

---

**Section G:**

**Policies and Procedures**

---

## Table of Contents: Section G

### I. Board of Directors

#### I A. Members of MEAC Board of Directors ..... G-8

1. Composition
2. Nominations
3. Elections
4. Responsibilities

#### I B. The Executive Committee ..... G-9

1. Composition
2. Elections
3. Responsibilities

### II. Administration

#### II A. Personnel.....G-11

1. Executive Director
2. Other administrative staff
3. Conflict of interest
4. Confidentiality

#### II B. Financial Management ..... G-13

1. Budget
2. Fees
3. Financial reports
4. Legal obligations and record keeping

#### II C. Accreditation Records, Publications and Notification Responsibilities ..... G-14

1. Types of documents that must be submitted to USDE
2. Contact with USDE regarding Title IV
3. Accreditation decisions requiring notice to USDE, appropriate state and accrediting agencies
4. Adverse decisions requiring notice to USDE, appropriate state and accrediting agencies
5. MEAC will provide written notice to the public of decisions listed in 3.a. and 3.b. above within 24 hours of its notice to the institution/program
6. Notice to USDE, appropriate state post-secondary agency and accrediting agency if an accredited institution voluntarily relinquishes accreditation

7. Summary of findings to USDE and state agencies after an adverse action
8. Sharing information with other appropriate agencies
9. Providing opportunities for third party comment
10. Notification of proposed changes in administrative policies and procedures to institutions/programs
11. Public notice of proposed new or revised standards or criteria
12. MEAC makes publicly available the following written materials
13. MEAC provides for the public correction of incorrect or misleading information
14. MEAC maintains a complete file for each program or institution obtaining accreditation
15. MEAC maintains records of the following administrative activities

### III. Accreditation Activities

#### III A. Scope of MEAC Accreditation Activities ..... G-18

1. Geographic scope of accreditation activities
2. Types of institutions and programs accredited
3. Institutional and programmatic accreditation
4. Types of certificates and degrees covered
5. Accreditation and pre-accreditation
6. Distance or Correspondence Education

#### III B. Standards for MEAC Accreditation ..... G-20

1. U.S. Department of Education requirements
2. Nationally-accepted criteria for midwifery education
3. Standards for degree-granting institutions and programs
4. Systematic review of standards
5. Changing the standards

#### III C. Basic Requirements for Accreditation ..... G-22

1. MEAC Standards and criteria
2. Legal authority under applicable state law
3. Standing with other state agencies and accrediting agencies
4. Pre-accreditation training requirements

#### III D. Evaluation and Decision-Making Bodies ..... G-23

1. Composition of evaluation and decision-making bodies
2. Conflicts of interest

3. Confidentiality
  4. Training
  5. Evaluation: Accreditation Review Committees
  6. Decision-making: Board of Directors
- III E. Accreditation Process, Determining Compliance in Standards .....G-25
1. General guidelines for the accreditation process
  2. Overall timeframe and extensions
- III F. Decision-making regarding Accreditation and Continuing Accreditation..G-26
1. General guidelines for accreditation decision-making
  2. Actions and decisions which may be made regarding initial accreditation or renewal of accreditation
    - a. To grant, or grant with reports
    - b. To defer accreditation
    - c. To deny accreditation
    - d. Definition of final accrediting action
    - e. Notice of final accrediting action to third parties
  3. Regard for decisions of states and other accrediting agencies
  4. Other Matters
- III G. Maintaining Accreditation Status ..... G-31
1. Reporting and financial responsibilities
  2. Making substantive changes
  3. Accurate institution/program marketing materials
  4. MEAC review of all reports and complaints to monitor continued compliance with Standards and policies
- III H. Decision-Making Regarding Pre-Accreditation ..... G-33
1. General guidelines for pre-accreditation decision-making
  2. Actions and decisions which may be made regarding pre-accreditation
    - a. To grant pre-accreditation
    - b. To deny pre-accreditation
    - c. Notice of final pre-accreditation action to third parties
  3. Regard for decisions of states and other accrediting agencies
  4. Other Matters
- III I. Renewal of accreditation or pre-accreditation status ..... G-36
1. Renewal of accreditation is required every three to five years, as determined by the Board.

2. The institution's/program's accreditation is maintained while it is undergoing the re-accreditation process.

### III J. Actions/Decisions of MEAC Regarding Continuing Accreditation

and/or Re-Accreditation ..... G-37

1. MEAC may at its discretion conduct special evaluations or site visits
2. MEAC may require an institution/program to show cause why accreditation should not be withdrawn
3. MEAC requires institutions/programs to come into compliance within a specified time period
4. MEAC will take adverse action when not in compliance

### III K. Adverse Actions: Suspension or Revocation of Accreditation..... G-38

1. Reasons for taking adverse action
2. Re-applying for accreditation after adverse action

### III L. Relinquishment of Accreditation ..... G-39

### III M. Approval for Substantive Changes..... G-40

1. Substantive changes must not adversely affect compliance with standards
2. Application is required for substantive changes
3. Substantive changes must receive MEAC approval prior to be included in accreditation
4. Substantive changes to both institutions and programs requiring *prior approval* by MEAC
5. Substantive changes to institutions requiring *prior approval* by MEAC
6. Substantive changes requiring a site visit
7. Four or more substantive changes in a year require new accreditation review
8. Substantive changes in a MEAC accredited program (programmatic accreditation)
9. Procedures for substantive change applications
10. More information regarding substantive changes, policies, and procedures
  - a. Change of established mission, purpose, or program objective
  - b. Change in legal status, ownership, or form of control of the institution
  - c. Changes in curriculum
  - d. Change of location
  - e. The addition of a new branch campus
  - f. Addition of an additional location providing at least 50% of an educational program

- g. Entering into a contract with another institution or organization that will provide more than 25% of one or more of the educational programs
- h. Acquisition of any other institution or any program or location of another institution
- i. Addition of a permanent location at a site at which the institution is conducting a teach-out for another institution
- j. Decision to participate in Title IV HEA programs

III N. Teach-out Agreements ..... G-46

- 1. Teach-out Plans
- 2. Teach-out Agreement
- 3. Closure of a MEAC accredited institution

III O. Due process and appealing MEAC decisions ..... G-50

- 1. MEAC policies and procedures to provide institutions/programs with due process
- 2. Institution/program right to appeal adverse actions
- 3. Description of the Appeals Process

III P. Complaints against an Institution/program ..... G-55

- 1. MEAC will review in a timely manner any complaint
- 2. Contents of a complaint
- 3. Process for handling complaints
- 4. Resolution of the complaint

III Q. Complaints about MEAC ..... G-59

- 1. MEAC will act on any written, signed complaints made against MEAC itself
- 2. Process for handling complaints

IV. Ethics Policies ..... G-60

- IV A. Compliance with Laws and Regulations
- IV B. Conflicts of Interest
- IV C. Confidentiality
- IV D. Giving and Receiving Gifts
- IV E. Political Activity
- IV F. Personal Conduct
- IV G. Use and Protection of MEAC Assets
- IV H. Accounting and Financial Reports
- IV I. Compliance



# MEAC Policies and Procedures

## I. Board of Directors

MEAC by-laws describe criteria for board membership, elections, meetings and other policies that are relevant to the Board of Directors. The following policies and procedures provide further clarification.

### A. Members of MEAC Board of Directors

#### 1. Composition

- a) The MEAC Board of Directors has responsibility for governance and all final accreditation decisions for both institutions and programs, and therefore includes practitioners (midwives), educators, academic and administrative personnel.
- b) No less than one-seventh of the members of the Board shall be members of the public and, to qualify as such, must not be an employee, member of the governing board, owner, or shareholder of, or consultant to, an institution or program that either is accredited or pre-accredited by MEAC or has applied for accreditation or pre-accreditation; a member of any trade association or membership association related to, affiliated with, or associated with MEAC; or a spouse, parent, child or sibling of an individual associated with, affiliated with, or related to MEAC or to MEAC institutions or programs or other associated, affiliated, or related organizations.

#### 2. Nominations

- a) Nominees shall be solicited from the general public, from the midwifery community, and from midwifery educational programs.
- b) Nominees must have the endorsement of at least two professional colleagues. If the prospective Board member is a midwife or midwifery educator, endorsements must be from professional colleagues who have worked with her in relevant committees, boards or organizations. If the prospective Board member is a public member, endorsements must be from colleagues who have worked with her in another organization.
- c) The nominee will review MEAC documents and consider Board member responsibilities and expectations.
- d) Prior to agreeing to run for election to the board, the nominees will provide MEAC with a résumé and letters of endorsement, including phone numbers, from the two professional references.

#### 3. Elections

Elections will proceed as stated in the by-laws.

#### 4. Responsibilities

Once elected to the Board, each Board member is expected to:



- a) Travel to and participate in MEAC Board meetings. In the event of two or more unexcused absences from Board and/or Committee meetings the Executive Committee may request the resignation of the Director.
- b) Support the finances of MEAC by assisting with fund raising.
- c) Participate in the work of at least one MEAC committee during a given year.
- d) Familiarize themselves with all MEAC documents and the accreditation processes utilized by MEAC.
- e) Participate in accreditation activities; including serving as Independent Board Reviewers (see section 6.a.ii).
- f) MEAC Board Members are responsible for making final accreditation decisions.
- g) Comply with the ethics policies of MEAC (Section IV).
  - i) In particular, Directors must avoid any interest, influence, or relationship that might conflict, or appear to conflict, with the best interests of MEAC, or that might affect judgment or loyalty. Directors must promptly disclose any situation where an actual or potential conflict may exist, and remove themselves from negotiations, deliberations or votes involving the conflict.
  - ii) Directors must also agree to maintain the confidentiality of all documents and information acquired as part of an institution's/program's accreditation process. Directors will not discuss the accreditation matters related to an institution/program outside of the normal MEAC meetings unless such discussion is necessary to conduct MEAC business effectively. Any restrictions on the provision of otherwise confidential information may be superseded by the requirements of government agencies or national accreditation regulatory agencies.

## B. The Executive Committee

### 1. Composition

The Executive Committee shall be the Officers, the Executive Director in an ex-officio capacity, and such other members as determined by the Board. It shall be the key planning and coordinating body of MEAC.

### 2. Elections

Officers shall be elected by the Board itself according to the by-laws.

### 3. Responsibilities

The Executive Committee shall act on behalf of the Board in the periods between meetings of the Board on all matters within the authority of the Board, except as to the following matters:

- a) The amendment, altering or repeal of the By-laws or the adoption of new By-laws;
- b) Electing, appointing or removing any member of any Committee or any Director or Officer of MEAC;
- c) Amending or restating the Articles of Incorporation, adopting a plan of merger or adopting a plan of consolidation with another corporation;
- d) Authorizing the sale, lease, exchange or mortgage of all or substantially all of the property and assets of MEAC;
- e) Authorizing the voluntary dissolution of MEAC or adopting a plan for the distribution of the assets of MEAC;
- f) Changing decisions of the Board regarding the accreditation status of an institution or program, and;
- g) The amendment or repeal of any resolution of the Board which by its terms shall not be so amendable or repealable.

## II. Administration

### A. Personnel

MEAC will employ adequate administrative staff to carry out its accrediting responsibilities and manage its finances effectively.

If for any reason, there should be insufficient funds to maintain staff, these administrative tasks will be carried out by the executive officers of the MEAC Board.

#### 1. Executive Director

- a) The Executive Director is generally responsible for the management of the organization, including but not limited to, overseeing accreditation activities, representing the organization to the public and other agencies, managing the organization's finances, providing support to the board of directors, and supervising other staff.
- b) The Executive Committee of the Board of Directors supervises the Executive Director.
- c) The Executive Director should have the following qualifications:
  - Ability to meet the requirements of the job description
  - Sound reputation for ethical conduct
  - Commitment to the goals and purposes of MEAC
- d) Recruitment and selection
  - The Board will establish a hiring committee.
  - All interested applicants must submit a résumé and at least two professional references to this committee. Applicants are expected to review all of MEAC's current documents and the job description for Executive Director.
  - Applicants will be interviewed.
  - The hiring committee will select the most suitable applicant for the position and present their recommendation to the Board of Directors for approval.
- e) All relevant parties will sign an employment contract.

