

# Section B: Standards for Institutional Accreditation



## Standards for Institutional Accreditation

Revised 2013 v. 5

## With gratitude...

The MEAC Board of Directors and Staff would like to thank the midwifery school directors, faculty and administrators, ARC reviewers, leaders of the Allied Midwifery Organizations (Midwives Alliance of North America (MANA), National Association of Certified Professional Midwives (NACPM), North American Registry of Midwives (NARM), Association of Midwifery Educators (AME), International Center for Traditional Childbearing (ICTC) and Citizens for Midwifery (CFM)) and midwives who participated in the 2013 revision of the accreditation standards.

Special thanks go to the **Standards Revision Workgroup** members who toiled for nearly two years to develop this new set of standards.



Kristi Ridd-Young, MEAC President, Heidi Fillmore, MEAC Vice President, Kathryn Montgomery, MEAC Secretary, Holly Scholles, Immediate Past President, JoAnne Myers-Ciecko, Former MEAC Executive Director.

We look forward to working with midwifery schools during the transition and implementation of these revised standards. MEAC is deeply committed to improving our consistency, efficiency and effectiveness. As a result, we are continually evaluating our policies and procedures. Your feedback is welcome and always valued.

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## Standard I | MISSION, PROGRAM ASSESSMENT AND STUDENT ACHIEVEMENT

The purpose of the benchmarks in this section is to ensure that the institution has clearly articulated both a mission and program goals, and to ensure that the institution engages in the ongoing assessment of the achievement of its goals. Benchmarks also seek to ensure that the institution engages in the ongoing measurement of student achievement.

## I | Benchmark A Institution's Mission

### I | Benchmark A1

The institution has a mission statement.

**Demo I.A1.1** | Provide a copy of your **mission statement**.

## I | Benchmark B Program Goals and Program Assessment

### I | Benchmark B1

The Institution has program goals *for all midwifery certificates and/or degrees and midwifery-related programs* that reflect its mission and the institution engages in ongoing **program assessment**.

*NOTE: If the institution offers a certificate program in addition to degrees it must clearly list the goals for each of these programs. An institution offering only a certificate in midwifery or only one degree will have one list of program goals. An institution offering a certificate in midwifery as well as a bachelor's degree in midwifery or multiple degree programs will have a separate list of program goals for each of the certificate and the bachelor's degree programs.*

**Demo I.B1.1** | Provide a copy of the **program goals** for each of the midwifery certificates and/or degrees and/or midwifery-related programs

**Demo I.B1.2** | Explain how these **program goals** are appropriate in light of the credentials awarded

**Demo I.B1.3** | Provide a copy of the institution's written plan for ongoing **program assessment**. Describe the process and specific criteria used to evaluate and update the **program goals** based on the findings of the **program assessment**.

*NOTE: Program goals should be measurable. Depending on the specific program goal, these measurements may or may not be directly tied to the **learning objectives** (Standard II.B2) of particular courses (though taken as a whole, the learning objectives of the courses at your program/institution should add up to a package that helps you achieve your program goals). Specific examples can be found in the glossary (MEAC Accreditation Handbook Section H)*

**Demo I.B1.4** | Report the results of the **program assessment** and describe any changes made to the **program goals based on that assessment**. Provide evidence for the last three years.

## I | Benchmark C Assessment of Student Achievement

### I | Benchmark C1

**Student Retention:** At least 60% of first-year matriculated students return for the second year or have graduated by their second year. Programs failing to meet this criterion develop an improvement plan to bring the retention rate to 60%.

*\*the percentage of matriculated first-year students who are still enrolled on day 30 of year two of the program. Retention data should be calculated for the most recent five-year period available in order to examine trends.*

*NOTE: This includes students who are on a leave of absence and are expected to return to the program. This should exclude students who are deceased, permanently disabled, have joined the armed forces, or are in other active governmental service or official church mission.*

**Demo I.C1.1** | Submit student retention data for the most recent five-year period available using the provided worksheet. Data reported should be accompanied by a narrative that explains documented trends, including any improvements as well as any extenuating or special circumstances impacting retention rates.

**Demo I.C1.2** | Explain the actions that have been taken or that are planned to mitigate low student retention, and/or to continue support of areas where students are excelling with respect to retention. This narrative should demonstrate how the school/program is engaging in continual development around programs, processes, and policies that support ongoing improvement in retention rates.

### I | Benchmark C2

**Student Completion:** At least 40% of matriculated students complete the program within 150% of the program's normal time for completion. Programs failing to meet this criterion develop an improvement plan to bring the completion rate to 40%.

*\*the percentage of matriculated full-time and part-time students, calculated separately, who completed the program within 150% of the program's normal time for completion. Completion data should be calculated for the most recent five year period in order to examine trends. This should exclude students who are deceased, permanently disabled, have joined the armed forces, or are in other active governmental service or official church mission.*

**Demo I.C2.1** | Submit student completion data for the most recent five year period available using the provided worksheet. Data reported should be accompanied by a narrative that explains documented trends, including any improvements as well as any extenuating or special circumstances impacting graduation rates.



**Demo I.C2.2** Explain the actions that have been taken or that are planned to mitigate low student completion, and/or to continue support of areas where students are excelling with respect to completion. This narrative should demonstrate how the school/program is engaging in continual development around programs, processes, and policies that support ongoing improvement in completion rates.

### I | Benchmark C3

**Certification Exam Pass Rate:** At least seventy percent of graduates who sat for the North American Registry of Midwives examination in the past three years have passed.

**Demo I.C3.1** | Complete the *graduate placement report* through the end of the most recent month. This report will document passage of the exam via scores sent directly from NARM or other reliable means.

*NOTE: NARM requires documentation that each student has given permission to release test scores directly to the school for the purpose of MEAC accreditation. Sending NARM a copy of the student's signed enrollment agreement could suffice. See Standard VII, Benchmark A. During the phase-in of this process, other documentation of passing the NARM exam will be considered (e.g. letter from NARM indicating passing of the exam, without reporting of numeric score; achievement of CPM credential; achievement of licensure in states requiring passage of NARM exam for licensure).*

### I | Benchmark C4

**Graduate Placement:** More than fifty percent of graduates in the past three years meet one or more of the following criteria:

- a. have been certified by the North American Registry of Midwives, and/or
- b. are state licensed or licensed in another jurisdiction, and/or
- c. are working as midwives, and/or
- d. working in related fields

**Demo I.C4.1** | Complete *graduate placement report* (which documents whether graduates are certified by NARM, licensed in their state or another jurisdiction or working in a related field) using data through the end of the most recent month

### I | Benchmark C5

The school shall have an explicit process for monitoring and evaluating student achievement relative to its mission, goals and objectives and for using evaluation results in ongoing planning and decision making to achieve its mission.

**Demo I.C5.1** | Describe the process you use to monitor and evaluate student achievement and how you use results in ongoing planning and decision making, including:

- a. Do you use sources other than those listed in demonstrations C1-4 above to monitor and evaluate student achievement? If yes, please describe.
- b. Provide evidence, such as any surveys, exit interviews, meetings, research or other documentation used to demonstrate that you have systems in place to evaluate student achievement.
- c. Explain your process for systematically compiling and reviewing your findings.
- d. Identify the most important internal and external barriers to achieving student achievement goals.
- e. Describe your plan for addressing these barriers.
- f. Provide a list of the policies created to meet the student achievement goals.
- g. Provide a list of the actions taken to meet the student achievement goals.



