



NATIONAL COLLEGE OF MIDWIFERY

Handbook and Catalog

2019

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The National College of Midwifery reserves the right to make changes as necessary without prior notice.
Please check NCM's website or Student Orientation Course for the most recent version.
Past versions are archived in the Digital Library.

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HOW TO UTILIZE THIS HANDBOOK

This handbook provides important information and the institution encourages all affiliates to use it and begin thinking now about the opportunities and challenges you will embrace while you are part of the NCM community.

The purpose of the National College of Midwifery Handbook is to give students and their preceptors an understanding of the general rules and guidelines for attending and receiving an education in our institute. This handbook is prepared with the belief that all students, faculty and staff, when provided with the correct information, are capable of making sound judgments relating to the interests of themselves, others, and the school. Students and their preceptors are expected to take an active role in our school. It is through participation in activities that individuals gain feelings of satisfaction and ownership. Students and preceptors should be aware that this document is reviewed monthly since policy and procedure adoption is an ongoing process. The most recent adopted policy or procedure will always prevail. The handbook may be amended at any time and those changes will be communicated by the administration to the staff, students and preceptors. The following represents our expectations of all staff, faculty and students:

1. All NCM affiliates are expected to respect and be in alignment with the NCM Equity Statement and the Non-Discrimination policy.
 2. No NCM affiliate has the right to interfere with study, instruction or work meant to benefit NCM students.
 3. Express your ideas in a respectful manner, as not to offend or slander others.
 4. Be aware of all rules and standards and conduct yourself accordingly.
 5. Assist staff in creating a safe school for all students.
 6. Be aware of and comply with state and local laws.
 7. Attend to your daily progress be it as a human, student, staff, or faculty.
 8. Attempt to complete all work satisfactorily. When you miss the mark take the opportunity to correct your work to a satisfactory level.
 9. Assume financial responsibility for your education, instruction and work.
-

PRESIDENT'S WELCOME

Welcome to the National College of Midwifery! Since 1989, NCM's "College without Walls" has opened opportunities for aspiring midwives to learn through a traditional apprenticeship model within their own communities while keeping up to date on the latest advancements in the profession of midwifery. NCM's structure works to preserve the ancient art of midwifery and make room for culturally diverse interpretations of that art while placing it in the broader context of professionalization. All elements of this unique design are aligned so that students may learn to provide respectful, culturally attuned midwifery care and in turn improve health outcomes in their communities. The program takes a tremendous amount of self initiative and discipline and thus sets the stage for midwives who will commit to lifelong learning and community engagement. Whether you are a prospective or current student or preceptor or a graduate, please do not hesitate to reach out to us at NCM for guidance and support along your arduous and joyful journey. It is our pleasure to get to know you and to see NCM's real work take hold through your impact on the world!

[Marcy Andrew](#), LM, CPM

CONTACT US

<u>PRESIDENT</u> Marcy Andrew , LM, CPM	Scholarship Newsletter Mentoring, Counseling, Mediation Individualized Learning Plans or Tutoring State Licensure Requirements
<u>OPERATIONS OFFICER</u> Clorinda Romero	Physical Library Librarian Academic Advising Payment Plans
<u>DEVELOPMENT OFFICER</u> Cassandra Jah , MS, LM, CPM, IBCLC	Online Resource (Canvas) Orientation Courses Preceptor Guidelines Course Digital Library Librarian Preceptor Opt-In List Website Corrections
<u>BIRTH JUSTICE OFFICER</u> Margaret Garcia	Equity, Access, Diversity Ability Accommodations Social Support Services
<u>REGISTRAR</u> Jennifer Helsel	Admissions Student Records Clinical Placement Support

WHY CHOOSE NCM?

NCM encourages you to stay grounded in your own community

When students choose their preceptors, it often allows for more continuity in students' and their families' lives by eliminating the need to uproot. Students who identify with and who understand the nuances of their community's needs hold the insight and passion to effectively meet those needs. We believe that culturally competent relationships are one of the keys to bridging health disparities.

NCM understands that diverse learners have distinctive needs

Many midwifery students are juggling family life, financial responsibilities, and other interests that compliment their midwifery studies while completing NCM's program. Students from different populations have varying hurdles to overcome in order to access midwifery education. Even those with life circumstances allowing them to focus all of their attention on their studies often hold rigorous clinical responsibilities.

This is why NCM has designed a program that allows for vast flexibility. Students can start whenever they are ready between the months of January and October with our rolling enrollment. They may take as little as two years and as much as five years to complete the program, which for most takes 2 and a half years. By choosing their own preceptors, students can match their own unique educational needs and goals with their preceptors' abilities, experience and practices. Preceptors and students make one-of-a-kind agreements, which allow for varying levels of commitment to accommodate diverse circumstances. The academic portion of NCM's program is self directed and self-paced.

NCM is working to bridge health disparities by encouraging diversity

Elizabeth Gilmore founded NCM in 1989 as a larger expression of her conviction, "We must remove barriers to midwifery education in order to improve outcomes for mothers and babies." Now we are more aware than ever of how maternal health outcomes in minority groups are affected by poverty, lack of services, cultural isolation and institutional racism. The value of providing accessible midwifery education to students from underserved populations is clear; these are the students who identify with their own communities, who understand the subtleties of their own people's unique needs and who hold the insight and the passion to effectively meet these needs. NCM is committed to making midwifery education as accessible as possible to students from underserved populations.

NARM Pass Rate and Career Placement

[For the most current years available visit our website.](#)

MISSION

The Mission of the National College of Midwifery is to provide aspiring direct-entry midwives with access to superlative clinical and didactic education culminating in an accredited degree emphasizing maternal and infant risk-reduction. The degree programs of the National College of Midwifery are implemented in diverse learning environments chosen by the student and the preceptor, from individual and group apprenticeships, to classroom settings, allowing for multiple approaches to learning while requiring a high degree of initiative and discipline from the student.

OBJECTIVES

1. To improve care for mothers and babies through midwifery education.
2. To provide a degree-granting, educational route for the training of midwives in their community setting in order to contain costs.
3. To provide accessible midwifery training to student midwives in any location and at any level of training under the guidance of an approved preceptor(s)
4. To promote community involvement and keep the student's family structure intact
5. To provide a core curriculum for each of the degrees offered
6. To provide an Associate of Science in Midwifery, a Bachelor of Science in Midwifery
7. To stimulate, encourage and reward research by midwifery practitioners
8. To provide courses and guidance to professional and state entities to fill expressed needs for specific courses or subject areas
9. To allow the student to choose her/his own preceptor(s) according to a mutually acceptable agreement based on College guidelines
10. To provide a faculty board made up of volunteers in the field of midwifery education and related disciplines for reviewing proposed research projects
11. To address the following concerns about midwifery apprenticeship nationally:
 - a. Consistency from preceptorship to preceptorship in academic content
 - b. Guidance for the preceptor and student through materials to be covered
 - c. Credibility for the academic program

DIRECT ENTRY MIDWIFERY (DEM)

A direct-entry midwife is distinct from the discipline of nursing. A direct-entry midwife is a skilled and professional independent midwifery practitioner educated in the discipline of midwifery, trained to provide the Midwives Model of Care to healthy women and newborns throughout the childbearing cycle primarily in out-of-hospital settings.