#### 2. Other administrative staff

- a) Other administrative staff may be hired as needed.
- b) Responsibilities may include reception, correspondence and clerical support, bookkeeping, and other services as delegated by the Executive Director.
- c) The Executive Director is responsible for hiring and supervision.

#### 3. Conflict of Interest

Administrative staff, consultants and other agency representatives are required to disclose any potential conflict of interest as described in the organization's ethics policies (Section IV).

4. Confidentiality

Administrative staff, consultants, and other agency representatives will not discuss the accreditation matters related to an institution/program outside of the normal MEAC meetings unless such discussion is necessary to conduct MEAC business effectively. (Section IV). Any restrictions on the provision of otherwise confidential information may be superseded by the requirements of government agencies or national accreditation regulatory agencies.

## II. Administration

### B. Financial Management

1. Budget
  - a) The organization's financial management will be guided by an annual budget that is developed without review by, or consultation with, any other entity or organization.
  - b) The Treasurer, with the input and assistance of the Executive Director and Board, will generate the annual budget which will be presented to the Board for approval at the Board meeting prior to the onset of the coming fiscal year.
2. Fees
  - a) Fees shall be based on projected MEAC operating costs.
  - b) The Treasurer, in development of the annual budget, will review fees and propose changes to fees to the Board for approval.
  - c) Once fees are approved, the Executive Director will notify all member-programs within 30 days of any changes in fees and the schedule for payment in the upcoming year.
3. Financial reports
  - a) The Treasurer and the Executive Director will meet periodically to review the agency's financial situation.
  - b) The Treasurer will review semi-annual financial reports and present them to the Board.
4. Legal obligations and record keeping
  - a) The Treasurer works with the Executive Director to assure that all legal obligations are fulfilled regarding MEAC's financial documentation and reporting.
  - b) MEAC will maintain records in accordance with its Record Retention Policy.

## II. Administration

### C. Accreditation Records, Publications and Notification Responsibilities

#### 1. Types of documents that must be submitted to USDE

MEAC will fulfill its obligations to ensure appropriate documentation, records and reports of its financial and accreditation activities by maintaining the following documents and submitting them to the Secretary of the U.S. Department of Education (USDE) and to the public upon request:

- a) Notice of final accrediting actions with respect to accredited institutions/programs
- b) A copy, updated annually, of MEAC's directory of accredited/pre-accredited institutions/programs
- c) Information, when requested by the Secretary, regarding an accredited/pre-accredited institution's Title IV, HEA program responsibilities and eligibility
- d) The name of any institution/program accredited by MEAC that MEAC has reason to believe is failing to meet its Title IV, HEA program responsibilities or is engaged in fraud or abuse, and the reason for MEAC's concern. This includes institutions that MEAC has found to be out of compliance regarding the assignment of credit hours per the requirements of 34 CFR 602.24(f).
- e) MEAC will monitor the headcount enrollment of each institution it has accredited that offers distance education or correspondence education. If any such institution has experienced an increase in headcount enrollment of 50% or more within one institutional fiscal year, MEAC will report that information to the USDE within 30 days of acquiring such data.
- g) MEAC will notify the USDE when any change in policies, procedures, or accreditation or pre-accreditation standards might alter the agency's scope of recognition.

#### 2. In the event that MEAC contacts the USDE for reasons outlined in II.C.1.c. or II.C.1.d. above, then MEAC must provide for a case by case review of the circumstances, and for the confidentiality of that contact. If USDE specifically requests it, MEAC must consider the contact to be confidential.

#### 3. Accreditation decisions requiring written notice to USDE, relevant state and accrediting agencies and the public:

MEAC will provide written notice of the following types of decisions to the Secretary, the appropriate State licensing or authorizing agency, the appropriate accrediting agencies, and the public no later than 30 days after it makes the decision:

- a) A decision by MEAC to award initial accreditation/pre-accreditation to an institution/program
- b) A decision to renew an institution's/program's accreditation/pre-accreditation.

4. Adverse decisions requiring notice to USDE, appropriate state and accrediting agencies  
MEAC will provide written notice of the following types of decisions to the USDE, the relevant state licensing/authorizing agency, and the relevant accrediting agencies at the same time it notifies the institution/program of the decision, but no later than 30 days after it reaches any of the following decisions:
  - a) A final decision to place an institution/program on probation or an equivalent status
  - b) A final decision to deny, withdraw, suspend, revoke, or terminate the accreditation/pre-accreditation of an institution/program.
  - c) A final decision to take other adverse action, as defined by MEAC, not listed in 3b above.
5. MEAC will provide written notice to the public of the adverse decisions listed in II C 4 within 24 hours of its notice to the institution/program.
6. Notice to USDE, relevant state licensing/authorizing and accrediting agencies and the public if an institution voluntarily relinquishes or lapses accreditation  
MEAC will notify the USDE, the relevant state licensing/authorizing agency, accrediting agencies, and the public if an accredited/pre-accredited institution/program:
  - a) Decides to voluntarily relinquish or withdraw from accreditation/pre-accreditation, within 30 days of receiving notification from the institution/program that it is withdrawing voluntarily from accreditation/pre-accreditation, or
  - b) Lets its accreditation/pre-accreditation lapse, within 30 days of the date on which accreditation/pre-accreditation lapses.
7. Summary of findings to USDE, appropriate state licensing/authorizing agency and the public after an adverse decision:  
For any decision to place an institution or program on probation, deny, withdraw, suspend, revoke, or terminate the accreditation or pre-accreditation of an institution of a program, MEAC will make available to the USDE, the appropriate state licensing/authorizing agency, and the public, no later than 60 days after the decision, a brief statement summarizing the reasons for the its decision and the official comments that the affected institution or program may wish to make with regard to that decision, or evidence that the affected institution has been offered the opportunity to provide official comment.
8. Sharing information with other appropriate agencies:  
MEAC will routinely share with other appropriate recognized accrediting agencies and State agencies information about the accreditation/pre-accreditation status of an institution/program and any adverse actions it has taken against an accredited/pre-accredited institution/program.
9. Providing opportunities for third party comment:

In providing public notice that an institution/program subject to its jurisdiction is being considered for accreditation/pre-accreditation, MEAC will provide an opportunity for third-party comment in writing concerning the institution's/program's qualifications for accreditation, and will allow sufficient time for third parties to provide those comments.

10. Notification of proposed changes in administrative policies and procedures to institutions/programs:

MEAC will notify all institutions/programs, whether accredited or in process of accreditation, of proposed changes in administrative policies and procedures that would affect the institutions'/programs' ability to comply with MEAC standards. New policies and procedures will be implemented on the date established by the Board at the time they are approved.

11. Public notice of proposed new or revised standards or criteria

MEAC will provide advance public notice of proposed new or revised standards or criteria, giving interested parties, including institutions/programs, adequate opportunity to comment on proposed changes prior to their adoption.

- a) The MEAC Board of Directors, after considering written comments and oral presentations, will take action on proposed accreditation standards to adopt without changes, to adopt with changes or modifications, to defer action until further study and consideration is given, or to reject the proposed standards outright.
- b) When any new standards are adopted, the Board will set the date they will become effective, providing a reasonable time for compliance by accredited/pre-accredited institutions/programs.

12. MEAC maintains and makes publicly available the following written materials:

- a) Each type of accreditation/pre-accreditation granted by the agency
- b) Its procedures for applying for accreditation/pre-accreditation
- c) The criteria and procedures used by the agency for determining whether to grant, reaffirm, reinstate, deny, restrict, revoke, place an institution or program on probation, or take any other action related to each type of accreditation/pre-accreditation that the agency grants
- d) The names, academic and professional qualifications, and relevant employment and organizational affiliations of the members of the agency's policy and decision-making bodies as well as the agency's principal administrative staff
- e) The institutions/programs that the agency currently accredits or pre-accredits and the date when the agency will review or reconsider the accreditation/pre-accreditation of each institution/program

13. MEAC provides for the public correction of incorrect or misleading information released by an accredited/pre-accredited institution/program about:

- The accreditation status of an institution/program
- The contents of reports of site team visitors



- The agency's accrediting decisions with respect to the institution/program
14. MEAC maintains complete and accurate records of all decisions made throughout a program's or institution's affiliation with MEAC regarding the accreditation and pre-accreditation of that institution or program in accordance with its Record Retention Policy including but not limited to:
    - a) Pre-accreditation or accreditation determinations and substantive changes, including all correspondence that is significantly related to those decisions.
    - b) Institution's/program's most recent SER
    - c) Site visit reports
    - d) Institution/program responses to site visit reports
    - e) Annual reports
    - f) Any written complaint records since last accreditation review
    - g) Special reviews and reports
    - h) Information related to the institution's Title IV responsibilities and eligibility, including record of compliance based on most recent student loan default rate data provided by the Secretary, the results of financial or compliance audits, program reviews, and any other information that the Secretary may provide to MEAC.
  15. MEAC maintains records of the following administrative activities:
    - a) Copy of minutes of all MEAC Board meetings, including proposals and decisions in MEAC's policies, procedures or accreditation standards in accordance with its Records Retention Policy.
    - b) Documents related to approval of continuing education programs in accordance with its Records Retention Policy.
    - c) Correspondence with state regulatory agencies in accordance with its Records Retention Policy.
    - d) MEAC's directory of accredited and pre-accredited institutions and programs.

### III. Accreditation Activities

#### A. Scope of Accreditation Activities

1. Geographic scope of accreditation activities

MEAC accredits and/or pre-accredits midwifery institutions and/or programs in the United States.

United States means a State of the Union, the Commonwealth of Puerto Rico, the District of Columbia, Guam, the United States Virgin Islands, the Commonwealth of the Northern Mariana Islands, the Republic of the Marshall Islands, the Federated States of Micronesia, and the Republic of Palau. The latter three are known as the Freely Associated States.

2. Types of Institutions and Programs Accredited

MEAC accredits and/or pre-accredits the following types of midwifery institutions and programs, including but not limited to:

- Freestanding schools or colleges of midwifery offering certificate and/or degree programs
- Certificate and/or degree programs of midwifery within public or private institutions accredited by another agency recognized by the U.S. Department of Education (USDE)
- Freestanding schools or colleges or programs within accredited institutions that offer distance courses or correspondence courses and/or structured apprenticeships as part of the midwifery curriculum, leading to a certificate or degree in midwifery

3. Institutional and Programmatic Accreditation

MEAC offers both institutional and programmatic accreditation.

a) Institutional accreditation refers to the review and approval of an entire institution, including all of its financial and management aspects. MEAC institutional accreditation is limited to independent or freestanding educational entities that primarily provide midwifery education.

If the institution also offers other educational programs beyond the scope of midwifery expertise, the institution must be accredited by another agency recognized by the USDE and the midwifery educational program can then apply for MEAC programmatic accreditation.

b) Programmatic accreditation refers to the review and approval of a midwifery program that legally functions as part of an accredited institution with a scope larger than midwifery. In order to apply for program accreditation, the program must be housed within an institution already accredited by an agency recognized by the USDE.

4. Types of Certificates and Degrees Covered

MEAC accredits and pre-accredits institutions and programs of midwifery leading to certificates and/or degrees including associate, baccalaureate, and masters and doctoral degrees.

## 5. Accreditation and Pre-accreditation

MEAC offers both accreditation and pre-accreditation.