## Standard II | CURRICULA

Graduates of midwifery schools may practice anywhere in the world and work with many different populations. The purpose of the benchmarks in this section is to ensure the institution is training midwives who will be competent in all of the knowledge and skills identified in the MEAC Curriculum Checklist of Essential Competencies. That Checklist is informed by the International Confederation of Midwives Essential Competencies for basic midwifery practice, the NARM Comprehensive Skills, Knowledge, and Abilities Essential for Competent Midwifery Practice and the MANA Core Competencies for Basic Midwifery Practice. Institutions must also ensure that students obtain the minimum clinical experiences required for certification by NARM.

### II | Benchmark A Curricular Mapping

#### II | Benchmark A1

The institution has a curriculum composed of courses of discrete units of instruction.

**Demo II.A1.1** | Provide a list of the modules, courses, or other **discrete units of instruction** and a brief description of subject(s) covered in each.

**Demo II.A1.2** | Describe how the program didactic and supervised-practice courses are organized, sequenced and integrated to build on previous knowledge and experience.

#### II | Benchmark A2

The institution has a plan and a rationale for the way the curriculum is organized or sequenced

**Demo II.A2.1** | Explain the school's rationale for the way the curriculum is organized and sequenced.

**Demo II.A2.2** | Explain how **theory** and **practice** are linked in your curriculum.

**Demo II.A2.3** | Provide rationale for proportion of program devoted to theory and proportion devoted to practice, noting that MEAC recommends roughly equal time devoted to each.

## II | Benchmark A3

The sequence and content of the curriculum enable the students to acquire essential competencies for midwifery practice in accordance with the **Curriculum Checklist of Essential Competencies**.

**Demo II.A3.1** | Complete the *Curriculum Checklist of Essential Competencies Worksheet* and specify where in your curriculum these competencies are taught/learned and assessed.

## II | Benchmark A4

The sequence and content of the curriculum enable the student to acquire the clinical experience required for national certification by the **North American Registry of Midwives (NARM)**, such as number and type of clinical experiences, requirements regarding continuity of care and birth settings, second signature on specified skills and timeframes for clinical training.

**Demo II.A4.1** | Complete the *NARM clinical experiences requirements chart* which details how the school reviews and documents student acquisition and completion of the clinical experience required for certification by **NARM** and how this documentation is stored. This includes the number and type of clinical experiences, requirements regarding continuity of care and birth settings, second signature on specified skills and timeframes for clinical training.

## II | Benchmark B Learning Activities

### II | Benchmark B1

All courses or units of instruction have a **syllabus** which is distributed to students and includes: **learning objectives**, a description of **learning activities**, **learning materials and resources**, and a description of student evaluation/assessment methods.

**Demo II.B1.1** | Provide the course **syllabi** distributed to students for two required courses in your curriculum (from different course instructors if possible) that specify the following, **learning objectives**, **learning activities**, **specific learning material and resources**, and student evaluation/assessment methods.

### II | Benchmark B2

**Learning activities** use a variety of educational approaches necessary for delivery of curriculum content to meet individual learner needs and to facilitate achievement of learning objectives.

**Demo II.B2.1** | Summarize the types of **learning activities** used in your program and your rationale for using them. Provide specific examples of how a **learning activity** (or activities) supports acquisition of specific learning objectives. Please describe any activities that your program considers unique or innovative.

## II | Benchmark B3

**Learning activities** support **competency-based education**. In other words, student achievement of essential competencies for midwifery practice is the goal of the learning activities and the measure of student success.

**Demo II.B3.1** | Describe how the **learning activities** used in courses are designed to promote the achievement of competencies for midwifery practice. Give examples of learning activities that apply knowledge and skills to the provision of care. Examples of learning activities include but are not limited to: discussion, written assignments, research, hands-on skill development, role playing, simulations, problem-based learning, classroom instruction, clinical experiences.

## II | Benchmark B4

**The Midwives Model of Care** is integrated into the curriculum.

**Demo II.B4.1** | Provide the name of the course(s) in which students are introduced to the **Midwives Model of Care**™ and provide a copy of the relevant learning objective(s) for each of these course(s).

## II | Benchmark B5

The curriculum includes **learning activities** designed to prepare students to provide midwifery care to all mothers, babies, and families, including individuals from populations and cultures different than her own. These differences might include gender identity, race, color, marital status, ethnic origin, religion, age, sexual orientation, disability or socio-economic status. The needs of diverse populations beyond one's own must be elicited and considered, and skills developed to meet those needs.

**Demo II.B5.1** | Summarize how students learn to elicit and consider the needs of a population different than his/her own. Include at least two examples of learning activities from your curriculum.

**Demo II.B5.2** | If your program includes clinical training in overseas training sites or in communities where students are likely to be working with populations or cultures that are different from her/his own, provide information about how you prepare students for those opportunities.

## II | Benchmark C

## Learning Assessment

### II | Benchmark C1

The program has developed an assessment plan by which students are regularly evaluated on their acquisition of the knowledge, skills and abilities necessary to attain the competencies specified in the **MEAC Curriculum Checklist of Essential Competencies**.

**Demo II.C1.1** | Provide a narrative description of your assessment plan. Demonstrate that a variety of **valid and reliable formative and summative** methods for assessing student knowledge and abilities are being used. Examples of tools for assessing student learning include but are not limited to: portfolios, oral presentations, exams, problem sets, case studies, structured and open-ended interviews, evaluation rubrics, surveys, pre-test/post-test, skills demonstration, observations, focus groups, journals.

**Demo II.C1.2** | Provide examples of all tools and or rubrics used to assess competency for ONE knowledge competency and ONE skill competency, including:

- a. description of the **formative and summative assessment** methods that are used
- b. **didactic** and/or supervised practice courses in which assessment will occur
- c. individuals responsible for ensuring that assessment occurs

**Demo II.C1.3** | Complete the *MEAC Curriculum Checklist of Essential Competencies Worksheet* which requires documentation of how student achievement of each skill and knowledge competency is assessed.

*NOTE: this demonstration requires that you indicate the **summative assessment method(s)** used. This demonstration is met using the same form as Demo II.A3.1.*

### II | Benchmark D

#### Ongoing Curriculum Improvement

#### II | Benchmark D1

Ongoing, formal review of the program's curriculum, (including **didactic** and supervised clinical experience objectives, content, length and educational methods) occurs in order to maintain or improve educational quality.

**Demo II.D1.1** | Describe the ongoing, formal curriculum review process over the past three years, including schedules and describe how faculty, students and graduates were involved.

**Demo II.D1.2** | Provide minutes from meetings, correspondence and planning documents as evidence of ongoing curricular review and improvement.

## II | Benchmark D2

Student assessment data is collected and reviewed annually to determine whether curricular changes are needed. If students are not achieving learning objectives, the program provides a plan that shows how the curriculum will be changed to assure that future students will achieve the learning objectives.

**Demo II.D2.1** | Describe overall curricular strengths and areas for improvement based on cumulative assessment of student achievement of learning objectives.

## II | Benchmark D3

Individuals conducting curriculum review and program faculty are made aware of new knowledge and technology impacting midwifery practice and curriculum is updated accordingly.

**Demo II.D3.1** | Describe how information about new knowledge and technology impacting midwifery practice is obtained and integrated into the curriculum on a regular basis. Identify a list of current resources used in this review process.

**Demo II.D3.2** | Give one example of how the curriculum has been updated in the past three years as a result of new information or technology obtained through the above process.

