
MEAC Accreditation Handbook, Section G:

Policies and Procedures

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I. Board of Directors

MEAC Bylaws 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.

I.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) At least one, but 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 preaccredited by MEAC or has applied for accreditation or preaccreditation; 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 them in relevant committees, boards or organizations. If the prospective Board member is a public member, endorsements must be from colleagues who have worked with them 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.
- e) All nominees are subject to review by the Nominations Committee to ensure that candidates meet the requirements for serving as a member of the Board of Directors. This review shall follow a standardized process and utilize standardized rubrics and tools.

3. Elections

Elections will proceed as stated in the Bylaws. Voting in elections is restricted to Member Schools only. At no point may a Board Member be selected or elected by any associated agency or organization.

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 II.B.6*).
- f) MEAC Board Members are responsible for making final accreditation decisions.
- g) Comply with the ethics policies of MEAC (*see II.C*).
 - 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.

I.B. The Executive Committee

1. Composition

The Executive Committee shall be the Officers, the Executive Director and Director of Accreditation in 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 Bylaws.

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 Bylaws or the adoption of new Bylaws;
- 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

II.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 governance of the organization, including but not limited to, 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 agreement and complete job-specific training.
2. Director of Accreditation
 - a) The Director of Accreditation is generally responsible for the program activities of the organization, including but not limited to, accreditation activities, representing the organization to the public and other agencies, providing support to the Board of Directors and supervising other accreditation staff.
 - b) The Executive Committee of the Board of Directors supervises the Director of Accreditation.
 - c) The Director of Accreditation 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 Director of Accreditation.
 - 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 agreement and complete job-specific training.
3. 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 and the Director of Accreditation are responsible for hiring and supervision.
 - d) All administrative staff must be qualified for the job for which they are hired, and must complete job-specific training.
 4. 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 (*see II.C*).
 5. 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 (*see II.C*). Any restrictions on the provision of otherwise confidential information may be superseded by the requirements of government agencies or national accreditation regulatory agencies.

II.B. 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). 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 (*see II.C*).

3. Confidentiality

Members of evaluation and decision-making bodies must agree to honor the confidentiality of all interactions with the institution/program (*see II.C*).

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 preaccrediting 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 Director of Accreditation, under the Board 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 in circumstances where there is a conflict of interest, an appearance of a conflict of interest, or sincerely-held concerns about the qualifications of the ARC appointee to conduct the review.

d) Evaluation of Accreditation Review Committee members

Evaluation of ARC member performance is systematically collected and reviewed.

- i. The Director of Accreditation 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 Director of Accreditation, in conjunction with the Board President, may decide that the person no longer serve in these capacities.

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.

II.C. 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 their 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 they or their spouse, parent, child, or sibling:

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 they have 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 they have 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 (*see MEAC's Non-Discrimination policy*).

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* (*see MEAC's 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 disbursal 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.

II.D. 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 Schools 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.E. Complaints about MEAC

1. Complaints against MEAC standards, policies, Board of Directors, 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 thirty (30) calendar 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. The independent ad hoc committee has and uses its authority to make the following decisions: to remand the issue to the MEAC Board for further internal consideration, to require MEAC to conduct a formal investigation with public notification of the outcome, or equivalent action. In any decision, the independent ad hoc committee must identify specific issues that the Board is to address.

The independent ad hoc committee does not have the authority to directly change MEAC's standards, criteria, or policies and procedures nor to remove or appoint any MEAC Board of Director or staff.
 - e) The independent ad hoc committee will simultaneously notify the MEAC Board and the complainant of the outcome of their review.
 - f) In a decision that is to be implemented by or remanded to the Board, the Board must act in a manner consistent with the independent ad hoc committee's decisions or instructions.

II.F. 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) A copy of any annual report MEAC prepares
 - b) A copy, updated annually, of MEAC's directory of accredited/preaccredited institutions/programs
 - c) Notice of final accrediting actions with respect to accredited institutions/programs.
 - d) When requested by the Secretary, a summary of MEAC's major accrediting activities during the previous year.
 - e) Any proposed change in MEAC's policies, procedures, or accreditation or preaccreditation standards that might alter MEAC's scope of recognition or compliance with the criteria for recognition.
 - f) 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).
 - g) Information, when requested by the Secretary, regarding an accredited/preaccredited institution's Title IV, HEA program responsibilities and eligibility
 - h) 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.
2. In the event that MEAC contacts the USDE for reasons outlined in II.F.1.d. or II.F.1.f. 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 thirty (30) calendar days after it makes the decision:
- a) A decision by MEAC to award initial accreditation/preaccreditation to an institution/program
 - b) A decision to renew an institution's/program's accreditation/preaccreditation.
4. Actions 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/preaccreditation of an institution/program.
 - c) A final decision to take any other adverse action, as defined by MEAC, not listed in 4b above.
5. MEAC will provide written notice to the public of the actions listed in II.F.4 within twenty-four (24) hours of its final 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/preaccredited institution/program:

- a) Decides to voluntarily relinquish or withdraw from accreditation/preaccreditation, within thirty (30) calendar days of receiving notification from the institution/program that it is withdrawing voluntarily from accreditation/preaccreditation, or
 - b) Lets its accreditation/preaccreditation lapse, within thirty (30) calendar days of the date on which accreditation/preaccreditation 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 preaccreditation 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 sixty (60) calendar 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:

Upon request, MEAC will share with other appropriate recognized accrediting agencies and State agencies information about the accreditation/preaccreditation status of an institution/program and any adverse actions it has taken against an accredited/preaccredited 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/preaccreditation, 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/preaccredited institutions/programs.

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

- a) Each type of accreditation/preaccreditation granted by the agency
- b) Its procedures for applying for accreditation/preaccreditation
- 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/preaccreditation 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 preaccredits and the date when the agency will review or reconsider the accreditation/preaccreditation of each institution/program

13. MEAC provides for the public correction of incorrect or misleading information released by an accredited/preaccredited 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 preaccreditation of that institution or program in accordance with its Record Retention Policy including but not limited to:

- a) Preaccreditation 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 preaccredited institutions and programs.

III. Accreditation Activities

III.A. Scope of Accreditation Activities

1. Geographic scope of accreditation activities

MEAC accredits and preaccredits midwifery institutions and programs that operate, primarily or in full, within 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 preaccredits the following types of direct-entry 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 institutions and/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. Accreditation and Preaccreditation

MEAC offers both accreditation and preaccreditation.

- a) Accreditation applies to those institutions and programs that have completed an initial or reaccreditation 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) Preaccreditation 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 preaccreditation status. The duration of preaccreditation status may be extended by vote of the Board.

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

4. 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 programmatic accreditation, the program must be housed within an institution already accredited by an agency recognized by the USDE.

5. Types of Certificates and Degrees Covered

MEAC accredits and preaccredits institutions and programs of midwifery leading to non-degree certificates and diplomas.

MEAC also accredits and preaccredits institutions and programs of midwifery leading to degrees including associate, baccalaureate, and masters and doctoral degrees. MEAC applies an additional set of Standards and criteria to institutions and programs under this category.

6. Distance or Correspondence Education

MEAC accredits and preaccredits institutions and programs of midwifery including distance education and correspondence education components. MEAC applies an additional set of Standards and criteria to institutions and programs under this category.

7. Title IV Federal Financial Aid

MEAC serves as a link for institutions with eligible programs to access Title IV federal financial aid programs. MEAC applies an additional set of Standards and criteria to institutions under this category.

8. Changes to MEAC's Scope of Accreditation Activities

Any changes that would change or otherwise expand MEAC's USDE scope of recognition must be approved by written application submitted to the USDE prior to implementation, as per 34 CFR 602.31(b).

Institutions or programs seeking to include within their MEAC grant of accreditation a program that is outside the scope of MEAC's USDE recognition may petition MEAC to seek an expansion of its USDE scope of recognition.

III.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.
- 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 and/or evaluation criteria 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 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. Affected institutions/programs will be allowed a period of time within which to create plans and come into compliance with the new.
- 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.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 goals 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 goals 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 local, state, and federal law

MEAC will only accredit institutions/programs that are legally authorized under applicable local, state, and federal 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.

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. Prospective Applicant and Renewal of Accreditation Training Requirements

All institutions and programs applying for initial accreditation must complete a MEAC Prospective Applicant Training before MEAC accepts the application. This training is offered on demand in two parts: 1) a self-study and 2) a readiness assessment with the MEAC Director of Accreditation. Additional training may be provided, as available.

All institutions and programs applying for re-accreditation must schedule a training session with their assigned Accreditation Coordinator to review any changes to the MEAC standards, accreditation process, and accreditation forms before MEAC will accept a Part I Application.

5. If, at any point in its evaluation of an institution/program seeking initial accreditation, agency staff determines that the institution/program fails to demonstrate compliance with these basic requirements for accreditation, or that falls outside the scope of MEAC's accreditation activities, the staff will:
 - a. Return the institution/program's application and provide an explanation of the deficiencies that caused staff to take that action; and
 - b. Recommend that the institution/program withdraw its application and reapply when the institution/program can demonstrate compliance.

