



**meac**  
midwifery education  
accreditation council

## Section F: Site Visit Preparation Manual for Institutions/Programs

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DRAFT

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# The MEAC Accreditation Site Visit

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## Introduction

This site visit manual has been prepared by MEAC staff to facilitate the site visit process for both the school and the Site Visit Team. This manual is designed to provide guidance to accreditation teams tasked with conducting site visits and for the institutions applying for accreditation. Accreditation is crucial for ensuring quality and accountability in higher education, and site visits play a vital role in this process.

## The Site Visit and its Objectives

The MEAC accreditation process includes a site visit to the institution and interviews of students, graduates, faculty, administrative staff, and other relevant parties to verify that the information provided in the Self-Evaluation Report (SER) is accurate and complete and that the program or institution is in compliance with MEAC standards. Each site visit will include a standard list of audits, interviews, and other ways of gathering information, as detailed below. The site visit will also include follow-up on any particular concerns identified during MEAC's review of the SER and/or comments received from third parties. The site visit may also include gathering of information related to other accreditation matters such as substantive change applications, annual report follow-up, and/or complaints filed with MEAC against an accredited institution or program.

## The Site Visit Team

Site visitors are professionals in the field of midwifery who are interested in the institution/program's continued improvement and success. The Site Visit Team (SVT) comprises two independent reviewers (Accreditation Review Committee - ARC) and MEAC's Director of Accreditation.

The site visit is conducted by members of the Accreditation Review Committee (ARC) appointed to evaluate the institution's or program's compliance with MEAC Standards with support from MEAC staff. Site visits are typically two to three days long, depending on the size and complexity of the institution to be visited, travel considerations, and the availability of key people. Interviews may take place before, during, and/or after the site visit.

MEAC works with the institution to establish the best time for the site visit and a tentative schedule of activities for the actual visit. During the visit, ARC members, with support from MEAC staff, will audit files, examine records, tour facilities, and conduct interviews. They will use standardized forms to organize and document their work.

At the end of the visit, the site visitors will provide a verbal summary of their findings to representatives of the institution, reporting its strengths and weaknesses in regard to compliance with the standards. A written report summarizing the results of the ARC's review of the SER, site visit, and interviews will be prepared by the ARC and sent to the school. The institution will have an opportunity to respond to the report and to provide any missing or new information before the ARC's final report is sent to the MEAC Board of Directors for an accreditation decision.

### **MEAC's Responsibilities**

- MEAC will provide the institution with a site visit schedule and additional instructions in advance of the site visit.
- MEAC will make all travel and lodging arrangements for the site visitors but may ask the institution to provide a list of affordable lodging options, driving instructions, and so on.

### **ARC Responsibilities During Site Visit and Interviews**

The tasks below will be performed during the site visit itself and in interviews that may take place before, during, or after the site visit. When the term audit is used in this context, the site visitors will randomly select 10% of the total in that category for review. If the category is small enough that selecting 10% of files would result in fewer than 3 files, the ARC will review a minimum of 3 files. They may review more than the minimum or even all of the files if their initial audit indicates a need for further verification or to follow up on concerns raised in the SER or other parts of the review.

The items listed below are a part of each site visit (unless a given benchmark is not applicable). As described above, additional audits/observations/interviews may be part of the site visit based on the ARC's review of the SER and other materials.

### **Standard I: Mission, Program Assessment, and Student Achievement**

- I.C1, I.C2:
  - Audit student and/or graduate files to verify data provided in the Student Completion and Retention Report.
- I.C3:
  - Audit graduate files to verify data provided in the Graduate Placement Report.
- I.C4:

- Audit graduate files to verify data provided in the Graduate Placement Report. They will look for documented evidence such as copies of NARM certification, state/provincial licensure, or records of website or phone confirmation with certifying or licensing authorities. Site Visitors may also contact certifying or licensing authorities to verify the institution's reports. Site Visitors may also look for evidence (e.g., midwife's business website, brochure, or yellow pages listing or confirmation from an employer or colleague) that the graduate is working as a midwife or in related fields or is continuing her education in related fields.

