



Tips for Meeting the MEAC Standards & Benchmarks

Table of Contents

Contact Information for Help	3
Abbreviations in this Manual	3
Standard I: Mission, Program Assessment, and Student Achievement	4
Benchmark I.B.1: Program Goals and Assessments	4
What are Goals?	4
What are Learning Outcomes (Objectives)?	4
What Are The Different Types of Learning Outcomes (Objectives)?	4
Benchmark I.B.2: Program Goals and Assessments	5
What is Ongoing Review and Assessment?	5
How Do You Measure The Achievement Of Program Learning Objectives?	6
Standard II: Curricula	8
Benchmark II.A2.5: Curriculum Mapping	8
Identifying the Educational Contribution a Direct Assessment Program Provides to the Student.	8
Benchmark II.A3.1: Curriculum Mapping	8
Completing the Curriculum Checklist of Essential Competencies.	9
Benchmark II.A5: Curriculum Mapping	9
Completing the NARM Clinical Experiences Requirements Chart	10
Benchmark II.B2.1: Learning Activities	10
Creating a Clinic Handbook for Students	10
Benchmark II.B3: Learning Activities	10
Aligning Learning Activities and Learning Styles	10
Benchmark II.B4: Learning Activities	11
Aligning Learning Activities, Learning Objectives, and Essential Competencies	12
Benchmark II.B5: Learning Activities	12
Inclusion, Diversity, Equity, and Anti-Racism (IDEA)	12
Benchmark II.B6: Learning Activities	13
Identifying Implicit Bias and Structural Societal Injustice	13
Benchmark II.C1: Assessment of Learning	14

Assessment of Learning	14
Benchmark II.D.1: Ongoing Curriculum Improvement	15
Using Student Assessment Data	15
What Data Should a School Collect?	16
How Should a School Use this Data?	16
Benchmark II.D2: Ongoing Curriculum Improvement	17
Planning a Curriculum Review	17
Benchmark II.F: Additional Curriculum Requirements for Distance Education Programs	18
Defining Regular and Substantive Interaction	18
Standard III: Faculty	20
Benchmark III.A1: Faculty Qualifications	20
Making Exceptions	20
Benchmark III.A5: Faculty Recruitment	20
Developing a Comprehensive Non-Discrimination Policy for Faculty Recruitment	20
Benchmark III.B: Faculty Orientation and Professional Development	20
Where to Find Training	21
Implementing Faculty Training	21
Benchmark III.B6: Distance Education	22
Distance Education Training for Faculty	22
Distance Education Training for Students	22
Standard IV: Facilities, Equipment, Supplies, and Other Resources	23
Benchmark IV.B.1: Library and Learning Resources	23
Providing Library and Learning Resources Access	23
Training Faculty and Students to Use Library and Learning Resources	23
Benchmark IV.B2: Library and Learning Resources	23
Providing Faculty and Students Access to IDEA Resources	24
Benchmark IV.B4: Library and Learning Resources	24
Training Students in Appropriate Methods for Effective Online Knowledge Acquisition	24
Benchmark IV.C2: Clinical Sites	24
How to Ensure Clinical Sites Are Meeting MEAC Standards	24
Benchmark IV.C3: Clinical Sites	25
Protecting the Healthcare Needs of Clients and the Public	25
Benchmark IV.D2: Administrative Office Facilities, Digital Technology, and Resources	25
Electronic Security	25
Benchmark IV.D3: Administrative Office Facilities, Digital Technology, and Resources	27
SIS and LMS	27
Benchmark IV.D4: Administrative Office Facilities, Digital Technology, and Resources	27
Providing Technology Training and Support for Faculty and Students	28
Standard V: Governance, Financial Management, and Administrative Capacity	29
Benchmark V.A3: Governance	29
Creating a Strategic Plan	29
Benchmark V.C: Administrative Staff	29
Standard VI: Student Services	30
Benchmark VI.A1: Student Support Services	30

Why Student Support Services Are So Important	30
Benchmark VI.A2: Student Support Services	31
Tutoring	31
Personal Counseling	31
Career Advising and Licensure Help	31
Standard VII: Student Affairs	32
Benchmark VII.B2: Disclosure to the Public, Including Prospective Students	32
Complete the Catalog Checklist	33
Standard VIII: Measures of Program Length	34
Standard IX: Complaints and Grievances	35
Standard X: Standard X Compliance with the Institution's Responsibilities under Title IV of the Higher Education Act	36

DRAFT

Using this Manual

This manual is designed to complement MEAC's Standards of Accreditation. While some Standards and Benchmarks are clear and easily attainable, others are more intricate and may pose challenges or confusion. Only the Standards and Benchmarks that could use a little extra explanation are included. You will notice that there are a number of hyperlinks throughout the manual, these are included for your convenience. For the complete MEAC Standards of Accreditation document, visit MEAC's [website](#). Please feel free to send me suggestions!

Contact Information for Help

Director of Accreditation | Caroline Rivera

Email | caroline@meacschools.org

Phone | 360.466.2080 Ext 3 or text @757.270.8396

Abbreviations in this Manual

AI = Artificial Intelligence

FERPA = Family Educational Rights and Privacy Act

HIPAA = Health Insurance Portability and Accountability Act

IDEA = Inclusion, Diversity, Equity, and Anti-racism

LMS = Learning Management System

MEAC = Midwife Education Accreditation Council

MFA = Multi-Factor Authentication

NARM = National Association of Registered Midwives

OSHA = Occupational Safety and Health Administration

SER = Self-Evaluation Report

SIS = Student Information System

You will notice that I use school/program/institution interchangeably.

Standard I: Mission, Program Assessment, and Student Achievement

Benchmark I.B.1: Program Goals and Assessments

There are broad goals and specific learning outcomes for each program that fall under the grant of accreditation, which reflect its mission and are commensurate to the certificate or degree awarded.

What are Goals?

Goals are broad statements that define the purpose of a program and describe the type of graduate it aims to produce. Ensure that your goals are specific and measurable so that you can track progress and success. An example of a program goal is to “Provide competent, safe, and culturally sensitive care utilizing the midwifery management process to independently manage the care of women throughout the lifespan” (from Seattle University).

What are Learning Outcomes (Objectives)?

Learning objectives are statements that describe the knowledge or skills students should have after completing a class, assignment, course, or program. Ensure that your learning objectives align with the broader goals of the program. Each objective should contribute to achieving one or more of the program goals. Start each learning objective with an action verb that indicates what the participant will be able to do. Common action verbs include "understand," "demonstrate," "analyze," "synthesize," "apply," "create," etc. Make sure that your learning objectives are specific and measurable. They should clearly define what the students will know or be able to do by the end of the program. Consider using [Bloom's Taxonomy](#) to structure your learning objectives. This framework categorizes learning objectives into different levels of cognitive complexity, such as remembering, understanding, applying, analyzing, evaluating, and creating.