- a) Accreditation applies to those institutions and programs that have completed an initial or re-accreditation process, and the Board of Directors has determined them to be in compliance with MEAC standards as described in III.B and III.C.
- b) Pre-accreditation applies to those institutions/programs that are progressing towards initial accreditation and that the Board of Directors has determined appear likely to achieve accreditation within one year after gaining pre-accreditation status. The duration of pre-accreditation status may be extended by vote of the Board.

Pre-accreditation does not signify that an applicant institution/program is accredited, nor is it a guarantee of eventual accreditation.

## 6. Distance or Correspondence Education

MEAC accredits institutions and programs that may include distance education and correspondence education components, applying the same standards, criteria, policies and procedures. Board member and Accreditation Review Committee training and site visitor tools are designed to ensure consistency in the application of MEAC standards, criteria, policies and procedures when evaluating and making decisions regarding distance and correspondence education offerings.

### III. Accreditation Activities

#### B. Standards for MEAC Accreditation

##### 1. U.S. Department of Education Requirements

Standards, evaluation criteria, policies and procedures established by MEAC for the accreditation of institutions/programs will address the requirements of the USDE, including but not limited to:

- a) Success with respect to student achievement in relation to the institution's mission, which may include different standards for different institutions or programs, as established by the institution, including, as appropriate, consideration of course completion, state licensing examination, and job placement rates.
- b) Curricula
- c) Faculty
- d) Facilities, equipment, supplies and other resources
- e) Fiscal and administrative capacity
- f) Student support services
- g) Recruiting and admissions practices, academic calendars, catalogs, publications, grading, and advertising (student affairs)
- h) Measures of program length and the objectives of the degrees or credentials offered
- i) Record of student complaints
- j) Record of compliance with the institution's program responsibilities under Title IV of the Higher Education Act

##### 2. Nationally-accepted Criteria for Midwifery Education

Standards, evaluation criteria, policies and procedures established by MEAC for the accreditation of institutions/programs will be based on the internationally accepted criteria developed by the International Confederation of Midwives and the nationally accepted criteria developed by the Midwives Alliance of North America and the North American Registry of Midwives, upon which such agencies as educators, educational institutions, licensing bodies, professional organizations and employers in the profession of midwifery rely.

##### 3. Standards for Degree-Granting Institutions and Programs

Standards, evaluation criteria, policies and procedures established by MEAC for the accreditation of degree-granting institutions and programs will take into account generally accepted standards in higher education.

##### 4. Systematic Review of Standards

MEAC maintains a systematic program of review to determine if its standards are adequate to evaluate the quality of the education or training provided by the institutions and programs it accredits and relevant to the educational or training needs of its students.

- a) This program of review is comprehensive, occurs at regular, yet reasonable intervals or on an ongoing basis, examines each of MEAC's

standards and the standards as a whole, and involves all the agency's relevant constituencies in the review and affords them a meaningful opportunity to provide input for the review.

b) All of the agency's relevant constituencies, including but not limited to representatives of midwifery professional organizations and certifying bodies, school directors and faculty, students and graduates, will be given meaningful opportunities to provide input for the review.

c) If the agency determines, at any point during its systematic program of review, that it needs to make changes to its standards, the agency must initiate action within 12 months to make the changes and must complete that action within a reasonable period of time.

d) MEAC will provide notice to all of the agency's relevant constituencies, and other parties who have made their interest known to the agency, of the changes to its standards that the agency proposes to make, and provide reasonable time for comment.

#### 5. Changing the Standards

As a result of its program of review, MEAC will adopt necessary changes to its standards, evaluation criteria, policies and procedures to ensure that they provide a valid measure and consistent basis for determining the educational quality of different institutions/programs.

a) Proposed changes to MEAC's standards, evaluation criteria, policies and procedures that would affect institutions'/programs' ability to comply with MEAC standards will be sent to all affected parties in advance of being approved by the Board, with a call for comment. This does not preclude the ability of the Executive Committee to make interim decisions and take interim actions in urgent situations.

b) The MEAC Board of Directors, after considering written comments and oral presentations, will take action on proposed accreditation standards to either approve, modify, reject, or defer action until further study and consideration is given.

c) When new standards or policies and procedures are approved, all affected institutions/programs will be notified of these changes in writing. The effective date will be determined by the Board and published with the mailing.

d) MEAC will submit to the Secretary any proposed changes in MEAC's policies and procedures, or accreditation standards that might alter the agency's scope of recognition or compliance with the requirements of the USDE.

### III. Accreditation Activities

#### C. Basic Requirements for Accreditation

##### 1. MEAC Standards and criteria

MEAC will only accredit institutions/programs that meet the standards established by MEAC, using criteria for evaluating compliance with standards that includes, but is not limited to:

- a) The educational institution/program maintains and demonstrates clearly specified educational objectives consistent with its mission and appropriate in light of the degrees or certificates it awards
- b) The educational institution/program defines and demonstrates its success in achieving its stated objectives in relation to successful completion of course work; student evaluations; number of graduates; licensing and certification of its graduates; and postgraduate practice
- c) The educational institution/program maintains degree and certificate requirements that at least conform to commonly accepted standards and comply with MEAC criteria.

##### 2. Legal authority under applicable state law

MEAC will only accredit institutions/programs that are legally authorized under applicable state law to provide a program of education beyond the secondary level. Each institution/program will be required to submit evidence of its authority to provide the program of education if required by state laws.

##### 3. Standing with other state agencies and accrediting agencies

All institutions/programs seeking accreditation must supply MEAC with a list of other accreditors and agencies that have authority to regulate the program and these agencies will be notified of the status of the institution/program as regards MEAC.

##### 4. Pre-Accreditation Training Requirements

All institutions and programs applying for initial accreditation must attend a MEAC pre-accreditation training, before MEAC accepts the application. This training is offered as a MANA pre-conference workshop; or privately when scheduled in advance. If the period between the training and the submission of the pre-accreditation or accreditation application exceeds two years, it will be required that the MEAC accreditation workshop be repeated.

All institutions and programs applying for re-accreditation must schedule a training session with MEAC staff before MEAC accepts the application.

### III. Accreditation Activities

#### D. Evaluation and Decision-Making Bodies

1. Composition of evaluation and decision-making bodies

MEAC accredits both institutions and programs, and therefore includes practitioners, educators, academic and administrative personnel in evaluation and decision-making bodies. MEAC's evaluation bodies are known as Accreditation Review Committees (ARCs) and the decision making body is the Board of Directors.

2. Conflicts of Interest

Members of evaluation and decision-making bodies must agree to declare all conflicts of interest and remove themselves from proceedings accordingly. (Section IV)

3. Confidentiality

Members of evaluation and decision-making bodies must agree to honor the confidentiality of all interactions with the institution/program. (Section IV)

4. Training

Structured training is provided for all members of evaluation and decision-making bodies prior to accreditation cycles on their responsibilities, as appropriate for their roles, regarding the agency's standards, policies, and procedures, to conduct its on-site evaluations, apply or establish its policies, and make its accrediting and pre-accrediting decisions, including, their responsibilities regarding distance education and correspondence education.

5. Evaluation: Accreditation Review Committees

a) Responsibilities of the Accreditation Review Committees (ARC)

Accreditation Review Committees are responsible for the evaluation of applicant institutions/programs, including review of the self-evaluation report and other documentation provided, conduct of site visits and interviews, and preparation of the ARC report and recommendations to the Board of Directors.

b) Selection of Accreditation Review Committees

MEAC makes regular announcements to the wider midwifery education community of the need for qualified volunteers to serve on ARCs. ARC members are appointed by the Board President or by the Executive Director under the President's supervision if they meet the stated qualifications.

c) Qualifications of Accreditation Review Committee Members

- i. ARC members are competent and knowledgeable individuals; qualified by education and experience in their own right and trained by the agency. They must have demonstrated experience and/or ability to evaluate institutions/programs as educators, clinicians, academic or administrative personnel, or they must be similarly qualified.

- ii. Potential ARC members must provide MEAC with a resume to document their qualifications and experience.
- iii. Potential ARC members must provide at least two professional references.
- iv. Potential ARC members must review and sign MEAC's Ethics Policy and conflict of interest declaration.
- v. Applicant institutions/programs have the right to request alternate ARC appointees.

d) Evaluation of Accreditation Review Committee members

Evaluation of ARC member performance is systematically collected and reviewed.

- i. The Executive Director regularly reviews evaluations of ARC member performance, including self-evaluation, evaluation from the midwifery program (site visitors); and evaluations from others on the ARC and staff.
- ii. In the event that evaluations include reports of inappropriate conduct at a site visit or conflict with other ARC members, the MEAC Executive Director may recommend to the Executive Committee that the person no longer serve in these capacities. This decision will be made using consensus among those Executive Committee members with no conflict of interest.

6. Decision-Making: Board of Directors

a) Responsibilities of the MEAC Board of Directors

- i. The Board of Directors is supplied the accreditation process material, including self-evaluation reports submitted by the institution/program, site visit reports, Accreditation Review Committee reports, responses from the institution/program, and any other relevant material, including monitoring and compliance reports, so that it may conduct its own review
- ii. Two board members are assigned as Independent Board Reviewers to conduct an independent review of the materials described above, present their findings, and make recommendations to the board regarding decisions to be made.
- iii. All board members are provided access to these materials electronically prior to the board meeting in which an accreditation decision will be made, except those recused from a decision.
- iv. The Accreditation Review Committee will be represented at the decision-making meeting and the board will have an opportunity to ask questions of the committee representative(s) before making a decision.
- v. The Board of Directors makes all final decisions regarding accreditation status.



### III. Accreditation Activities

#### E. Accreditation Process for Determining Compliance with MEAC Standards

##### 1. General guidelines for the accreditation process

- a) MEAC consistently applies and enforces standards that respect the stated mission of the institution of higher education, including religious missions, and that ensure that the courses and programs of instruction, training, or study offered by the institution of higher education, including distance education or correspondence courses or programs, are of sufficient quality to achieve, for the duration of the accreditation period, the stated objective for which the courses or the programs are offered.
- b) All institutions/programs that apply to MEAC for accreditation/pre-accreditation are systematically reviewed to determine if they are in compliance with MEAC's standards.
- c) Standardized evaluation processes and tools are used to ensure that the criteria are applied consistently to all institutions/programs.
- d) No school may declare their intention to become MEAC accredited or claim to have submitted an application for accreditation until MEAC has approved the Part 1 Preliminary Application. When a school has submitted the Part 1 Preliminary Application AND that application has been approved by MEAC, the school will be informed that they can use the following statement on their website, catalog and other marketing materials. *“Our preliminary application for accreditation by MEAC was accepted on (date). The accreditation process generally takes two years or more from this date to complete successfully. If we are approved, only students enrolled at the time accreditation is approved and those enrolling after that date will be eligible to graduate from a MEAC-accredited program. Accreditation is not retroactive. For further information, contact MEAC at ....”*

##### 2. Overall timeframe and extensions

- a) The accreditation process will follow an established timeline. For more information see MEAC Accreditation Handbook Section D - Process.
- b) On one occasion during this process, the institution/program may request a 30-day extension on any deadline, accompanied by a fee. The Executive Director will notify the institution/program and the ARC of the new timeline, and note it in the file. Under exceptional circumstances, a second 30-day extension may be granted by approval of the ARC. If the request is denied the fee is returned minus the processing fee.

### III. Accreditation Activities

#### F. Decision-making Regarding Accreditation

##### 1. General guidelines for accreditation decision-making

- a) All decisions regarding accreditation status are based on published standards, criteria, policies and procedures.
- b) MEAC takes into account decisions made by other accrediting agencies and state regulatory agencies when making an accreditation decision.
- c) When a decision has been made, institutions/programs will receive a detailed written report that clearly identifies any deficiencies in the institution's or program's compliance with the MEAC's standards.