## II | Benchmark E

### Additional Curriculum Requirements for Degree-Granting Institutions

## II | Benchmark E1

The curriculum incorporates general education components appropriate to the degree(s) offered.

**Demo II.E1.1** | List and describe the general education courses offered by the institution.

**Demo II.E1.2** | Describe how students obtain any required general education courses not offered by the institution.

**Demo II.E1.3** | If general education components are required by a state post-secondary education authority:

1. List the relevant state post-secondary education authority
2. List the specific general education components required by the authority for the degrees offered by the institution
- 3.

**Demo II.E1.4** | If the general education components are not required by the state post-secondary education authority, describe how you have determined that your general education components meet the generally accepted standards in higher education.

## II | Benchmark E2

The level of study and quality of work required are appropriate to the degree(s) offered.

**Demo II.E2.1** | List the criteria used for assessing that the level of study and quality of work required are appropriate to the degree(s) offered.

## II | Benchmark E3

Master's and doctoral degree programs must include successful completion and defense of a major independent project, thesis or dissertation involving research and application of knowledge.

**Demo II.E3.1** | List the curriculum components that prepare students to meet this benchmark.

**Demo II.E3.2** | List the criteria used for assessing that the independent project, thesis, or dissertation requirements meet generally accepted standards in higher education.



## Standard III | FACULTY



The purpose of the benchmarks in this section is to assure that faculty is qualified and has the appropriate training and/or education necessary for each credential/degree level offered by the school. These benchmarks also address the rights and responsibilities of faculty, the required orientation of faculty, and the ongoing training and evaluation requirements of faculty.

## III | Benchmark A Qualifications and Hiring

### III | Benchmark A1

All faculty members who are midwives must be qualified as follows:

- a. Nationally certified midwife (CPM, CM, CNM) with at least two years of current experience in **full scope midwifery practice**  
OR
- b. Legally recognized in a jurisdiction, province or state as a practitioner who provides women's health or maternity care with at least two years of experience in **full scope midwifery practice**

If any exceptions are made to the experience requirements, the institution must provide a rationale with supporting documentation.

### III | Benchmark A2

All faculty members who are not midwives must hold certificates or degrees appropriate to their area of instruction or, when neither certificates nor degrees are available in this subject area, have a minimum of three years' experience in the relevant field.

### III | Benchmark A3

The majority (51% or more) of the midwifery program faculty members must be CPMs or midwives legally recognized in a jurisdiction, province or state with out-of-hospital birth experience.

**Demo III.A1.1, III.A2.1, III.A3.1** | Complete the *Faculty Table*, listing all instructors who are midwives and who are not midwives. If a midwife does not meet the stated qualifications, name the faculty member and provide a rationale as to why this exception was made. Supporting documentation may include but not limited to:

- a. Current Practice Guidelines
- b. Current Informed Consent and Emergency Care Plan
- c. Current NRP/CPR verification
- d. Recent student or school evaluation of preceptor
- e. Letters of reference

### III | Benchmark A4

Curriculum that includes courses that the student completes independently is designed by individuals who meet one of the above qualifications.

**Demo III.A4.1** | Complete the Independent Study Course Tab within the *Faculty Table* listing the qualifications of each course designer.

### III | Benchmark A5

All faculty members are recruited, appointed and promoted without discrimination in regard to sex, gender identity, race, color, marital status, ethnic origin, religion, age, sexual orientation, or disability.

**Demo III.A5.1** | Provide a copy of your policies and procedures that clearly state that faculty are recruited, appointed, and promoted without discrimination in regard to sex, gender identity, race, color, marital status, ethnic origin, religion, age, sexual orientation, or disability.

**Demo III.A5.2** | Explain how this non-discrimination policy is made known to current and prospective faculty.

**Demo III.A5.3** | Describe your efforts to develop a **diverse** faculty. Provide two examples including job postings with publications or websites that serve diverse populations.

## III | Benchmark B Orientation and Professional Development

### III | Benchmark B1

All faculty members are provided training and orientation to the mission, goals, values and educational philosophy of the midwifery program and to the principles of:

- a. **Adult teaching and learning**
- b. **Competency-based education**
- c. **Cultural sensitivity and versatility**

**Demo III.B1.1** | Describe and provide a copy of your policies and procedures that address how faculty is trained and oriented to the mission, goals, values and educational philosophy of the midwifery program including but not limited to:

- a. **Adult teaching and learning**
- b. **Competency-based education**
- c. **Cultural sensitivity and versatility**

### III | Benchmark B2

All faculty members have opportunities for professional growth and training in topics such as:

- a. Developing course materials and curriculum (including online course development when applicable);
- a. Facilitating student inquiry and participation, ability to impart information;
- b. Constructing and evaluating technical/manual, oral and written student work;
- c. Emerging technologies and the selection and use of these tools for classroom and online instruction;
- d. Latest research and evidence in midwifery practice and maternity care

**Demo III.B2.1** | Describe and provide a copy of your policy and procedures that address how faculty has opportunities for ongoing professional growth and training.

**Demo III.B2.2** | Provide a copy of meeting notes, agendas or other documentation that illustrates how these policies and procedures have been implemented.

### III | Benchmark B3

In distance education programs, faculty is prepared to teach online education courses and the institution ensures faculty receives training, assistance and support during the development and delivery of courses.

**Demo III.B3.1** | Demo III.B3.1 | Provide a description of the training given to faculty, as well as the assistance and technical support resources available to faculty at all times during the development and delivery of courses.

### III | Benchmark B4

Faculty receives training and materials related to copyright law, the doctrine of fair use, plagiarism, and other relevant legal and ethical concepts.

**Demo III.B4.1** | Provide evidence that faculty have participated in training related to doctrine of fair use, plagiarism and other relevant legal concepts.

## III | Benchmark C Evaluation and Supervision

### III | Benchmark C1

The institution has process for the periodic review of the effectiveness of all course and clinical faculty.

**Demo III.C1.1** | Provide a copy of your policy and procedures for evaluating faculty performance, including how individual faculty weaknesses discovered through the evaluation process are addressed.

### III | Benchmark C2

The institution has criteria to determine whether faculty as a whole is adequate to support student achievement of program goals and objectives and a regular process for evaluating the **adequacy of faculty**.

**Demo III.C2.1** | Provide the criteria you use to determine that your faculty is adequate to support student achievement of program objectives.

**Demo III.C2.2** | Describe your process for evaluating the adequacy of faculty based on the institution's stated criteria.

### III | Benchmark C3

Faculty members are managed, supported and monitored by a midwife.

**Demo III.C3.1** | Provide an explanation or an organizational chart that demonstrates the supervisory relationship between the school administrative personnel, who is also a midwife, and the faculty.

**Demo III.C3.2** | If faculty supervisor is not a midwife, provide rationale.

## III | Benchmark D Rights and Responsibilities

### III | Benchmark D1

All faculty members have the right and responsibility to participate in the following:

- a. development, implementation, and evaluation of curriculum
- b. evaluation and advancement of students
- c. periodic evaluation of student admissions criteria
- d. periodic evaluation of program resources, facilities, and services
- e. supervision and evaluation of student learning in the clinical setting

**Demo III.D1.1** | Provide a copy of your policies and procedures that address how faculty has opportunities and responsibilities to participate in the following:

- a. development, implementation, and evaluation of curriculum
- b. evaluation and advancement of students
- c. periodic evaluation of student admissions criteria
- d. periodic evaluation of program resources, facilities, and services
- e. supervision and evaluation of student learning in the clinical setting, including any specific responsibilities linked to NARM requirements for student supervision and evaluation.