MIDWIFERY APPRENTICESHIP

Midwifery Apprenticeship refers to learning midwifery from a fully licensed midwife (or other obstetrical practitioner approved in her/his jurisdiction) who guides the student through academic and clinical participation in the preceptor's practice setting at a mutually agreed upon pace. The preceptor supervises the student's development of academic and clinical skills considered, by the national standards of the Midwives Alliance of North America (MANA) and the North American Registry of Midwives (NARM), to be the scope of midwifery care. The student is primarily responsible for meeting the academic requirements, while the preceptor evaluates academic progress, offering or insuring that the student obtains any special classes in areas of specific importance or difficulty as agreed upon by student and preceptor.

COLLEGE WITHOUT WALLS

NCM's self-paced, flexible, apprenticeship-based programs are adaptable to the unique needs of the student and preceptor. Students study in their own community or create a study plan that allows them to

travel to other cities or countries. Our comprehensive academic and clinical programs result in either an Associates Degree in Midwifery (ASM) or a Bachelor of Science in Midwifery (BSM). Students begin their program whenever they are ready. Our program supports students in one-on-one apprenticeships as well as students in larger group study placements. Applicable transfer credits are accepted from accredited colleges. Our ASM program prepares students for state licensure and/or national certification whereas our BSM Bridge program is for midwives who are already licensed and certified.

FOUNDERS

The National College of Midwifery was founded in 1989 by Elizabeth Gilmore, and the New Mexico Midwives Association and the Northern New Mexico Midwifery Center under the name The New Mexico College of Midwifery.

ACCREDITATION, LICENSURE AND AUTHORIZATION

NCM is accredited by MEAC, The Midwifery Education Accreditation Council, a small, private accrediting agency recognized by the US Department of Education. Accreditation cycles are every 4 years. NCM is licensed under the Postsecondary Institution Act (Section 21-23 et seq. NMSA 1978) and has been deemed by the New Mexico Higher Education Department. NCM is an institutional participant in the SARA initiative.

Institution Policies

A full set of institutional policies is available in the NCM Policy and Procedure Manual.

NATIONAL COLLEGE OF MIDWIFERY EQUITY STATEMENT

Elizabeth Gilmore founded NCM as a larger expression of her conviction, "We must remove barriers to midwifery education in order to improve outcomes for mothers and babies." Now we are more aware than ever of how maternal health outcomes among certain populations are affected by poverty, lack of services, cultural isolation, institutional racism and oppression.

NCM consciously considers how internal, self-mediated and institutional oppression is experienced based on race, color, national or ethnic origin, ability, religion, marital status, sex, age, sexual orientation, gender identity and expression, economic status, formal education, language, citizenship status, veteran status, genetic and/or ancestry information, political affiliation and other characteristics.

We believe that the Midwives Model of Care® when delivered with an equity consciousness and a culturally versatile approach holds the potential to undo systemic discrimination and oppression within our maternity healthcare systems and in turn bridge the health disparities experienced by so many. We understand that bringing this potential to reality starts with our own commitment to the continual, lifelong effort of actively dismantling internal, self-mediated and institutional racism and oppression.

NCM takes seriously its responsibility in this realm and commits to:

- Protecting the apprenticeship model and creating opportunities for midwifery students to choose their own preceptors while remaining in their communities so that they can learn and serve within their unique cultural contexts. □
- Continually working to increase access to midwifery education for all aspiring midwives. This includes maintaining an active scholarship program which opens opportunities for students who originate from and/or identify culturally with populations affected by institutional racism/discrimination as they relate to maternity care and who hold the intention to serve these populations as midwives. □
- Engaging in ongoing examination and revision of our internal practices, policies and procedures (including recruitment of students, admissions and hiring of staff and faculty) to ensure that they genuinely reflect an ethic of equity and a commitment to social justice. □
- Creating a College culture in which all students, preceptors and staff have an experience of feeling heard, respected, represented and included. □
- Maintaining a staff structure that eliminates hierarchy and encourages equality, consensus building, cooperation and self responsibility. □
- Ensuring that all staff is working with a lens of equity and inclusivity by providing ongoing education, including anti-racism training to all staff members. □
- Continually updating NCM's written materials to ensure that inclusive language is used and that birth justice and equity themes are woven through the curriculum. □
- Teaching midwifery students to offer compassionate and effective care across cultural differences, to engage in healing from racism and discrimination and to work towards dismantling internalized, personally mediated and institutionalized racism and oppression. □
- Ensuring that the delivery and assessment methods used in NCM's curriculum are versatile and inclusive of different viewpoints and ways of knowing. □
- Creating methods to use student assessment data to improve the versatility and inclusivity of the delivery and assessment methods of our curriculum. □

- Providing training to all of our preceptors and students in dismantling and healing from racism and discrimination. This includes education and self reflective exercises woven through all aspects of the curriculum that relate to implicit bias, privilege, health disparities, social determinants of health, history of midwifery from various perspectives, midwifery practices within diverse cultural contexts, and other themes of inclusivity. □
- Providing guidance and support for healthy student preceptor relationships including training in nonviolent communication, anti-discrimination and anti-bullying policies. □
- Intentionally making connections with, supporting and learning from other individuals and organizations involved in birth justice work, thus taking an active role in the birth justice movement. □

NON DISCRIMINATION STATEMENT

The National College of Midwifery prohibits discrimination against and harassment of any employee, student or preceptor or any applicant because of race, color, national or ethnic origin, ability, religion, marital status, sex, age, sexual orientation, gender identity and expression, economic status, formal education, language, citizenship status, veteran status, genetic and/or ancestry information, political affiliation or other identities, including those characteristics protected under applicable federal or state law. All personnel who are responsible for recruitment, admissions, hiring and promoting and for the development and implementation of college programs are entrusted to hold up this standard and to respond promptly and appropriately to any concerns that are brought to their attention.

NON DISCRIMINATION POLICY

OBJECTIVE

The National College of Midwifery is committed to the principle of equal opportunity in education and employment and a work environment in which all individuals are treated with respect and dignity. Each individual has the right to work in a professional atmosphere that promotes equal employment opportunities and prohibits unlawful discriminatory practices, including harassment. Therefore, NCM expects that all relationships among persons in the office will be business-like and free of bias, prejudice and harassment. NCM has developed this policy to ensure that all its employees can work in an environment free from unlawful harassment, discrimination and retaliation. NCM will make every reasonable effort to ensure that all concerned are familiar with these policies and are aware that any complaint in violation of such policies will be investigated and resolved appropriately.

Any student, faculty, employee or affiliate, who has questions or concerns about these policies should talk with the CBJO or other Executive Staff.

EQUAL EMPLOYMENT OPPORTUNITY

The National College of Midwifery recruits, hires, admits, appoints and promotes without discrimination or harassment on the basis of race, color, national or ethnic origin, ability, religion, marital status, sex, age, sexual orientation, gender identity and expression, economic status, formal education, language, citizenship status, veteran status, genetic and/or ancestry information, political affiliation or other identities, including those characteristics protected under applicable federal or state law. NCM prohibits any such discrimination or harassment.

RETALIATION

NCM encourages reporting of all perceived incidents of discrimination or harassment. It is the policy of NCM to promptly and thoroughly investigate such reports. NCM prohibits retaliation against any individual who reports discrimination or harassment or participates in an investigation of such reports.

SEXUAL HARASSMENT

Sexual harassment constitutes discrimination and is illegal under federal, state and local laws. For the purposes of this policy, “sexual harassment” is defined, as in the Equal Employment Opportunity

Commission Guidelines, as unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature when, for example: a) submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment, b) submission to or rejection of such conduct by an individual is used as the basis for employment decisions affecting such individual, or c) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive working environment.