III.D. 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/preaccreditation are systematically reviewed to determine if they are in compliance with MEAC's standards. This includes the following:
 - i. An in-depth self-study that includes the assessment of educational quality and the institution/program's continuing efforts to improve educational quality
 - ii. An on-site review to verify information provided in the self-study
 - iii. Responses by the institution/program to requests for additional information and the site visit report.
 - 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 considered to have graduated from a MEAC-accredited program. Accreditation is not retroactive. For further information, contact MEAC at"*
 - e) As accreditation is a voluntary process, institutions/programs may voluntarily withdraw an application for accreditation/preaccreditation at any point in the process by submitting a written statement of withdrawal. Withdrawal of an application for renewal of accreditation by an institution/program that is already MEAC accredited may jeopardize continual accreditation beyond any current grant of accreditation.
2. Overall timeframe and extensions for the accreditation process
 - a) The accreditation process will follow an established timeline. *For more information see MEAC Accreditation Handbook Section D: The Accreditation Process.*
 - b) On one occasion during this process, the institution/program may request a thirty-day extension on any deadline, accompanied by a fee. The Accreditation Coordinator will notify the institution/program and the ARC of the new timeline, and note it in the file. If the request is denied the fee is returned minus the processing fee.

The published timeline may be adjusted depending on the complexity of the institution/program, quality of the materials submitted, cooperation of the institution/program

in submitting complete materials, volunteer availability, and extensions. MEAC staff will update the timeline accordingly and will notify the institution/program when there is a significant increase or decrease in any times previously stated.

3. Other accreditation-related processes

- a) All institutions/programs that apply to MEAC for a substantive change and that submit required annual, monitoring and compliance reports are systematically reviewed to determine if they are in compliance with MEAC's standards.
- b) Standardized evaluation processes and tools are used to ensure that the criteria are applied consistently to all institutions/programs.
- c) Review of other accreditation-related processes will follow established timelines.

III.E. Decision-making Regarding Preaccreditation

1. General guidelines for preaccreditation decision-making
 - All decisions regarding preaccreditation status are based on published standards, criteria, policies and procedures.
2. Actions and decisions which may be made regarding preaccreditation
 - 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 preaccreditation status.
 - i. *Granting preaccreditation status*
 - MEAC grants preaccreditation status to applicant institutions/programs that demonstrate a likeliness to gain accreditation within one year, as demonstrated by their preliminary application, SER and AIR materials.
 - MEAC will provide written notice of preaccreditation 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 preaccredited, it must print the USDE's definition of preaccreditation in its brochure and catalog. Institutions/programs must include the following as an addendum to the statement described in III.D.1.d:

“We were granted the status of preaccreditation on [date]. Preaccreditation 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 preaccreditation 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 preaccreditation status is granted, the ARC will continue with the published initial accreditation process.
 - ii. *Denying preaccreditation*
 - An institution's/program's application for preaccreditation 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 preaccreditation 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 preaccreditation 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 preaccreditation 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 preaccreditation, 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 preaccreditation 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 thirty (30) calendar 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 preaccreditation status
- a) Preaccredited institutions/programs may voluntarily withdraw their application for initial accreditation.
 - b) Upon withdrawal, the institution/program will lose preaccreditation 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 preaccreditation status
- The duration of preaccreditation status is one year from the time it is granted; however, an extension may be approved by Board vote in situations where an extension of preaccreditation status is needed to complete a program calendar, fiscal year audit, or other reporting cycle, if needed to demonstrate compliance with MEAC Standards.
 - Institutions/programs that are granted preaccreditation will proceed with the site visit. An initial ARC Report will be provided following the site visit. Institutions/programs must respond to the report with plans for making corrections and improvements in any area where there are concerns of noncompliance and/or weakness. The one-year period of preaccreditation is to be used to implement these improvements and submit a final response to the ARC Report no later than three (3) months prior to expiration of preaccreditation. The Board will make the initial accreditation decision based on all

materials submitted, including documentation of improvements made while in preaccreditation.

7. Change from “preaccreditation” 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.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) MEAC takes into account third-party comment when making an accreditation decision. MEAC will provide public notice of all institution/programs that are being considered for preaccreditation/accreditation and provide an opportunity for written comment by the public concerning the institution/program's qualifications for preaccreditation/accreditation.
 - d) 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 six 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 four to six 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.
 - See III.J Actions to Address Non-Compliance.
 - *Granting probationary accreditation*. A program or institution applying for reaccreditation may be granted probationary accreditation for four years. Probationary accreditation may be granted 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 weaknesses or deficiencies noted earlier by MEAC.
 - The decision to place a program or institution on probation is not an adverse action and is not subject to appeal.

