeated or intentional violations of policy, or significant acts of poor judgment, or the presence of other aggravating factors, corrective action may begin at an advanced step in the discipline process, or skip steps, or may proceed directly to termination from employment. UW Health encourages full discussion between a leader and the employee to ensure that all reasonable efforts have been made to informally resolve an employee's concerns regarding disciplinary action received. However, when an informal approach is not successful in resolving an issue, an employee is entitled to present his/her concerns in a formal appeal, to appropriate management personnel and obtain an appropriate resolution, if warranted. The leader should advise the employee of the right to initiate a formal appeal and of the applicable time limits for doing so. Allegations that a disciplinary decision is discriminatory are excluded from this appeal process and will be addressed through the procedures outlined in UW Health Administrative Policy 9.27—Equal Employment Opportunity and Non-Discrimination.

c) INVESTIGATIONS AND DISCIPLINARY REVIEW

i) A leader should investigate an issue fully before issuing disciplinary action. In certain cases, counseling may be sufficient to correct the issue.
ii) Disciplinary procedures will be administered consistently, and in a manner, that is intended to be corrective rather than punitive.
iii) Discipline generally should be progressive. However, certain behavior/actions may be serious enough to warrant skipping disciplinary steps and/or moving to termination for a single or first offense. Examples where a first offense could result in termination is theft, workplace violence, certain HIPAA violations and negatively impacting patient care.
iv) Although at times misconduct may not appear to be serious, the employee must be made formally aware that it is inappropriate and that it cannot continue. Counseling and written warnings put the employee involved on notice, and provide documentation that the issue was appropriately addressed.
v) The manager should determine based on the facts of the investigation whether progressive discipline is appropriate. If so, discipline generally will be applied in the progressive disciplinary steps listed above.
vi) Leaders will need to review disciplinary actions with their immediate leader and Employee Relations, prior to issuing discipline. However, Employee Relations does not need to consult on progressive discipline for attendance violations until the level of Final Written Warning or above.
vii) Documented formal discipline will remain in an employee’s personnel file indefinitely. Most discipline will be considered active for a period of one (1) year from date of issuance. However, patterns of similar violations over the course of employment, even
outside of the one (1) year in which the discipline is considered active, does not prevent management from issuing the next level of discipline or higher.

V. DISCIPLINARY APPEAL

a) An appeal may only be filed for disciplinary actions at the level of Written Warning and above.
   i) Discipline issued under Policy 9.11: Corrective Action for Non-Compliance with Confidentiality of Protected Health Information is not subject to the Appeal process, unless unique circumstances exist or are identified on the Appeal form. Employees may submit an Appeal form for discipline issued under Policy 9.11, but each will be reviewed by the Director, Performance Management and Organizational Development or designee, to determine if the appeal meets the criteria to be heard.

b) The employee is responsible for ensuring that appeals are filed timely. If an employee fails to submit the appeal form within the required time limits, the appeal will not be considered. However, the time-period to submit an appeal form may be extended in writing for good cause, and at the request of the employee, management or Employee Relations (ER). The extension should be documented in writing.

VI. Appeal Process

a) Step 1: Manager, Director and Employee Relations Consultant (ERC) a) If the employee does not agree with a disciplinary decision, he/she may appeal within ten (10) calendar days of receipt of the disciplinary action. The employee shall complete the Appeal Form to initiate the appeal. The Appeal Form must be received by ER within the ten (10) calendar days.
   i) ER shall forward the Appeal Form to the appropriate director. The department shall schedule a meeting with the employee, the disciplining manager (attendance may be mutually waived), director and an ERC who was not involved in issuing the disciplinary decision within ten (10) calendar days of receipt of the form to discuss the situation, give the employee full opportunity to explain the concern, and promptly and objectively review the case.
   ii) The attendance of the disciplining manager is optional at this step and his/her presence may be waived by mutual agreement of the parties.
   iii) Within ten (10) calendar days of the meeting, the director, in consultation with the ERC, shall complete applicable section of the Appeal Outcome Form and submit a copy to ER, the leader and the employee. Appeal rights for Written Warnings end at the conclusion of this step.