Title VII of the Civil Rights Act of 1964 recognizes two types of sexual harassment: a) quid pro quo and b) hostile work environment. Sexual harassment may include a range of subtle and not-so-subtle behaviors and may involve individuals of the same or different gender. Depending on the circumstances, these behaviors may include unwanted sexual advances or requests for sexual favors; sexual jokes and innuendo; verbal abuse of a sexual nature; commentary about an individual's body, sexual prowess or sexual deficiencies; leering, whistling or touching; insulting or obscene comments or gestures; display in the workplace of sexually suggestive objects or pictures; and other physical, verbal or visual conduct of a sexual nature.

HARASSMENT

Harassment on the basis of any other protected characteristic is also strictly prohibited. Under this policy, harassment is verbal, written or physical conduct that denigrates or shows hostility or aversion toward an individual because of their race, color, national or ethnic origin, ability, religion, marital status, sex, age, sexual orientation, gender identity and expression, economic status, formal education, language, citizenship status, veteran status, genetic and/or ancestry information, political affiliation or other identities, including those characteristics protected under applicable federal or state law, or that of his or her relatives, friends or associates, and that: a) has the purpose or effect of creating an intimidating, hostile or offensive work environment, b) has the purpose or effect of unreasonably interfering with an individual's work performance, or c) otherwise adversely affects an individual's employment opportunities.

Harassing conduct includes epithets, slurs or negative stereotyping; threatening, intimidating or hostile acts; denigrating jokes; and written or graphic material that denigrates or shows hostility or aversion toward an individual or group that is placed on walls or elsewhere on the employer's premises or circulated in the workplace, by email, phone (including voice messages), text messages, social networking sites or other means.

INDIVIDUALS AND CONDUCT COVERED

These policies apply to all employees, faculty, affiliates and applicants, whether related to conduct engaged in by fellow affiliates or by someone not directly connected to NCM.

Conduct prohibited by these policies is unacceptable anywhere two or more affiliates share the same space. For the purpose of this policy affiliates includes clients and their support persons.

REPORTING AN INCIDENT OF HARASSMENT, DISCRIMINATION OR RETALIATION

NCM encourages reporting of all perceived incidents of discrimination, harassment or retaliation, regardless of the offender's identity or position. Individuals who believe that they have been the victim of such conduct should discuss their concerns with the CBJO, Executive Staff or Board of Directors. See the Formal and Information Complaint and Grievance Policy in this document.

In addition, NCM encourages individuals who believe they are being subjected to such conduct to promptly advise the offender that their behavior is unwelcome and to request that it be discontinued. Often this action alone will resolve the problem. NCM recognizes, however, that an individual may prefer to pursue the matter through complaint procedures.

RELIGIOUS ACCOMMODATION POLICY

The National College of Midwifery is committed to providing an academic and work environment that is respectful of the religious beliefs of its students, faculty, employees and affiliates. NCM will make an effort to provide reasonable religious accommodation to students, preceptors, employees and affiliates whose sincerely held religious beliefs conflict with a NCM policy, procedure, or other academic or employment requirement. These accommodations can be made unless it would create unreasonable hardship for the National College of Midwifery, students, faculty, employees and affiliates.

Unreasonable hardship can be defined as an expense based on resources and circumstances in relationship to the cost or difficulty of providing a specific accommodation including accommodations which interfere with the safe and efficient operation of the workplace or learning site.

PROCEDURES FOR SEEKING RELIGIOUS ACCOMMODATION

NCM encourages students to find preceptors who can made accommodations for time to practice their religious prayers, the ability to attend religious events or observe certain holidays. Students are encouraged to communicate their needs to their chosen preceptor(s) before contracting with them. Requests can be made by making a verbal or written request for an accommodation and if possible should be agreed upon prior to signing a contract. If the request cannot be met, please refer to the section of the handbook regarding mediation between preceptor and student. All employees may request a religious accommodation by making a written request to the Chief Birth Justice Officer; the CBJO will submit their requests to the President. Employees who anticipate being absent from work because of a religious observance must submit their request for time off in advance at least ten business days in advance. Decisions regarding the accommodation will be made based on the impact of the accommodation, the duration of the accommodation request, and the availability of alternative accommodations.

QUIET SPACES AND PRAYER

Arrangements will need to be made between student and preceptor for quiet space and prayer during clinical and academic training.

RETALIATION IS PROHIBITED

The National College of Midwifery prohibits retaliation against students, faculty, employees and affiliates requesting a religious accommodation or participating in an approved accommodation. Any person who retaliates against a students, faculty, employees and affiliates may be subject to disciplinary action.

LACTATING PERSONS POLICY

National College of Midwifery is committed to supporting and meeting the needs of lactating people returning to work, or school.

ACCOMMODATIONS

students, faculty, employees and affiliates are entitled to reasonable breaks to transfer breast milk as well as sufficient time to get to a safe and quiet safe to express. A space for lactation should offer privacy, cleanliness and comfort with access to electrical outlets near the chair. Each person must provide their own pump. Since refrigerators are not necessarily provided, students and staff are encouraged to ask their preceptor or supervisor to help them locate a refrigerator or other means within their work area or clinical learning site to store the milk. Lactating people must provide adequate storage containers and proper labeling. They may also bring their own small cooler to store the breast milk.

SERVICE ANIMALS POLICY

This policy provides rules and guidelines for bringing animals to the NCM office or to a learning site. NCM encourages students who need service animal(s) to make arrangements with their preceptor(s) prior to contracting with them if possible. The animal(s) should be welcomed with the procedures outlined in this

policy, but may exclude an animal from a office or learning site if it causes disruption, threatens the health or safety of others or otherwise fails to meet the criteria set forth in this policy.

SERVICE ANIMALS

NCM welcomes the presence of service animals in our office. A service animal is any animal that has been individually trained to provide comfort or perform tasks to accommodate an individual with a disability. Individuals who anticipate needing a service animal should talk with potential preceptors before signing a contract to discuss bringing a service animal to clinic or births regularly.

RESPONSIBILITIES OF ANIMAL OWNERS/HANDLERS

Owners/handlers must comply with the following provisions regarding the behavior and care of animals in the office or at a learning site:

- Dangerous, poisonous or illegal animals are not permitted.
- The behavior, noise, odor, and waste of the animal must not exceed reasonable standards and these factors must not create an unreasonable disruption for community members (including staff, faculty, students, clients and/or residents).
- The animal must be vaccinated in accordance with local law and meet all other licensing requirements.
- The animal must be in good health and maintain good hygiene. If fleas, ticks or other pests are detected, the owner/handler will be responsible for the required pest treatment including being financial responsible for the treatment of the animal and the facility.
- From time to time, the NCM office or learning sites may use pesticides, pest control devices, de-icing materials, cleaning supplies, and other materials for the maintenance and operation of the facilities. NCM is no way responsible for any harm to animals caused by such materials.
- The owner/handler is financially responsible for the animal, including for any bodily injury or property damage caused by the animal.

REVOKING A SERVICE ANIMAL'S PRESENCE

The owner/handler is responsible for assuring that the animal does not unduly interfere or adversely affect the routine activities of others. If NCM staff or faculty determines that the animal threatens the health, safety, or property of anyone in the community, or that the approved animal is adversely affecting programs and activities, NCM staff or faculty will take appropriate measures, up to and including a determination with that an approved animal may no longer be permitted at the office or learning site. If a service or assistance animal is banned, the individual with a disability will have the right to engage in an interactive process with NCM to determine if effective participation can occur with other appropriate accommodations. NCM is committed to engaging in an interactive process with individuals with disabilities to ensure reasonable accommodation.

QUESTIONS AND CONTACT INFORMATION

If you need assistance with speaking to your preceptor about the use of service animals please contact the CBJO.