**Demo III.D1.2** | Provide evidence that faculty have participated in items a-e above.

### III | Benchmark D2

All faculty members are provided with a job description or other documents that specify their rights and responsibilities.

**Demo III.D2.1** | Provide examples of job descriptions and terms of employment or other agreements that specify faculty rights and responsibilities for each category of faculty (e.g. course instructor, clinical instructor/preceptor).

### III | Benchmark D3

Course and clinical instructors/preceptors have the opportunity to work cooperatively in the facilitation, direct observation, and evaluation of students' learning, thereby linking **theory to practice**.

**Demo III.D3.1** | Provide evidence that course and clinical instructors/preceptors are given opportunities to work cooperatively in the facilitation, direct observation and evaluation of students' learning.

## III | Benchmark E

### Additional Faculty Requirements for Degree-Granting Institutions

#### III | Benchmark E1

At least 75% of all course instructors must hold degrees at the level to which they are teaching or higher

**Demo III.E1.1** | Complete the *Faculty Table*

#### III | Benchmark E2

Appropriately qualified faculty must supervise course instructors who do not hold degrees at the degree level to which they are teaching or higher

**Demo III.E2.1** | Explain how a qualified faculty member supervises each of those course instructors who do not hold a degree at the appropriate level.

**Demo III.E2.2** | Provide a copy of the forms, tracking tools, or other documentation used in supervising instructors who do not hold a degree at the appropriate level.



## Standard IV | FACILITIES, EQUIPMENT, SUPPLIES, AND OTHER RESOURCES

The purpose of the benchmarks in this standard is to assure that all the classroom facilities, clinical sites, learning resources, administrative offices and distance education infrastructure are adequate to meet the needs of students and accomplish the goals and objectives of the program.

## IV | Benchmark A Classroom Facilities

### IV | Benchmark A1

Classroom facilities, equipment, and supplies meet the needs of students.

**Demo IV.A1.1** | Describe your classroom facilities including lighting, seating, furniture, air quality, and temperature maintenance.

**Demo IV.A1.2** | Describe the teaching aids, equipment, technology, and supplies that are utilized in teaching your curriculum.

**Demo IV.A1.3** | Explain how you determine that facilities, teaching aids, equipment, technology, and supplies are adequate to meet the needs of all currently enrolled students.

### IV | Benchmark A2

Educational equipment is safe and well-maintained.

**Demo IV.A2.1** | Provide a copy of your policies and procedures for maintaining educational equipment, including regular inspection, maintenance, and/or replacement.

### IV | Benchmark A3

Classroom facilities have met local safety regulations.

**Demo IV.A3.1** | For classroom facilities that are located in public or commercial buildings, provide evidence of inspection by local authorities for building and fire safety.

**Demo IV.A3.2** | For classroom facilities located in facilities other than public or commercial buildings, provide evidence of a safety plan.

### IV | Benchmark A4

Universal precautions, hazardous waste and hazardous materials management protocols are used in classroom areas.

**Demo IV.A4.1** | Provide a copy of your policies and procedures for universal precautions, hazardous materials management (e.g., bleach, chemicals), and bio-hazardous waste management (e.g., proper storage and disposal of bodily secretions and sharps) in classroom facilities.



## IV | Benchmark B Library and Learning Resources

### IV | Benchmark B1

Students and faculty are provided with access to the following library and learning resources at a minimum:

- a. access to current health science literature and databases
- b. a list of library resources that address and build competency in diversity and cultural versatility which may include resources on topics that address such topics as anti-racism, white privilege, health disparities among women of color and their babies, and how to serve Lesbian, Gay, Bi-Sexual, Transgendered and Queer populations.
- c. materials provided by schools for courses

**Demo IV.B1.1** | Describe how students and faculty are provided with access to the following library resources:

- a. access to current health science literature and databases
- b. a list of library resources that address and build competency in diversity and cultural versatility
- c. materials required by the school for courses

### IV | Benchmark B2

Students and faculty are provided with access to training and information they will need to secure required materials through electronic databases, interlibrary loans, government archives, new services and other sources.

**Demo IV.B2.1** | Describe how students and faculty are provided with access to training and information they will need to secure required materials through electronic databases, interlibrary loans, government archives, new services and other sources.

### IV | Benchmark B3

Library and learning resources are current and adequate to meet the needs of students and faculty.

**Demo IV.B3.1** | Describe how the library and learning resources are evaluated for currency and updated when necessary.

### IV | Benchmark B4

Students learn appropriate methods for effective online knowledge acquisition, including critical assessment of the validity and credibility of online sources.

**Demo IV.B4.1** | Describe how students are provided with training in effective research methods, including assessment of the validity of resources and the ability to master resources in an online environment.

## IV | Benchmark C Clinical Sites

### IV | Benchmark C1

Clinical sites are sufficient in number and types of clinical experiences for students to attain the skills and knowledge on the MEAC Curriculum Skills Checklist of Essential Competencies. All students have opportunities to attain the required skills and knowledge on the MEAC Curriculum Checklist of Essential Competencies.

**Demo IV.C1.1** | Complete the *Clinical Site Table*.

**Demo IV.C1.2** | Demonstrate that all currently enrolled students who are ready for clinical placement have adequate opportunities with a qualified preceptor.

### IV | Benchmark C2

Facilities, equipment, and supplies are sufficient to assure attainment of the required clinical experiences and skills.

**Demo IV.C2.1** | Describe how you assess whether your facilities, equipment and supplies are sufficient for students to gain the required skills and knowledge on the Curriculum Checklist of Essential Competencies.

### IV | Benchmark C3

The institution has selection criteria for and conducts ongoing review of all clinical learning sites and their suitability for student learning/experience in relation to expected learning outcomes.

**Demo IV.C3.1** | Provide a copy of the selection criteria used to review clinical learning sites and their suitability for student learning/experience in relation to expected learning outcomes.

**Demo IV.C3.2** | Provide evidence of how the institution uses the established criteria to conduct the ongoing review of all clinical learning sites and their suitability for student learning/experience in relation to expected learning outcomes.

### IV | Benchmark C4

Clinical site facilities, equipment, and supplies meet safety standards.

**Demo IV.C4.1** | Provide a copy of your clinical site agreement or other documentation which verifies that the clinical site has policies or procedures that meet federal and state safety standards, standard (universal) precautions, hazardous materials management (e.g. bleach, chemicals) and

hazardous waste management (e.g. proper storage and disposal of bodily secretions and sharps).

## IV | Benchmark D

### Administrative Office Facilities and Distance Education Infrastructure

#### IV | Benchmark D1

Administrative office facilities, equipment, technology, and supplies meet the institution's needs.

**Demo IV.D1.1** | Describe administrative office space and equipment.

**Demo IV.D1.2** | Explain how you have determined that administrative office space and equipment are adequate to meet the institution's needs.

#### IV | Benchmark D2

The institution has a documented technology plan that includes electronic security measures to ensure quality standards, adherence to FERPA, and the integrity and validity of information. The technology plan has been implemented and is operational.

**Demo IV.D2.1** | Provide a copy of your institution's technology plan which assures the integrity and validity of all data.

**Demo IV.D2.2** | Provide evidence that your institution's technology plan has been implemented.

**Demo IV.D2.3** | If applicable, provide a copy of your policies and guidelines to authenticate that students enrolled in online courses and receiving college credit are indeed those completing the coursework. This may include password protection, encryption, secure online or proctored exams, etc.