## Standard II: Curricula

- II.A3:
  - Audit curriculum files to verify information provided in the Curriculum Checklist of Essential Competencies Worksheet. (Audit a minimum of 10% of competencies—the proportion of courses selected depends on the organization of the curriculum.)
- II.A4:
  - Audit student and/or graduate files or other documentation to verify that students obtain the clinical experience required for national certification by NARM as indicated in the NARM Clinical Experiences Requirements Chart.
- II.B1:
  - Audit curriculum files to verify that syllabi clearly specify learning objectives, learning activities, learning resources, and evaluation tools/methods. This audit includes courses offered by distance or correspondence education.
  - Interview students and faculty to verify that course materials distributed to students contain the required information.
- II.B4:
  - Review curriculum files for the course(s) listed in the SER to verify that students are introduced to the Midwives Model of Care™.
- II.B5:
  - Interview students to verify that students engage in learning activities designed to prepare students to provide midwifery care to all mothers, babies, and families, including individuals from populations and cultures different than her own.
- II.C1:
  - Audit student and/or graduate files to verify documentation of competencies as indicated in the Curriculum Checklist of Essential Competencies Worksheet. (Audit a minimum of 10% of skill/ability competencies.)
- II.E1: (Institutional + degree-granting only)

- Audit curriculum files, admissions records, transcripts or other permanent student records or other documentation to verify that students obtain the general education components described by the institution.
- II.E2: (Institutional + degree-granting only)
  - Audit course files, student and/or graduate files, or other evidence to determine if the stated criteria were applied when assessing the level of study and quality of work required for the degree(s) offered.
- II.E3: (Institutional + master/doctoral degrees only)
  - Review recent projects, theses, or dissertations to determine if these criteria were applied when assessing student work.

### **Standard III: Faculty**

- III.A1:
  - Audit faculty files to verify information provided in the Faculty Table. Site visitors will look for documentation that includes current relevant certification and/or licensure, as well as documentation of meeting the 2-year experience requirement. If the institution/program has made any exceptions to the experience requirements, site visitors will review supporting documentation justifying the faculty member's qualification.
  - Interview faculty members to verify qualifications, including a minimum of 2 years of experience.
- III.A2:
  - Audit faculty files to verify information provided in the Faculty Table. Site visitors will look for evidence of degrees/certificates such as transcripts or diplomas, as well as documentation of meeting the 3-year experience requirement as appropriate.
  - Interview faculty members to verify qualifications.
- III.A3:
  - Audit faculty files to verify information provided in the Faculty Table.
  - Interview faculty members to verify qualifications.
- III.A4:
  - Audit faculty files to verify information provided in the Faculty Table.
  - Interview faculty members to verify qualifications.
- III.B1:
  - Interview faculty members to verify that they receive the required training and orientation.
- III.B2:

- Interview faculty members to verify that they have the required opportunities.
- III.B3 (Distance education only):
  - Interview faculty members to verify that they receive training, assistance, and support.
- III.C1:
  - Audit faculty files to verify that performance evaluations have been completed and that any weaknesses have been addressed, including those related to distance or correspondence education teaching, if applicable.
  - Interview faculty members to verify that they are regularly evaluated.
- III.C2:
  - Interview students, graduates and faculty to verify that faculty is adequate to support student achievement of program goals, including in distance or corresponding education courses, if applicable.
- III.C3:
  - Interview faculty members to verify that they are managed, supported, and monitored by a midwife.
- III.D1:
  - Interview faculty members to verify that they have the right to participate in the listed activities and to verify participation.
- III.D2:
  - Audit faculty files (including those of preceptors) to verify that job descriptions or other relevant documents are current and specify rights and responsibilities, including any related to distance or correspondence teaching, if applicable.
- III.D3:
  - Interview faculty members to verify that they have the opportunity to work cooperatively in the facilitation, direct observation, and evaluation of students' learning.
- III.E1: (Institutional + degree-granting only)
  - Audit course instructor files to verify information presented in the Faculty Table.
- III.E2: (Institutional + degree-granting only)
  - Examine faculty files to verify that qualified faculty supervise course instructors who do not hold the degrees described.
  - Interview faculty members to verify that those without degrees at the degree level to which they are teaching or higher are appropriately supervised.