AMERICANS WITH DISABILITIES POLICY

National College of Midwifery is committed to providing reasonable accommodations for qualified students, faculty, staff and affiliates with disabilities in a fair and equitable manner and in accordance with applicable federal and state law. NCM seeks to promote a diverse and inclusive midwifery community.

The ADA does allow employers and preceptors to ask potential students if they are able to perform the functions needed as a midwifery student. This may include questions regarding heavy lifting, sight, hearing, fine motor skills, ability to function with little sleep, and the ability to go up and down stairs.

PHYSICAL, COGNITIVE AND EMOTIONAL ATTRIBUTES THAT ALL STUDENTS MUST HAVE

In order to be able to effectively perform the functions of a midwife, students must possess the following attributes or must seek accommodations:

1. Hear soft sounds, e.g., fetal heart tones, cardiac murmurs, and breath sounds
2. Lift and/or turn patients who may be of greater size and/or weight
3. Concentrate and focus for long periods of time on complex tasks and/or on material that may be difficult to understand
4. Visualize objects that are close at hand, either with the naked eye or with corrective lenses
5. Use cognitive skills, fine motor skill dexterity, and hand-eye coordination to perform complex tasks such as palpation, phlebotomy, suturing, adult and neonatal resuscitation, insertion of IV lines, and basic and complex obstetric maneuvers
6. Maneuver quickly in small or cramped spaces
7. Change physical positions quickly in response to the needs of a pregnant or laboring woman
8. Communicate in such a way as to be understood by others
9. Write legibly or type
10. Read and comprehend technical materials written at college and professional levels of comprehension.

Accommodations for students with disabilities may be made by the preceptor and the National College of Midwifery. NCM can assist in making reasonable accommodations for students with disabilities. The prospective student must provide a formal statement of diagnosis from a qualified practicing primary care provider including the student's projected needs regarding necessary accommodations. Please note that as students hire their own preceptors, the student will need to make arrangement for accommodations for disabilities directly with the preceptor for any activities they agree to complete together.

DEFINING DISABILITIES

Disability: According to the Americans with Disabilities Act (ADA), a disability is defined as a physical or mental impairment that substantially limits one or more of a disabled person's major life activities (for example, walking, standing, or breathing).

Qualified Persons with Disabilities: An employee, faculty, affiliate or applicant with a disability who satisfies the skill, experience, education, and other job-related requirements for the position and who can perform the essential functions of the job in question with or without reasonable accommodations. This includes part-time, full-time, probationary, non-career status and temporary employees. Similarly, for students, a qualified person with a disability is a student who satisfies all the skill, experience, and educational requirements for their chosen educational program with or without reasonable accommodations.

Essential Functions: Job duties typically, but not exclusively, found on a job description, considered so fundamental that the individual cannot do the job without performing them. Similarly, for students, essential functions are defined as basic activities and responsibilities that a student must be able to perform to complete their academic program and/or be considered for program admission, retention, and graduation. Essential functions for both students, faculty, staff and affiliates must be met either without an accommodation or with appropriate accommodation(s) after meeting the qualifications for a disability.

Interactive Process: The interactive process is the procedure through which an employer and an individual with a documented disability work together to identify what barriers exist to the individual's performance and/or essential functions of a particular job with the intention of finding a reasonable accommodation. The interactive process often includes a review of the individual's abilities and limitations and an analysis of which factors or job tasks may pose a difficulty and how the person may be accommodated. Similarly, with students, faculty, staff and affiliates, the interactive process entails the Chief Birth Justice Officer and/or the President of NCM working with the qualified person to identify existing barriers with the intention of finding an accommodation that is reasonable.

Reasonable Accommodation: The Americans with Disabilities Act (ADA), and Section 504 of the Rehabilitation Act, require NCM to provide appropriate and reasonable academic and employment accommodations to employees and students with disabilities unless doing so would create an undue hardship, compromise the health and safety of members of the College community, or fundamentally alter the nature of NCM’s employment or academic mission.

Undue Hardship: An action requiring significant difficulty, expense, and disruption (financial and administrative burden) or an action that would fundamentally alter policy and procedures, the nature of the job function, and/or the fundamental nature of the academic program at the National College of Midwifery.

INTERACTIVE PROCESS (HOW ARE REASONABLE ACCOMMODATIONS MADE?)

The Chief Birth Justice Officer is responsible for the interactive process (as defined below) for the College staff and is a designee for student, faculty and affiliate issues involving accessibility and other ADA process issues.

Accommodations are provided through an interactive process among the qualified person and NCM representatives. The individual requesting the accommodation may be asked to obtain documentation from an appropriate health care provider. Supporting documentation from an appropriate provider may include:

- a diagnosis of the impairment and any accompanying test results;
- a connection between the nature of the disability and the requested accommodation;
- a detailed description of the specific impairment, functional limitations (with and without the use of mitigating measures such as treatment, aids, and medication), functional need, and the medical justification for such need; and
- a recommendation for the type and duration of the accommodation needed, as well as the rationale underlying the request “reasonableness.”

Upon receiving and reviewing the appropriate documentation, a determination will be made by the Chief Birth Justice Officer and the NCM President (in the case of an employment or faculty request) or by the preceptor (in the case of a learning site accommodation) regarding the individual’s disability.

INCIVILITY, BULLYING AND WORKPLACE VIOLENCE POSITION STATEMENT

The National College of Midwifery is committed to creating and sustaining a culture of respect between students and preceptors. This document is meant to act as a guide for both students and preceptors to increase awareness and clarify responsibilities as they relate to creating safe and healthy working relationships.

BACKGROUND

Studies have shown that incivility, bullying and workplace violence within midwifery preceptor student relationships are common problems. NCM sees this type of harmful behavior as a threat to the individual educational experience as well as to the midwifery profession as a whole. While patient safety is of utmost importance, it also must be balanced with preceptor and student safety. All are integral to quality and safe care. NCM believes that all branches of the profession must proactively work towards creating a cultural change in which harmful actions are in no way considered an acceptable norm. Those who experience or witness incivility, bullying and workplace violence without acknowledging it, confronting it and reporting it are indirectly promoting it. In this way, NCM realizes the importance of creating a system for students and preceptor to recognize and address these issues.

IDENTIFYING HARMFUL ACTIONS

The first step in taking actions to eliminate bullying is to define harmful actions.

By distinguishing the various forms of harmful behavior, as a profession we can focus our collective wisdom and experience to create a culture of respect, safety, and effective communication. Below are outlined various types of harmful actions.

INCIVILITY

can take the form of:

- rude and discourteous actions
- gossiping or spreading rumors
- name calling
- using a condescending tone
- expressing public criticism

BULLYING

is repeated, unwanted harmful actions intended to:

- humiliate
- offend
- cause distress

- undermine
- degrade

Actions may include, but are not limited to:

- hostile remarks
- verbal attacks
- threats
- taunts
- intimidation
- withholding of support

(McNamara, 2012)

Such actions occur with greater frequency and intensity than do those actions described as incivility. Bullying actions represent serious safety and health issues, and they can cause lasting physical and psychological difficulties for targets (Washington State Department of Labor and Industries, Safety and Health Assessment and Research for Prevention Program, 2011).

Bullying often involves an abuse or misuse of power, creates feelings of defenselessness and injustice in the target, and undermines an individual’s inherent right to dignity. Bullying may be directed from the top down (preceptor against student), from the bottom up (student against preceptor), or horizontally (student against student). Top-down bullying from organizational leaders allows bullying to become an accepted and condoned workplace norm (Deans, 2004a; Royal College of Nursing, 2002; Vessey, DeMarco, & DiFazio, 2011).