- Probationary accreditation still bestows the institution/program with the full rights, benefits, and responsibilities of accreditation while making corrections.
- The areas of weakness, deficiency, and/or non-compliance leading to probationary status must be corrected within a specified time period (*see III.J Actions to Address Non-Compliance*).
- If the areas of weakness, deficiency, and/or non-compliance are corrected timely, MEAC will remove the probationary status from the grant of accreditation.
- If the areas of weakness, deficiency, and/or non-compliance are not corrected within the specified time period, MEAC will proceed with withdrawing accreditation, unless MEAC, for good cause, extends the period for corrections.
- MEAC will notify applicable third parties, regulatory agencies and the public of the Board's decision to place a program/institution on probation. (*see II.F*).
- Probationary accreditation will not be granted to institutions/programs that are being considered for initial accreditation.
- *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.L 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 beyond the normal, published comprehensive review process. Deferrals occur when extenuating circumstances exist that prevent the Board from making an informed accreditation decision. This includes, but is not limited to insufficient information. Any deferral will be for a limited period, generally no more than six months.
 - The option for deferral may not be used to avoid making an adverse action, denying accreditation, or supersede MEAC's standardized evaluation tools.
 - 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 will 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.
 - MEAC may require a special site visit and/or an updated Self-Evaluation Report as a condition of making an accreditation decision.
 - 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 III.L 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 II.F*).
3. Regard for decisions of states and other accrediting agencies
- a) MEAC will not grant initial or renewed accreditation or preaccreditation to an institution/program during the period in which the institution/program:
- Is the subject of a pending or final action brought by a state agency to suspend, revoke, withdraw, or terminate the institution/program's legal authority to provide postsecondary education in the state;
 - Is the subject of a decision by a recognized accreditation agency, other than MEAC, to deny accreditation or preaccreditation;
 - Is the subject of a pending or final action brought by a recognized accrediting agency, other than MEAC, to suspend, revoke, withdraw, or terminate the institution/program's accreditation or preaccreditation;
 - Is the subject of probation or an equivalent status imposed by a recognized accrediting agency, other than MEAC.
- 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 grants accreditation or preaccreditation to an institution/program notwithstanding any of the circumstances listed in (a), above, 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 thirty (30) calendar days including a thorough and reasonable explanation consistent with MEAC's accreditation standards, why the action of the other body does not preclude MEAC's grant of accreditation or preaccreditation.

- d) If MEAC learns that in institution/program that MEAC has preaccredited/accredited is the subject of an adverse action by another recognized accrediting agency or has been placed on probation or an equivalent status by another recognized agency, then MEAC will promptly review its preaccreditation/accreditation of the institution/program to determine whether it will take adverse action, place the institution/program on probation, or issue a show cause directive.
- e) If a review of a Member School is warranted as a result of another agency's action or decision, the MEAC Board of Directors will appoint a review committee which will:
 - Solicit an explanation from the agency with details of the action taken and the basis for the action
 - Review the agency's action and basis for the action in comparison against MEAC Standards and policies and procedures to determine if the institution/program is also in violation or noncompliance with MEAC
 - Recommend to the MEAC Board of Directors whether the institution/program should be subjected to MEAC's policies for addressing non-compliance with standards and adverse action.

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.G. Maintaining Accreditation Status

1. Submission and MEAC review of all required reports and complaints to monitor continued compliance with standards and policies
 - a) Annual Reports.
 - i. All institutions/programs accredited or preaccredited by MEAC are required to submit an Annual Report. Annual Reports are based on a subset of the MEAC Standards.
 - ii. All information submitted during the annual reporting process is subject to verification. MEAC will conduct verification for any data that contains identified discrepancies, is suspect, or is otherwise believed to be inaccurate.
 - iii. The Director of Accreditation is responsible for reviewing annual reports and preparing a summary to the Independent Board Reviewers (IBR). The IBR reviews the documentation and makes a recommendation to the Board. The Board reviews, determines further actions, if necessary, and the school is notified.
 - b) Monitoring Reports.
 - i. Monitoring Reports are assigned by the MEAC Board of Directors in circumstances where weaknesses or inadequacies have been identified and require further review to ensure the institution/program remains in compliance or is making progress toward compliance.
 - ii. The assigned Accreditation Coordinator is responsible for reviewing the report, preparing a summary, and forwarding to the Independent Board Reviewers (IBR). The IBR reviews the report and makes a recommendation to the Board. The Board reviews, determines further actions, if necessary, and the school is notified
 - c) Compliance Reports.
 - i. Compliance Reports are assigned by the MEAC Board of Directors in circumstances where noncompliance with MEAC Standards have been identified.
 - ii. The assigned Accreditation Coordinator is responsible for reviewing the report, preparing a summary, and forwarding to the Independent Board Reviewers (IBR). The IBR reviews the report and makes a recommendation to the Board. The Board reviews, determines action taken, if necessary, and the school is notified.
 - d) Third party reports.
 - i. Third party reports, including public comment, are accepted at any time and may raise questions about an institution's/program's continuing compliance with MEAC Standards and Policies and Procedures.
 - ii. The assigned Accreditation Coordinator is responsible for forwarding third party reports to reviewers for further analysis and recommendation to the Board. The Board reviews and accepts or determines action taken, if necessary, and the school is notified.
 - e) Complaints.
 - i. Complaints against an institution/program are accepted at any time and may raise questions about an institution's/program's continuing compliance with MEAC Standards and Policies and Procedures.

