Section C: Standards for Programmatic Accreditation

Standards for Programmatic 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) as well as all the 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 program has clearly articulated both a mission and program goals and objectives, and to ensure that the program engages in the ongoing assessment of the achievement of its goals. Benchmarks also seek to ensure that the program engages in the ongoing measurement of student achievement.

I | Benchmark A
Mission

I | Benchmark A1
The program has a mission statement that fits within the mission of the institution.

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

I | Benchmark B
Program Goals and Program Assessment

I | Benchmark B1
The program has goals that are consistent with the program's mission.

> **Demo I.B1.1** | Provide a copy of the **program goals.**

> **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 program'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 evaluation and update of the **program goals.** 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 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 the *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 program shall have an explicit process for monitoring and evaluating student achievement relative to its mission and goals 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 demonstrations C-1-4 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 program 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. Programs must also ensure that students obtain the minimum clinical experiences required for certification by NARM.

II | Benchmark A
Curricular Mapping

II | Benchmark A1
The program 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 program 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 expereinces requirements chart* which details how the program 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, 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, and 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
On-Going 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.

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 program 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.A1.1, III.A1.1 |** 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.A53 | 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 tothe principles of:
    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;
    b. (including online course development when applicable)
    c. Facilitating student inquiry and participation, ability to impart information;
    d. Constructing and evaluating technical/manual, oral and written student work,
    e. Emerging technologies and the selection and use
    f. of these tools for classroom and online instruction
    g. 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 program ensures faculty receives training, assistance and support during the development and delivery of courses.

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 receive 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 has 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 program must have a process for the periodic review of the effectiveness of all **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 program 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 program'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, 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.

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 program 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 program 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 program'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 program's needs.

IV | Benchmark D2
The program (or institution housing the program) 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 program'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 program 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 program utilizes distance education, provide a description of the centralized support system your program has in place to build and maintain the online infrastructure.

IV | Benchmark D5
Distance programs maintain system backup.

Demo IV.D5.1 | If your program 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.

Standard V | Governance, Financial Management and Administrative Capacity

The benchmarks in this standard are designed to assess that the program has institutional support, ensure that representatives of the program leadership participate in institutional governance and to ensure that the program has adequate administrative staff to operate effectively and fulfill its obligations to students.

V | Benchmark A
Governance

V | Benchmark A1
Representatives of the program participate in institutional governance.

> **Demo V.A1.1** | Provide a list of the institutional governing bodies that have authority to determine curriculum, faculty qualifications, student admissions requirements, budget, etc. and describe how the program participates or is represented in these bodies.

> **Demo V.A1.2** | Describe the role and authority of the Midwifery Program Director in revising curriculum, hiring faculty, developing budget and admitting students.

> **Demo V.A1.3** Provide a recent example of the program's participation in institutional governance and discuss the challenges and opportunities that have arisen as a result of this participation.

V | Benchmark A2
The program has a 3-year strategic plan, distinct from the institution within which it resides.

> **Demo V.A2.1** | Provide a copy of your 3- year strategic plan that includes at a minimum:
> a. 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
> b. 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
> c. Leadership succession planning

V | Benchmark B
Financial Management

V | Benchmark B1
The program has adequate institutional support.

> **Demo V.B1.1** | Provide evidence of commitments made by the institution that support this program, including but not limited to: financial, program marketing, student financial aid/scholarships, student and faculty

recruitment/retention, faculty development opportunities, dedicated facilities, etc.

Demo V.B1.2 / An operations budget with justifications for a minimum of three years, which shows distinct and adequate financial support for the midwifery education program.

Demo V.B1.3 | Explain how fiscal resources are sufficient to support the program's mission and are commensurate with the resources of the institution overall.

Demo V.B1.4 | Describe your program's annual budget development and approval process, specifically the role and the authority of the Midwifery Program Director, in determining the program budget.

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 program'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 D
External Regulation

V | Benchmark D1

The program resides within an institution that is accredited by an agency recognized by the U.S. Department of Education.

Demo V.D1.1 | Provide the name and address of the agency that accredits the institution within which the program resides, and evidence, such as a letter or the agency's website address, affirming the institution's current status and length of accreditation.

V | Benchmark D2

The midwifery program is legally authorized under applicable state law.

>**Demo V/D2.1** | 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 **presence**.

>**Demo V.D2.2** | Explain your current status with each of the regulatory agencies by which you are governed.

>**Demo V.D2.3** | List each of the dates when your program was approved by a state regulatory agency during the past seven years.

>**Demo V.D2.4** | Provide copies of current approval letters, certificates, or other supporting documentation from the agencies by which you are governed.

V | Benchmark D3
If the program is accredited by agencies other than MEAC, the program remains in good standing with those agencies.

>**Demo V.D3.1** | 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.D3.2** | Provide a description of any adverse actions or other outstanding disciplinary actions currently enforced against this institution.

V | Benchmark D4
The program 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.D4.1** | Describe how the program 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.D4.2** | 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.D4.3** | 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 (ADA).

>**Demo V.D4.4** | Provide evidence that the program is currently approved to enroll international students through and in compliance with the Student and Exchange Visitor Program (SEVP), if applicable.

Demo V.D4.5 | 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 program or the institution within which the program resides 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 program 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 makes 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 Program 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 students obligations, financial and otherwise

e. The students 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

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.A3.1 | 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 program.

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 are provided that clearly inform the public, including prospective students, about the following:

a. The mission of the program
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 program or institution's academic honesty policy and procedures.

VII | Benchmark D
Student Rights

VII | Benchmark D1

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.

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
Program 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 program awards **credits** for either clinical training or didactic coursework, the program 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 VII.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 VII.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.

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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 and/or program 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 the 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 and/or program 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 the 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 the 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.