b) Appeal Process Step 2: VP of Human Resource and Department VP (or designee) review
   i) If the employee does not agree with the Step 1 decision or the ERC does not respond timely, the employee may appeal within 10 (ten) calendar days of receipt of the written decision or within ten (10) calendar day after it was due if not received. The employee shall complete the appropriate section of the Appeal Form to initiate this appeal. This form must be received by ER within the ten (10) calendar day period.
   ii) ER shall forward the form to the VP of HR and the Department VP. The VP of HR and Department VP shall review the following materials:
      (1) Documents presented and reviewed at Step 1.
      (2) Appeal form and decision issued at Step 1.
(3) Prior disciplinary letters iv) Investigatory documents and notes relating to the discipline being appealed (if not included as part of the materials provided at Step 1).
(4) Within thirty (30) calendar days of receipt of the appeal request, the VP of HR and/or the Department VP shall complete the applicable section of the Appeal Outcome Form and submit a copy to ER and the employee. This timeframe may be unilaterally extended as needed, and the employee will be notified of the new deadline.
(5) This decision is final and cannot be appealed further.
iii) No employee is to be retaliated against for filing a formal appeal. Any employee may file a complaint about retaliation under this policy directly to the Director, Employee Relations.
iv) If an employee voluntarily terminates his/her employment, including resignations pursuant to a written agreement, the internal appeal process as outlined in this policy shall not be initiated or continued.

VII. MODIFICATIONS
a) This policy creates no rights, contractual or otherwise. Statements of policy obtained herein are not made for the purpose of inducing any person to become or remain an employee of UW Health, and should not be considered "promises" or as granting "property" rights. UW Health may add to, subtract from and/or modify this policy at any time. Nothing contained in this policy impairs the right of an employee or UW Health to terminate the employment relationship at-will.

VIII. REFERENCES
a) UW Health Administrative Policy 9.27—Equal Employment Opportunity and Non-Discrimination
b) UW Health Administrative Policy 9.52—Probationary Period
c) UW Health Administrative Policy 9.13—Attendance
d) UW Health Administrative Policy 9.26—Performance Review Cycle

IX. COORDINATION
a) Senior Management Sponsor: Vice President, Chief Human Resources Officer Author: Manager, Employee Relations
b) Approval Committee: UW Health Administrative Policy and Procedure Committee
c) SIGNED BY Elizabeth Bolt UW Health Chief Operating Officer
**UW HEALTH Administrative Scheduling of Work Policy: 9.81**

**I. PURPOSE**
To establish guidelines that departments/units/work groups will use to set work schedules and schedule extra hours/overtime for UW Health’ employees.

**II. PERSONS AFFECTED**
For purposes of this policy, the term "employees" refers to non-represented, non-exempt (hourly) employees. Represented employees should refer to their respective collective bargaining agreements. This policy does not apply to Graduate Medical Education trainees.

**III. POLICY**

**Work Scheduling Practices**

A. This policy provides the minimum guidelines for all departments/units/work groups, which are required to develop written policies or procedure(s) regarding scheduling of work for their employees. Departments should involve employees and their Human Resources Consultant (HRC)/Employee and Labor Relations Consultant (ELRC) in this process. Departments will determine whether different work schedule processes are created for, individual cost centers/units/areas within that department or if a single over-arching departmental scheduling procedure will cover all cost center/units/areas falling within that department.

A. These departmental procedures should meet the unique operational needs and staffing/scheduling requirements of individual departments and strive for fundamental fairness to all employees. For operational reasons, certain departments may choose not to publish written procedures, but these limited exceptions must be approved by the department's Vice President.

B. Departmental policies should incorporate the following:

1. An initial work schedule including core or standard hours and the process for filling open shifts/hours within schedules should be defined:
   i. Work schedules should include an employee’s assigned hours of the day, days of the week, approved time off, days off, and shift rotations (if applicable).
   ii. Work schedules should be posted a minimum of fourteen (14) days prior to the beginning of the first workday of the schedule and set the hours of work for not less than a fourteen (14) day period. In departments where work schedules are fixed (schedules are set and recurring), the schedules do not need to be posted.
   iii. Employees will be scheduled at their FTE.
   iv. Employees should not be scheduled to work a shift greater than 12.5 hours.
   v. Employees should be scheduled for a minimum of twelve 12 hours off between scheduled shifts.
   vi. When operationally feasible, shift rotations for an employee should be limited to minimize fatigue. This may include minimizing rotations to all three shifts and/or minimizing rotations between shifts in a scheduling period.
   vii. Operational needs may make it necessary for management to change the regular work schedules of individual employees as well as the schedules of entire work units; however, work schedule changes should be kept to a minimum. Whenever possible, employees should be given at least five (5) calendar days advance notice of changes in work schedules.
2. The occasional trading of shifts within the same department or work unit and within the same job classification/competencies should be allowed as long as the trade does not cause overtime. Shift trades should be documented in writing, presented to supervisor/manager with proper advance notification, and be approved in advance by the supervisor/manager or his/her designee. Each department or work unit must establish and document the appropriate advance notice period for allowing shift trades.