##### 2. Actions and decisions which may be made regarding initial accreditation or renewal of accreditation

- *Granting*, initial or renewal of accreditation of the institution/program for three to five years. An institution or program will be granted accreditation if MEAC finds it to be in compliance with all MEAC standards and policies.
- If accreditation is granted, MEAC will send the institution/program a copy of its final report and a Certificate of Accreditation. The Certificate is accompanied by notification of applicable sustaining fees due in the coming year.
- *Granting with compliance reporting required*, initial or renewal of accreditation of the institution/program for three to five years. Accreditation may be granted with compliance reporting required if MEAC finds the institution/program to be substantially in compliance with MEAC standards and policies, but with one or more areas of non-compliance that must be corrected within a specified time period. Compliance reports are the usual means of documenting such correction. If compliance reporting is required, the Board will establish the due date for the school to submit its report(s).
- MEAC may also require monitoring reports for reasons, including but not limited to, tracking progress toward compliance and/or verifying continued compliance.
- MEAC will require the institution/program to take appropriate action to bring itself into compliance within a specified time period. If the institution or program does not bring itself into compliance within the specified period, MEAC will take immediate adverse action unless it, for good cause, extends the period for achieving compliance.

That time period may be as short as 30 days, but will not exceed:

- Twelve months, if the affected program(s) is less than one year in length

- Eighteen months, if the affected program(s) is at least one year, but less than two years in length
- Two years, if the affected program(s) is at least two years in length
- Granting *probationary accreditation*. A program or institution may be granted probationary accreditation if MEAC finds significant areas of non-compliance, for example, those that might jeopardize the capability of the program to provide acceptable educational experiences for students or the program or institution's financial viability. A program may also be placed on probation because the program has not corrected deficiencies noted earlier by MEAC.
  - The areas of non-compliance leading to probationary status must be corrected within a specified time period. That time period may be as short as 30 days, but will not exceed:
    - Twelve months, if the affected program(s) is less than one year in length
    - Eighteen months, if the affected program(s) is at least one year, but less than two years in length
    - Two years, if the affected program(s) is at least two years in length
  - The decision to place a program or institution on probation is not subject to appeal.
  - If the areas of non-compliance are corrected timely, MEAC will remove the probationary status from the grant of accreditation.
  - If the areas of non-compliance are not corrected within the specified time period, MEAC will proceed with withdrawing accreditation, unless MEAC extends the period for achieving compliance for good cause.
  - MEAC will notify applicable third parties, regulatory agencies and the public of the Board's decision to place a program/institution on probation. (see Section II.C.)
- *Denying accreditation or re-accreditation.*

An institution's/program's application for an initial or renewal grant of accreditation will be denied if MEAC believes that the institution/program has had ample opportunity to demonstrate compliance with the standards and policies but has failed to demonstrate substantial compliance.

- MEAC will send a letter of denial of accreditation to the institution/program, including its reasons for denial, procedures for appeal, timelines and applicable fees.
- An institution/program has the right to appeal the decision under the rules of the appeal process. *See III.O Due Process and*

*Appealing MEAC Decisions and MEAC Accreditation Handbook  
Section E: Fees.*

- An institution/program denied accreditation may not re-apply for accreditation until a period of one year has elapsed since MEAC's final decision. The applicant institution/program will be treated procedurally and substantively as if it is a new applicant for accreditation.
  - *Deferring* a decision regarding accreditation until conditions are met. A deferral extends considerations of the institution's/program's application for an initial or renewal grant of accreditation. Typically, a deferral occurs when the Board does not have sufficient information upon which to make an accreditation decision, and the deferral will be for a limited period, generally no more than 6 months.
    - A deferral is not an adverse action and is not subject to appeal.
    - If a program/institution is accredited by MEAC at the time of the deferral, the period of accreditation may be extended until the end of the deferral period.
    - If accreditation is deferred, MEAC will notify the applicant in a letter detailing the decision of deferral and any conditions including the final time limit within which the applicant must respond.
    - After reviewing the school's response, the ARC will write a final report summarizing the institution's/program's compliance with each standard, strengths, and areas for further improvement. The ARC Report will be forwarded to the Board for a final decision to grant or deny accreditation.
  - A *final* accrediting action means a final determination by MEAC regarding the accreditation status of an institution/program. With the denial of accreditation or other adverse action, MEAC will make a *final* decision when the applicant has failed to notify their intent to appeal, or when the appeal process is complete and the Board has considered the findings of the Ad Hoc Appeal Committee (See Section O. Due Process and Appealing MEAC decisions.) A *final* accrediting action is not subject to appeal within the agency.
  - MEAC will notify applicable third parties and regulatory agencies and the public of the Board's *final* decision (see Section II.C.)
3. Regard for decisions of states and other accrediting agencies
- a) MEAC does not renew the accreditation of an institution/program during the period in which the institution/program:
- Is the subject of an interim action by a recognized institutional accrediting agency potentially leading to the suspension, revocation, or termination of accreditation,

- Is the subject of an interim action by a state agency potentially leading to the suspension, revocation, or termination of the institution's legal authority to provide postsecondary education,
  - Has been notified of a threatened loss of accreditation, and the due process procedures required by the action have not been completed, or
  - Has been notified of a threatened suspension, revocation, or termination by the State of the institution's legal authority to provide post-secondary education, and the due process procedures required by the action have not been completed.
- b) In considering whether to grant initial or renewal of accreditation MEAC takes into account actions by:
- Recognized institutional accrediting agencies that have denied accreditation to the institution, placed it on public probationary status, or revoked status
  - State agencies that have suspended, revoked or terminated the institution's legal authority to provide post-secondary education
- c) When MEAC confers accreditation on an institution/program notwithstanding any adverse action by another accrediting agency, it will provide the Secretary of the Department of Education, and other involved accrediting and state agencies with an explanation of the reasons for its actions within 30 days including:
- A detailed description of how the institution/program demonstrates consistency with MEAC's accreditation standards
  - Why the previous action by the accrediting or state agency does not preclude MEAC's granting of status
- d) MEAC will promptly review its accreditation of any institution/program to determine whether it will take adverse action if:
- Another recognized accrediting agency takes an adverse action against a MEAC accredited institution
  - Another recognized accrediting agency places a MEAC accredited institution on public probationary status
  - Another recognized accrediting agency takes an adverse action for reasons associated with the overall institution rather than the specific program
  - A recognized program accrediting agency takes an adverse action against a MEAC accredited program
  - A recognized program accrediting agency places a midwifery program on public probation
  - The institution is the subject of interim action potentially leading to the suspension, revocation, or termination of accreditation or pre-

accreditation by a recognized accrediting agency or a state regulatory agency

- e) If an interim review is required (as described above), the MEAC Board of Directors will appoint a review committee which will:
- Solicit an explanation from the agency
  - Review the MEAC conferred status
  - Recommend to MEAC Board of Directors whether adverse action should be taken
  - Share information about the status of the institution/program with recognized accrediting agencies, state agencies and the U.S. Department of Education.

4. Other matters

The Board may, at its discretion, consolidate two or more actions involving the same school or affiliated schools that are pending before the Board.

### III. Accreditation Activities

#### G. Maintaining Accreditation Status

##### 1. Reporting and financial responsibilities

Institutions/programs are required to submit annual reports:

- a) Detailing the current student population, *and including the growth of programs at institutions experiencing significant enrollment growth.*
- b) Sustaining fees, and
- c) Any reports required in a timely manner.

##### 2. Making substantive changes

Institutions/programs are required to notify MEAC before making substantive changes. Certain changes require prior approval by MEAC (see Section G, Substantive Changes for details).

##### 3. Accurate institution/program marketing materials

- a) Institutions must accurately describe all programs in its brochure and catalog, differentiating any that are MEAC accredited from those that are not.
- b) Only institutions/programs that are currently accredited/pre-accredited may say in catalogs that accreditation/pre-accreditation has been granted by the Midwifery Education Accreditation Council. Institutions/programs that elect to disclose this information must also print the current address and telephone number of MEAC. It is acceptable to print the mission and purpose of MEAC as written in the MEAC Accreditation Handbook. All MEAC accredited or pre-accredited institutions must designate their accreditation status on all student transcripts (e.g., “MEAC accredited/pre-accredited”).
- c) Advertising or promotion to the public may clarify that MEAC has been recognized by the U.S. Department of Education.
- d) If printed informational materials need correction, they must be withdrawn from circulation or the required corrections or clarifications must be attached to those materials. The institution/program will publicly correct any errors in the representation of its accreditation status, the contents of reports of site team visitors, and/or MEAC’s accrediting actions with respect to the institution/program.

##### 4. MEAC review of all reports and complaints to monitor continued compliance with standards and policies

- a) Annual reports. The Executive Director is responsible for reviewing annual reports and preparing a summary to the Board. If any of the information provided raises questions about continuing compliance, the report will be sent to the ARC for further analysis and recommendation to the Board. The Board reviews and accepts, or determines further actions, if necessary, and the school is notified.
- b) Compliance reports. The Executive Director is responsible for forwarding Compliance reports to the ARC. The ARC reviews the report and makes a

recommendation to the Independent Board Reviewers (IBR). The IBR reviews the report and makes a final recommendation to the Board. The Board reviews and accepts or determines action taken, if necessary, and the school is notified.

- c) Monitoring reports. The Executive Director is responsible for forwarding Monitoring reports to the Independent Board Reviewers (IBR). The IBR reviews the report and makes a recommendation to the Board. The Board reviews and accepts or determines action taken, if necessary, and the school is notified
- d) Third party reports. The Executive Director is responsible for reviewing third party reports and preparing a summary to the Board. If any of the information provided raises questions about continuing compliance with standards, the report will be sent to the ARC for further analysis and recommendation to the Board. The Board will review and accept, or determine further action, if necessary, and the school is notified.
- e) Substantive changes. Special evaluations or site visits are required for certain substantive changes and may be required, at MEAC's discretion, based on information gleaned that an institution/program may not be in compliance with MEAC standards or policies. The ARC will conduct these special evaluations and prepare a report and recommendation to the Board. The Board reviews the ARC report and recommendation, and determines further actions, if necessary, and the school is notified.
- f) Complaints. The Executive Director will implement the complaint process (see III.O.)



### III. Accreditation Activities

#### H. Decision-making Regarding Pre-Accreditation

1. General guidelines for pre-accreditation decision-making
  - All decisions regarding pre-accreditation status are based on published standards, criteria, policies and procedures.
2. Actions and decisions which may be made regarding pre-accreditation
  - The Accreditation Review Committee (ARC) will review the applicant's initial Self Evaluation Report (SER) and, if applicable, Additional Information Request (AIR) materials, and prepare a report with a recommendation to the Board of Directors to grant or deny pre-accreditation status.
    - i. *Granting pre-accreditation status*
      - MEAC grants pre-accreditation status to applicant Institutions/Programs that demonstrate a likeliness to gain accreditation within a specified time period, as demonstrated by their preliminary application, SER and AIR materials.
      - MEAC will provide written notice of pre-accreditation decisions to the Secretary, the appropriate State licensing or authorizing agency, the appropriate accrediting agencies, and the public in accordance with II.C.3.
      - If the institution/program is pre-accredited, it must print the USDE's definition of pre-accreditation in its brochure and catalog. Institutions/programs must include the following as an addendum to the statement described in III.E.1.d:

*“We were granted the status of pre-accreditation on (date). Pre-accreditation is defined by the US Department of Education as ‘the status of public recognition that an accrediting agency grants to an institution/program for a limited period of time that signifies that the agency has determined that the institution/program is progressing towards accreditation and is likely to attain accreditation before the expiration of that limited period of time.’ MEAC pre-accreditation status is normally limited to one year and does not signify that an applicant institution/program is accredited, nor is it a guarantee of eventual accreditation.”*
    - If pre-accreditation status is granted, the ARC will continue with the initial accreditation process.
  - ii. *Denying pre-accreditation*
    - An institution's/program's application for pre-accreditation will be denied if MEAC believes that the institution/program does not appear likely to achieve accreditation within a specified time

period, as demonstrated by their preliminary application, SER and AIR materials.