- ii. The Director of Accreditation will implement the complaint process (*see III.O*).
2. Making substantive changes

Accredited and preaccredited institutions/programs are required to notify MEAC before making substantive changes. Certain changes require prior approval by MEAC (*see III.H Approval for Substantive Changes*).
 3. Financial responsibilities
 - a) Preaccredited and accredited institutions/programs are required to submit annual sustaining fees, fees for Reaccreditation, fees for substantive changes, and other miscellaneous fees as detailed in the MEAC Accreditation Handbook, Section E: Fees. All fees, including annual sustaining fees, are paid directly to MEAC and may not be combined with, nor paid out of, fees paid to any related midwifery organization or other agencies or associations.
 - b) Annual sustaining fees will be prorated accordingly for institutions/programs that gain initial accreditation or that have accreditation terminated mid-year.
 4. 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/preaccredited may say in catalogs that accreditation/preaccreditation 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 preaccredited institutions must designate their accreditation status on all student transcripts (e.g., “MEAC accredited/preaccredited”).
 - 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.

III.H. Approval for Substantive Changes

1. Any substantive change to be made by an institution/program accredited or preaccredited 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)
 - g) Decision to cease participation in Title IV, HEA programs (see 10.k 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)

Site visits to confirm items in the substantive change process may be conducted in an abbreviated manner from the full reaccreditation site visit as determined by the complexity of the substantive change being made.

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. F*).

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. The application submitted must include a complete and detailed plan for how the change will be made and all the areas it will impact at the institution/program.
- 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 or deny, 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 thirty (30) calendar 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.
- g) Review occurring prior to Board decision will be conducted in order to determine the likelihood that the institution/program's proposed plan will allow the change to be implemented without creating areas of noncompliance. Follow-up, via Monitoring Reporting, will be conducted with all Substantive Changes to determine actual benchmark scoring and continued reporting. This will normally occur six months following implementation of the change.

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 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. Accreditation will only be extended to the branch campus after MEAC has satisfactorily completed review of the institution's business plan and ensured that the institution will continue to meet MEAC standards for education, finances, operations, management, and facilities resources at the branch location.
 - iv. 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.
- k. Decision to cease participation in Title IV HEA programs
 - i. Any decision made by the U.S. Department of Education to suspend or terminate an institution's ability to participate in Title IV HEA programs will supersede this policy and institutions are expected to comply with such decision immediately.
 - ii. The application for a substantive change to cease participation in Title IV HEA programs will include the following:
 - The institution's full rationale for the decision
 - A plan for how students will be informed
 - The plan for phase out and anticipated date on which financial aid availability is expected to cease
 - The institution's plan for supporting any students who are currently Title IV recipients
 - The institution's updated budget and strategic plan

III.I. Renewal of Accreditation

1. Renewal of accreditation is required every four to six 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 required every year, including the years in which 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.
 - i. A continuation will be routinely granted for any institution/program that is nearing the end of its current period of accreditation but that has not completed the normal comprehensive review process, pending outcome of said review.
 - ii. Institutions/programs must be fully cooperative with the comprehensive review process in order to receive, and remain under, a continuation. This means all items must be submitted on time and site visits must be promptly scheduled. Failure to cooperate will result in the termination of a continuation.
 - iii. Time spent under continuation is considered to be a part of any future period of accreditation that may be granted, pending outcome of the review. It may not be used to extend the time between comprehensive reviews or to otherwise extend the period of accreditation.

III.J. Actions to Address Non-compliance

MEAC monitors institutions/programs that have been granted preaccreditation/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, criteria, and policies, MEAC may take the following actions:

1. MEAC may at its discretion conduct special evaluations or site visits.
2. MEAC may require an institution/program to show cause why preaccreditation/accreditation should not be withdrawn. A show cause order may be issued for any of the following reasons:
 - a. As a result of non-compliance with MEAC standards, criteria, and/or policies
 - b. When there is a consistent pattern of incomplete, incorrect, and/or late submissions
 - c. When there is a pattern of outcomes and/or Benchmark scoring that consistently demonstrates widespread and/or systemic weaknesses
 - d. The institution/program files for bankruptcy under the U.S. Bankruptcy Code
 - e. Another recognized accrediting agency places the institution/program on probation or takes adverse action
 - f. Other changes are 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 goals, management, ownership, student success in relation to mission, faculty, or facilities

If MEAC issues an order requiring the institution/program to show cause, the institution/program is required to respond in writing and “show cause” why adverse action should not be taken against the institution/program. The MEAC Board of Directors will describe in writing to the institution the terms and conditions of the submission of the response to the show cause order.