Bullying and other harmful actions can be “surrounded by a ‘culture of silence,’ fears of retaliation, and the perception that ‘nothing’ will change”.

MOBBING

is a collective form of bullying and as an expression of aggression aimed at ostracizing, marginalizing, or expelling an individual from a group (Bowling & Beehr, 2006; Galen & Underwood, 1997; Harper, 2013). As Griffin and Clark (2014) state, workplace mobbing occurs when “more than one person commits egregious acts to control, harm, and eliminate a targeted individual”. Mobbing is linked to physical, psychological, social, and emotional damage, and it can have devastating consequences as the targeted individuals fight to keep their job and career (DiRosa et al, 2009; Hutchinson, Vickers, Jackson, & Wilkes, 2006; Monteleone et al., 2009; Vessey, DeMarco, Gaffney, & Budin, 2009). In some cases, targets of workplace mobbing may be exceptional individuals. For example, Westhues (2004) suggested that mobbing among faculty members in academic workplaces may be related to envy of excellence and to jealousy associated with the achievements of others. Mobbing may thus occur in such workplaces in an attempt to maintain group mediocrity and compliance with the status quo, so that the high performer is targeted to keep that person in line with prevailing workplace norms.

WORKPLACE VIOLENCE

consists of physically and psychologically damaging actions that occur in the workplace or while on duty (National Institute for Occupational Safety and Health [NIOSH], 2002). Examples of workplace violence include:

- direct physical assaults (with or without weapons)
- written or verbal threats
- physical or verbal harassment
- homicide

(Occupational Safety and Health Administration, 2015). Relationships marred by incivility and bullying can contribute to unhealthy work environments that ultimately have a negative impact on the quality and safety of care delivered (American Association of Critical-Care Nurses, 2005).

POTENTIAL RAMIFICATIONS

Potential ramifications of incivility, bullying and workplace violence include:

- decreased job satisfaction
- reduced organizational commitment
- decreased personal health (psychological stress, anxiety, irritability, depression)
- decreased productivity
- impacted clinical judgment
- increased risk of clinical errors

SOLUTIONS

NCM endorses the Nonviolent Communication (NVC) model and encourages students and preceptors who are finding it difficult to maintain civil relationship to engage in study and implementation of the model to the best of their ability. The NVC model relies on both empathic listening and honest expression of observations, feelings, needs and requests. The following text is taken from the NVC website, which also can be used by students and preceptors who are interested in accessing more useful resources about this helpful method of communication:

Nonviolent Communication (NVC) is sometimes referred to as compassionate communication. Its purpose is to:

1. Create human connections that empower compassionate giving and receiving
2. Create governmental and corporate structures that support compassionate giving and receiving.

NVC involves both communication skills that foster compassionate relating and consciousness of the interdependence of our well being and using power with others to work together to meet the needs of all concerned. This approach to communication emphasizes compassion as the motivation for action rather than fear, guilt, shame, blame, coercion, threat or justification for punishment. In other words, it is about getting what you want for reasons you will not regret later. NVC is NOT about getting people to do what we want. It is about creating a quality of connection that gets everyone's needs met through compassionate giving.

The process of NVC encourages us to focus on what we and others are observing separate from our interpretations and judgments, to connect our thoughts and feelings to underlying human needs/values (e.g. protection, support, love), and to be clear about what we would like towards meeting those needs. These skills give the ability to translate from a language of criticism, blame, and demand into a language of human needs -- a language of life that consciously connects us to the universal qualities "alive in us" that sustain and enrich our well being, and focuses our attention on what actions we could take to manifest these qualities.

Nonviolent Communication skills will assist you in dealing with major blocks to communication such as demands, diagnoses and blaming. In CNVC trainings you will learn to express yourself honestly without attacking. This will help minimize the likelihood of facing defensive reactions in others. The skills will help you make clear requests. They will help you receive critical and hostile messages without taking them personally, giving in, or losing self-esteem. These skills are useful with family, friends, students, subordinates, supervisors, co-workers and clients, as well as with your own internal dialogues.

NONVIOLENT COMMUNICATION SKILLS

NVC offers practical, concrete skills for manifesting the purpose of creating connections of compassionate giving and receiving based in a consciousness of interdependence and power with others. These skills include:

1. Differentiating observation from evaluation, being able to carefully observe what is happening free of evaluation, and to specify behaviors and conditions that are affecting us;
2. Differentiating feeling from thinking, being able to identify and express internal feeling states in a way that does not imply judgment, criticism, or blame/punishment;
3. Connecting with the universal human needs/values (e.g. sustenance, trust, understanding) in us that are being met or not met in relation to what is happening and how we are feeling; and

4. Requesting what we would like in a way that clearly and specifically states what we do want (rather than what we don't want), and that is truly a request and not a demand (i.e. attempting to motivate, however subtly, out of fear, guilt, shame, obligation, etc. rather than out of willingness and compassionate giving).

These skills emphasize personal responsibility for our actions and the choices we make when we respond to others, as well as how to contribute to relationships based in cooperation and collaboration.

With NVC we learn to hear our own deeper needs and those of others, and to identify and clearly articulate what "is alive in us". When we focus on clarifying what is being observed, felt, needed, and wanted, rather than on diagnosing and judging, we discover the depth of our own compassion. Through its emphasis on deep listening—to ourselves as well as others—NVC fosters respect, attentiveness and empathy, and engenders a mutual desire to give from the heart. The form is simple, yet powerfully transformative.

Founded on consciousness, language, communication skills, and use of power that enable us to remain human, even under trying conditions, Nonviolent Communication contains nothing new: all that has been integrated into NVC has been known for centuries. The intent is to remind us about what we already know—about how we humans were meant to relate to one another—and to assist us in living in a way that concretely manifests this knowledge.

The use of NVC does not require that the persons with whom we are communicating be literate in NVC or even motivated to relate to us compassionately. If we stay with the principles of NVC, with the sole intention to give and receive compassionately, and do everything we can to let others know this is our only motive, they will join us in the process and eventually we will be able to respond compassionately to one another. While this may not happen quickly, it is our experience that compassion inevitably blossoms when we stay true to the principles and process of Nonviolent Communication.

NVC is a clear and effective [model](#) for communicating in a way that is cooperative conscious, and compassionate. (c) 2005 by Center for Nonviolent Communication Website: www.cnvc.org Email: cnvc@cnvc.org Phone: +1.505.244.4041

HOW THE NATIONAL COLLEGE OF MIDWIFERY CAN HELP

While NCM encourages students and preceptors to practice nonviolent communication and to explore their own methods of resolution in the case of personal conflicts that arise out of harmful actions, it is also important to NCM that all students and preceptors feel confident they will have access to guidance and support if needed. For this reason, NCM staff offers mediation and maintains a formal grievance policy. All communications are kept confidential and individuals will not be discriminated against as a consequence of making a complaint.

If you have any questions about this position statement or about NCM's grievance policy, please contact NCM directly. This position statement is based on the 2015 American Nurses Association Position Statement on Incivility, Bullying and Workplace Violence.

COMPLIANCE WITH FERPA POLICY

NCM follows the Family Educational Rights and Privacy Act (FERPA)

<https://www2.ed.gov/policy/gen/guid/fpco/ferpa/index.html>. Complaints regarding alleged violations of the rights accorded students by the Federal Family Educational Rights and Privacy Act may be filed with the Family Policy Compliance Office

U.S. Department of Education

400 Maryland Avenue, SW

Washington, DC 20202-8520

The Family Educational Rights and Privacy Act (FERPA), 20 U.S.C. §1232g, is federal law that provide students with the following rights with respect to their student educational records:

- to inspect and review the student's education records;
- to consent to disclosure of the student's education records to third parties, except to the extent that FERPA authorizes disclosure without consent;
- to request amendment of the student's education records to ensure that they are not inaccurate or misleading;
- to be notified of the student's privacy rights under FERPA;
- to file a complaint with the U.S. Department of Education concerning alleged failures by the College to comply with the requirements of FERPA.