#### **Standard IV: Facilities, Equipment, Supplies, and Other Resources**

- IVA1, IVA2, IVA4:

- Tour facilities to observe classrooms, teaching aids, equipment, and supplies as described in the SER. When all or part of the midwifery education program is delivered through distance learning methods, site visitors will observe examples of methods used for course instruction and technical support available to students and faculty.
- Interview students and faculty to verify that facilities, teaching aids, equipment, and supplies are adequate to meet students' needs and properly maintained and that universal precautions, hazardous waste, and hazardous materials management protocols are used as described. When all or part of the midwifery education program is delivered through distance learning methods, Site Visitors will interview students and faculty to verify that the methods, technology, and support available are adequate to meet student needs.
- IV.B1, IV.B3:
  - Tour the library to verify that resources are current and adequate and references include, at a minimum, those specified in Benchmark IV.B1.
  - When students and/or faculty are not regularly on-site, verify how students can access the library. (Applies to institutions/programs with distance or correspondence education components)
  - Interview students and faculty to verify that the library resources are current and adequate to meet their needs and that the required references are available to them.
  - Interview students and faculty who participate in distance or correspondence education (if applicable) to verify that they have access to the library resources.
- IV.B2:
  - Interview students and faculty to verify that they have access to the required training and information.
- IV.B4:
  - Interview students to verify that they learn appropriate methods for online knowledge acquisition.
- IV.C1:
  - Audit clinical site files to verify the information provided on the clinical site table.
  - Interview students, graduates, and administrative staff to verify that the institution/program follows through on the stated plan for assuring sufficient clinical sites to meet the needs of students who are ready for clinical training.
- IV.C2:
  - Interview students to verify that clinical site facilities, equipment, and supplies are sufficient.
- IV.C3:
  - Audit clinical site files (or other appropriate documents) for evidence of ongoing review.



- IV.C4:
  - Audit clinical site files to verify that agreements or other documentation used by the institution verify that clinical site facilities, equipment, and supplies meet the safety standards as described in the agreements.
- IV.D1:
  - Tour administrative office facilities to ensure that facilities, equipment, technology, and supplies are as described in the SER and meet the needs of the program/institution.
  - Interview administrative staff to verify that administrative office facilities, equipment, technology, and supplies meet the program's/institution's needs.
- IV.D2:
  - Interview technology staff to verify the information presented in SER.
- IV.D3, D4, D5: (Distance education only)
  - Interview technology staff to verify the information presented in SER.
- IV.D6:
  - Interview faculty, staff, and students to verify that they are supported in the development and use of new technologies.
- IV.E1: (Institutional + degree-granting only)
  - Interview students, graduates, and faculty to verify that library resources are sufficient to provide for advanced scholarship and research.

**Standard V: Governance, Financial Management, and Administrative Capacity (Institutional Version—see below for Programmatic Version)**

- V.A1: (Institutional)
  - Interview board members to verify that governance occurs as described in the SER.
- V.B1: (Institutional)
  - Examine financial records, meeting minutes, and other documentation to verify that policies and procedures are followed in each of the areas listed.
  - Interview students, including those participating in distance or correspondence education, if applicable, to verify that students are provided with receipts and have access to their ledgers on a timely basis.
- V.C2: (Institutional)
  - Audit administrative staff files to verify that job descriptions and employment contracts are current and that staff meets the qualifications established by the institution. If applicable, verify that job descriptions and employment contracts contain references to any specific responsibilities relevant to distance or correspondence education.

- Interview administrative staff to verify administrative functions (including, if applicable, administrative functions specific to distance or correspondence education) are performed as described in the SER.
- V.C4: (Institutional)
  - Audit administrative staff files to verify that annual evaluations are performed as described in the SER.
- V.C5: (Institutional)
  - Review relevant evidence that the annual review of administrative capacity is carried out as described in the SER.
- V.C6: (Institutional)
  - Verify that records retention is carried out as described in the SER.
- V.D2: (Institutional)
  - If applicable, verify that the institution remains in good standing with any other agencies by which it is accredited.
- V.D3: (Institutional)
  - Verify that student transcripts are protected from damage or loss, securely stored, and made permanently accessible in compliance with FERPA.