An institution’s/program’s show cause response will be processed in the same manner as for a Compliance Report. In evaluating and resolving the show cause, MEAC may:

- vacate the show cause
- place a program or institution on probation,
- continue the show cause with additional reporting,
- take immediate adverse action.

A program may remain subject to a show cause directive for no longer than twelve (12) months without resolution.

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 and submit a Compliance Report demonstrating compliance. That time period may be as short as thirty (30) calendar days from notification, 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

When the specified time period for compliance is shorter than the maximum time allowed by MEAC policy and USDE regulations, MEAC will provide an explanation for the time stated. Institutions/programs may petition MEAC for a longer time period, not to exceed the limit stated above, if circumstances outside of the institution/program's control will not allow the institution/program to demonstrate compliance within the time period granted. Examples: an auditor's report will not be available until after the expected compliance date; a state authorization decision will not be available until after the expected compliance date.

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

4. Good Cause Extensions may be granted toward the time period for compliance in the following circumstances:
 - In situations where an extension is needed to complete a program calendar, fiscal year audit, or other reporting cycle.
 - In situations where documentation/evidence is expected from an external source/process, such as a state authorizing agency or USDE.
 - In situations where MEAC has made an error that has impacted a school's compliance or ability to demonstrate compliance.

III.K. Adverse Action

Institution/programs will be provided with written specification of any deficiencies identified and will be given the opportunity to submit a written response before any adverse action is taken.

If, after the institution/program has had the opportunity to respond to notification of deficiency, it is determined that the institution, individual program within an institution, or program is not in compliance with standards, criteria, or policies and procedures, MEAC will take prompt adverse action against the institution/program. Adverse Action may be taken against individual programs within MEAC-accredited institutions and/or against the institution as a whole.

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

Denial is the decision not to grant accreditation to any institution/program applying for initial or renewal of accreditation. In the case of renewal of accreditation, the institution/program may be allowed to complete the remainder, if any, of the current grant of accreditation.

Withdrawal is the decision to revoke a currently accredited institution/program's grant of accreditation. This ends the institution/program's current grant of accreditation as well as the rights, benefits, and responsibilities of that accreditation.

Suspension is the decision to place a currently accredited institution/program's grant of accreditation on hold as well as the rights, benefits, and responsibilities of that accreditation.

1. Reasons for taking adverse action

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

- a) An institution/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).
- c) The institution/program fails to cooperate in making arrangements for a scheduled visitation.
- d) The institution/program fails to maintain or correct its advertising policies and practices in accordance with MEAC criteria and directives.
- e) The institution/program 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/program is the subject of a pending or final action to suspend, revoke, or terminate accreditation by another recognized accrediting agency.
- i) The institution/program is the subject of a pending or final action to suspend, revoke, or terminate legal authority to provide education by a state or federal agency.
- j) The institution/program 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. Steps following an initial decision for adverse action
 - a) Institution/programs have the right to appeal any decision for adverse action. See III.L Due Process and Appealing MEAC Decisions.
 - b) Details of the adverse action, timeline for appeal, notification requirements, and requirements for a teach-out plan will be sent to the institution/program with notification of the adverse action.
 - c) Adverse actions are not considered final until the deadline for an appeal has been reached without an appeal being submitted or until the appeal process is exhausted.
 3. Reinstating accreditation after adverse action
 - a) An institution/program that has had its accreditation denied or withdrawn 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.
 - b) An institution/program that has had its accreditation suspended must complete the terms of the suspension in order to reinstate accreditation. This will ordinarily involve a comprehensive evaluation of the entire institution/program to determine if accreditation should be reinstated or withdrawn.

III.L. Due Process and Appealing MEAC Decisions

1. MEAC policies and procedures to provide institutions/programs with due process
 - a) MEAC procedures governing accreditation/preaccreditation 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/preaccreditation 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 and responsibilities
 - a) MEAC permits the institution/program the opportunity to appeal the following decisions made by the Board of Directors:
 - Denial of accreditation or preaccreditation
 - Suspension of the institution/program's accreditation, in part or in whole
 - Withdrawal of the institution/program's accreditation, in part or in whole
 - Any other comparable adverse action taken.
 - b) MEAC will keep confidential the details of any action and the basis for the action until the institution/program has either failed to appeal as permitted or MEAC has completed consideration of the institution's/program's appeal.
 - c) Institutions/programs that choose to provide notifications to their administrative staff, faculty, current or prospective students, or other stakeholders prior to a final appeal decision, must provide only accurate, justifiable, and provable information. MEAC must be provided prompt copies of all communications/notifications made.
3. Description of the Appeals Process
 - a) Notification of an adverse decision

If MEAC takes action denying, suspending, or revoking accreditation/preaccreditation, 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 (10) business days following the decision.
 - b) Notice of intent to appeal

An institution/program wishing to appeal the adverse decision must submit a written notice of intent to appeal and applicable fees to MEAC within fourteen (14) business days of its receipt of notification of the adverse action.

c) Appeal

If an appeal is requested, the institution/program must submit a complete written statement of the grounds for its appeal, based on the material upon which MEAC made the adverse decision, within twenty-one (21) business days after the receipt of notification of the adverse action.