It is the policy of the National College of Midwifery to protect the privacy and records access rights that apply to records maintained by or for the College about its current and former students by complying with FERPA at all times.

ANNUAL FERPA NOTICE

NCM provides each Student in attendance at the College at least annually notification of their rights pursuant to FERPA, the procedures for exercising their rights via the redistribution of the updated Handbook.

FERPA CONSENT DEFINITION

Written or electronic consent, signed by the Student or otherwise verified by the Student if electronic, that is dated and specifies the specific records to be disclosed, the party to whom the records are to be disclosed, and the purpose of the disclosure.

DE-IDENTIFIED RECORD DEFINITION AND POLICY

The college reserves the right to submit an Education Record that has been stripped of all identifiers and/or aggregated such that it is not possible to re-identify an individual who is the subject of the record. An Education Record that has been de-identified is no longer an Education Record and is not subject to this policy or FERPA. Organizations conducting studies for, or on behalf of the College for the purpose of developing, validating, or administering predictive tests, administering student services, and improving instruction, may access De-Identified Student or Preceptor Records.

EDUCATION RECORDS DEFINITION

An education record refers to all information collected that directly relates to a Student and are maintained by NCM. NCM Education Records do not include:

- Records of in the sole possession of Preceptors or Supervisors; used only as a personal memory aid,
- Law enforcement records;
- Medical records and mental health records, including counseling records created, maintained, and used only in connection with provision of medical treatment or mental health treatment or counseling to the student,
- Employment records unrelated to the Student's status as a Student, or
- Alumni records.

RIGHT TO INSPECT AND REVIEW THE STUDENT'S EDUCATION RECORDS

FERPA requires NCM to permit a student to inspect most education records maintained about them within 45 days of the day the College receives a request for access.

REQUESTS TO AMEND STUDENT RECORDS

A Student who believes that their Education Record is inaccurate, misleading, or otherwise in violation of the student's privacy rights under FERPA, may request amendment of the record. However, substantive judgment of a faculty member about a student's work, expressed in grades and/or evaluations, is not within the purview of this right.

PERSONALLY IDENTIFIABLE INFORMATION DEFINITION, POLICY, AND PROCEDURE

Information obtained from or contained in an Education Record that can be used to identify a Student to whom the record relates or another Student. It specifically includes information determined by NCM to be:

- Linked or linkable to a specific Student such that it would allow a reasonable person in the College community who does not have personal knowledge of the relevant circumstances, to identify the Student with reasonable certainty.
- Requested by a person who the College reasonably believes knows the identity of the Student to whom the Education Record relates.

Student or preceptor information is not released without written consent of the student, as defined by FERPA. All graduation inquiries for jobs or licensing by a third party must be accompanied by a signed release from the students.

NCM does not provide student or preceptor information or images on any brochures or other marketing materials without written consent of student or preceptor.

HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA)

NCM does not require or keep personal health information.

TRANSCRIPT / DIPLOMA REQUESTS / ACCESS TO EDUCATIONAL RECORDS

Requests for official copies of transcripts or other academic records will not be released for students who have a delinquent financial obligation with NCM. All transcript/ diploma requests are submitted with a completed transcript request form which includes the student's signature along with payment to the office. Requests are processed within 45 days. An email confirmation is sent to the student when the transcript has been processed. NCM Transcript request forms are available for download on the NCM website. NCM is not a title IV institution; However NCM adheres to FERPA law on confidentiality and access to educational records. All student transcripts are protected from damage or loss by being backed up and securely stored on an external hard drive stored in a fireproof locked filing cabinet and also off site in a secured "cloud" site. Should the College ever close, the student transcripts will be uploaded onto an online transcript service.

TECHNICAL SUPPORT POLICY AND PROCEDURE

NCM does not offer distance courses. However, since the digital library, orientation and course material is accessed via Canvas technical support is provided by the online resource 24/7/365 through the help tab in Canvas or through staff via email or phone. For help with login and passwords NCM staff is available Monday through Thursday 9am-3pm when the college is open. Contractors who make technical assistance available is provided by Canvas and can be found in Canvas under the help tab ("?") where the number is listed as 844-653-1468. Staff are available via email info@midwiferycollege.org or by phone at 575-758-8914. During holidays email is checked periodically for log on issues.

COMPLAINT AND GRIEVANCE POLICY

NCM encourages the prompt reporting of complaints or grievances so that rapid and constructive action can be taken before relationships become irreparably strained. Therefore, while no fixed reporting period has been established, early reporting and intervention have proven to be the most effective method of resolving complaints and grievances.

Individuals will not be discriminated against as a consequence of making an informal or formal complaint or grievance. Retaliation against an individual for engaging in the informal or formal complaint and grievance process or for participating in an investigation of a complaint or grievance is a serious violation of this policy and, like harassment or discrimination itself, will be subject to disciplinary action. Acts of retaliation should be reported immediately and will be promptly investigated and addressed. Each complaint or grievance will be handled in a respectful and objective manner. The college makes every effort to limit the number of people within the college who know the identity of the complainant to prevent the opportunity for implicit bias

or explicit discrimination to occur. The College's goal is to help reach an amicable solution and to offer assistance in securing the desired result.

CONCERNING DISCRIMINATION

Individuals who believe they have been the victims of conduct prohibited by NCM's Non Discrimination Policy or believe they have witnessed such conduct are encouraged to engage in NCM's Complaint and Grievance Policies and Procedures. In cases of discrimination, the Chief Birth Justice Officer will be consulted or asked to take charge of the grievance process by NCM staff.

Misconduct constituting harassment, discrimination or retaliation will be dealt with appropriately. Responsive action may include but is not limited to training, referral to counseling, or disciplinary action such as a warning, reprimand, withholding of a promotion or pay increase, reassignment, temporary suspension without pay, or termination, as NCM believes appropriate under the circumstances.

False and malicious complaints of harassment, discrimination or retaliation (as opposed to complaints that, even if erroneous, are made in good faith) may be the subject of appropriate disciplinary action.

COMPLAINT AND GRIEVANCE PROCEDURES

The college recognizes that a complaint or grievance may not begin with a formal process by the complainant but rather may begin as a "soft" indicator of an issue. When an individual contacts NCM staff with a grievance, complaint or venting, the complainant is asked directly if they desire to engage in:

1. a counseling process,
2. a mediation process or
3. the formal complaint process.

Each of the processes is described to the complainant so that they may make an informed decision about which process is most appropriate. Counseling is confidential and can be provided by the appropriate staff per policy. Mediation opens discussion between conflicting parties. Formal complaints/grievance require written documentation based on NCM's specific requirements, are handled by the President or their designee and initiates an investigation by NCM of the situation without direct contact between the complainant and the accused. During the complaint/grievance process, the complainant is informed of outside agencies they can complain to or seek services from if they do not feel NCM's policy offers the appropriate method.

In the case the complaint is about the President the BOD President is notified and the same policies and procedures are followed except that the BOD President or their designee takes responsibility for handling the complaint.

COUNSELING

Counseling in response to a complaint may be provided by any appropriate staff person and is kept confidential. If the complainant desires conflict resolution that involves the person whom they are complaining about, they must choose either the mediation process or the formal complaint process.