- MEAC will provide written notice of denial of pre-accreditation to the Secretary, the appropriate State licensing or authorizing agency, the appropriate accrediting agencies, and the public in accordance with II.C.4.
  - MEAC will send a denial of pre-accreditation status letter to the institution/program, including reasons for denial, procedures for appeal, timelines and applicable fees, should the institution/program decide to appeal.
  - An institution/program has the right to appeal the decision under the rules of the appeal process. *See III.O Due Process and Appealing MEAC Decisions* and *MEAC Accreditation Handbook Section E: Fees*.
  - An institution/program denied pre-accreditation may not re-apply for initial accreditation until a period of one year has elapsed since MEAC's final decision. The applicant institution/program will be treated procedurally and substantively as if it is a new applicant for initial accreditation.
3. In considering whether to grant pre-accreditation, MEAC takes into account actions by:
- Recognized institutional accrediting agencies that have denied accreditation to the institution, placed it on public probationary status, or revoked status.
  - State agencies that have suspended, revoked, or terminated the institution's legal authority to provide post-secondary education.
4. When MEAC confers pre-accreditation on an institution/program notwithstanding any adverse action by another accrediting agency, it will provide the Secretary of the Department of Education, and other involved accrediting and state agencies with an explanation of the reasons for its actions within 30 days including:
- A detailed description of how the institution/program demonstrates consistency with MEAC's accreditation standards
  - Why the previous action by the accrediting or state agency does not preclude MEAC's granting of status
5. Withdrawal of pre-accreditation status
- a) Pre-accredited institutions/programs may voluntarily withdraw their application for initial accreditation.
  - b) Upon withdrawal, the Institution/Program will lose pre-accreditation status.
  - c) If the applicant institution/program chooses to reapply for initial accreditation after withdrawal, applicant institution/program will be treated procedurally and substantively as if it is a new applicant for initial accreditation.

6. Time limit for pre-accreditation status
  - The duration of pre-accreditation status is normally one year from the time it is granted; however, an extension may be approved by Board vote.
7. Change from “pre-accreditation” to “accreditation”
  - For actions and decisions that may be made regarding initial accreditation or renewal of accreditation, see *III.F. Decision-making Regarding Accreditation*

### III. Accreditation Activities

#### I. Renewal of Accreditation

1. Renewal of accreditation is required every three to five years, or as determined by the Board.
  - a) MEAC will notify accredited institutions/programs that they must begin the process of renewing accreditation by submitting an Application to Renew Accreditation and Part I Fee. See MEAC Accreditation Handbook Section D: Process.
  - b) Accredited institutions/programs are required to submit a Self-Evaluation Report as part of the re-accreditation process. The process continues in the same manner as that for initial grant of accreditation. See MEAC Accreditation Handbook Section D: Process.
  - c) An annual report is not required during the year a school submits its SER for renewal of accreditation.
  - d) Sustaining fees are assessed every year, including the years in which re-accreditation fees are paid.
2. The institution's/program's accreditation status is maintained while it is undergoing the re-accreditation process.

### III. Accreditation Activities

#### J. Actions to address non-compliance with standards

MEAC monitors institutions/programs that have been granted accreditation through annual reports, monitoring reports, compliance reports, third party reports, and investigation of complaints. Based on information gleaned from these or other sources that indicates an institution/program may not be in compliance with MEAC standards and criteria, the following actions may be taken:

1. MEAC may at its discretion conduct special evaluations or site visits.
2. MEAC may require an institution/program to show cause why accreditation should not be withdrawn:
  - a. as a result of non-compliance with MEAC standards and criteria, or
  - b. for any of the following reasons:
    - i. the institution/program files for bankruptcy under the U.S. Bankruptcy Code
    - ii. another recognized accrediting agency places the institution/program on probation or takes adverse action
    - iii. Other changes made by the institution that are detrimental to the quality of the institution/program. Affected areas include, but are not limited to, educational purpose and objectives, management, ownership, student success in relation to mission, faculty, or facilities

If MEAC issues an order requiring the institution/program to show cause under the above policy, the institution will have the opportunity to respond to the show cause order in writing or in person at the next regularly scheduled meeting of MEAC. The MEAC Executive Committee will describe in writing to the institution the terms and conditions of the submission of the response to the show-cause order, including hearing procedures.

3. If MEAC determines that an institution/program is not in compliance with MEAC standards or criteria, it will require the institution/program to take appropriate action to bring itself into compliance within a specified time period. That time period may be as short as 30 days, but will not exceed:
  - Twelve months, if the program is less than one year in length
  - Eighteen months, if the program is at least one year, but less than two years in length
  - Two years, if the program is at least two years in length

Failure to show evidence of compliance with the standards/elements within the specified time period will immediately result in adverse action (see III.K below) unless MEAC, for good cause, extends the period for achieving compliance.

4. MEAC may place a program or institution on probation following a show cause.

### III. Accreditation Activities

#### K. Adverse Action

If it is determined that an institution/program is not in compliance with standards or criteria, MEAC will take prompt adverse action against the institution/program, unless MEAC, for good cause, extends the period for achieving compliance.

Adverse actions include: denial, withdrawal, or suspension of accreditation, or any comparable accrediting action.

##### 1. Reasons for taking adverse action

MEAC may take adverse action for any of the following reasons:

- a) An institution or program is determined to be out of compliance with standards.
- b) The institution/program has not corrected deficiencies within the specified timeframe (see III J 3 above).
- c) The institution fails to cooperate in making arrangements for a scheduled visitation.
- d) The institution fails to maintain or correct its advertising policies and practices in accordance with MEAC criteria and directives.
- e) The institution engages in unethical recruiting practices as determined by MEAC.
- f) The institution/program makes substantive changes in mission, objectives or curriculum without advance approval in writing by MEAC.
- g) The institution fails to file all documents and receive approval as required for a change in ownership or control.
- h) The institution is the subject of an interim action potentially leading to the suspension, revocation, or termination of accreditation by another recognized accrediting agency.
- i) The institution is the subject of an interim action potentially leading to the suspension, revocation, or termination of legal authority to provide education by a state agency.
- j) The institution loses its state license/authorization to operate.
- k) The institution/program fails to file its annual report or to pay promptly the annual sustaining fees, necessary visitation expenses, or other fees specified in MEAC's handbook.

##### 2. Re-applying for accreditation after adverse action

An institution/program that has had its accreditation suspended or revoked may not re-apply for accreditation until a period of one year has elapsed since MEAC's final decision. The applicant institution will be treated procedurally and substantively as if it is a new applicant for accreditation.

### III. Accreditation Activities

#### L. Relinquishment of Accreditation

An institution/program automatically relinquishes its accreditation through either of the following actions:

- MEAC receives, and formally accepts, written notification from the chief executive officer of the institution/program that it voluntarily relinquishes accreditation.
- The institution/program closes.

### III. Accreditation Activities

#### M. Approval for Substantive Changes

1. Any substantive change to the educational mission or program(s) of an institution/program accredited by MEAC must not adversely affect the capacity of the institution/program to meet MEAC's standards.
2. MEAC requires an institution/program considering a substantive change to submit an application specific to the planned change.
3. The substantive change must receive MEAC approval prior to implementation in order to be included in MEAC's grant of accreditation to the institution/program.
4. The following substantive changes apply to both institutions and programs and require prior approval by MEAC:
  - a) Change in the established mission or objectives of the institution/program (see 10.a. below)
  - b) Change in the ownership, legal status or form of control of the institution /program (see 10.b. below)
  - c) Change in curriculum (see 10.c. below)
  - d) Change of location (see 10.d. below)
5. The following substantive changes apply only to institutions and require prior approval by MEAC:
  - a) Addition of a new branch campus (see 10.e. below)
  - b) Addition of an additional location providing at least 50% of an educational program (see 10.f. below)
  - c) Entering into a contract with another institution or organization that will provide more than 25% of one or more of the accredited institutions educational programs whether or not that institution or organization is certified to participate in the Title IV, HEA programs. (see 10.g. below)
  - d) Acquisition of any other institution or any program or location of another institution. (see 10.h. below)
  - e) Addition of a permanent location at a site at which the institution is conducting a teach-out for students of another institution that has ceased operating before all students have completed their program of study. (see 10.i. below)
  - f) Decision to participate in Title IV, HEA programs (see 10.j. below)
6. Certain substantive changes also require a site visit by MEAC no later than six months from the date of the change, including but not limited to:
  - Change in ownership which results in a change of control
  - Addition of a new branch campus
  - Addition of an additional location providing at least 50% of an educational program (except as specified in 10.f. below)



7. If an institution/program makes four or more substantive changes within any consecutive twelve-month period, MEAC will require a new accreditation review, including Self-Evaluation Report and site visit. See *III. E. Accreditation Process for Determining Compliance with MEAC Standards*

8. Substantive changes in a MEAC accredited program (programmatic accreditation)

If a MEAC accredited program *within* an institution is undergoing a review of substantive change by that institution's accrediting agency, then the program must provide MEAC with the documentation required by that agency but is not required to pay the substantive change fee(s).

However, if the substantive change, as defined by MEAC, does not require a substantive change approval by the institution's accrediting agency, then the program must complete MEAC's substantive change process and pay the fee(s).

9. Procedures for reviewing substantive change applications

- a) Prior to implementation of any of the changes listed above, the institution/program must submit the necessary substantive change application form and fee to the MEAC office at least six months in advance of the planned change.
- b) The substantive change application is reviewed by an Accreditation Review Committee, which may request additional information from the institution/program.
- c) After reviewing all materials (including any site visit reports) the ARC will provide a report to the MEAC Board of Directors which may approve, deny, or defer a decision about the proposed change.
- d) MEAC will specify an effective date, which is not retroactive, on which the change is included in the program's or institution's accreditation. MEAC may designate the date of a change in ownership as the effective date of its approval of that change if the accreditation decision is made within 30 days of the change in ownership.
- e) The school will be notified of the Board's decision.
- f) If a site visit is required to verify the information provided by the institution/program, one or more members of the ARC will visit the institution/program and/or new branch campus or additional location. The institution/program is required to submit the site visit fee prior to scheduling the site visit.

10. More information regarding substantive changes, policies and procedures

*Note: Certain substantive changes are identified in the Code of Federal Regulations found in Part 602 of Title 34 of the Higher Education Act. The red numbers below refer to specific regulations.*

a. Change of established mission, purpose, or program objectives CFR (602.22(a)(2)(i))

i. Examples of changes of established mission, purpose or objectives of the institution/program include:

- Altering the institution's/program's emphasis on midwifery education
  - Changing its purpose or objectives in providing midwifery education, or
  - Changing its ability to meet the definition of institution/program accreditation
- ii. The application for a substantive change in mission, purpose, or program objectives will address Standard I and, depending on the proposed change, may also include other Standards.
- b. Change in legal status, ownership or form of control of the institution (CFR 602.22(a)(2)(ii))
- i. Examples of change in legal status or form of control include:
- Changing from profit to non-profit status or vice versa
  - Changing from partnership or sole proprietorship to corporation
  - Selling the institution/program to another owner
  - Having a new partner "buy into" the ownership of the institution/program
  - Changing more than 50% of the members of the Board of Directors of the corporation during a given election period or consecutive twelve-month period
  - Other related changes that alter who "controls" the institution
- ii. The application for a substantive change in legal status, ownership, or form of control of the institution will address Standard V and, depending on the proposed change, may also include other Standards.
- c. Changes in curriculum (CFR 602.22(a)(2)(iii, iv, v and vi))
- i. Examples of a change in curriculum include:
- The addition or discontinuation of courses or programs that represent a significant departure from the existing offerings of educational programs, in terms of content or method of delivery, from those that were offered when MEAC most recently evaluated the institution/program (this includes the addition of distance learning courses)
  - The addition of courses or programs of study at a degree or credential level different from that included in the institution's/program's current accreditation.
  - A change from clock hours to credit hours, or vice-versa
  - A substantial increase or decrease in the number of credit hours awarded for successful completion of a program
  - A substantial increase or decrease in the length of the program
  - Significant changes in the capacity for clinical training.