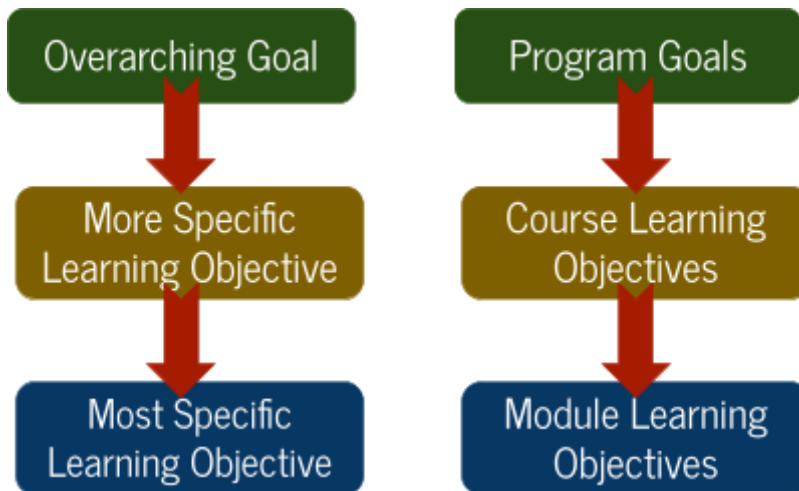
What Are The Different Types of Learning Outcomes (Objectives)?

There are program learning outcomes (objectives). An example of a program learning objective is “Independently assess the well-being of the mother and fetus during the first antenatal visit and subsequent visits” (AI generated).

There are course learning outcomes (objectives). An example of a course learning objective is “Upon completion of this course, students will be able to demonstrate comprehensive knowledge and understanding of the principles, practices, and ethical considerations in midwifery care” (AI generated).

There are module (topic) learning objectives. An example of a module learning objective for a unit on suturing is “By the end of this module, midwifery students will proficiently demonstrate the knowledge

and skills required to perform basic suturing techniques in obstetric and perineal lacerations” (AI generated).



Benchmark I.B.2: Program Goals and Assessments

The institution or program department has a plan for ongoing review and assessment of the achievement of program learning outcomes for each program that falls under the grant of accreditation as a tool for quality improvement.

What is Ongoing Review and Assessment?

Ongoing review and assessment in higher education refer to continuous processes used to evaluate the effectiveness of educational programs, courses, teaching methods, and student learning outcomes. These processes are integral to quality assurance and improvement efforts within academic institutions. Here's an overview of ongoing review and assessment in higher education:

1. **Continuous Evaluation:** Ongoing review involves continuous monitoring and evaluation of various aspects of higher education, including curriculum, teaching strategies, assessment methods, and student performance. It is not limited to specific points in time but occurs throughout the academic year.
2. **Formative Assessment:** This type of assessment is conducted during the learning process to provide feedback that can be used to improve teaching and learning. It helps instructors identify areas where students may be struggling and adjust their teaching methods accordingly.
3. **Summative Assessment:** Summative assessment occurs at the end of a course or program to evaluate students' overall performance and achievement of learning objectives. It typically includes final exams, projects, or other assessments that measure the extent to which students have mastered the content.

4. **Feedback Mechanisms:** Ongoing review involves establishing feedback mechanisms through which students can provide input on their learning experiences, course materials, and teaching methods. This feedback helps instructors make informed decisions about instructional design and delivery.
5. **Data Collection and Analysis:** Institutions collect various types of data, including student grades, course evaluations, and standardized test scores, to assess the effectiveness of educational programs. Data analysis techniques such as statistical analysis and qualitative methods are used to interpret the results and identify areas for improvement.
6. **Program Evaluation:** Ongoing review encompasses the evaluation of entire academic programs to ensure they are meeting their intended goals and objectives. This may involve assessing program outcomes, student retention rates, graduation rates, and graduate placement.
7. **Continuous Improvement:** The ultimate goal of ongoing review and assessment is to facilitate continuous improvement in higher education. By identifying strengths and weaknesses in educational programs and practices, institutions can implement targeted interventions to enhance student learning and success.

Overall, ongoing review and assessment play a crucial role in maintaining the quality and relevance of higher education programs, ensuring that they meet the needs of students, employers, and society at large.

How Do You Measure The Achievement Of Program Learning Objectives?

Measuring the achievement of program learning goals in higher education involves a systematic approach that incorporates multiple methods of assessment. Here's a general framework for how this can be done:

1. **Define Program Learning Goals:** Start by clearly defining the program learning goals or outcomes. These should be specific, measurable, achievable, relevant, and time-bound (SMART). Each program should have a set of overarching goals that articulate what students are expected to know, understand, and be able to do upon completion of the program.
2. **Align Assessments with Learning Goals:** Develop assessments (e.g., exams, projects, presentations, portfolios) that directly align with the program learning goals. Each assessment task should measure one or more of the intended learning outcomes. This alignment ensures that assessment results provide meaningful insights into student achievement of the goals.
3. **Use Direct and Indirect Assessment Methods:** Direct assessment methods involve measuring student performance or artifacts directly related to the learning goals (e.g., exams, rubric-based evaluations of student work). Indirect assessment methods gather information about student

perceptions, attitudes, or self-reported behaviors related to the learning goals (e.g., surveys, focus groups, interviews).

4. **Collect Assessment Data:** Administer assessments to students at appropriate points in the program (e.g., course-level assessments, capstone projects, exit surveys). Collect both quantitative and qualitative data to gain a comprehensive understanding of student achievement.
5. **Analyze Assessment Results:** Analyze assessment data to determine the extent to which students have achieved the program learning goals. This may involve comparing student performance against established benchmarks, conducting statistical analyses, and examining trends over time.
6. **Use Multiple Measures:** Avoid relying on a single assessment method or data point to evaluate program learning goals. Instead, multiple measures should be used to triangulate findings and gain a complete picture of student achievement.
7. **Provide Feedback and Close the Loop:** Use assessment results to provide feedback to students, faculty, and program administrators. Identify areas of strength and areas for improvement concerning the learning goals. Implement changes to curriculum, instruction, or assessment practices as needed to address areas of weakness and enhance student learning.

DRAFT

Standard II: Curricula

Benchmark II.A2.5: Curriculum Mapping

For direct assessment programs, identify and describe the educational contribution the direct assessment program provides to students. Such contributions may include syllabi, modules, engagement with faculty, assignments, assessment of student learning, or other activities that advance the student's knowledge or skills above the level that the student may have already achieved before matriculation.

Identifying the Educational Contribution a Direct Assessment Program Provides to the Student.

Direct and indirect assessment approaches differ in method and focus. Direct assessment measures students' actual performance or products to evaluate their knowledge, skills, and competencies related to specific learning outcomes. Direct assessment methods involve observing, analyzing, and evaluating students' performance directly. This can include exams, portfolios, performance assessments, capstone projects, and other forms of assessment where students demonstrate what they have learned. Indirect assessment measures students' perceptions, attitudes, or beliefs about their learning experiences, rather than directly evaluating their performance or products. Indirect assessment methods typically involve surveys, questionnaires, interviews, focus groups, or other tools to gather data on students' opinions, satisfaction, or perceived learning gains.

Indirect assessment can be measured by administering student satisfaction surveys, student perception of instructor surveys, and graduate employer surveys.