If the staff person feels the issue is outside of their abilities, comfort or scope, they will refer the complainant to the President for counseling. If the President feels the issue is outside of their abilities, comfort or scope, the President will refer the complainant to a licensed counselor or counseling service.

Counseling is documented through the archiving of emails. Phone calls are often recapped and documented via email.

MEDIATION

Mediation in response to a complaint is provided by the President or their designee and opens discussion between conflicting parties. The President or their designee educates the parties about and adheres to methods of Nonviolent Communication during mediation. The President or their designee will speak privately first with individuals involved and then will arrange a time to meet with involved parties together. If the President or their designee feels the issue is outside of their abilities, comfort or scope, they will refer the parties to a professional mediator.

Mediation is documented through the archiving of emails. Phone calls are often recapped and documented via email.

FORMAL COMPLAINTS

Formal complaints must be in writing either via email or mail and must include the following:

1. A statement clearly stating the complaint with supporting documentation
2. A description of the steps already taken to resolve the problem
3. The name and contact information of the person making the complaint
4. A statement of the desired resolution

Once the complaint is received:

1. COO will respond to the complainant confirming receipt of complaint and will forward the complaint to the President within 24 hours of receipt.
2. COO will log the complaint into the mail log and assign a Complaint ID in the following format: (P(preceptor initiating), S (for student initiating) date/initials of staff who received initial complaint. i.e. P112119CRJ)
3. COO creates tasks for appropriate follow-up in Asana to ensure timely responses
 - a. 7 calendar days after initial complaint: Request for more information must be sent. (Assign to President).
 - b. 10 calendar days after initial complaint: Schedule phone consultations (Assign to President).
 - c. Conclude Complaint [ID#] Process (within 60 calendar days) OR Next authority takes over complaint process. (Assign to President).
4. COO will create a Complaint/Grievance tracking form which is kept in the dropbox.
5. President will request further information if needed from complainant by calendar day 7 of receipt of complaint. President will inform the complainant that a response is required within 5 calendar days.
6. President will begin the process for scheduling a phone consultation with complainant by calendar day 10 of receipt of initial complaint. In the case that further information is requested, President will begin the process for scheduling a phone consultation with complainant by calendar day 10 of request for further information.
7. After the President initiates setting up a phone consultation, timing of contacts with complainant and timing for resolution of the complaint process will be variable, depending on the response times of the complainant and the extent of the complaint. The President will respond to any communications

from the complainant within 24 hours of receipt and will communicate reasonable deadlines for the complainant's responses.

8. President will have a phone consultation with the complainant in order to initiate a plan and to offer a solution. At this point, options for counseling and/or mediation will be made available again as possible solutions. The complainant will be assured that they are free to accept or reject counseling and/or mediation and will not be discriminated against as a consequence of their decision. The complainant will be informed that in the case that counseling and/or mediation options are accepted by the complainant, the original complaint will be closed. If counseling and/or mediation is not successful, a new complaint can be filed at any point. Complainants will also be given information about outside agencies they can complain to if they do not feel NCM's policy provides the appropriate method for the complaint. They are also informed of their right to terminate their contract.
9. In the case that the complainant chooses to continue with the formal complaint process, they will be clearly asked by the President or their designee to determine what level of confidentiality is to be maintained. All communication will be kept confidential to the extent requested by the complainant, though it will be explained that keeping confidentiality often limits the ability of NCM to be able to conduct investigations and to address issues effectively.
10. The president or their designee will complete an investigation to the extent possible while honoring the complainant's requests for confidentiality. Before or during the investigation, the President or their designee may consult with other staff members, board members, or other consultants to the extent possible while still honoring the complainant's requests for confidentiality. Based on the findings of the investigation, the appropriate corrective actions will be taken.
11. In the case that the complainant requests confidentiality, corrective actions may include Confidentiality Maintained Education and Training (CMET) - See description below
12. Resolution and/or corrective actions must be initiated and The President or their designee must inform the complainant in writing of the resolution and/or corrective actions within 60 calendar days of the receipt of the written formal complaint.
13. If the complainant is dissatisfied with the resolution and/or corrective actions, they may file a written formal complaint with the NCM Board of Directors. The Board of Directors will have 60 calendar days to respond by following the steps outlined in this policy.
14. Notes will be taken and filed on all interactions relating to the matter. The report will include any actions taken by the College and the resolution reached. This report will be placed in the complainant's file and, if appropriate in light of confidentiality issues, in the file of the accused, as well as in the grievance file for easy reference during accreditation reviews. All grievances including the original complaint, the process, timeline and the outcome will be maintained in the College's complaint file for a minimum of seven years.

The following is a list of tasks to be assigned within Asana by the COO to specific positions with timelines to be tracked:

1. Notify Complainant [ID#] of receipt of complaint (within 24 hours of receipt) Assigned to COO
2. Request further information if needed from Complaint [ID#] (by calendar day 7 of receipt, response from complainant is required within 5 calendar days) Assigned to COO or President
3. Begin process for setting up a time for phone consultation with Complaint [ID#] (by calendar day 10 of receipt of original complaint or by calendar day 10 of request for further information) Assigned to COO or President
4. Conclude Complaint [ID#] Process (within 60 days) OR Next authority takes over complaint process
5. Next authority takes over complaint process if resolution is not found by complainant to be satisfactory (Repeat steps 1-3)) Assigned to BOD President
6. Notify Complainant [ID#] of transfer of complaint process to next authority (within 24 hours of receipt) Assigned to NCM President or BOD President

FORMAL COMPLAINT OR GRIEVANCE AGAINST NCM PRESIDENT POLICY AND PROCEDURE

If the complaint is made against the President of the College, the complaint will go directly to the Board of Directors. The Board of Directors will follow the Complaint and Grievance Policies and Procedures outlined above. Written evidence of the outcome of the complaint and the NCM Board report will be maintained in the College's President complaint file held in dropbox, which is password protected with the BOD President and Secretary the only persons to have the password for a minimum of seven years.

CONFIDENTIALITY MAINTAINED EDUCATION AND TRAINING (CMET)

In cases where complainants request that confidentiality be maintained, NCM has created a system called Confidentiality Maintained Education and Training (CMET). This system empowers NCM to respond to complaints without exposing the complainant to possible discrimination. This system may come into play in the case of an informal or formal complaint.

The process provides the accused with required education and/or training on the subject of the complaint in an online course without calling out the accused as having received a complaint. The course is created covering the appropriate material as determined by the President and/or advisors of their choice. The course is then required of the accused and 2 or more mentors of the President's choosing and must be completed within 14 weeks. Since preceptors and students are required to acknowledge upon enrollment that occasionally the college requires additional training/education, the reason for the course requirement is maintained as a general requirement rather than a response to a complaint. The course material created for the purpose of the complaint response may later be integrated into future annual faculty training as deemed appropriate.