3. Where operationally feasible, Requests from employees to voluntarily change work schedules should be allowed. This process should include how requests should be submitted, expected turnaround time, and the approval/denial by management.

**Scheduling Extra Hours/Overtime**

a. All departments/units/work groups are required to develop their own written policies/procedures regarding scheduling extra hours and overtime and should involve employees and their HRC or ELRC. These departmental policies should be developed to meet the unique operational needs and staffing/scheduling requirements of the individual departments and strive for fundamental fairness to all employees. For operational reasons, certain departments may choose not to publish written procedures, but the department’s Vice President must approve these limited exceptions.

b. Departmental policies should incorporate the following:
   1. Departments that ban mandatory overtime for specified job titles as of June 30, 2014 for non-exempt employees will continue that practice with the current limited exceptions. All other departments will delineate in their policies whether mandatory overtime is prohibited, or not, and under what conditions.

c. Mandatory overtime means requiring an employee to work more than his/her regularly scheduled hours according to the predetermined work schedule. It does not include overtime work that occurs because of pre-scheduled on-call time or the need to complete a particular case, treatment, or procedure.
   i. An emergency is defined as any period when replacement staff are not able to report for the next shift or there is increased patient care need because of unforeseeable circumstances including, but not limited to natural disaster, acute disease epidemic, UW HEALTH-declared weather emergency, or an unusually high volume of last minute sick calls and/or no shows.

d. Departmental policies should include a process for soliciting volunteers for extra hours and determining which employee(s) are selected to work and in what order.

e. When needing to fill holes in schedules, departmental policies should include a defined process to assign additional hours/overtime (for those employees not covered by a mandatory overtime ban) to staff, taking into consideration an employee’s qualifications/competencies/training. Some of these methods could include the following:
   i. Most cost effective solution
   ii. Rotation basis
   iii. Hospital service date

f. Departmental policies should include a process for distributing extra work hours and/or overtime fairly among full-time and part-time employees.

g. Except in an emergency or consistent with Hospital Administrative Policy 9.80-Limits on

**B. Hours Worked:**

i. Employees should not work more than two (2) consecutive shifts or a maximum of sixteen and a half (16.5) hours total. Additionally, employees may not work more than 60 hours in a rolling 7-day period.

ii. Employees should have (7.5) hours off between worked shifts.
b. Occasionally employees may be required to work past their scheduled end time. When this occurs, employees will be paid for actual time worked. However, employees notified while on duty that they are being required to work an additional four or more hours, will be guaranteed a minimum of two (2) additional hours of work with pay.

   1. Generally, if circumstances change, and the extra work requires less than two hours, and the employee and manager agree, the employee may be released early and paid only for the actual time worked. If there is no agreement, the employee will be allowed to work for the full two hours.

c. Staff who are on duty during the shift in which daylight savings time goes into effect, will be permitted to use one hour of benefit time (excluding sick leave), take it unpaid or work one additional hour at the beginning or end of their shift as scheduled by management in order to achieve their normal number of shift hours.

IV. MODIFICATIONS
This Policy creates no rights, contractual or otherwise. Statements of policy obtained herein are not made for the purpose of inducing any person to become or remain an employee of UW HEALTH, and should not be considered "promises" or as granting "property" rights. UW HEALTH may add to, subtract from and/or modify this Policy at any time. Nothing contained in this Policy impairs the right of a non-represented employee or UW HEALTH to terminate the employment relationship at-will. For represented employees, who are not at-will employees, this policy does not supersede, limit nor grant any rights beyond those provided by the applicable collective bargaining agreement.

V. REFERENCES
Hospital Administrative Policy 9.80-Limits on Hours Worked
Hospital Administrative Policy 9.14-Recording Paid Time
Hospital Administrative Policy 9.36-End Appointment and Appointment Change

VI. COORDINATION
Sr. Management Sponsor: Vice President, Human Resources
Author: Director, Human Resources
Approval committee: Administrative Policy Committee

WRITTEN BY:

Cassandra Vanderwall, PhD, RD, CDE, CPT
Director, Dietetic Internship Program

Megan Waltz, MS, RD
Director, Culinary and Clinical Nutrition Services
Director, Dietetic Internship Program

SIGNED BY:

Susan Rees, DNP, RN, CPHQ, CENP
VP Dec, Nursing and Patient Care Services
Interns must abide by the policies and procedures of UW Health and UW-Madison, which also protect the rights of enrolled students and the people we work with and serve.