The effectiveness of direct assessment can be measured and reported in many ways. Course syllabi should include measurable learning outcomes tied to the various direct assessments, so if a student completes a course successfully, the assumption is that the learning objectives tied to direct assessment were met. Schools can submit course success rates to illustrate the contribution of direct assessment to students' education. For example, if a course directly assesses suturing and 95% of the students complete the course successfully, the assumption is that the student can perform suturing. Similarly, the effectiveness of direct assessment is also measured through quantifiable learning activities or skills checks (each learning activity and skills check should be tied to a specific learning objective).

Benchmark II.A3.1: Curriculum Mapping

Complete the Curriculum Checklist of Essential Competencies Worksheet to specify where these competencies are taught/learned and assessed in your curriculum.

Completing the Curriculum Checklist of Essential Competencies.

There are a whopping 272 Essential Competencies divided into seven categories. Each category has a set of skills and a set of knowledge items that a potential midwife should possess before taking the NARM exam. The skills will likely be covered in clinical courses and documented on a skills checklist sheet that the preceptor signs. The knowledge items may be taught in a number of ways and in more than one course. The best way to ensure prospective midwives are provided opportunities to learn everything required is to determine the courses in which each skill or knowledge is taught. Include the competencies in the syllabi and connect them to course and module learning objectives. For example, Competency 0.1 is Handwashing - this skill is likely taught in the first clinical course. A course objective aligning with this competency might be “Student will demonstrate understanding and application of Universal Precautions.” It is important to align the Essential Competencies, Program Goals, Course and Module Learning Objectives with learning activities and assessments. On the next page is an example of a course alignment table I created for one of the modules in a cultural anthropology course:

Course Learning Objectives (SLO)

1. Describe key concepts and methods of cultural anthropology.
2. Explain the concept of culture, cultural diversity, and culture change.
3. Demonstrate how anthropological concepts apply to addressing human and global challenges.

Week 1: Anthropology and Culture

Module (Chapter) Learning Objectives (MLOs)	Course Materials	Assignments
<p>1.1 Define the term anthropology (SLO1)</p> <p>1.2 Identify the methods used by anthropologists to view human cultures (SLO1)</p> <p>1.3 Define the term globalization (SLO1)</p> <p>1.4 Identify the importance of anthropology (SLO1)</p> <p>1.5 Identify how globalization is transforming anthropology (SLO3)</p> <p>2.1 Define the term culture (SLO2)</p> <p>2.2 Identify how has the culture concept has developed in anthropology (SLO2)</p> <p>2.3 Identify how culture and power are related (SLO2)</p> <p>2.4 Identify the concept of genetics vs culture argument in human development (SLO2)</p> <p>2.5 Identify how culture is created (SLO2)</p> <p>2.6 Identify how globalization is transforming culture (SLO3)</p>	<p>Reading: Guest Chapter 1: Intro to Anthropology and Chapter 2: Culture (SLOs 1, 2, & 3; MLOs 1.1-1.5 & 2.1-2.6)</p> <p>Study Tools & Resources: Chapter Notes, Practice Quizzes, Chapter Videos</p>	<p>Quiz 1: Chapters 1-2 (SLOs 1, 2, & 3; MLOs 1.1-1.5 & 2.1-2.6)</p> <p>Topic Assignment 1: Cultural Rites of Passage (SLOs 1, 2, & 3; MLOs 2.1, 2.3, 2.5, & 2.6)</p>

Benchmark II.A5: Curriculum Mapping

For each entry-level midwifery program that will fall within the grant of accreditation, the curriculum guides students through their clinical skill development and preceptorships, and those experiences prepare them to meet the current standard for midwifery practice in the U.S.

Completing the NARM Clinical Experiences Requirements Chart

This form was updated in May of 2024. You can use the NARM Chart to show when and where students acquire specific clinical skills and how the experiences are documented.

Benchmark II.B2.1: Learning Activities

Provide the syllabi/handbook distributed to students for clinical courses/clinical training/practicum periods that specify the following: learning objectives, learning activities, learning materials, learning resources, and student evaluation/assessment methods.

Creating a Clinic Handbook for Students

In addition to course syllabi, a clinic handbook should be created and distributed to students. The handbook can be a general clinic handbook for students throughout the program, including OSHA standards and Universal Precautions. The handbook should also include the goals and objectives of the clinical courses, learning materials (list of textbooks and other reference material), checklists of skills, and general explanations of learning assessments or ways students will be evaluated.

Benchmark II.B3: Learning Activities

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

Aligning Learning Activities and Learning Styles

Every academic course should present learning activities in a way that will reach all learning styles. Aligning learning activities with learning styles involves designing instructional strategies and activities that cater to the preferences and strengths of different learners. “Here's how you can align learning activities with various learning styles:

1. Visual Learners:
 - Use diagrams, charts, graphs, and videos to present information.
 - Incorporate visual aids and presentations into lectures.
 - Encourage the use of mind maps or concept maps to organize information.
 - Provide visual cues and prompts during discussions and activities.
2. Auditory Learners:
 - Use verbal explanations and lectures to deliver content.
 - Incorporate discussions, debates, and oral presentations.
 - Use recorded lectures, podcasts, and audiobooks as supplementary resources.
 - Encourage students to read aloud or discuss concepts with peers.

3. Kinesthetic/Tactile Learners:
 - Include hands-on activities, experiments, and simulations.
 - Provide opportunities for movement and physical interaction during learning.
 - Use manipulatives, models, and real-world examples to illustrate concepts.
 - Encourage role-playing, group projects, and interactive games.
4. Reading/Writing Learners:
 - Provide written materials such as textbooks, articles, and handouts.
 - Assign reading assignments, essays, and written reflections.
 - Encourage note-taking, summarizing, and outlining.
 - Use online platforms for written discussions, blogging, or collaborative writing activities.
5. Social Learners:
 - Foster collaborative learning environments through group projects and discussions.
 - Use cooperative learning strategies such as peer teaching and group problem-solving.
 - Encourage networking, study groups, and community engagement.
 - Incorporate activities that promote teamwork and interpersonal skills development.
6. Solitary/Individual Learners:
 - Provide opportunities for self-paced learning through online modules or independent study.
 - Offer choices and autonomy in selecting learning resources and assignments.
 - Encourage reflective practices such as journaling or self-assessment.
 - Provide quiet spaces for focused study and concentration.

When designing learning activities, it's essential to consider the diversity of learners within the classroom and incorporate a variety of instructional methods to accommodate different learning styles. Flexibility, differentiation, and student engagement are key principles in aligning learning activities with learning styles to create an inclusive and effective learning environment.” (AI generated).

It is impossible to present every concept for every learning style, but it is important to provide variety and balance in learning activities.

Benchmark II.B4: Learning Activities

For each program that will fall within the grant of accreditation, learning activities support a competency-based approach to education. In other words, student achievement of essential competencies for midwifery practice is the goal of the learning activities and the measure of student success.