#### IV | Benchmark D3

Distance programs utilize technology delivery systems that are highly reliable and operable with measurable standards being utilized such as system downtime tracking or task benchmarking.

**Demo IV.D3.1** | If your institution utilizes technology to support course delivery and/or provide student services, describe the technology delivery system and how reliability is ensured.

#### IV | Benchmark D4

Distance programs have a centralized system that provides support for creating, maintaining, and expanding the online education infrastructure.

**Demo IV.D4.1** | If your institution utilizes distance education, provide a description of the centralized support system your institution has in place to build and maintain the online infrastructure.

#### **IV | Benchmark D5**

Distance programs maintain system backup.

**Demo IV.D5.1** | If your institution utilizes distance education, describe your procedures for ongoing system backup.

#### **IV | Benchmark D6**

Faculty, staff and students are supported in development and use of new technologies.

**Demo IV.D6.1** | Provide evidence that faculty, staff and students are supported in development and use of new technologies and skills.

### **IV | Benchmark E**

**Additional Facility Requirements for Degree-Granting Institutions**

#### **IV | Benchmark E1**

Library and learning resources for students and faculty support advanced scholarship and research

**Demo IV.E1.1** | Describe how you have determined that the library and learning resources are sufficient to provide for advanced scholarship and research.



## Standard V | GOVERNANCE, FINANCIAL MANAGEMENT AND ADMINISTRATIVE CAPACITY

The benchmarks in this standard are designed to assess the financial and overall stability of the institution, ensure that the proper financial accountability measures are in place, and demonstrate that the institution has adequate administrative staff to operate effectively and fulfill its obligations to students.

## V | Benchmark A Governance

### V | Benchmark A1

The institution has a **governance structure** to enable effective and comprehensive decision making.

**Demo V.A1.1** | Provide documentation of **legal form of ownership** of your institution.

**Demo V.A1.2** | Provide a copy of your most current **organizational bylaws**, operating agreement, or other document describing how the business is organized and decisions are made.

**Demo V.A1.3** Provide a list of your current Board of Directors, including officers, if applicable.

**Demo V.A1.4** Provide evidence of your organization's governance processes, such as meeting minutes or reports.

### V | Benchmark A2

The institution has a 3-year **business or strategic plan**.

**Demo V.A2.1** | Provide a copy of your 3- year business or strategic plan that includes at a minimum:

- a. A description of the business organization and operations
- b. Financial documentation including:
  - i. An operations budget with justifications for a minimum of three years, which shows distinct and adequate financial support for the midwifery education program
  - ii. Quarterly or monthly cash flow projections for a minimum of three years

*NOTE: budget and cash-flow projections in business plan must be forward-looking, not historical.*

- c. A recruitment and development plan including:
  - i. Your target markets,
  - ii. Your plan for promotion, advertising, publicity, and community relations
  - iii. Estimated budget and timeline
- d. A list of all likely external events and internal problems that might hamper your success and provide your contingency plan for each, including but not limited to:
  - i. Disasters
  - ii. Loss of key personnel
  - iii. Lawsuits
  - iv. Fraud
- e. Ownership and/or leadership succession planning

## V | Benchmark B Financial Management

### V | Benchmark B1

The institution has policies and procedures that ensure financial accountability, including the following:

- a. Separation of duties for receiving money, depositing money, and reconciling statements;
- b. How student financial records are maintained to record student tuition payments and other financial transactions;
- c. How students are provided with access to their financial records on a timely basis
- d. The manner in which receipts are provided to students
- e. How the institution's financial records, including student financial records are protected from damage or loss, and are stored and made accessible
- f. The process and schedule by which management compares the projected operations budget to actual income and expenses
- g. How management determines when discrepancies between projected and actual income and/or expenses require plan revisions
- h. How decisions are made and priorities established for meeting obligations to currently enrolled students

**Demo V.B1.1** | Provide copies of the written policies and procedures that ensure the financial accountability of the institution (items a-h).

**Demo V.B1.2** | Provide evidence such as meeting minutes and financial reports that management compares the operations budget to actual income and expenses and makes plan revisions as required according to the process and schedule described.

### V | Benchmark B2

The financial state of the institution is assessed annually by an **independent accountant**.

- a. If the institution has annual gross revenue that exceeds \$150,000, an **audit** is required every other year and an **external financial review** is required in the intermediary year.
- b. If the institution has annual gross revenue that is less than \$150,000, external financial reviews are required every year.

**Demo V.B2.1** | Provide a copy of your completed audits and/or external financial reviews (in accordance with revenue thresholds noted above), including management letters, for the previous two years.

*NOTE: If you are planning to establish eligibility for participation in Title IV programs, you will have to complete an audit that meets the Generally Accepted Government Audit Standards (GAGAS) for the previous two years*

*regardless of income level and the institution must meet additional financial responsibility requirements.*

**Demo V.B2.2** | If the audit or financial reports does not demonstrate solvency, provide an explanation of what has led to this problem and what the institution is doing to address it.

**Demo V.B2.3** | Provide evidence that all issues raised in the management letter of the audit and/or financial review have been addressed, if applicable.

## V | Benchmark B3

The institution has an annual budget review and development process.

**Demo V.B3.1** | Describe your institution's annual budget development process.

## V | Benchmark B4

The institution maintains a current ratio (assets to liabilities) of at least 1:1.

**Demo V.B4.1** | Complete the *Assets to Liabilities (Current) Ratio Worksheet* that calculates this ratio for the last two fiscal years.

*NOTE: If you are planning to establish eligibility for participation in Title IV programs, please note that the USDE requires a different measure of financial stability. See subpart L of the Title IV regulations (CFR Part 668.15) for more information on their composite scoring system.*

## V | Benchmark C

### Administrative Capacity

#### V | Benchmark C1

The head of the midwifery program has the following qualifications:

- a. experience as a midwife, and
- b. experience as a midwifery educator, and
- c. experience in management and administration.

**Demo V.C1.1** | Provide documentation that the head of your midwifery program has experience as a midwife.

**Demo V.C1.2** | Provide documentation that the head of your program has experience as a midwifery educator.

**Demo V.C1.3** | Provide a resume for the head of your program that details work experience in management or administration.

**Demo V.C1.4** | If the head of your program does not have these qualifications, please provide a rationale.



## V | Benchmark C2

Qualifications are established for the institution's management staff, the management structure is clearly defined, and management performs the following administrative functions:

- a. Academic and curriculum oversight
- b. Distance learning oversight, if applicable
- c. Student progress
- d. Student clinical experience oversight
- e. Monitoring of NARM certification requirements
- f. Faculty supervision
- g. Learning resources oversight
- h. Recruitment and marketing
- i. Student admissions
- j. Student services
- k. Student financial aid, if applicable
- l. Personnel/human resources management
- m. Financial management
- n. Regulatory compliance oversight
- o. Facilities and equipment oversight
- p. Records management and retention review

**Demo V.C2.1** | Provide an organizational chart, including, if applicable, the governing body.

**Demo V.C2.2** | Complete the *Administrative Staff Table* that lists all paid and unpaid administrative staff by job title, qualifications, and number of hours worked each week.

**Demo V.C2.3** | Complete the *Administrative Functions Table*.

**Demo V.C2.4** | Provide job descriptions and employment agreements or contracts for all paid and unpaid administrative staff that incorporate the title, qualifications, hours worked, and responsibilities identified for each person in the *Administrative Staff Table* and *Administrative Functions Table*.