**Standard V: Governance, Financial Management, and Administrative Capacity (Programmatic Version—see above for Institutional Version)**

- V.A1: (Programmatic)
  - Interview appropriate institutional staff to verify that the program participates in governance as described in the SER.
- V.B1: (Programmatic)
  - Interview appropriate institutional staff to verify that the program has adequate institutional support as described in the SER.
- V.C2: (Programmatic)
  - Audit administrative staff files to verify that job descriptions and employment contracts are current and that staff meets the qualifications established by the institution. If applicable, verify that job descriptions and employment contracts contain references to any specific responsibilities relevant to distance or correspondence education.
  - Interview administrative staff to verify administrative functions (including, if applicable, administrative functions specific to distance or correspondence education) are performed as described in the SER.
- V.D1: (Programmatic)

- Verify that the institution remains in good standing with its institutional accreditor.
- V.D3: (Programmatic)
  - If applicable, verify that the program remains in good standing with any other agencies by which it is accredited.
- V.D4: (Programmatic)
  - Verify that student transcripts are protected from damage or loss, securely stored, and made permanently accessible in compliance with FERPA.

### **Standard VI: Student Services**

- VI.A1:
  - Interview students to verify that the student services listed are provided as described in the SER, including to students participating in distance or correspondence education, if applicable.
- VI.B1: (Distance education only)
  - Interview students to verify that technical assistance and technical support are provided as described in the SER.

### **Standard VII: Student Affairs**

- VII.A1:
  - Audit student files and/or admissions files to verify that policies and procedures for the selection and admission of students are followed, including for students who plan to enroll in distance or correspondence education, if applicable.
- VII.A2:
  - Audit student files to verify that individual student enrollment agreements are current and complete. This includes students enrolled in distance or correspondence education, whose enrollment agreements must reference the nature and scope of the distance or correspondence program.
  - Interview students to ensure that they are aware of and understand the terms of their enrollment agreements.
- VII.A3 (Programmatic)/VII.A4 (Institutional):
  - Audit student files and/or transcripts to verify that the policies and procedures for transfer of credit, prior learning assessment, and advanced placement are followed as described in the SER.

- VII.C1:
  - Audit student files, graduate files, and/or transcripts (including those of students participating in distance and/or correspondence education, if applicable) to verify that the policies and procedures for monitoring, enforcing, and notification of satisfactory academic progress are followed.
- VII.C2:
  - Audit student files, graduate files, and/or transcripts (including those of students participating in distance and/or correspondence education, if applicable) to verify that the policies and procedures regarding academic honesty are followed.
- VII.D1: (Institutional)
  - Audit transcripts (including those of students participating in distance and/or correspondence education, if applicable) to verify that they have been prepared and maintained as described in the SER.
- VII.D2 (Institutional)/VII.D1 (Programmatic)
  - Examine survey forms, meeting minutes, and other evidence provided by the institution/program to verify that students (including, if applicable, those enrolled in distance or correspondence education) participate in curriculum evaluation, program planning and evaluation, faculty evaluation, student services evaluation, and policy-making activities.
  - Interview students (including, if applicable, those enrolled in distance or correspondence education) to verify their participation in program planning and evaluation, faculty evaluation, student services evaluation, and policy-making activities.
- VII.D3: (Institutional)
  - Audit student files (including those of students participating in distance and/or correspondence education, if applicable) to verify tuition and fees cancellation and refunds are handed as indicated in the SER.

### **Standard VIII: Measure of Program Length**

- VIII.A1:
  - Audit graduate files and/or transcripts to verify that the graduates complete the program within the minimum and maximum timeframes stated in the SER.
- VIII.B1:
  - Audit curriculum, student files, and/or graduate files to verify that credits are awarded based on the required formula described by the institution and that credit hours awarded for

preceptorships or other clinical instruction must be based on a record of a minimum number of actual clinical contact hours.

- VIII.C1: (Institutional + degree-granting only)
  - Audit curriculum files and graduate transcripts or other permanent student records to verify that degree programs meet the minimum total semester/quarter credits.

### **Standard IX: Complaints and Grievances**

- IX.A1:
  - Interview students, faculty, and staff to verify that the complaint and/or grievance policy is made available to them.
- IX.A2:
  - Interview students, faculty, and staff to verify that individuals are not discriminated against as a consequence of making a complaint.
- IX.A3:
  - Audit complaint and grievance records to verify that policies and procedures are followed and applied fairly and consistently and protect confidentiality (including for students who are enrolled in distance or correspondence education, if applicable).
- IX.B1:
  - Review complaint and grievance records to verify that these records are available for MEAC inspection and retained for at least seven years.
- IX.C1:
  - Interview students to verify that they have been informed about the grievance policies and contact information for MEAC and any relevant state regulatory bodies.