Aligning Learning Activities, Learning Objectives, and Essential Competencies

“Aligning learning activities with learning objectives is crucial for ensuring students have meaningful opportunities to achieve the intended learning outcomes. Here's how you can align learning activities with learning objectives effectively:

1. Understand the Learning Objectives:
 - Start by clearly defining the learning objectives for the lesson or course. These objectives should articulate what students are expected to know, understand, or be able to do by the end of the learning experience.
2. Identify Appropriate Activities:
 - Select learning activities that directly support the attainment of the learning objectives. Consider the types of tasks and experiences that will help students develop the knowledge, skills, and competencies outlined in the objectives.
3. Map Activities to Objectives:
 - Align each learning activity with specific learning objectives. Clearly articulate how each activity contributes to achieving the desired learning outcomes.
4. Provide Varied Experiences:
 - Offer a variety of learning activities to address different aspects of the learning objectives and cater to diverse learning styles and preferences. Mix lectures, discussions, group work, hands-on activities, and multimedia resources as appropriate.
5. Include Formative Assessment:
 - Integrate formative assessment opportunities within learning activities to monitor student progress and provide feedback. These assessments should align with the learning objectives and help guide instruction.” (AI generated)

Refer to the alignment chart example provided on page 8 under Benchmark II.A3.1. Remember this is all about alignment; aligning the learning activities, learning objectives, and essential competencies.

Benchmark II.B5: Learning Activities

Inclusion, Diversity, Equity, and Anti-Racism (IDEA)

“In the context of midwifery, inclusion, diversity, equity, and anti-racism are essential principles and practices that aim to promote respectful, accessible, and culturally responsive care for all individuals. Here's how each of these concepts applies to midwifery:

1. Inclusion:
 - Inclusion in midwifery refers to creating environments where all individuals, regardless of their background, identity, or circumstances, feel welcomed, respected, and valued. It

involves actively promoting diversity and ensuring everyone has equitable access to midwifery care and services.

2. Diversity:

- Diversity in midwifery acknowledges and celebrates the variety of backgrounds, cultures, identities, and experiences among birthing individuals and communities. It recognizes the importance of culturally competent care and the need to address diverse populations' unique needs and preferences.

3. Equity:

- Equity in midwifery involves ensuring fair and just access to high-quality care and services for all individuals, particularly those historically marginalized or underserved. It requires identifying and addressing systemic barriers to healthcare access and outcomes, including socioeconomic disparities, geographical barriers, and institutional biases.

4. Anti-Racism:

- Anti-racism in midwifery involves actively challenging and dismantling racism and discrimination within the profession and healthcare system. It requires acknowledging and addressing how racism, bias, and inequity impact birthing individuals' experiences, outcomes, and access to care. This includes examining and addressing racial disparities in maternal and infant health outcomes, advocating for culturally responsive care practices, and promoting diversity and representation within the midwifery workforce.” (AI generated).

How does your program promote IDEA? Where is this built into the curriculum? What activities are aligned?

Benchmark II.B6: Learning Activities

For each program that will fall within the grant of accreditation, the curriculum includes learning activities and/or competencies designed to bring awareness of each student's own personal biases and the structural societal injustices and inequities that impact the delivery of care to a diverse population.

Identifying Implicit Bias and Structural Societal Injustice

Helping students identify their implicit biases will allow them not only to acknowledge where they are in their own biases, it will also allow them to address these biases and work to overcome them. An anthropologist named Khiara Bridges published an ethnography called “Reproducing Race: an Ethnography of Pregnancy as a Site of Racialization.” In this ethnography, Bridges analyzes the intersection of race and reproduction at a large medical training facility in New York City. The

overarching takeaway is that racism is taught and reinforced in medical education and that the implicit biases of medical teaching staff are passed on to medical students perpetuating the issue. This is a great ethnography if your program is seeking materials to include.

If you want a free implicit bias test for your students check out [Project Implicit](#). They have assessments for implicit bias for everything from weight preferences to sexuality to race.

Benchmark II.C1: Assessment of Learning

For each entry-level midwifery program that will fall within the grant of accreditation, the program has developed an assessment plan by which students are regularly evaluated on their acquisition of the knowledge, skills, and abilities necessary to attain the competencies specified in the MEAC Curriculum Checklist of Essential Competencies using valid and reliable assessment methods.

Assessment of Learning

An assessment plan can be an incredibly useful tool in ensuring student success. The plan should be comprehensive and designed to evaluate midwifery students' knowledge, skills, and competencies throughout their educational journey. "Here are key components that should be included in such a plan:

1. Learning Objectives and Outcomes:
 - Clearly defined learning objectives that outline the knowledge, skills, and attitudes students are expected to acquire by the end of the program.
 - Measurable learning outcomes that specify the observable behaviors or competencies students should demonstrate to indicate achievement of the objectives.
2. Assessment Methods:
 - A variety of assessment methods that align with the learning objectives and allow for a comprehensive evaluation of student learning. This may include written exams, practical assessments, clinical evaluations, simulations, case studies, presentations, and reflective assignments.
 - Formative assessments to monitor student progress and provide feedback throughout the program.
 - Summative assessments to evaluate student performance at key milestones, such as at the end of courses or clinical rotations.
3. Rubrics and Scoring Criteria:
 - Clear and transparent rubrics or scoring criteria for each assessment method, outlining the expectations and standards for student performance.
 - Consistent application of rubrics to ensure fairness and objectivity in grading.
4. Feedback and Evaluation:

- Providing timely and constructive feedback to students on their performance, highlighting strengths and areas for improvement.
 - Encouraging self-reflection and self-assessment to promote continuous learning and professional growth.
 - Collecting feedback from students on the assessment process to identify areas for improvement and ensure the fairness and effectiveness of assessments.
5. Diversity and Inclusion:
- Ensuring that assessment methods are inclusive and equitable, considering students' diverse backgrounds, experiences, and learning styles.
 - Avoiding bias in assessment design and evaluation, and addressing systemic barriers that may impact the performance of underrepresented or marginalized groups.
6. Validity and Reliability of Assessment Methods:
- Ensuring that assessment methods are valid, meaning they accurately measure what they are intended to measure, and reliable, meaning they produce consistent results over time and across different evaluators.
 - Regularly review and validate assessment tools and processes to maintain effectiveness and relevance.
7. Continuous Improvement:
- Ongoing review and evaluation of the assessment plan to identify strengths and areas for improvement.
 - Incorporating feedback from faculty, students, and stakeholders to refine assessment methods and enhance the overall educational experience.” (AI generated).

A formative assessment occurs during the learning process such as an interactive textbook chapter incorporating quiz questions throughout. A summative assessment evaluates student learning at the end of an instructional unit by comparing it against some standard or benchmark.

Incorporate the assessment information in the MEAC Curriculum Checklist of Essential Competencies.

Benchmark II.D.1: Ongoing Curriculum Improvement

Using Student Assessment Data

For each program that will fall within the grant of accreditation, student assessment data is collected and reviewed annually to determine whether curricular changes are needed. If students are not achieving learning objectives and/or competencies, the program provides a plan that shows how the curriculum will be reevaluated or reviewed to ensure that future students will achieve the learning objectives.

What Data Should a School Collect?

Student assessment data may include course grades, acquisition of clinical skills, and NARM certification pass rates. All of these can be tied to specific learning objectives and core competencies. Other important data include student satisfaction surveys, graduate employer satisfaction surveys, faculty meeting minutes, and Program Advisory Committee meeting minutes.