## V | Benchmark C3

Administrative staff are recruited and promoted without discrimination in regard to sex, gender identity, race, color, marital status, ethnic origin, religion, age, sexual orientation, or disability.

**Demo V.C3.1** | Provide a copy of your policies and procedures that clearly state that administrative staff are recruited, appointed, and promoted without discrimination in regard to sex, gender identity, race, color, marital status, ethnic origin, religion, age, sexual orientation, or disability.

**Demo V.C3.2** | Explain how this non-discrimination policy is made known to current and prospective administrative staff.

## V | Benchmark C4

The institution has written Policies and Procedures for annual evaluation of staff performance of the administrative functions listed above.

**Demo V.C4.1** | Provide a copy of your policies and procedures for annual evaluation of staff performance of administrative functions.

**Demo V.C4.2** | Provide at least two examples of most recent annual staff evaluations.

**Demo V.C4.3** | Provide at least one example of how staff evaluation results have been used to make improvements

## V | Benchmark C5

The institution annually reviews administrative capacity.

**Demo V.C5.1** | Describe the process used to review administrative capacity and any actions taken as a result of the review.

## V | Benchmark C6

The Institution has policies and procedures for organizing, accessing and retaining records and information.

**Demo V.C6.1** | Provide a description of your policies and procedures for organizing, accessing, and retaining administrative records and information.

## V | Benchmark D

### External Regulation

## V | Benchmark D1

The institution is legally authorized under applicable state law(s).

**Demo V.D1.1** | Provide the names and addresses of all regulatory agencies that govern midwifery education programs, post-secondary education, vocational education, and/or degree-granting institutions in every state or local jurisdiction where your institution has a **presence**.

**Demo V.D1.2** | Explain your current status with each of the regulatory agencies by which you are governed.

**Demo V.D1.3** | List each of the dates when your program was approved by a state regulatory agency during the past seven years.

**Demo V.D1.4** | Provide copies of current approval letters, certificates, or other supporting documentation from the agencies by which you are governed.

## V | Benchmark D2

If the institution is accredited by agencies other than MEAC, the institution remains in good standing with those agencies

**Demo V.D2.1** | Provide the names and addresses of any other accrediting agencies by which you are currently accredited or were accredited within the last three years.

**Demo V.D2.2** | Provide a description of any adverse actions or other outstanding disciplinary actions currently enforced against this institution.

## V | Benchmark D3

The institution demonstrates compliance with applicable federal regulations, including, but not limited to:

- a. Family Educational Rights and Privacy Act (**FERPA**)
- b. Health Insurance Portability and Accountability Act (**HIPAA**)
- c. Americans with Disabilities Act (**ADA**)
- d. Student and Exchange Visitor Program (**SEVP**)
- e. **Copyright laws**

**Demo V.D3.1** | Describe how the institution ensures student transcripts are protected from damage or loss, securely stored, and made permanently accessible in compliance with the Family Educational Rights and Privacy Act (FERPA).

**Demo V.D3.2** | Describe how the institution ensures student files are secured for patient confidentiality with regard to the Health Insurance Portability and Accountability Act (HIPAA).

**Demo V.D3.3** | Provide a copy of your policies and procedures for making reasonable accommodations in facilities, equipment, supplies, services and other resources for students, faculty, staff, and others with disabilities in accordance with the federal Americans with Disabilities Act.

**Demo V.D3.4** | Provide evidence that the institution is currently approved to enroll international students through and in compliance with the Student and Exchange Visitor Program, if applicable.

**Demo V.D3.5** | Provide a copy of your copyright policy and procedures regarding fair use of intellectual property including course materials, online materials and in other applications.



## Standard VI | STUDENT SERVICES

The purpose of the benchmarks in this standard is to ensure that the institution offers academic advising and other student support services that facilitate and encourage academic success.

## VI | Benchmark A

### Student Support Services

#### VI | Benchmark A1

The institution facilitates and encourages academic success by providing access to student support services, including but not limited to:

- a. Academic advising
- b. Tutoring
- c. New student orientation
- d. Financial aid advisement
- e. Clinical placement support
- f. Personal counseling
- g. Career placement services, including information about NARM certification and state licensure requirements, credentials, practice, and/or employment opportunities
- h. Social support services linking academic and social integration for all students. Examples of social support services include keeping students connected by cohort and developing virtual or in-person learning communities.

**Demo VI.A1.1** | Explain and provide examples of how the institution provides access to each of the services a-h listed above.

**Demo VI.A1.2** | Provide evidence of how the institution informs students about the availability of each of the services a-h listed above.

## VI | Benchmark B

### Technical Support for Distance Education Students

#### VI | Benchmark B1

If the institution has a distance learning component, students have access to appropriate technical assistance and technical support staff throughout the duration of the program and student support personnel are available to address student questions, problems, bug reporting, and complaints.

**Demo VI.B1.1** | Describe how students in your distance courses can access technical support throughout the program.

**Demo VI.B1.2** | Provide the name of the individual(s) or contractors who make technical assistance available to your students throughout the duration of the program.

**Demo VI.B1.3** | Provide the weekly and hourly schedule of availability of technical support to your students.



## Standard VII | STUDENT AFFAIRS

The purpose of the benchmarks in this standard is to ensure that the students' rights and responsibilities are protected in policies and procedures dealing with student admission, enrollment, advertising and public disclosure, definitions of satisfactory academic progress, student rights, transcripts, and tuition payment and refunds. The benchmarks also establish what information must be made available to the public, including to prospective students.

## VII | Benchmark A

### Student Admission and Enrollment

#### VII | Benchmark A1

The institution must have clearly written admission policies that are accessible to potential applicants. These written policies must include:

- a. Entry requirements, including minimum requirement of high school diploma or equivalent;
- b. A transparent recruitment process;
- c. A transparent selection process;
- d. Criteria for acceptance which:
  - i. identify applicants for admission who are capable of completing the program and becoming a midwife.
  - ii. do not discriminate in regard to sex, gender identity, race, color, marital status, ethnic origin, religion, age, sexual orientation, or disability.
- e. Mechanisms for taking account of prior learning.

**Demo VII.A1.1** | Provide a copy of your criteria, and policies and procedures for the selection and admission of students.

**Demo VII.A1.2** | Describe any qualitative and quantitative measures you use to identify applicants for admission who are capable of completing the program and becoming midwives including any requirements specific to physical, cognitive or other limitations which might impact the ability of the applicant to perform the essential functions of a midwife.

**Demo VII.A1.3** | Provide a copy of your non-discrimination policy regarding student recruitment and admission and list the specific documents and page numbers where this information is made available to the public.

**Demo VII.A1.4** | Describe your efforts to recruit develop and retain a diverse student body. (e.g., a list of advertisements in magazines or websites targeted to diverse populations)

**Demo VII.A1.5** | Provide a copy of your procedure for confirming that applicants have a high school diploma or equivalent.

#### VII | Benchmark A2

Enrollment agreements, signed and dated by the student and a school official at the onset of the program, clearly specify:

- a. The nature and scope of the program
- b. The terms of enrollment
- c. The services and obligations to which the program is committed, including full disclosure about:
  - i. Clinical training
  - ii. Administrative fees and tuition
  - iii. The payment and refund schedule
- d. The student's obligations, financial and otherwise

- e. The student's permission to release certification test results to the school for the purposes of compiling student achievement data for compliance with MEAC standards
- f. The catalog, addendum, and/or student handbook publication date, volume number, or unique identifier that applies to the terms of enrollment

**Demo VII.A2.1** | Provide a sample of your enrollment agreement.

### VII | Benchmark A3

Enrollment policies and procedures are clearly stated and in compliance with state law.