### **Standard X: Compliance with the Institution's Responsibilities under Title IV of the Higher Education Act (Applies only where MEAC is the institutional accreditor and the institution participates in Title IV programs)**

- X.B2:
  - Interview students (including those enrolled in distance and/or correspondence education, if applicable) to verify that they have access to the designated employee(s) responsible for student financial aid programs.
  - Interview the designated employee(s) responsible for student financial aid programs to verify that they administer the program and are available to answer student questions.
- X.B3:

- Interview administrative staff to verify separation of duties between awarding of Title IV funds and disbursing of funds.
- X.B4:
  - Interview third-party servicer (if applicable) to verify responsibilities as described in SER.
- X.B5:
  - Interview students (including those enrolled in distance and/or correspondence education, if applicable) to verify that they are informed of their financial aid options, rights, and responsibilities as described in SER.
- X.C1:
  - Interview the designated individual(s) responsible for the student financial aid program to verify that they have been trained and that there are plans for ongoing training.
  - Review the personnel file of the designated individual(s) responsible for the student financial aid program or other relevant documentation to verify training on financial aid rules and regulations.
- X.C2:
  - Interview students (including those enrolled in distance and/or correspondence education, if applicable) to verify that the institution communicates information that may impact a student's Title IV eligibility as described in SER.

### Preparing for the Site Visit

The host institution will undertake a great deal of preparatory work before the visit. The Self Evaluation Report (SER) is the major result of this effort. Other actions the host institution may include but are not limited to:

1. All individuals involved in site visit preparation should read this manual. A clear appreciation of the Site Visit Team's objectives, procedures, and responsibilities will make the site visit a smoother and more productive undertaking.
2. Enough notice should be given to everyone at the institution who will participate in the site visit so that the site visit can be completed on schedule.
  - a. The program head/department head/director of education should provide a detailed draft schedule that includes the names of interviewees, their roles and office locations, and any other places the SVT will visit to MEAC's Director of Accreditation at least two weeks before the visit.
3. The individual(s) who will head the site visit at the host institution should brief all participating administrators, faculty, and students on what to expect during the visit.
4. Reserve a secure location (classroom, conference room, etc.) where the Site Visit Team can examine all related documents simultaneously.

5. Think of the Site Visit as a time to show off your institution/program to MEAC's SVT.
  - a. Prepare to give a tour of the SVT
  - b. Provide all documentation supplied as part of the SER (see 6b below)
    - i. Be prepared for the SVT to do random checks of student and faculty files
  - c. Set up interviews with administration, faculty, and students and prepare them for what type of questions the SVT will ask (see section titled [Site Visit Interview Questions](#))
6. Any materials used in the preparation of the SER, for example, the files (or a sample) of an entering cohort, which were included in the retention report, should be organized and available to the SVT.
  - a. See the section titled "[A Review of Program's Records](#)" to see what documents need to be included
  - b. Documents may be shared via DropBox or similar cloud drive, on a flash drive, or on paper (this is the least desirable choice)
7. Prior to the visit, the institution will be asked to provide current contact information (phone numbers and/or email addresses) for the following:
  - a. All students and former students listed on the Student Completion and Retention Report submitted with the SER
  - b. Any new matriculating students enrolled since the SER was submitted
  - c. All graduates listed on the Graduate Placement Report submitted with the SER
  - d. All faculty members, including preceptors, listed in the Faculty Table submitted with the SER
  - e. Any new faculty who began teaching since the SER was submitted.
8. Finally, every effort should be made to ensure that the site visit is a cooperative, collegial experience and not an adversarial encounter and that no one involved perceives it as such. The officials in charge of the program's Self Evaluation Report, those responsible for site visit preparation, and the MEAC SVT should take every possible occasion to reinforce this understanding.

The institution will be asked to provide several potential dates for the site visit. The primary person responsible for MEAC accreditation at the institution/program must be on-site and available throughout the site visit. Other individuals responsible for the kinds of information to be verified during the site visit must also be available on-site or readily accessible by phone for any questions that may arise.