How Should a School Use this Data?

Schools can use data collected to make decisions regarding curriculum improvement by determining shortfalls in learning objectives, activities, and assessments. “Using student assessment data for curriculum improvement in midwifery education is essential for ensuring that educational programs remain effective, relevant, and aligned with the evolving needs of students and the profession. By leveraging student assessment data for curriculum improvement, midwifery education programs can enhance the quality of education, better prepare students for clinical practice, and contribute to the advancement of the midwifery profession. Here's how this process typically works:

1. **Data Collection:** Assessment data can come from various sources, including written exams, clinical evaluations, simulations, project assessments, and feedback from students and preceptors. These data points provide insights into students' knowledge, skills, competencies, and overall performance.
2. **Analysis and Evaluation:** Once the assessment data is collected, it needs to be analyzed to identify patterns, trends, strengths, and areas for improvement. This analysis may involve comparing performance across cohorts, identifying common challenges, and assessing alignment with program objectives and accreditation standards.
3. **Identifying Gaps and Areas for Improvement:** Based on the analysis, educators and curriculum developers can identify gaps in the curriculum or areas where students are struggling. This may include content areas that are not adequately covered, skills that require more emphasis, or teaching methods that are less effective.
4. **Curriculum Revision:** Using the insights gained from the assessment data, curriculum developers can revise the curriculum to address identified gaps and improve student learning outcomes. This may involve updating course content, adjusting teaching strategies, integrating new technologies or teaching modalities, or enhancing clinical experiences.
5. **Implementation and Monitoring:** The revised curriculum is implemented, and ongoing monitoring and evaluation are conducted to assess its effectiveness. Assessment data continues to be collected to track student progress, identify any new areas for improvement, and ensure that the curriculum changes are achieving the desired outcomes.

6. **Feedback Loop:** Feedback from students, faculty, preceptors, and other stakeholders is crucial throughout this process. Regular feedback mechanisms should be established to gather input on the effectiveness of curriculum changes and to make further adjustments as needed.
7. **Continuous Improvement:** Curriculum improvement is an ongoing process that requires continuous monitoring, evaluation, and refinement. Assessment data serves as a foundation for evidence-based decision-making and ensures that the curriculum remains dynamic and responsive to the needs of students and the profession.” (AI generated).

Benchmark II.D2: Ongoing Curriculum Improvement

For each program that will fall within the grant of accreditation, ongoing, formal review of the program’s curriculum occurs to maintain or improve education quality and student success. This review must include both didactic and clinical courses and should include, at a minimum, faculty and graduate feedback.

Planning a Curriculum Review

A curriculum review is a periodic evaluation process that assesses how well a given academic program accomplishes its stated purpose. The first step to planning a curriculum review is developing policies and procedures to guide the process:

1. What is the purpose of the policy?
2. How often will the curriculum be reviewed?
3. Who is involved in the review process?
4. What is the overall goal of the review process?
5. What is the step-by-step procedure that the curriculum review will follow?

The MEAC Self-Evaluation Report (SER) can be a great starting place in the curriculum review process because the SER requires schools to evaluate their program mission, program quality, and standards of assessment. One of the requirements of the SER is curriculum mapping and curriculum mapping can provide insights into proper course sequencing, learning gaps, and alignment with the institution/program mission.

Consider the following:

1. Are the courses sequenced properly? Does coursework build upon itself as students move through the program?
 - Consider referring to Bloom’s Taxonomy in considering course sequencing and learning objectives.
2. Are all of the program outcomes met somewhere in the curriculum? If not, these are gaps in learning.

- Schools can identify gaps in learning by connecting program learning objectives and core competencies to specific courses.
 - Evaluating student success throughout the program (course grades, completion of skills checklists, retention, etc.) can be used to further identify gaps in learning.
3. Are students successfully completing the coursework, graduating from the program, passing the NARM exam, and finding work?
- Schools can gather data on student course completion, graduation numbers, NARM pass rates, and job placement to show that the program is designed to enable successful graduates.
4. Are students satisfied with what they learned in the program?
- Student satisfaction should be evaluated at specific times throughout the program (e.g., after the first term, halfway through the program, nearing the end of the program, and 6 months following graduation).
 - It can be difficult to get students to participate in these surveys so it is important to stress to them from the start of the program the importance of their feedback.
5. Are employers satisfied with students who graduated from the program?

Benchmark II.F: Additional Curriculum Requirements for Distance Education Programs

Distance education programs ensure regular and substantive engagement between students and academic faculty.

Defining Regular and Substantive Interaction

“Perhaps the most critical distinction between correspondence courses and distance education courses under longstanding Department regulations is that distance education courses involve “regular and substantive interaction.” That key characteristic, however, has never been specifically defined. The final regulations thus define “regular interaction” as that which, prior to the student’s completion of a course or competency: (1) provides the opportunity for substantive interactions between instructors and students on a predictable and scheduled basis commensurate with the length of time and the amount of content in the course or competency and (2) monitors the student’s academic engagement and success and ensuring that an instructor is responsible for proactively engaging in substantive interaction with the student when needed, on the basis of such monitoring, or upon request by the student. Further, the final regulations define “substantive interaction” as that which engages students in teaching, learning, and assessment, consistent with the content under discussion, and includes at least two of the following: providing direct instruction; assessing or providing feedback on a student’s coursework; providing information or responding to questions about the content of a course or competency; facilitating a group discussion regarding the content of a course or competency; or other

instructional activities approved by the institution's or program's accrediting agency." (Title 34, Subtitle B, Chapter VI, Part 600, Subpart A, 600.2).

Most Learning Management Systems have the ability to run reports on faculty and student engagement. Schools need to require a certain amount of interaction and feedback from faculty, e.g., faculty member must provide in-line feedback to written assignments, faculty member must post in discussion forums at least 3 times a week, faculty member must hold X number of office hours (can be virtual) per week, etc.

DRAFT

Standard III: Faculty

Benchmark III.A1: Faculty Qualifications

All academic faculty who are teaching core midwifery courses and clinical faculty members who are midwives must be qualified as follows:

- a. Nationally certified midwife (CPM, CM, CNM) and/or legally recognized in a jurisdiction, province, and state; AND
- b. Have at least three years of work experience in clinical midwifery practice -OR- a minimum of 50 births as the primary attendant.

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

Making Exceptions

Exceptions must be made on occasion. The important thing to remember is that the exception must be justified with documentation. If you have questions, reach out to the Director of Accreditation for guidance.

Benchmark III.A5: Faculty Recruitment

All faculty members are recruited, appointed, and promoted without discrimination, harassment, retaliation, or discipline against any individual or group on the basis of their actual, implied, or perceived: race; color; national or ethnic origin or ancestry; religion or creed; sex, gender, gender identity or expression, including transgender identity; sexual orientation; marital status; familial status; age; disability; genetic information; or any other protected category under federal, state, or local law.

Developing a Comprehensive Non-Discrimination Policy for Faculty Recruitment

If your institution/program does not have a non-discrimination policy already, there are many examples online. It is important to include provisions for all protected classes and to have substantive nonretaliation and anti-harassment policies. Your non-discrimination policy should be posted on the program's website, linked to any job ads, and published in the faculty handbook. Schools can implement annual training to ensure that faculty are aware of the policies.