**Demo VII.A3.1** | Provide a copy of your enrollment policies and procedures.

**Demo VII.A3.2** | Provide a copy of your state post-secondary education regulations regarding enrollment procedures. If a specific regulation does not exist, provide a letter from an official at the state's office for postsecondary education with jurisdiction over your institution explaining that the state requires no specific enrollment procedure.

### VII | Benchmark A4

Policies and procedures are established which address at a minimum the criteria for:

- a. **transfer of credit**
- b. **prior learning assessment**
- c. **advanced placement**

**Demo VII.A4.1** | Provide a copy of your policies and procedures for transfer of credit, prior learning assessment and advanced placement.

## VII | Benchmark B

### Disclosure to the Public, including Prospective Students

### VII | Benchmark B1

Advertising, information and promotional materials make only accurate, justifiable and provable claims about the institution.

**Demo VII.B1.1** | Provide all website addresses and copies of all advertising, information, and promotional materials published or distributed in the previous 12 months about the school.



## VII | Benchmark B2

A catalog, catalog addendum, program handbook, websites and/or other documents is provided that clearly informs the public, including prospective students, about the following:

- a. The mission of the institution
- b. The program objectives
- c. Certificate, diploma or degrees earned at the completion of the program
- d. Professional opportunities for midwives upon graduation
- e. Measures of student achievement including but not limited to completion and retention rates, NARM exam pass rates, and graduate placement rates
- f. The curriculum and a description to students of how to progress through the curriculum.
- g. A list of faculty and faculty qualifications
- h. An overview of facilities, equipment and supplies
- i. Availability of student services
- j. Admissions criteria, policies and procedures
- k. Criteria to transfer in credit, prior experience and/or advanced placement
- l. Transferability of credit or degree to other programs
- m. Attendance requirements
- n. Criteria for student evaluation and grading
- o. Definition of satisfactory academic progress
- p. Academic calendar with the schedule for academic terms, school years, and student completion timelines
- q. Cost and possible locations of clinical training opportunities
- r. Length of program
- s. Minimum and maximum time parameters for completing the program
- t. Requirements for graduation
- u. Tuition, fees, and all other related expenses
- v. The payment and refund schedule
- w. Requirements for NARM certification
- x. Title IV programs must include information on Federal Student Aid program
- y. Ability to sponsor student visas, if applicable
- z. Definition of enrollment status (full time/part time)
- aa. Policy on academic honesty
- bb. Minimal technology skills and equipment required by the course design

**Demo VII.B2.1** | Provide a copy of your current catalog, catalog addendums, program handbook, websites and/or other documents where this information is provided to the public, including prospective students.

**Demo VII.B2.1** | Complete the *Public Information Checklist* which includes required items from a-bb above.

## VII | Benchmark C

### Satisfactory Academic Progress

#### VII | Benchmark C1

Policies and procedures are established which address the monitoring, enforcing and notification of **satisfactory academic progress** (SAP). SAP must cover at a minimum:

- a. Attendance requirements
- b. Approach to measuring whether the student is making progress in a timely way toward completing the program
- c. Assessment of the quality of student performance as captured in GPA or other measures
- d. Graduation requirements
- e. Minimum and maximum time parameters for completing the program
- f. Expiration of credits in relation to maximum time frames for program completion
- g. Student leave of absence
- h. Criteria for student evaluation and grading
- i. Criteria for dismissal from a course or clinical setting
- j. Criteria for dismissal from the program
- k. Criteria used to assess student readiness for clinical training

**Demo VII.C1.1** | Provide a copy of your policies and procedures which address each of a-k listed above.

#### VII | Benchmark C2

Policies and procedures are established which address **academic honesty**.

**Demo VII.C2.1** | Provide a copy of the institution's academic honesty policy and procedures.

## VII | Benchmark D

### Student Rights, Transcripts and Refund

#### VII | Benchmark D1

School must prepare and maintain student transcripts and make them available to student, following generally accepted format and practice.

Transcript must include:

- a. The school's full name
- b. Explanation of the school's academic calendar, length of terms, credit structure, grading system.
- c. Full identification of the student, showing all prior degrees earned, details of any credit transferred or otherwise awarded at entry, and periods of enrollment.
- d. For each period of enrollment, include every completed course, clinical, or module in an understandable manner including title, number of credits earned, and grade received.

- e. A note, with or without explanation, if the student is not immediately eligible to continue enrollment for reasons of academic probation or suspension

**Demo VII.D1.1** | Provide a copy of the transcript that includes items a-e above.

## VII | Benchmark D2

Students are provided with opportunities to participate in curriculum evaluation, program planning and evaluation, policy-making, faculty evaluation, and student services evaluation.

**Demo VII.D2.1** | Provide evidence that students are provided with opportunities to participate in curriculum evaluation, program planning and evaluation, policy-making, faculty evaluation, and student services evaluation. Documentation could include relevant policies and procedures, meeting minutes, evaluation forms or other tools used to collect student input, and/or other evidence of student participation.

## VII | Benchmark D3

Policies and procedures are established which address tuition and fees cancellations and refunds in accordance with state law.

**Demo VII.D3.1** | Provide a copy of your state post-secondary education regulations regarding student cancellation and refunds of tuition and fees. If no such law exists in the state where your school is located, policies and procedures must include at a minimum:

- a. Enrollment fees are refundable in full up to three days after signing the enrollment agreement; after three days, they are nonrefundable.
- b. Fees, including registration fees, lab fees, course pack fees, technology fees, and any other fees are nonrefundable after the registration deadline.
- c. Items ordered from the school, including textbooks, first year equipment kit, and suturing kit are nonrefundable after the registration deadline.
- d. Institutional Refund Schedule:

### 12 week semester:

Withdrawal Date (day of term) - Refund %

On or before 1st day of term - 100%

Day 2 through 7 - 86%

Day 8 through 14 - 72%

Day 15 through 21 - 58%

Day 22 through 28 - 44%

Day 29 through 35 - 30%

Day 36 through 42 - 16%

Day 43 through end of semester – No Refund

### 10 week term:

Withdrawal Date (day of term) - Refund %

On or before 1st day of the term - 100%

Day 2 through 7 - 80%

Day 8 through 14 - 60%

Day 15 through 21 - 40%

Day 22 through 28 - 20%  
Day 29 through end of term - No refund

**Demo VII.D3.2** | Provide a copy of your tuition and fees refund policies and procedures.



## Standard VIII | MEASURES OF PROGRAM LENGTH

The purpose of the benchmarks in this standard is to ensure that institutions accurately describe the length of the program and, if credits are awarded, that credits are calculated using the current U.S. Department of Education formula.

## VIII | Benchmark A

### Time Spent in Didactic and Clinical Learning

#### VIII | Benchmark A1

Institutions must clearly state the minimum and maximum timeframes for completion of the program, including both didactic and clinical requirements.

**Demo VIII.A1.1** | State the minimum and maximum timeframes for completion of each program offered by the institution, including both didactic and clinical requirements.

**Demo VIII.A1.2** | Provide a rationale for these timeframes.

**Demo VIII.A1.3** | If exceptions to the minimum and maximum timeframe are allowed, provide a copy of the policies and procedures which explain why and how an exception may be granted.