### Record Review

It is important to adequately audit the records supporting the SER. The institution/program should make available records relevant to specific standards as identified by the SER. Some materials that should be available include but are not limited to:

- Student handbook
- Clinic handbook
- Faculty/employee handbooks
- Catalog
- Organizational chart
- College policies and procedures
- Advertising materials
- Copies of course syllabi
- Faculty meeting minutes
- Administration meeting minutes
- Program Advisory Board meeting minutes
- Lists of student files, current and past 3 years
- Copies of course evaluation forms and clinic evaluation forms (student and supervisor/site)
- Copies of employer, graduate, and exit surveys
- Data compiled from student assessments

### Ethics of Site Visiting

The following instructions are from the Site Visitors Handbook and are included here to inform institutions/programs about how site visitors are prepared for the site visit.

Ethical behavior during site visits involves clearing your mind and heart of preconceptions, prejudices, etc., and looking for and substantiating the facts asked for in the SER. You have a right to care for your personal needs, such as eating and drinking, going to the bathroom, etc. Otherwise, you are committed to concentrating wholly on your task and the school. Keep your feelings to yourself. Speak only based on the facts as you find them; ask for clarification when you're unsure. You do not decide whether the school is accredited. You are members of a MEAC Accreditation Review Committee, qualified to evaluate midwifery educational institutions or programs, and your role is to perform a complete review. You will report your review and recommendation about the school's accreditation to the Board, which will make the final decision.

1. Conflict of interest
  - a. If you have any conflict of interest with the school, e.g., you have friends who go there, relatives who have graduated from there, assisted them in their programs, utilized their services, have strong disagreements with them, etc., you must disqualify yourself as a site-visitor. Contact MEAC if you are unsure whether you have a conflict of interest.
2. Confidentiality



- a. All information contained in the SER and discovered at the site visit is inviolably confidential. This information can be discussed with the school itself, your co-visitor(s), the MEAC Accreditation Review Committee, and the Board of Directors. The information will be used solely for the purpose of evaluating the institution's or program's compliance with MEAC requirements. The information that you obtain during site visits and through the SER may not be communicated, copied, utilized, or otherwise discussed. Any restrictions on the provision of otherwise confidential information may be superseded by the requirements of government agencies or national accrediting agencies.
3. Accuracy
    - a. Your report must be accurate and substantiated by written and physical materials and face-to-face interactions with the people and materials directly related to the site visit. Information based on personal interactions must contain the person's name and the time and place of the interaction if such documentation is used in the report.
  4. Feelings
    - a. Put your feelings aside, whether positive or negative and stick to the facts. Be calm and methodical. Be an advocate for the program; search diligently for its strengths, and be factual and forthright about weaknesses and deficiencies. Be encouraging. Weaknesses and deficiencies can be corrected. Accreditation facilitates corrections of weaknesses and deficiencies by identifying them, providing requirements for correction and deadlines for corrective implementation.
  5. Know your roles and responsibilities
    - a. As a site visitor, you are charged with identifying compliance with the Standards. The school may ask you to provide information as a "consultant," that is, ask for ideas on how you would address a problem that is beyond the scope of meeting the Standards. Be clear in your role as a site visitor.
  6. Responsibility for expenses
    - a. Except where paid for directly by MEAC, site visitors are responsible for paying for their own meals and incidental expenses, which will be reimbursed by MEAC. MEAC will pay for all transportation and lodging out of the site visit fees.

Your ethical behavior ensures the school's fair and correct treatment by MEAC. MEAC's intention is to accredit schools, not prevent them from accreditation. Your advocacy and fairness are crucial to the success of MEAC's mission and to the multiplicity and variety of educational opportunities for midwives.

## Site Visit Interview Questions

Included in this section are example interview questions for administration, faculty, and students.

### Administration

1. How did the program establish its mission, purpose, and public service values? Who was involved (for example, internal or external stakeholders)?
2. What is the process the program uses to collect, apply, and report information about its performance and its operations?
3. How effective has the program been? How has it improved?
4. What are the program's long-range plans?
5. How does the administrative structure support the program's mission and operations?
6. How does the budgeting process support the program's mission and operations?
7. What are the academic or professional strengths of the faculty as a whole? How has the program distinguished itself in terms of scholarship and/or community service?
8. How active or involved is your advisory council?
9. How are mission-specific required or elective competencies (program options, concentrations, or specializations) created, expanded, contracted, or terminated?
10. How is the internship program (if offered) managed? Has it been successful?
11. How are students recruited?
12. How does the program promote diversity, equity, and a climate of inclusiveness for students and faculty?
13. Describe how the program ensures that students attain the required and elective competencies as well as the professional competencies.
14. What types of communications does the program use to inform students, faculty, alumni, employers, and other stakeholders?