Benchmark III.B: Faculty Orientation and Professional Development

Academic and Clinical faculty receive orientation and ongoing training in:

1. The mission, goals, values, and educational philosophy of the midwifery program

2. Principles of adult teaching and learning (in the classroom, virtual classroom, and in the clinical setting as appropriate)
3. Competency-based education and assessment
4. Concepts of cultural humility, anti-racism, and inclusivity as they relate to midwifery education and practice
5. Informed decision-making
6. Race and other forms of privilege, inequities, and implicit bias as it relates to education and healthcare delivery
7. Training in adult learning and teaching methods in the classroom setting
8. Best practices in student assessment techniques in the classroom setting
9. Opportunities to keep up-to-date on current research in midwifery practice and perinatal care

Academic faculty are required to have additional trainings:

10. Doctrine of Fair Use (Copyright)
11. Plagiarism
12. Health Insurance Portability and Accountability Act (HIPAA)
13. Family Educational Rights and Privacy Act (FERPA)
14. Sexual harassment (Note: Title IV schools should refer to Title IX and the Clery Act for training requirements)
15. Training and support in developing course materials and curriculum
16. Training in current classroom-educational technologies

Clinical faculty are required to have additional trainings:

1. Patient's rights
2. Ethics of cross-cultural or service-learning models

Where to Find Training

Training websites are linked. There are many possibilities on the web, I just picked a few. The Department of Education has [online training modules for FERPA](#). OSHA Academy has [online training for HIPAA](#) and [many other training modules](#). HiveCE has [online training modules in cultural competency](#) and a number of [MEAC-approved CE](#). MEAC also has a number of [CE courses](#).

Implementing Faculty Training

Motivating faculty to complete training can be achieved through various strategies that emphasize the benefits of training, address potential barriers, and create a supportive environment. It can be especially difficult to get clinical faculty to complete training when they are not being paid. Illustrate the importance of the trainings your school requires, demonstrating the value to the faculty, students, and the school.

Benchmark III.B6: Distance Education

In distance and education programs, academic faculty receive training and support for the successful pedagogical and technical delivery of courses.

Distance Education Training for Faculty

Teaching online is very different from teaching in a traditional classroom environment. A great resource for distance education training is [Quality Matters](#). Distance education requires much more than content knowledge, it requires attention to course design. Distance education programs should provide substantive training to all distance education faculty that includes best practices in course design; alignment of learning objectives with learning materials, activities, and assessments; faculty responsibilities; technology tools and platforms; online pedagogy; universal design; time management and workload expectations; and support resources and services.

Distance Education Training for Students

Many students are new to distance education so it is important to properly introduce them to the various aspects of your program's distance education components. Not providing students with orientation/training for distance education may lead to a barrier in their ability to successfully complete the program. Orientation/training for students should begin before they begin the program and continue throughout the program as needed. For ideas or help in developing a distance education orientation/training program, please feel free to reach out to MEAC.

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

Benchmark IV.B.1: Library and Learning Resources

Students and faculty have reasonable access to library and learning resources, including electronic resources, which support the program objectives.

Providing Library and Learning Resources Access

Programs that are part of a larger institution will be able to meet the library requirement of this benchmark easily as most colleges and universities have an on-site library and will have reference materials for all programs housed on the campus. For programs that are stand-alone and/or virtual, meeting this benchmark will take a bit of research and investment. [LIRN](#) is an excellent virtual library that can be built to suit the needs of your program. Using a system like LIRN will allow programs to run reports that include the number of books, periodicals, media, names of online databases or software, and digital resources. MEAC can work with LIRN to ensure that your program will meet the accreditation requirements. Learning resources include library access, useful apps, textbook applications (built into LMS), anatomical models, simulations, etc. If you have questions concerning the appropriateness of resources selected for your program please reach out to MEAC for assistance.

Training Faculty and Students to Use Library and Learning Resources

It is important to properly train faculty and students in the use of the library and all learning resources. Training should begin at orientation and continue throughout the tenure of faculty and the matriculation of students.

Faculty should be trained to guide students through the effective use of the library and learning resources; if faculty do not know how to use these they will not be able to help students.

As students progress through the program they will need different things from the library and learning resources and training should reflect this. For example, at the beginning of the program students will need to be able to access journals and other resource materials, as they near the end of the program they will need to be able to conduct effective research.

Benchmark IV.B.2: Library and Learning Resources

Students and faculty have reasonable access to resources that address and build competency in concepts of cultural humility, anti-racism, and inclusivity as they relate to midwifery education and practice.

Providing Faculty and Students Access to IDEA Resources

[Section II.B5](#) provides an overview of IDEA and [Section II.B6](#) provides some resource ideas. Where in your program is IDEA addressed? How are faculty trained? How are students trained? Provide examples of the training resources used by your program.

Benchmark IV.B4: Library and Learning Resources

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

Training Students in Appropriate Methods for Effective Online Knowledge Acquisition

As students are oriented/trained in distance education, they should learn digital literacy. Digital literacy is an individual's ability to find, evaluate, and communicate information using digital media platforms. This requires students to have both technical and cognitive abilities. For more information on digital literacy see [Digital Literacy in Higher Education: A Key Area to Close the Digital Divide](#). For tips on teaching digital literacy check out [A Teacher's Guide to Digital Literacy & Digital Literacy Skills in the Classroom](#).

It is helpful to assess student digital literacy during student orientation. You can require a survey or pretest that requires students to identify their computer hardware and software, answer questions concerning their comfort with technology, and find an article that is peer-reviewed. If you need some ideas or help, please reach out to MEAC.

Benchmark IV.C2: Clinical Sites

The institution or program department has selection criteria and an assessment process for all clinical learning sites that ensure that facilities and resources are adequate and that practice model, scope, and student supervision are appropriate to create a safe and effective learning environment for students to achieve their learning goals.

How to Ensure Clinical Sites Are Meeting MEAC Standards

Pay attention to the list in Demo IV.C2.1 and demonstrate that the clinical sites meet these criteria. Schools accomplish this in different ways typically including a preceptor site survey and a site visit (can be physical or virtual). Include a policy and procedure explaining how sites are evaluated and how often sites are reevaluated.

Benchmark IV.C3: Clinical Sites

The healthcare needs of the clients and the public health concerns of the community are considered, respected, and not compromised when placing students in clinical sites.

Protecting the Healthcare Needs of Clients and the Public

Students should never be allowed to perform skills or duties for which they are not prepared. There must be clear communication between the program and the clinical site (preceptor); between the clinical site (preceptor) and the patient; and between the student and all parties. Patients must be aware and grant permission to allow a student to participate in their care.

It is important that preceptors understand and acknowledge the power differential between them and the student. There is a great article titled [“‘They hold your fate in their hands’: Exploring the power dynamic in the midwifery student-preceptor relationship.”](#) I have a couple of friends who, during graduate school, were verbally abused by their major advisors and were taken advantage of in the research lab (not being included as an author in published papers, not being pushed forward to graduate, etc.). This made their time in graduate miserable, if I had been in that position I would have quit working with that person. Preceptors should be provided with training and resources to help them understand the implicit power differential.