- ii. The application for a substantive change in curriculum will address Standard II, Standard VII and, depending on the proposed change, may also include other Standards.
- d. Change of location
  - i. Examples of a change in location include:
    - A change in the location of the main campus
    - A change in the location of the main administrative site if the educational program is provided via a distance education or correspondence education program.
  - ii. The application for a substantive change in location will address Standard IV and, depending on the proposed change, may also include other Standards.
- e. The addition of a new branch campus (CFR 602.24.(a))
  - i. A branch campus is defined as a location of an institution that is geographically apart and independent of the main campus of the institution that:
    - Is permanent in location **and**
    - Offers courses in midwifery that lead to a credential in midwifery **and**
    - Has its own faculty and administrative or supervisory organization **and**
    - Offers at least 50 percent of an educational program.
  - ii. The application for a substantive change to add a new branch campus will address each standard and criteria in order to permit MEAC to determine that the branch campus has sufficient educational, financial, operational, management, and physical resources to satisfy MEAC's standards for accreditation. The review will specifically include:
    - The educational program to be offered at the branch campus
    - The projected revenues and expenditures and cash flow at the branch campus
    - The operation, management and physical resources at the branch campus
  - iii. MEAC will undertake a site visit as soon as practicable, but no later than 6 months after the establishment of that branch campus to determine continuing compliance with MEAC standards.
- f. Addition of an additional location providing at least 50% of an educational program (CFR 602.22(a)(2)(viii)(A, B, C, D, and E))
  - i. An additional location is a location geographically apart from the main campus that provides at least 50% of an educational program but does not meet the definition of a branch campus.

- ii. Each additional location must be individually reviewed as a substantive change and requires prior approval by MEAC. MEAC does not pre-approve institutions to add additional locations without going through this application process.
- iii. The application for a substantive change to add an additional location will address Standard I; Standard II; Standard III; Standard IV; Standard V; Standard VI; and, depending on the proposed change, may also include other Standards. The institution must document satisfactory evidence of a system to ensure quality across a distributed enterprise that includes:
  - Clearly identified academic control;
  - Regular evaluation of the locations;
  - Adequate faculty, facilities, resources, and academic and student support systems;
  - Financial stability; and
  - Long-range planning for expansion.
- iv. MEAC will undertake a site visit, within six months, to each additional location the institution establishes, if the institution
  - Has a total of three or fewer additional locations;
  - Has not demonstrated, to MEAC's satisfaction, that it has a proven record of effective educational oversight of additional locations; or
  - Has been placed on warning, probation, or show cause by MEAC or is subject to some limitation by the agency on its accreditation status.
- v. MEAC will conduct, at reasonable intervals, visits to a representative sample of additional locations of institutions that operate more than three additional locations. MEAC will conduct visits to 10% of all additional locations or a minimum of three locations, whichever number is greater within each period of accreditation granted to the institution.
- vi. MEAC may, at its discretion, include visits to additional locations, for ensuring that accredited/pre-accredited institutions that experience rapid growth in the number of additional locations maintain educational quality.
- vii. The purpose of the visits is to verify that the additional location has the personnel, facilities, and resources it claimed to have in its application to MEAC for approval of the additional location.
- g. Entering into a contract with another institution or organization that will provide more than 25% of one or more of the accredited institutions educational programs whether or not that institution or organization is certified to participate in the Title IV, HEA programs (CFR 602.22(a)(2)(vii))

The application for a substantive change to acquire another institution or program or location of another institution will address each standard and criteria in order to permit MEAC to determine that the contracted institution

or organization has sufficient educational, financial, operational, management, and physical resources to satisfy MEAC's standards for accreditation.

- h. The acquisition of any other institution or any program or location of another institution. (CFR 602.22(a)(2)(ix))

The application for a substantive change to acquire another institution or program or location of another institution will address each standard and criteria in order to permit MEAC to determine that the institution or program to be acquired has sufficient educational, financial, operational, management, and physical resources to satisfy MEAC's standards for accreditation.

- i. The addition of a permanent location at a site at which the institution is conducting a teach-out for another institution that has ceased operating before all student have completed their program of study. (CFR 602.22(a)(2)(x))

The application for a substantive change to add a permanent location at a site at which the institution is conducting a teach-out for another institution that has ceased operating before all student have completed their program of study will address each standard and criteria in order to permit MEAC to determine that the permanent location at which the institution is conducting a teach-out has sufficient educational, financial, operational, management, and physical resources to satisfy MEAC's standards for accreditation.

- j. Decision to participate in Title IV HEA programs
  - i. An institution planning to establish their eligibility to participate in Title IV HEA programs must currently be in compliance with all benchmarks in Standard V.
  - ii. The application for a substantive change to participate in Title IV HEA programs will address Standard V and Standard X.
  - iii. The institution may not begin participation in Title IV HEA programs until they have been both certified by the U.S. Department of Education and their application for this substantive change has been approved by MEAC.

### III. Accreditation Activities

#### N. Teach-out Plans and Teach-out Agreements

##### 1. Teach-out Plans

- a) Teach-out plan means a written plan developed by an institution that provides for the equitable treatment of students if an institution, or an institutional location that provides one hundred percent of at least one program, ceases to operate before all students have completed their program of study, and may include, if required by the institution's accrediting agency, a teach-out agreement between institutions.
- b) MEAC will monitor the status of all active teach out plans, and will continue to monitor compliance with all benchmarks for those institutions teaching out one or more programs; however, institutions/programs in a designated teach-out will not be held to completion and retention benchmarks for the specific program(s) in teach-out. *See III.G.4 Maintaining Accreditation Status for monitoring mechanisms.*
- c) MEAC requires an institution it accredits or pre-accredits to submit a teach-out plan for approval upon the occurrence of any of the following events:
  - i. The HEA Secretary notifies MEAC that the Secretary has initiated an emergency action against an institution, in accordance with section 487(c)(1)(G) of the HEA, or an action to limit, suspend, or terminate an institution participating in any Title IV, HEA program, in accordance with section 487(c)(1)(F) of the HEA and that a teach-out plan is required.
  - ii. MEAC acts to withdraw, terminate, or suspend the accreditation or pre-accreditation of the institution.
  - iii. The institution notifies MEAC that it intends to cease operations entirely or close a location that provides one hundred percent of at least one program.
  - iv. A state licensing or authorizing agency notifies the agency that an institution's license or legal authorization to provide an educational program has been or will be revoked.
- c) MEAC must approve teach-out plans. The teach-out plan must include:
  - i. A listing by name and Social Security number of all students in all programs and their estimated graduation dates, the status of unearned tuition, all current refunds due and account balances.
  - ii. The date of last classes and date of site closure.

- iii. An explanation, accompanied by appropriate supporting documentation and timelines, of how the institution will notify students in the event of closure and, if applicable, how the closing institution will notify the students of the teach-out agreement.
- iv. A detailed listing of additional charges, if any, and how students will be informed of the charges.
- v. A disposition of all student records, including educational, billing, accounting and financial aid records, in an accessible location and in accordance with applicable legal requirements in the event the institution closes.
- vi. Procedures to ensure that the delivery of training and services to students will not be materially disrupted and that obligations to students will be timely met.
- vii. An explanation of how job placement services for past and recent graduates from the closed facility will be made available, if applicable.
- viii. Title IV approved schools: An explanation of how the institution will arrange for continuity of financial aid services at the new institution and, if unavailable, how students will be informed of the cessation of financial aid support.
- ix. If the school is unable to fulfill its obligations to all currently-enrolled students, then the school must also submit a proposed teach-out agreement with one or more institutions which currently offer programs similar to those offered at the school and are within reasonable geographic proximity or which would be capable of conducting the teach-out without requiring students to move or travel substantial distances.

d) Procedures for reviewing teach-out plans

- i. Prior to implementation of a teach-out plan, the institution/program must submit the necessary application form to the MEAC office.
- ii. The application is reviewed by an Accreditation Review Committee, which may request additional information from the institution/program.
- iii. After reviewing all materials (including any site visit reports) the ARC will provide a report to the MEAC Board of Directors which may approve, deny, or defer a decision about the proposed change.
- iv. MEAC will notify institutions of approval or disapproval of the plan within 90 days of submission of the teach-out plan to MEAC.
- v. When accepting a teach-out plan, MEAC may require the institution to provide monitoring and/or compliance reports detailing changes in

enrollment, administration, faculty, curriculum, facilities, finances and other major components that could affect the quality of the educational program.

vi. If a site visit is required to verify the information provided by the institution/program, one or more members of the ARC will visit the institution/program and/or new branch campus or additional location. The institution/program is required to submit the site visit fee prior to scheduling the site visit.

e) If MEAC approves a teach-out plan that includes a program that is accredited by another recognized accrediting agency, it must notify that accrediting agency of its approval.

## 2. Teach-out Agreement

a) Teach-out agreement means a written agreement between institutions that provides for the equitable treatment of students and a reasonable opportunity for students to complete their program of study if an institution, or an institutional location that proves one hundred percent of at least one program offered, ceases to operate before all enrolled students have completed their program of study.

b) MEAC requires an institution it accredits or pre-accredits that enters into a teach out agreement, either on its own or at the request of MEAC, with another institution to submit that teach-out agreement to MEAC for approval. MEAC may approve the teach-out agreement only if the agreement is between institutions that are accredited or pre-accredited by a nationally recognized accrediting agency, is consistent with applicable standards and regulations, and provides for the equitable treatment of students by ensure that:

i. The teach-out institution has the necessary experience, resources, and support services to:

- provide an educational program that is of acceptable quality and reasonably similar in content, structure, and scheduling to that provided by the institution that is ceasing operations either entirely or at one of its locations; and
- remain stable, carry out its mission, and meet all obligations to existing students; and

ii. The teach-out institution demonstrates that it can provide students access to the program and services without requiring them to move or travel substantial distances and that it will provide students with information about additional charges, if any.



c) Teach-out agreements must be submitted with teach-out plans and must be approved by MEAC prior to implementation (see procedure for reviewing teach-out plans described above).

3. Closure of a MEAC accredited institution

- a) If an institution MEAC accredits or pre-accredits closes without a teach-out plan or agreement, MEAC must work with the USED and the appropriate state agency, to the extent feasible, to assist students in finding reasonable opportunities to complete their education without additional charge.
- b) Due to the broad impact of such a closure, the determination to close a program, branch campus, or the institution should be made through a consultative process between MEAC, the institution and other stakeholders in midwifery education, and should be decided only after alternatives have been considered.

### III. Accreditation Activities

#### O. Due Process and Appealing MEAC Decisions

1. MEAC policies and procedures to provide institutions/programs with due process
  - a) MEAC procedures governing accreditation/pre-accreditation process are provided in writing to all interested parties, including institutions/programs.
  - b) MEAC procedures allow institutions/programs a reasonable period of time to comply with requests for information and documents.
  - c) Before a final adverse action is taken, based solely upon a failure to meet financial standards and benchmarks, the institution or program may, on one occasion, request that the Accreditation Review Committee review significant financial information that was unavailable to the institution or program prior to the determination of the adverse action, and that bears materially on the financial deficiencies identified by MEAC. Upon such review of the new financial information as to significance and materiality, the ARC shall report to the MEAC Board of Directors the findings of their review and any adjustment in their recommendations regarding adverse action. Any decision made by the MEAC Board of Directors upon review and consideration of the new financial information shall not be separately appealable by the institution or program.
  - d) MEAC will make written notification to the institution/program about final decisions regarding applications for accreditation/pre-accreditation and any adverse actions. This written notification will include details for the basis of decisions and the appeals process for adverse actions.
2. Institution/program right to appeal adverse actions
  - a) MEAC permits the institution/program the opportunity to appeal an adverse action and the right to be represented by counsel during that appeal.
  - b) MEAC may, at its sole discretion, limit the appeal of actions, other than adverse actions, to a written appeal.
  - c) MEAC notifies the institution/program in writing of the result of its appeal and the basis for that result.
  - d) MEAC will keep confidential any action until the institution/program has either failed to appeal as permitted or MEAC has completed consideration of the institution's/program's appeal.
3. Description of the Appeals Process
  - a) Notification of an adverse decision

If MEAC takes action denying, suspending, or revoking accreditation/pre-accreditation, or takes other adverse action against an institution/program, MEAC will send to the institution/program its written statement of findings of fact and reasons forming the basis of that action within ten days following the decision.
  - b) Notice of intent to appeal

An institution/program may appeal the adverse decision within 14 business days of its receipt of such notice by sending a written request for appeal and applicable fees to MEAC headquarters.