### Faculty

1. What has been the faculty's role in establishing the program's mission, purpose, and public service values?
2. What has been the faculty's role in collecting and applying information about the program's performance?
3. What has been the faculty's role in planning for the program's future?
4. How are faculty involved in program administration and governance?
5. How was the faculty involved in preparing the Self Evaluation Report?
6. What is the faculty's role in program assessment? How are competencies addressed in your course?
7. What is the relationship between the competency assessment done in your course and overall program evaluation?

8. What are the faculty's strengths?
9. What is the faculty's role in the recruitment and hiring of new faculty?
10. What is the faculty's role in the recruitment and admission of students?
11. How does the program promote diversity, equity, and a climate of inclusiveness for students?
12. What support services do faculty provide for students, such as academic advising, internship supervision, or career counseling?
13. What assignments in your classes do students complete to demonstrate competencies in [specific topic]? Can you show us some examples?

### Student

1. What are your career goals?
2. What were your reasons for electing this program?
3. Do you think this program will help you to meet your career goals?
4. Are you generally satisfied with your experience in the program? Has it met expectations? Can you be specific?
5. What do you perceive to be the mission and objectives of this program?
6. Is the curriculum consistent with these goals?
7. Given your participation in the program to date, do you think you are achieving the knowledge, skills, and abilities you will need in a public service job?
8. What are the structural components and degree requirements of the curriculum?
9. What are the strengths and weaknesses of the curriculum?
10. Which single educational experience in this program have you most enjoyed?
11. How would you characterize your "typical" professor?
12. If faculty or course evaluation forms are available to students, have the results of these questionnaires made any difference? If they don't exist, should they?
13. Do students participate in the governance and development of the program? formally? Informally?
14. What is your evaluation of the academic support services - the library, computer facilities, etc.?
15. What is your evaluation of student services - career counseling and placement, etc.?
16. Were admissions criteria and processes clearly articulated, and were advertisements consistent with your experiences after enrollment?
17. Does the program have diversity goals of which you are aware? What do you believe the program is doing to achieve these goals? Are issues about such topics as diversity and cultural competency discussed in any of your classes? (This question should be raised with students in general as well as with students that specific diversity programs intend to serve).
18. What has been the participation of students in the self-study?

19. (For alumni) In what ways are you, as alumni, involved with the program? Are you contacted with any degree of regularity?
20. What would you say to someone requesting your advice about entry into this program?

DRAFT

## The Site Visit Schedule

Day One: Travel	
Evening	SVT Arrival & Hotel Check-IN Pre-Visit Meeting
Day Two	
8:30 am	SVT breakfast
9:30 am	SVT arrives at the institution
9:45 am	Introduction/site visit orientation meeting
10:15 am	Audit curriculum files (Standards I & II)
11:45 am	Lunch
1:15 pm	Audit preceptor/faculty and clinical site files (Standard III)
2:30 pm	Interviews with administrators and faculty
4:00 pm	Interviews with students
5:00 pm	Meet with SVT to answer any outstanding questions related to Standards I-III
5:30 pm	SVT day one complete
Day Three	
9:00 am	SVT breakfast meeting
10:00 am	SVT arrives at the institution
10:15 am	Audit student and graduate files (Standards I, II, VI, VII, VIII, and NARM requirements)
11:45 am	Lunch
1:00 pm	Tour facilities

1:30 pm	Complete file audits
2:30 pm	Audit the MEAC curriculum checklist
4:00 pm	Meet with SVT to answer any outstanding questions related to Standards I, II, VI, VII, VIII, and NARM requirements
4:30 pm	SVT conducts a standard-by-standard review to see what is missing and plans for day four
Day Four	
9:00 am	SVT breakfast meeting
10:00 am	SVT arrives at the institution
10:15 am	Conduct follow-up interviews and audits and address outstanding concerns regarding: Standards V, IX, and X
11:00 am	Catch-up
12:00 pm	Lunch
1:30 pm	SVT and institution/program exit meeting