Benchmark IV.D2: Administrative Office Facilities, Digital Technology, and Resources

The institution has a technology plan that includes electronic security measures including, but not limited to:

- a. Digital information backup systems
- b. Adherence to FERPA
- c. Password requirements for electronic accounts
- d. Firewall protection
- e. Virus protection software
- f. Validity of digital information

Electronic Security

Most schools offer at least some of their coursework via distance education, this makes security a critical aspect of campus planning. “A technology plan for higher education, also known as instructional technology planning, is a document that outlines an organization's goals and objectives for its digital roadmap. It should include strategies for using technology efficiently and effectively, as well as ways to measure progress.” (AI generated).

EdTech [published an article in 2023](#) that addresses the need for digital information backup systems in higher education. Any backup system employed must adhere to FERPA (and HIPAA).

MFA (multi-factor authentication) is useful in helping to ensure privacy and security, this involves the use of an app like Duo Mobile, or Microsoft Authenticator or can involve a code being sent by email or text message. Passwords should be changed at least every six months. Password requirements for electronic accounts should follow these best practices:

1. Length
 - Passwords should be at least 8 characters long, but longer is better. Some recommend 12–20 characters, or even 14 or more.
2. Complexity
 - Passwords should include a mix of uppercase and lowercase letters, numbers, and special characters. Avoid repeating numbers or using sequential numbers. Passwords should not include personal information like names, birthdays, or addresses. They should also not be dictionary words or the names of people, places, or things.
3. Uniqueness
 - Use a different password for each account and service. Avoid reusing passwords. When changing a password, create a new, unique password instead of just changing a few characters.
4. Memorability
 - Passwords should be hard to guess but easy to remember. You can try using a passphrase that combines dictionary words in a memorable way.

Firewalls are an important security measure that schools must employ. I hate to quote anything from McAfee, but they have a great definition of firewalls. “Firewalls are software programs or hardware devices that filter and examine the information coming through your Internet connection. They represent a first line of defense because they can stop a malicious program or attacker from gaining access to your network and information before any potential damage is done.”

“Virus protection software, also known as antivirus software, is a security program that can prevent, detect, and remove viruses and other malware from devices, networks, and computers. It can also help prevent identity theft, fraud, and phishing by blocking them and warning users about dangerous links and websites.” (AI generated). In addition to virus protection software, schools should require cybersecurity training annually covering topics like phishing, ransomware attacks, and social engineering. It is so easy to inadvertently click a virus-infected link if you do not know what to look for.

There are a number of ways to authenticate that the student receiving credit for a course (or assignment) is the student who is enrolled. Proctored exams are one example of authentication. Online proctoring services include HonorLock, Respondus LockDown Browser, and Capterra. These programs require students to present identification before taking an exam and can even provide live video proctoring.

Benchmark IV.D3: Administrative Office Facilities, Digital Technology, and Resources

Distance education programs utilize a highly reliable, centralized online student information system (SIS) and learning management system (LMS) and have a formal plan for creating, maintaining, and expanding the online learning environment and infrastructure.

SIS and LMS

The use of an SIS (student information system) allows schools to securely protect private student information. It also allows schools to centralize various types of student data including:

1. Admissions
2. Enrollment
3. Course scheduling
4. Performance tracking
5. Managing finances (financial aid)
6. Registering students in courses
7. Documenting grades and transcripts
8. Tracking student attendance
9. Generating reports (attendance, transcripts, etc.)

Another invaluable tool for schools is an LMS (learning management system). LMSs are sort of a virtual classroom, providing a centralized place for all class materials and coursework, the maintenance of grades, attendance tracking, early alert for struggling students, and a place for students to interact with other students and with faculty. The most popular LMS is probably Canvas, but there are a number of other LMSs that are also great; Blackboard and Moodle to name a couple. The LMS is one of the most important tools in providing quality distance education, the key is to utilize it effectively. Quality Matters is a great resource.

Benchmark IV.D4: Administrative Office Facilities, Digital Technology, and Resources

Faculty, staff, and students are supported in the use of all relevant technologies utilized by the institution and/or program.

Providing Technology Training and Support for Faculty and Students

Providing orientation and ongoing training for faculty and students is an important way to support the use of technology. In addition to providing training, it is important to provide technology support (tech support). Programs that are part of a larger institution will have institutional Itech support. Stand-alone programs will need to provide some sort of tech support. For small programs, it is probably not feasible to hire individuals dedicated solely to this, but there are options. Check out this article titled [Why Education Should Outsource IT Support](#) (this is written with K-12 in mind but the idea is the same). Contracts, job descriptions, etc., can be submitted as evidence.

DRAFT

Standard V: Governance, Financial Management, and Administrative Capacity

Benchmark V.A3: Governance

The institution has a 3-year strategic plan to ensure institutional stability.

Creating a Strategic Plan

“Creating a strategic plan for a midwifery program involves defining the program's mission, vision, goals, and objectives, as well as outlining strategies for achieving them. Here's a step-by-step guide to developing a strategic plan for a midwifery program:

1. **Assess the Current State:** Conduct a thorough assessment of the current state of the midwifery program, including its strengths, weaknesses, opportunities, and threats (SWOT analysis). Gather data on student enrollment, faculty expertise, curriculum offerings, clinical placements, facilities, resources, accreditation status, and stakeholder feedback.
2. **Define Mission and Vision:** Clarify the program's mission, which encapsulates its purpose, values, and commitments. Develop a compelling vision that articulates the desired future state of the program and its aspirations for excellence in midwifery education, practice, and advocacy.
3. **Set Goals and Objectives:** Based on the program's mission and vision, establish specific, measurable, achievable, relevant, and time-bound (SMART) goals and objectives. These should encompass key areas such as academic excellence, clinical competency, student diversity and inclusion, faculty development, research and scholarship, community engagement, and advocacy for maternal and infant health.
4. **Identify Strategies and Initiatives:** Determine the strategies and initiatives required to achieve the program's goals and objectives. These may include curriculum enhancements, faculty recruitment and retention, student support services, clinical partnership development, research collaborations, outreach efforts, fundraising activities, and policy advocacy.
5. **Allocate Resources:** Assess the resources needed to implement the strategic plan effectively, including financial, human, and technological resources. Develop a budget and resource allocation plan that aligns with the priorities and timelines outlined in the strategic plan.
6. **Engage Stakeholders:** Engage stakeholders in the strategic planning process to ensure buy-in, collaboration, and support. This may include faculty, students, alumni, healthcare providers, professional organizations, community partners, policymakers, and other relevant stakeholders. Solicit their input, feedback, and perspectives on the program's priorities, challenges, and opportunities.
7. **Establish Metrics and Key Performance Indicators (KPIs):** Define metrics and KPIs to measure progress toward achieving the program's goals and objectives. These may include retention and graduation rates, student satisfaction surveys, clinical outcomes, research productivity, faculty development activities, community partnerships, and advocacy efforts.