If an appeal is requested, the institution/program must submit an appeal fee and file a complete written statement of the grounds for its appeal, based on the material upon which MEAC made the adverse decision, within 21 business days after the receipt of notice of the adverse action.

When the written statement of appeal is received, the Executive Director will forward the file of materials to the President. The file must include the institution's/program's written grounds for appeal and the material upon which MEAC based its decision.

c) Ad Hoc Appeal Panel

If the institution/program appeals a decision by MEAC in accordance with the procedures outlined, the institution's/program's file becomes the responsibility of an Ad Hoc Appeal Panel.

The Panel undertakes a fresh review of the case. The Ad Hoc Appeal Panel has no authority concerning the reasonableness of accrediting criteria or procedures. The Ad Hoc Appeal Panel has and uses its authority to make the following decisions: to affirm, amend, or reverse adverse actions of the original decision-making body; and affirms, amends, reverses, or remands the adverse action. A decision to affirm, amend or reverse the adverse action is implemented by the Ad Hoc Appeal Panel or by the MEAC Board of Directors, at MEAC's option. In a decision to remand the adverse action to the Board for further consideration, the Ad Hoc Appeal Panel must identify specific issues that the Board must address. In a decision that is implemented by or remanded to the Board, the Board must act in a manner consistent with the Ad Hoc Appeal Panel's decisions or instructions.

d) Appointment of the Ad Hoc Appeal Panel

Within ten business days of MEAC's receipt of the request for appeal, the President of MEAC shall appoint an Ad Hoc Appeal Panel. A list of seven persons will be identified in advance to the institution/program as the group from which the Ad Hoc Appeal Panel will be selected. The Ad Hoc Appeal Panel shall be subject to MEAC's Ethics Policies (Section IV) .

This list is taken from a pool of candidates who are not members of the MEAC Board of Directors and who have knowledge of accrediting purposes and procedures such as midwifery education program administrators; public members from the industry, government and education; and experienced accreditation persons from other agencies. A minimum of one public member is required to serve on this panel. The President will designate one person from the list of seven to serve as Chair of the Ad Hoc Appeal Panel of three persons.

The institution, within ten business days of receipt of the list, may strike up to two persons, other than the chair, from the list. Should this occur, the President will then designate two new individuals from those remaining on

the list to constitute the second and third members of the Ad Hoc Appeal Panel.

An alternate Ad Hoc Appeal Panel member will be selected from the two remaining individuals for each appeal proceeding.

- e) The President shall also notify the site visitors and members of the MEAC Accreditation Review Committee who participated in the accreditation review of the date, time and place of the hearing. The President may request that one of the site visitors and one member of the Accreditation Review Committee be present at the hearing.

A time and place will be selected to permit the institution/program to make its appeal, allowing sufficient time for presentations, deliberations, and the forwarding of a report to MEAC. Ordinarily, the meeting shall be no more than 60 and no less than 40 business days from the final appointment of the Ad Hoc Appeal Panel.

- f) Notification of appeal and hearing procedures to the appellant institution/program

MEAC shall forthwith notify the appellant institution/program in writing of the following:

- The time and place that the Ad Hoc Appeal Panel will meet for the hearing, the hearing fee and the expenses of the Ad Hoc Appeal Committee that must be reimbursed.
- The consideration of the appeal will be based on MEAC's written statement of findings and reasons related to the action, the institution's/program's written response detailing grounds for appeal, and relevant supportive documents.
- The appellant institution/program has the right to be present and represented, at its option and expense, by counsel of the institution's/program's choosing, and to have a transcript of the hearing proceedings of the appeal.
- The institution/program has the right to introduce evidence on its behalf, to examine any evidence introduced against it, to be advised, on request, of the names of any witness appearing against it, and to cross-examine any such witness.
- Ordinarily, the Ad Hoc Appeal Panel shall consider only information contained in the self-evaluation report, school promotional materials, site visitors' reports, remediation or addenda to site visitors' reports, except when MEAC has received written notification of action or complaints from recognized accrediting and state regulatory agencies.
- The institution/program may submit new evidence (evidence not previously considered by MEAC) at the time it files material in support of its appeal, but any such new evidence must be identified

as such and must be accompanied by a demonstration that the new evidence relates to:

- Any aspect of MEAC's determination that relied on issues or evidence which the institution/program has not had an opportunity, in advance of MEAC's action, to make its position known; or
- Facts that were in existence at the time of the action and were relevant to any basis for MEAC's action, but were not presented to MEAC because of mistake or misunderstanding by the institution/program, and which have subsequently come to the attention of the institution/program.

g) Conduct of hearing

The Chair of the Ad Hoc Appeal Panel shall preside over the hearing to determine the order of the proceedings, maintain decorum and assure that all participants in the hearing have a reasonable opportunity to present and examine all relevant oral and documentary evidence introduced therein.

The MEAC Board shall have the right to be accompanied or represented by counsel in the conduct of the appeal.

The hearing need not be conducted strictly according to the rules of law applicable in a court proceeding as to the examination of witnesses or presentation of evidence. Any relevant matter upon which reasonable persons customarily rely in the conduct of their affairs may be considered.

A tape recording of the hearing shall be kept and the tape or transcriptions shall be available to the appellant for review or purchase.

The Chair of the Ad Hoc Appeal Panel shall have the discretion to recess for a reasonable time and reconvene the hearing upon his or her own application, that of the institution's/program's, or that of any member of the Ad Hoc Panel.

The Ad Hoc Appeal Panel will decide whether any new evidence submitted should be considered in accordance with the requirements set forth above. If new evidence is submitted to the Panel and the Panel determines that this new evidence shows or suggests that MEAC's decisions should be reconsidered, the Panel may remand the matter for further MEAC consideration and action.

Following the hearing, the Ad Hoc Appeal Panel shall submit a report based on its review. The report will then be considered and acted upon by MEAC. The action of MEAC, which evoked the appeal, may be considered effective and final if the Panel's deliberations result in a decision consistent with that made previously by MEAC.

h) Notification of *final* decision

The president shall notify the institution/program *in writing of the final decision* upheld by the panel, or a new determination by the Board after consideration of the Panel's report, within 30 calendar days following the conclusion of the hearing. MEAC will also notify the applicable federal

and state agencies and the public according to notification responsibilities required by MEAC's administrative policies and procedures.

i) Arbitration

MEAC has the authority to require binding arbitration of institutions/programs in lieu of appeals through the courts. If MEAC decides to initiate a binding arbitration requirement, it may do so only after giving prior notice to all institutions/programs accredited by MEAC. In its notice, it must describe in writing the terms and conditions of such an appeal process.

### III. Accreditation Activities

#### P. Complaints against an Institution/Program

1. MEAC will review in a timely, fair and equitable manner any complaint it receives against an accredited institution or program in accordance with these procedures and will take follow-up action as appropriate based on the results of its review. MEAC encourages parties to pursue informal grievance mediation attempts with each other, or with MEAC staff or Board members, to attempt to resolve grievances informally before commencing a formal written complaint process with MEAC.

2. Contents of a complaint:

The complaint shall be submitted in writing and dated by the Complainant and shall include:

- a. A statement clearly identifying the submitted materials as a written complaint, and
- b. identification of the accredited institution or program against which the complaint is being filed, and
- c. a concise statement of the specific activities or conduct that constitute the basis of the complaint, and
- d. an explanation of why such activities or conduct violate a specific MEAC standard, benchmark or policy (MEAC standards, benchmarks, and policies can be found at <http://meacschools.org/wp-content/uploads/2013/10/2013-Section-B-Institution-Standards-v.2-Accreditation-Handbook.pdf>), and
- e. a description of the steps already taken to resolve the problem, and
- f. a description of what Complainant requests of MEAC to resolve the grievance, and
- g. the name and contact information for the person making the complaint or a statement indicating the complaint is being made anonymously. If the complaint is being made anonymously, MEAC still requires a mailing address so that requests for additional information can be made. Every effort will be made to keep the Complainant's identity and mailing address confidential.

If the written complaint does not contain the required information listed above, the MEAC Executive Director will notify the Complainant, and request additional information. The Complainant has 30 business days to respond with additional information; if additional information is not provided within 30 business days the complaint will be considered inactive, and MEAC will take no further action unless the Complainant submits the requested information and a letter requesting that the complaint review re-commence.

The Executive Director will review the complaint information, including any additional information requested by MEAC, and determine if the complaint is within the scope of the MEAC standards or policies. If the Executive Director determines that the written complaint is outside the scope of MEAC standards or policies, the MEAC Executive Director will notify the Complainant and the MEAC Board President and enclose a

copy of this policy. If the written complaint is found to be within the scope of MEAC standards or policies, the following procedures will commence:

3. Process for handling complaints

- a. Within 15 business days of receipt by the MEAC office of a written complaint that includes all of the required components, or submission of additional information by the Complainant as requested by MEAC to complete a complaint, a copy of the complaint and a letter requesting a response to the complaint will be forwarded via certified mail to the institution/program against which the complaint has been filed.
- b. The Complainant will receive written notification from MEAC within 15 fifteen business days that the complaint has been received and processed for resolution.
- c. The institution/program (the Respondent) will then have a maximum of 30 business days from the date of the letter from MEAC to respond to MEAC in writing to the complaint. MEAC will request the Respondent to provide documentation and/or evidence relevant to the complaint sufficient to permit evaluation of its merits.
- d. Whenever a complaint indicates that the school may be in violation of accrediting standards or requirements, the matter may be forwarded to the MEAC Board of Directors for independent consideration or for consideration in conjunction with any other accreditation matter pending before the Board.
- e. The MEAC President shall appoint a member of the Board of Directors who shall not have a conflict of interest nor shall have been directly involved in the circumstances giving rise to the complaint to serve as chairperson of an Investigative Committee (the "Investigative Committee") to investigate the activities or conduct under complaint.
- f. Should the MEAC President be named in the complaint, the Investigative Committee Chairperson will be appointed by an uninvolved member of the MEAC Executive Committee.
- g. Within 30 business days, the Chairperson of the Investigative Committee shall appoint at least one additional member of the Investigative Committee who is a current or former member of the MEAC Board of Directors or a current or former Accreditation Review Committee Member, excluding any current or former members with conflicts of interest or who may have participated directly or indirectly in the complaint under review. A public member must participate in either the Investigative Committee or the Executive Committee, the body that will render the complaint review decision. Within ten business days of appointing the Investigative Committee members, the Chairperson of the Committee shall notify the Respondent of the names of the members of the Investigative Committee.
- h. The Chairperson of the Investigative Committee shall notify the Complainant in writing that the Respondent has been advised of the nature of the complaint and that an investigation of the charge is pending in accordance with these procedures. The notification will include the address to which any additional information in



support of the complaint may be sent and the deadline for the submission of any such additional material.