## VIII | Benchmark B

### Awarding Academic Credits

#### VIII | Benchmark B1

If the institution awards **credits** for either clinical training or didactic coursework, the institution must use the following formula for awarding credits:

- a. One semester or trimester credit requires a minimum of 45 hours of student work in classroom, study and/or clinical practice over a period of approximately 15 weeks.
- b. One quarter credit requires a minimum of 30 hours of student work in classroom, study and/or clinical practice over a period of approximately 10-12 weeks.

**Demo VIII.B1.1** | Describe the process used by the institution to determine the number of credits awarded for each module, course, or unit of instruction. Note that credit hours awarded for preceptorships or other clinical instruction must be based on a record of a minimum number of actual clinical contact hours.

*NOTE: If you are planning to establish eligibility for participation in Title IV programs, the formula for awarding credit for the purposes of calculating financial aid award may be different.*

**Demo VIII.B1.2** | Provide two examples of the process as it was applied to two different didactic courses and one example of the process as it was applied to a clinical course.

## VIII | Benchmark C

### Additional Credit Requirements for Degree-Granting Institutions

#### VIII | Benchmark C1

The degree requirements meet the following minimum semester/quarter credits:

- a. Associate degree programs must be at least 60/90 credits
- b. Baccalaureate programs must be at least 120/180 credits
- c. Master's degree programs require completion of 30/45 credits in addition to a baccalaureate degree from an institution accredited by a U.S. Department of Education-recognized accrediting agency or the equivalent

**Demo VIII.C1.1** | Describe the credit requirements for each of the degrees offered by the institution.

**Demo VIII.C1.2** | Provide a sample copy of pages in publications and documents containing the credit requirements for each degree offered by the institution.



## Standard IX | COMPLAINTS AND GRIEVANCE

The purpose of the benchmarks in this section is to ensure that institutions have policies and procedures in place that provide students, faculty, and staff with a clear way to lodge complaints or grievances. The benchmarks also ensure that the proper documentation of grievances is retained and made available to MEAC officials when requested. This standard also requires that students are informed of the proper channel to file a complaint with MEAC or other regulatory bodies.



## IX | Benchmark A Institutional Grievance Policy

### IX | Benchmark A1

The institution has a written complaint and/or grievance policy that is made available to students, faculty and staff.

**Demo IX.A1.1** | Provide a copy of your complaint and/or grievance policy.

**Demo IX.A1.2** | Describe how students, faculty, and staff are informed about your complaint and/or grievance policy.

### IX | Benchmark A2

The complaint/grievance policy includes a provision that individuals will not be discriminated against as a consequence of making a complaint.

**Demo IX.A2.1** | Describe how you protect individuals from discrimination as a consequence of making a complaint.

### IX | Benchmark A3

The institution has a procedure for receiving and responding to written complaints and grievances from students, faculty, and staff in a timely manner, not to exceed 60 days, that ensures the fair and consistent application of all policies, and addresses confidentiality concerns.

**Demo IX.A3.1** | Describe your procedures for receiving and responding to written complaints and grievances in a timely manner, not to exceed 60 days

**Demo IX.A3.2** | Explain how you ensure that policies and procedures regarding written complaints and grievances are applied fairly and consistently.

**Demo IX.A3.3** | Explain how your policies and procedures regarding written complaints and grievances include safeguards of confidentiality.

**Demo IX.A3.4** | Provide an example of a complaint or grievance with resolution, if available.

## IX | Benchmark B Retention of Grievance Records

### IX | Benchmark B1

Records of complaints and grievances are retained for at least seven years and are accessible to MEAC officials.

**Demo IX.B1.1** | Provide a copy of your policies and procedures for retaining records of complaints and grievances, along with their resolutions, for a minimum of seven years.

## IX | Benchmark C External Grievance Mechanisms

### IX | Benchmark C1

The institution or program materials inform students about the **grievance policies of MEAC** and any relevant state regulatory bodies and provide contact information for each.

**Demo IX.C1.1** | Provide evidence that students are informed about the grievance policies of MEAC and any other relevant state regulatory bodies and contact information for each is provided.



## Standard X | COMPLIANCE WITH THE INSTITUTION'S RESPONSIBILITIES UNDER TITLE IV OF THE HIGHER EDUCATION ACT

The purpose of the benchmarks in this standard is to ensure that institutions participating in Title IV financial aid programs have adequate administrative capacity, trained personnel, and policies and procedures to fulfill their government obligations.

## **X | Benchmark A**

### Compliance with US Department of Education Regulations

#### **X | Benchmark A1**

The institution demonstrates compliance with its program responsibilities under current U.S. Department of Education regulations. In reviewing the institution's compliance with these program responsibilities, MEAC relies on documentation provided by the U.S. Secretary of Education.

**Demo X.A1.1** | Provide a copy of the institution's most recent:

- a. **Program Participation Agreement (PPA)**
- b. **Eligibility and Certification Approval Report (ECAR)**

**Demo X.A1.2** | Describe your school's system for maintaining electronic and paper files including maintenance and back-up as well as archiving, in compliance with Title IV requirements.

## **X | Benchmark B**

### Title IV Administration

#### **X | Benchmark B1**

The Institution has policies and procedures for implementation and maintenance of the financial aid program.

**Demo X.B1.1** | Provide a copy of the institution's policies and procedures for implementing and maintaining the financial aid program.

**Demo X.B1.2** | Describe in narrative form the process that the institution uses to compile, review and update policies and procedures.

#### **X | Benchmark B2**

At least one individual who is an employee of the institution who is designated as having responsibility for student financial aid programs shall be available to students on-site to answer questions and to administer the program.

**Demo X.B2.1** | Provide a job description for all positions involved with providing financial aid information and the awarding and disbursing of Title IV funds.

#### **X | Benchmark B3**

The institution demonstrates adequate checks and balances, and clear separation of duties between awarding of Title IV funds and disbursing of funds.

**Demo X.B3.1** | Describe how your institution ensures adequate checks and balances and clear separation of duties for the responsibilities of awarding of Title IV funds and disbursing of funds.

## **X | Benchmark B4**

If the institution utilizes a third-party servicer, it must demonstrate how responsibilities are separated between the servicer and the institution.

**Demo X.B4.1** | If your institution utilizes a third-party servicer, provide a chart delineating tasks and responsibilities or a contract with the third-party servicer outlining responsibilities.

## **X | Benchmark B5**

Students must be informed of their financial aid options, and their rights and responsibilities.

**Demo X.B5.1** | Provide examples of materials given to students regarding:

- a. Availability of aid at the institution
- b. The students' eligibility for aid (e.g., award letters/notifications, entrance/exit counseling information)
- c. Materials used in advising students (e.g., handouts, newsletters, email blasts)

## **X | Benchmark C**

### **Currency in Title IV Regulations**

## **X | Benchmark C1**

Individuals designated as having responsibility for the student financial aid program maintain current knowledge of financial aid rules and regulations

**Demo X.C1.1** | Provide documentation of initial and ongoing training on financial aid rules and regulations. Such training could include membership and participation in state, regional, and/or national financial aid associations; attendance at financial aid workshops, seminars, and conferences; and/or reading professional journals, publications, and websites that are designed to keep the financial aid officer up-to-date on changes in financial aid requirements.

## **X | Benchmark C2**

The institution has a process for communicating and reviewing information that may impact a student's Title IV eligibility.

**Demo X.C2.1** | Describe your process for communicating and reviewing Title IV information. Include any relevant policies and procedures, or forms.