The following policies and procedures also apply:

Grievances
It is the intent of the Dietetic Internship program manager to maintain effective informal procedures for responding to intern and preceptor queries and concerns. If external intervention is required, the individual seeking a solution to their concern should follow the procedures associated with the policies listed below. The Dietetic Internship program manager will manage interactions related to UW HEALTH and the Certificate Program Director will manage interactions with the College of Agriculture and Life Sciences, the Division of Continuing Studies, the Registrar’s Office, and the Department of Nutritional Sciences. The Dietetic Internship program manager/director and the Department of Nutritional Sciences Program Director will communicate with each other and the student to guide and assess the student’s progress through the Dietetic Internship.

Dress codes
Interns engaged in the Dietetic Internship supervised practice represent UW HEALTH and UW-Madison and will dress professionally as determined by the facility in which the student is assigned. For food systems experiences, dressing professionally may be demonstrated by wearing clean, pressed uniforms, appropriate hair restraints and footwear that provides comfort and safety. Sandals and high heels are not appropriate for food service activities. Supervised practice in nutrition related areas might require casual business attire and/or a laboratory jacket and the UW HEALTH patient areas require closed-toe shoes. Interns are to also follow the dress codes of the affiliate sites hosting rotations.

Student Records
Students have access to their own program files that are maintained in the office of the Dietetic Internship program manager. Records will not contain information concerning religion, political or social beliefs, and membership in any organization, other than honorary and/or professional, directly related to the academic process. Current and former interns may request to inspect and obtain a copy of their personnel file.

Privacy
Privacy is protected by the Family Educational Rights and Privacy Act (FERPA). Students who are currently enrolled or formerly enrolled regardless of their age are subject to FERPA.

Equal Opportunity, Anti-Harassment and Affirmative Action
It is the intent of program, not exclusive to managers, preceptors and students, to provide a work environment free from unlawful discrimination and harassment for all persons.

- UW HEALTH Administrative Policy 9.27 Equal Employment Opportunity and Non-Discrimination
- UW Madison Office for Equity and Diversity, Discrimination or Harassment
Access to Support Services
Interns have access to support services provided at UW HEALTH and UW-Madison. Support services include but are not limited to health care centers, counseling center, financial aid, learning and development system, information services help desk, career services, and victim services.

- Employee Assistance Program

Social Media and Communication:
Students must comply with applicable administrative and departmental policies, including policies relating to confidentiality, proprietary information, HIPAA, privacy, and appropriate use of the computer systems. Users of social media write at their own risk and are legally responsible for their commentary. Inappropriate or improper use of social media by employees, determined not to be protected activity or speech, may result in disciplinary action, up to and including termination of employment. Computer and portable electronic devices should be limited to work purposes only. Interns are not to use computers or the internet for social networking, shopping, visiting websites that do not pertain to work assignments, or for gaming. If an intern chooses to carry their personal laptop or other portable electronic device, to the internship site, the use of that item during internship work hours will be limited to work tasks only. Smart phone may be used for calculator functions, and apps associated with work functions in determining caloric needs or teaching nutrition-related programs.
Drug Free Workplace:
UW HEALTH and UW-Madison have a strong commitment to the safety and well-being of its employees, patients, and visitors, the protection of company and public property, the productivity of its workforce, and the preservation of a safe working environment. UW HEALTH has a no-tolerance policy regarding the unlawful manufacture, distribution, sale, purchase, dispensation, possession, or use of drugs and controlled substances, or unauthorized use, or being under the influence of alcohol or drugs in the workplace. UW HEALTH and the UW-Madison are required by the Drug-Free Workplace Act of 1988 to take specific steps to ensure a drug-free workplace, which are incorporated in the policies below. Dietetic interns must abide by the terms of this policy.

Medical Charting:
The UW HEALTH and the affiliates have defined medical record documentation requirements. The intern must follow the approved medical charting guidelines. It is the responsibility of the intern to follow the individual hospital guidelines for medical charting. Preceptors will monitor the intern’s charting skills and make recommendations for improvement. A Registered Dietitian must cosign medical record documentation. It is the intern’s responsibility to inform the preceptor of all medical record chart notes that need to be co-signed. It is the preceptor’s responsibility to make sure that these notes are co-signed. The intern may only use an approved hospital term/abbreviation to define their role as a dietetic intern when signing in the medical record. RDE is not an acceptable abbreviation.

Confidentiality
The program takes appropriate steps to promote compliance with the requirements for maintaining the confidentiality of protected health information (PHI). PHI is individually identifiable information that is maintained or transmitted in any form, including oral, written, or electronic. PHI includes demographic, health, and financial information.