8. **Develop an Implementation Plan:** Create a detailed implementation plan that outlines the specific actions, timelines, responsibilities, and milestones for each initiative identified in the strategic plan. Assign accountability and establish mechanisms for monitoring progress, evaluating outcomes, and making necessary adjustments.
9. **Monitor and Evaluate Progress:** Regularly monitor and evaluate progress toward achieving the goals and objectives outlined in the strategic plan. Review performance metrics, collect feedback from stakeholders, conduct periodic assessments, and identify areas of success as well as opportunities for improvement.
10. **Review and Update the Plan:** Periodically review and update the strategic plan to reflect changes in the external environment, emerging trends in midwifery education and practice, and evolving institutional priorities. Ensure that the strategic plan remains relevant, responsive, and aligned with the program's mission, vision, and goals.

By following these steps, a midwifery program can develop a comprehensive and actionable strategic plan that guides its growth, development, and impact in advancing the field of midwifery education, practice, and advocacy.” (AI generated).

Benchmark V.C: Administrative Staff

Most of the demos for administrative staff are covered in the faculty section, the same rules will apply.

Standard VI: Student Services

Benchmark VI.A1: Student Support Services

The institution or program promotes academic success by providing access to student support services, including but not limited to:

- a. Academic advising
- b. New student orientation
- c. Financial aid advisement
- d. Clinical placement support
- e. If the institution offers distance education, it provides social support services that facilitate linking academic and social integration for students.

Why Student Support Services are So Important

“Overall, student support services are essential in midwifery education to ensure that students receive the guidance, assistance, and resources they need to succeed academically, emotionally, and professionally in their journey to becoming skilled and compassionate midwives. Student support services play a crucial role in midwife education for several reasons:

1. **Navigating Academic Challenges:** Midwifery education can be rigorous, with demanding coursework, clinical rotations, and exams. Student support services provide academic guidance, tutoring, and resources to help students navigate these challenges effectively.
2. **Emotional Support:** Midwifery education can be emotionally taxing due to the nature of the profession and the experiences encountered during clinical practice. Student support services offer counseling, mental health resources, and peer support groups to help students cope with stress, anxiety, and burnout.
3. **Clinical Placement Assistance:** Securing clinical placements is essential for midwifery students to gain hands-on experience. Student support services help students find suitable placements, coordinate schedules, and address any issues that may arise during clinical rotations.
4. **Professional Development:** Midwifery students need guidance on professional development, including resume writing, interview skills, and networking. Student support services offer workshops, seminars, and career counseling to help students prepare for their transition into the workforce.
5. **Accessibility and Inclusivity:** Student support services ensure that education is accessible to all students, including those with disabilities or specific needs. They provide accommodations, advocacy, and support to create an inclusive learning environment where every student can thrive.

6. Retention and Success: Student support services play a vital role in student retention and success. By providing comprehensive support, they help students overcome challenges, stay motivated, and achieve their academic and professional goals.” (AI generated).

Benchmark VI.A2: Student Support Services

The institution or program promotes academic success by providing access or referral to student support services, including but not limited to:

- a. Tutoring
- b. Personal counseling
- c. Career outlooks and advising, including information about NARM certification and state licensure requirements, credentials, practice, and employment opportunities

Tutoring

There are a number of online tutoring programs that are available for college contracting. Finding a midwife tutor will be the most difficult part of finding a good online tutoring program.

Personal Counseling

Programs do not need to have a full-time personal counselor instead, programs can have materials on hand for referrals. Another option is contracting with a company like BetterHelp or TalkSpace, they often have discounted programs for schools.

Career Advising and Licensure Help

Students should prepare to sit for the licensure exam in anticipation of finding a job from the first day of the program.

Standard VII: Student Affairs

Benchmark VII.B2: Disclosure to the Public, Including Prospective Students

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

- a. The mission of the institution or program
- b. The program goals
- c. The curriculum and a description of how students progress through the curriculum
- d. A list of faculty and faculty qualifications
- e. An overview of facilities and learning resources
- f. Required technology skills and equipment
- g. Availability of student services, including disability services
- h. Admissions criteria, policies and procedures
- i. Non-discrimination policy
- j. Criteria to transfer in credit, prior experience, and/or advanced placement
- k. Transferability of credit or degree to other programs
- l. Attendance requirements
- m. Criteria for student evaluation and grading
- n. Policy on student conduct and academic honesty
- o. Satisfactory academic progress policy
- p. Academic calendar with the schedule for academic terms and school years
- q. Length of program
- r. Minimum, maximum, and normal timeframes for completing the program
- s. Requirements for initiation of clinical training
- t. Cost and possible locations of clinical training opportunities
- u. Tuition, fees, and all other related expenses
- v. The payment and refund schedule
- w. Requirements for graduation
- x. Certificate, diploma, or degrees earned at the completion of the program
- y. Requirements for NARM certification
- z. Professional opportunities for midwives upon graduation
- aa. Professional licensure disclosures
- bb. Measures of student achievement including but not limited to completion and retention rates and NARM exam pass rates
- cc. Ability to sponsor student visas, if applicable
- dd. Definition of full-time/part-time enrollment status
- ee. Information on availability and application for Federal Student Aid, if applicable

- ff. Gainful Employment disclosures for Title IV schools, if applicable

Complete the Catalog Checklist

This is a new document designed to make your life easier! It does not match a-ff identically. Because this is a new requirement I do not expect everyone to be in 100% compliance immediately.

DRAFT

Standard VIII: Measures of Program Length

Contact MEAC if you have questions.

DRAFT

Standard IX: Complaints and Grievances

It is important to have both a policy and procedure in place to deal with complaints and grievances. “Policies set the overarching principles and rules, while procedures detail the specific steps and actions needed to implement those policies in practice. Together, they provide a structured framework for governing behavior, operations, and decision-making within an organization.

1. Policy:
 - a. Definition: A policy is a high-level statement that outlines the organization's goals, values, principles, and rules. It provides a framework for decision-making and guides actions within the organization.
 - b. Purpose: Policies establish the overall direction and standards for the organization. They define what is acceptable or expected behavior and provide a basis for consistency and accountability.
 - c. Scope: Policies are broad and encompassing. They apply to the entire organization or specific departments and address overarching issues such as safety, ethics, confidentiality, and professional conduct.
 - d. Examples: A policy in a midwifery education program might address student code of conduct, confidentiality of patient information, or procedures for handling complaints.
2. Procedure:
 - a. Definition: A procedure is a detailed series of steps or actions to be followed in specific situations to achieve a particular outcome. It provides a roadmap for carrying out tasks or processes effectively and efficiently.
 - b. Purpose: Procedures translate policies into practical actions. They specify how tasks should be performed, who is responsible for each step, and what resources are required.
 - c. Scope: Procedures are specific and operational. They focus on the implementation of policies and address the "how" of day-to-day activities within the organization.
 - d. Examples: In a midwifery education program, procedures might include protocols for conducting clinical assessments, guidelines for documenting patient records, or steps for resolving conflicts between students.” (AI generated).

Standard X: Standard X | Compliance with the Institution's Responsibilities under Title IV of the Higher Education Act

Contact MEAC if you have questions.

DRAFT