- i. The Investigative Committee will review the documentation provided by the Complainant and the Respondent and create a report analyzing this documentation, including how each area of the complaint reflects compliance or non-compliance with MEAC standards, benchmarks, or policies by the Respondent. The report will also identify areas where the Respondent complied with MEAC standards, benchmarks, or policies. Where areas of inadequacy or weakness in policy, action or response by the Respondent occurred that require feedback and/or remediation, the Committee may make a recommendation for resolution of the complaint. This resolution may include:
    - i. a follow-up complaint report submitted by the Respondent addressing changes to inadequate areas or weaknesses identified in the investigation, or
    - ii. action regarding the accreditation or pre-accreditation status of the institution or program, including monitoring and compliance report(s), show cause action, or revocation of pre-accreditation or accreditation status.
  - j. The Investigative Committee shall complete the investigation within 90 business days after its formation or such other time as determined by the MEAC President. The MEAC President and the Investigative Committee Chairperson shall determine whether and for how long an extension of the 90 business-day timeline should be granted if the Respondent requests an extension of the deadline.
  - k. The Chairperson of the Investigative Committee shall send the Investigative Committee's report and recommendations to the Executive Committee in advance of the Executive Committee's next available scheduled meeting and present the Committee's findings at that meeting.
  - l. The Executive Committee will consider the Investigative Committee's recommendations and determine whether the Executive Committee requires any additional information to render a decision. If no further information is required, the Executive Committee will determine whether the complaint is valid, and if so, what actions are needed to achieve resolution. MEAC may request that the Respondent submit a follow-up report describing how Respondent will address inadequacies and weaknesses, or MEAC may take actions regarding the accreditation or pre-accreditation status of the institution or program, ranging from requiring reporting to initiating a Show Cause Action to revoking pre-accreditation or accreditation status.
  - m. If more than half the Executive Committee has conflicts of interests with the complaint under review, then the consideration of the complaint will be considered by the full MEAC Board, excluding those with conflicts of interest.
4. Resolution of the complaint:
- a. If the Executive Committee decides to require the Respondent to prepare a follow-up report addressing weaknesses or areas of inadequacy, the Respondent's

response will be considered by the Investigative Committee. The Investigative Committee will provide an analysis of the Respondent's response and either make recommendations for further action or recommend that the complaint be declared resolved. The Executive Committee will consider the Investigative Committee's analysis and recommendations and make the final decision on whether further action is required by the Respondent or if resolution of the complaint has been achieved.

- b. If the Executive Committee decides to require a report(s) or initiate a Show Cause action in response to the complaint review, then these will be referred to an Accreditation Review Committee and will follow MEAC's policies and procedures for Compliance and Monitoring Reports and Show Cause Actions. *See III.G Maintaining Accreditation Status.*
- c. If the Executive Committee's complaint review decision includes a mix of weaknesses or inadequacies and items requiring reports or a Show Cause Action, then all items will be referred to an Accreditation Review Committee and will follow MEAC's policies and procedures for Compliance and Monitoring Reports and Show Cause Actions. *See III.G Maintaining Accreditation Status.*
- d. The President or Executive Director will notify in writing the Complainant and Respondent of the findings of the complaint review and any decisions by the MEAC Executive Committee or Board regarding actions to be taken by the Respondent.
- e. The Respondent may request an appeal hearing to dispute the findings or MEAC's decision regarding actions to resolve the complaint. If the Respondent does not request a hearing within 30 business days from the date of the Complaint Findings letter, MEAC will consider the complaint review closed.
- f. The Complainant may also request a hearing if the resolution has failed to satisfy the Complainant or if the Complainant wishes to pursue the matter further. If the Complainant does not communicate in writing to within 30 business days from the date of the Complaint Findings letter, MEAC will consider the complaint review closed.
- g. If the Complainant and Respondent accept that the complaint review has been resolved, the MEAC Board President will provide written confirmation of closure to both parties.
- h. A hearing in accordance with MEAC's due process procedures will be arranged if further recourse is required and/or if the situation warrants such action.
- i. The MEAC President shall present a synopsis of the processing and outcome of complaints and investigations to the MEAC Board at the next regularly scheduled Board meeting following final resolution.

### III. Accreditation Activities

#### Q. Complaints about MEAC

1. Complaints against MEAC standards, staff, on-site teams or any party acting on behalf of MEAC are diligently and impartially investigated by the Executive Committee. If the complaint is against the MEAC Board or Executive Committee an independent ad-hoc committee appointed by members of MEAC's affiliated organizations will investigate the complaint.
2. Process for handling complaints
  - a) All complaints should be submitted to MEAC in writing.
  - b) The Executive Committee will review the complaint with due diligence appropriate to the nature and substance of the allegations and may request additional information from the complainant,
  - c) The complainant will be notified, in writing, within 30 days of the close of the following MEAC Board meeting, as to the findings and actions taken and formalized in the MEAC Board meeting minutes.
  - d) Under such circumstances where the complaint is against the MEAC Board or Executive Committee itself, an ad hoc committee of outside members will be appointed to independently review and evaluate a complaint and to submit a report for subsequent review of the Board. The ad hoc committee members will be independently appointed by members of Midwives Alliance of North America, Citizens for Midwifery, North American Registry of Midwives, and National Association of Certified Professional Midwives.
  - e) The MEAC Board will review the findings/report of the independent ad hoc committee, and will notify the complainant in writing, within 30 days of the close of the MEAC Board meeting, as to the actions taken and formalized in the meeting minutes.

## IV. Ethics Policies

### A. Compliance with Laws and Regulations

All MEAC activities are to be conducted in compliance with the letter and spirit of all laws and regulations. MEAC representatives have a responsibility to understand the applicable laws, recognize potential dangers, and seek legal advice when necessary.

### B. Conflicts of Interest

MEAC's policy is to have effective controls against conflicts of interest or the appearance of conflicts of interest by MEAC representatives. A "conflict of interest" is defined as a situation where members of the Board of Directors, staff, site visitors, or others acting in an official capacity for MEAC may have an opportunity to influence business or accreditation decisions in ways that could lead to personal gain or give improper advantage to associates.

Whenever MEAC is called upon to consider an application for accreditation or make an accreditation decision related to a midwifery education program or institution, and a MEAC Board member or committee member is affiliated with the program/institution, then that person:

1. Shall disclose prior to MEAC's discussion of the program's application or accreditation action the nature of his or her affiliation with the program/institution; and
2. Shall not be present during discussion of and voting on the program/institution's application or accreditation action.

No MEAC representative accompanying a site visit team or committee may be affiliated with the program/institution being visited.

For the purposes of this policy, a person is *affiliated* with a midwifery program or institution if he or she, or his or her spouse, parent, child, brother or sister:

1. Has been an officer, director, trustee, employee, contractor, consultant, or student of the midwifery program or institution within the last two years;
2. Has had any other dealings with the institution or program from which he or she has or will receive cash or property within the last two years.
3. In any event, all previous relationships should be disclosed.

If for any other reason a MEAC representative believes he or she has a conflict of interest or the appearance of one with regard to any program or institution's application or accreditation action before MEAC, the representative shall declare the conflict or appearance of one.

If a representative of a midwifery program or institution that has an application or accreditation action before MEAC has a reason to believe a member or representative may have a conflict of interest or the appearance of one, or if any other members or MEAC's executive director may so believe, and if that member does not declare the conflict or the appearance of one, a request may be made that

MEAC consider the matter. The possible conflict of interest or the appearance of one shall be discussed by all parties and resolved if necessary by consensus, or vote, with all MEAC Board members entitled to vote.

Other areas involving conflict of interest include:

1. Employment decisions if these concern friends, business associates, relatives, or themselves.
2. Purchasing or other contract decisions in which the individual may have a personal interest.

### C. Confidentiality

The information provided by institutions/programs subject to MEAC accreditation will be maintained in strict confidence and will be used solely for the purpose of evaluating the institution's/program's compliance with MEAC requirements.

The MEAC Board, site visitors, staff, and consultants will not discuss the accreditation matters related to an institution/program outside of the normal MEAC meetings unless such discussion is necessary to conduct MEAC business effectively. Any restrictions on the provision of otherwise confidential information may be superseded by the requirements of government agencies or national accreditation regulatory agencies.

MEAC collects personal information about employees and other representatives that relates to their involvement with MEAC. Access to this information is limited to people with a need to know and any release of the information to others must be authorized in advance by the Executive Director or the President of the Board of Directors. Personal information is released outside MEAC only with the individual's approval and authorization of the Executive Director, except to verify employment or to satisfy legitimate investigatory or legal requirements.

### D. Giving and Receiving Gifts

MEAC representatives may not give or receive gifts from a supplier, governmental official, an accredited organization or applicant, or other organization. Exceptions may be made for gifts which are customary and lawful, are of nominal value, and are authorized in advance. Gifts or benefits for more than a nominal value should be reported promptly, and shall be returned or donated to a suitable charity and this exchange documented.

Meals and refreshments are acceptable if they are infrequent, are of nominal value, and are in connection with business discussions.

Anyone doing or desiring to do business with MEAC should be informed that all gifts other than advertising novelties are discouraged.

### E. Political Activity

MEAC recognizes that employees may participate in the political process by supporting political parties, candidates, or causes. However, MEAC is a tax exempt organization which is prohibited from directly or indirectly participating in any

political campaign supporting or opposing any candidate or issue. MEAC may not contribute anything of value, including employee's time, to political campaigns, publish or distribute materials on behalf of any candidate or party, or engage in any other activity which may be considered political.

MEAC representatives may personally contribute to a candidate or party of their choice. However, no compensation or reimbursement by MEAC shall be received for a personal contribution. Any efforts devoted to political activity must be outside working hours. MEAC representatives must make clear that any statements on political or public issues are not those of MEAC.

#### F. Personal Conduct

MEAC strives to provide all employees, directors, volunteers and members a healthy, safe and positive environment. The climate at MEAC shall be free from discrimination and harassment based on race, color, religion, sex, sexual orientation, age, national origin, disability, marital or familial status, veteran status, or any other factors unrelated to MEAC's legitimate interests.

MEAC shall not tolerate sexual advances or comments, threats of violence, or any other conduct that creates, in the opinion of the management of MEAC, an intimidating or otherwise offensive environment. Similarly, the use of racial or religious slurs, or any other remarks, jokes or conduct that encourages or permits an offensive environment will not be tolerated.

If a member, employee or volunteer is subjected to improper conduct, or becomes aware of the improper conduct of others, they should bring this to the attention of the Executive Director or the President of the Board of Directors. MEAC maintains an employee handbook for relevant policies. All complaints will be investigated promptly (consult MEAC employee handbook.).

#### G. Use and Protection of MEAC Assets

Members have a fiduciary duty to preserve MEAC's assets by demonstrating cost control and following vigorous procurement standards. MEAC employees, materials, equipment or other assets shall not be utilized for any unauthorized purpose. Assets shall be tracked and inventoried. Appropriate action shall be taken if there are any losses.

#### H. Accounting and Financial Reports

MEAC shall abide by accurate record keeping and reporting. Reimbursable business expenses should be justifiable, reasonable, and supported by receipts. Receipts are not required for per diem payments.

MEAC's financial statements and all books and records on which they are based must accurately reflect all of the organization's transactions. All disbursements and receipts of funds must be properly authorized and recorded. No undisclosed or unreported fund may be established for any purpose.

Those responsible for the handling or disbursement of funds must assure that all transactions are executed as authorized and recorded to permit financial statements in accordance with Generally Accepted Accounting Principles.

#### I. Compliance

Failure to comply with this policy may result in formal disciplinary action that may include reimbursement to MEAC for any losses or damages, termination of employment, dismissal from the Board, and/or referral for criminal prosecution. Action may also be taken against anyone who fails to report a violation or withhold relevant information concerning a violation of this Ethics Policy. All ARC members, board members, employees and independent contractors must sign a certification form prior to their work with MEAC.