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.

When the written statement of appeal is received, the Director of Accreditation will notify the MEAC Executive Committee of the school's appeal and will convene an Ad Hoc Appeal Panel.

d) 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 Ad Hoc Appeal Panel shall be subject to MEAC's Ethics Policies (Section IV), including the conflict of interest policy.

Eligible candidates must not be current members of the MEAC Board of Directors and were not participants in the initial decision for adverse action, or related to 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 Panel undertakes a fresh review of the case. The Ad Hoc Appeal Panel has no authority concerning the reasonableness of accrediting criteria or procedures. 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, monitoring report, and/or compliance report, except when MEAC has received written notification of action or complaints from recognized accrediting and state regulatory agencies. 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.

e) Appointment of the Ad Hoc Appeal Panel

Within three (3) calendar weeks of MEAC's receipt of the request for appeal, the Director of Accreditation shall appoint an Ad Hoc Appeal Panel. A list of seven (7) persons will be identified in advance to the institution/program as the group from which the Ad Hoc Appeal Panel will be selected. The Director of Accreditation will designate one person from the list of seven to serve as Chair of the Ad Hoc Appeal Panel of three persons.

The institution/program, within ten (10) business days of receipt of the list, may strike up to two persons, other than the chair, from the list. Should this occur, the Director of Accreditation 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.

f) The Director of Accreditation 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 Director of Accreditation 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 sixty (60) and no less than forty (40) business days from the final appointment of the Ad Hoc Appeal Panel.

g) Notification of 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.

h) 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.

Audio recording of the hearing shall be maintained and the recording or transcriptions shall be available to the appellant for review.

The Chair of the Ad Hoc Appeal Panel shall have the discretion to recess for a reasonable time and reconvene the hearing upon their 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.

i) Notification of *final* decision

The Director of Accreditation 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, including rationale for the decision, within thirty (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.

j) 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.M. Relinquishment of Preaccreditation/Accreditation

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

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

III.N. Institution/Program Closure, Teach-out Plans and Teach-out Agreements

Due to the broad impact of any 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.

Institutions and programs that are compiling a teach-out and/or closure plan should also include any substantive change(s) that will be needed as part of the process, such as change of location, change in curriculum, entering into contracts with another institution or organization to provide education services.

1. Institution or Program Closure

- a) Institutions/programs that will close are required to complete a closure plan, teach-out plan, and/or a teach-out agreement to be evaluated by MEAC prior to implementation. If an institution or program MEAC accredits or preaccredits closes without a teach-out plan or agreement, MEAC must work with the USDE and the appropriate state agency, to the extent feasible, to assist students in finding reasonable opportunities to complete their education without additional charge.

The closure plan must include:

- i. The effective date of closure.
 - ii. A plan for 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.
 - iii. Full contact information for the entity that will assume responsibility for student records.
 - iv. A plan for the disposition of all institution/program shares, assets, and liabilities in accordance with the institution/program's bylaws or other governing documents.
- b) MEAC will pro-rate the Annual Sustaining Fee for any institution/program closing, according to the final day the institution/program is open.

2. 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 or is expected to cease operation 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 student 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 preaccredits 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 preaccreditation 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 evaluate teach-out plans. The teach-out plan must include:
- i. A listing of all students in all programs and:
 1. their name and student ID number (do not submit social security numbers or birth dates, in part or in whole)
 2. their estimated graduation dates
 3. their anticipated decision for staying at the institution through graduation, transfer, and/or participation in a teach-out agreement with a specific institution
 4. the status of unearned tuition
 5. all current refunds due
 6. their account balances
 - ii. An anticipated timeline of activities, including:
 1. The date by which recruitment, admissions, and new enrollment will cease.
 2. The date(s) by which all marketing materials and advertising will be withdrawn, cancelled, corrected, or deleted.
 3. The date by which an audit will be completed to determine what courses and/or other activities are needed by students currently enrolled to complete their programs.
 4. The date by which development of a schedule of courses to be taught during the teach-out period that ensures that all remaining courses required for the students to complete their programs will be offered in a reasonable sequence. In some cases, it may be necessary to modify the program requirements (e.g., include self-study courses or other alternatives) to enable the students to complete their programs, but in these cases the learning objectives and credit-hour requirements must be equivalent to those of the original program.
 5. The date of last classes
 6. The effective date of site closure, if applicable
 7. The anticipated date of loss of degree-granting authority, if applicable
 8. The anticipated date of loss of Title IV access, if applicable

- iii. An explanation, accompanied by appropriate supporting documentation and timelines, of how the institution has or will notify students, administrative staff, and faculty of the teach-out plan and, if applicable, of any applicable teach-out agreement, including key dates within each.
- iv. A detailed listing of additional charges, if any, and how students will be informed of the charges.
- v. 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.
- vi. A plan for advising students (group and/or individual meetings, dates, agendas).
- vii. 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.
- viii. 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. See Teach-Out Agreements below.

d) Procedures for reviewing teach-out plans

- i. Prior to implementation of a teach-out plan, the institution/program must submit the necessary plan and associated materials to the MEAC office.
- ii. The plan is reviewed by Independent Board Reviewers, which may request additional information from the institution/program.
- iii. After reviewing all materials (including any site visit reports) the IBR will provide a report to the MEAC Board of Directors.
- iv. The Board of Directors will determine areas of further monitoring and recommendations for strengthening the teach-out process. This may include Monitoring and/or Compliance Reports detailing changes in enrollment, administration, faculty, curriculum, facilities, finances and other major components that could affect the quality or equitable treatment of students within the educational program.
- v. Any teach-out plan that is not acceptable and/or that would require undue further monitoring will not be approved and will require that the institution/program enact teach-out agreements in a timely manner.
- vi. MEAC will notify institutions/programs of further reporting requirements within ninety (90) calendar days of submission of the teach-out plan to MEAC.

- vii. If a site visit is required to verify the information provided by the institution/program, one or more members of the IBR 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 receives a teach-out plan from a program that is accredited by another recognized accrediting agency, the Agency will notify that accrediting agency of the teach-out.

3. 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 preaccredits 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 will approve the teach-out agreement only if the agreement is between institutions that are accredited or preaccredited by a nationally recognized accrediting agency, is consistent with applicable standards and regulations, and provides for the equitable treatment of students by ensuring 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
 - 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 and approved by MEAC prior to implementation.

III.O.Complaints against an Institution/Program

1. MEAC will review in a timely, fair and equitable manner any complaint it receives against an accredited/preaccredited 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. Scope of MEAC authority in a complaint is limited to compliance or adherence with MEAC's published standards, criteria, and policies and procedures. Matters of noncompliance will be referred to the appropriate process for remediation or show cause, as appropriate.
3. 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 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. a description of the steps already taken to resolve the problem, and
 - e. a description of what Complainant requests of MEAC to resolve the grievance, and
 - f. 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 Director of Accreditation will notify the Complainant, and request additional information. The Complainant has thirty (30) calendar days to respond with additional information; if additional information is not provided within thirty (30) calendar 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 Director of Accreditation 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. Should the Director of Accreditation be named in the complaint, the MEAC Executive Director or another uninvolved staff or Board member will review the complaint. If the Director of Accreditation determines that the written complaint is outside the scope of MEAC standards or policies, they will notify the Complainant and the MEAC Executive Committee. If the written complaint is found to be within the scope of MEAC standards or policies, the following procedures will commence.

4. Process for handling complaints
 - a. Within fifteen (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 fifteen (15) business days that the complaint has been received and that the complaint process has been initiated. The notification will provide an outline of the remaining steps and an anticipated date of resolution, including that the Respondent has been advised of the nature of the complaint, 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.
- c. The institution/program (the Respondent) will then have a maximum of thirty (30) calendar 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 will 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 calendar 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. The Director of Accreditation will participate as an ex-officio member of the Investigative Committee. 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 (10) 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 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 Monitoring or Compliance Report, to be submitted by the Respondent, addressing changes to inadequate areas or weaknesses identified in the investigation, or
 - ii. adverse action regarding the accreditation or preaccreditation status of the institution or program, and/or show cause action.
 - i. The Investigative Committee shall complete the investigation within sixty (60) calendar days after its formation.
 - j. 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.
 - k. 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 what actions are needed to achieve resolution.
 - l. 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.
5. Resolution of the complaint:
- a. 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 follow MEAC's policies and procedures for Compliance and Monitoring Reports and Show Cause Actions (*see III.G*).
 - b. The Director of Accreditation 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.
 - c. 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 thirty (30) calendar days from the date of the Complaint Findings letter, MEAC will consider the complaint review closed.
 - d. 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 thirty (30) calendar days from the date of the Complaint Findings letter, MEAC will consider the complaint review closed.
 - e. If the Complainant and Respondent accept that the complaint review has been resolved, the MEAC Director of Accreditation will provide written confirmation of closure to both parties.
 - f. 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.

- g. The MEAC Director of Accreditation 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.
6. No persons filing complaints or otherwise participating in the investigation arising from such complaint will be discriminated, harassed, retaliated against, or disciplined as a result of said filing or participation. Procedures for offering protection and for responding to discrimination, harassment, retaliation, or discipline will adhere to MEAC's Non-discrimination policy.