UNRESOLVED COMPLAINTS POLICY

NEW MEXICO COMPLAINT REGISTRATION

If the complainant is unable to resolve their complaints through the National College of Midwifery internal informal or formal complaint process, you can file a complaint through the New Mexico Higher Education Department complaint process. *In accordance with the new Federal Program Integrity rules effective July 1, 2011, the New Mexico Higher Education Department (NMHED) will review complaints regarding public and private postsecondary institutions in New Mexico as well as New Mexico resident students attending out-of-state institutions. NMHED will receive complaints that were unable to be resolved through the institution's internal complaint process. Generally, in order to file a complaint with NMHED, you must have already filed with and received a response from the institution which you are complaining against. If you have legitimate reasons preventing you from filing a complaint with the institution, you must provide supporting documentation to that regard. Please use this link to go to New Mexico Higher Education Department complaints webpage: <http://hed.state.nm.us/Complaint.aspx> NOTE: All Forms must be notarized.*

All submitted complaints must include:

- Complaint Form;
- FERPA Release Form;
- *A copy of the complaint that was filed with the institution; and*
- *A copy of the response/ruling received from the institution; or*
- *Supporting documentation why a complaint could not be filed with the institution.*

The following form is only to be submitted if the complaint is medical in nature (i. e. it involves disability, injury, illness, etc):

- HIPAA Release Form

MEAC COMPLAINT POLICY

If the complainant is unable to resolve their complaints through the National College of Midwifery's internal complaint process and the New Mexico Higher Education Department complaint process, please follow the MEAC Complaint Policy below: MEAC encourages parties to pursue informal grievance mediation attempts with each other, or with MEAC staff or Board members, to attempt to resolve grievances informally before commencing a formal written complaint process with MEAC. If those attempts fail, MEAC will review complaints received against an institution or program if it is in writing and complies with the guidelines set forth in the Accreditation Handbook:

http://meacschools.org/wp-content/uploads/2014/07/2014-Section-G_Policies-and-Procedures_Accreditation-Handbook.pdf

Midwifery Education Accreditation Council 1935 Pauline Blvd., Ste. 100B Ann Arbor, MI 48103 Phone: (360) 466-2080 Fax: (480) 907-2936 info@meacschools.org

COMPLAINTS REGARDING NCM'S INTERSHIPS IN SARA STATES

SARA Policies and Standards, including those for consumer protection and the resolution of complaints, apply to interstate distance education offered by participating SARA institutions to students in other SARA states, including internships taking place in these states. Only those complaints resulting from distance education courses offered by participating institutions to students in other SARA states come under the terms of the agreement.

Complaints about a SARA institution's in-state operations are to be resolved under the state's provisions, not those of SARA. For more information visit <http://nc-sara.org/sara-states-institutions>

ACADEMIC/CLINICAL INTEGRITY

NCM's academic integrity policy maintains the Integrity Code and applies it to all work for any class, academic activity, clinical encounter and/or skill completed as part of an NCM program including activities such as enrollment, withdrawal, termination of contract, and/or complaints/grievances. When misconduct is reported and formal resolution is required the President utilizes the Integrity Council in order to reach resolution per NCM's Academic/Clinical Integrity Policy.

INTEGRITY CODE

NCM's Integrity Code is a commitment, even in the face of adversity, to five fundamental values:

- honesty
- trust
- fairness
- respect
- responsibility

(The Center for Academic Integrity (CAI) <http://www.academicintegrity.org/icai/assets/FVProject.pdf>)

INTEGRITY COUNCIL

The Integrity Council shall be convened as required, advised by a board appointed by the President, with representation from faculty, students, and others as appropriate.

ACADEMIC DISHONESTY, ACADEMIC MISCONDUCT OR ACADEMIC FRAUD DEFINITIONS

Any type of cheating that occurs in relation to a formal academic exercise. It can include:

- **Plagiarism**: The adoption or reproduction of original creations of another author (person, collective, organization, community or other type of author, including anonymous authors) without due acknowledgment.
- **Fabrication**: The falsification of data, information, or citations in any formal academic exercise.
- **Deception**: Providing false information to an instructor concerning a formal academic exercise—e.g., giving a false excuse for missing a deadline or falsely claiming to have submitted work.
- **Cheating**: Any attempt to obtain assistance in a formal academic exercise or test without due acknowledgment.
- **Bribery** or paid services: Giving assignment answers or test answers for money.

- **Sabotage**: Acting to prevent others from completing their work. This includes cutting pages out of library books or willfully disrupting the experiments of others.
- **Professorial misconduct**: includes improper grading of students' papers and oral exams, grade fraud, deliberate negligence towards cheating or assistance in cheating.
- **Impersonation**: assuming a student's identity with intent to provide an advantage for the student.

ACADEMIC INTEGRITY RESOURCES

- <https://static.lib.ou.edu/academicintegrity/player.html>
- http://integrity.ou.edu/files/nine_things_you_should_know.pdf

ACADEMIC/CLINICAL INTEGRITY PROCEDURE

REPORTING ACADEMIC MISCONDUCT

- Any person may report suspected misconduct to an instructor (or to the relevant administrator as appropriate).
- Instructors and administrators who receive a report or otherwise learn of suspected misconduct may first investigate and should report the matter to NCM Administrative Office as described below.

INFORMAL RESOLUTION

An admonition is a warning from the instructor to the student. It may be accompanied by a grade reduction up to a zero on the assignment and/or additional required work. An admonition is not an adjudication of academic misconduct. However, in any subsequent misconduct preceding the admonition will establish the student's familiarity with integrity standards.

FORMAL RESOLUTION

Report to NCM Administration Upon receipt of a report of misconduct, the NCM President and integrity council shall investigate unless the case is referred back to the instructor for review and informal resolution.

- Notice to the student, no later than 30 regular class days of when the incident is discovered;
- a grade of "N", a temporary neutral grade, to be assigned while the matter is pending;
- referral to the President and Integrity Council, or appropriate designee(s), who will answer questions and counsel the student as to the rights, and be available to the student throughout the investigation process as an informative resource only;
- a report of findings, in writing, that shall be provided to the student, the instructor or other administrator reporting the incident, and other university officials with a need to know.

At the conclusion of the investigation, the matter may be concluded by dismissal, if insufficient evidence exists to support a finding of responsibility; default, if the student fails to respond to reasonable notice; admission of responsibility by the student; or hearing.

HEARINGS

Upon the student's request for a hearing, the matter shall be assigned to an Integrity Council Inquiry Panel. The Inquiry Panel shall consist of two students, two faculty members, and a student chair. The case shall be adjudicated according to procedures that honor the following principles:

- Students are entitled to the presumption of innocence.
- Students are entitled to a reasonably prompt hearing.
- Hearings are not adversarial: the Panel shall be primarily responsible for eliciting information from all relevant sources, which shall ordinarily include the instructor, investigator, and student.
- The student shall represent himself or herself but may be advised by his or her Integrity Council advisor.
- Responsibility for misconduct must be established by a preponderance of the evidence.
- At the conclusion of the hearing the Panel shall deliberate and decide by majority vote whether the student is responsible for an act of misconduct. If a student is found not responsible for misconduct, the matter shall be dismissed. If a student is found responsible, the Panel shall recommend an

institutional penalty to the Provost and may make recommendations to the instructor as to the grade penalty.

REMEDATION FOR MISCONDUCT

- Censure. Censure is a written reprimand for violation of integrity standards and a warning that a further act of academic misconduct will result in more severe action. Censure shall not be noted on a student's transcript, but will be noted in the student's education record.
- Service and Instructional Alternatives. In appropriate cases, a student may be allowed to complete a voluntary community service or instructional exercise in lieu of suspension or expulsion.
- Suspension. Suspension is loss of student status for a period of not less than one academic session. Credits earned elsewhere during the suspension shall not be accepted by NCM. A notation of the suspension shall be made on the student's transcript and shall remain there until the student graduates, or permanently, depending on the severity of the offense.
- Expulsion. Expulsion is termination of student status for an indefinite period, usually intended to be permanent. A notation of expulsion for academic misconduct shall be made on the student's transcript and will remain there permanently. Reconsideration of any expulsion is not guaranteed; it occurs at the discretion of the Provost, in consultation with the Integrity Council.

APPEALS AND RECONSIDERATION

Appeals must be based on procedural irregularities so substantial as to deny the student a fair hearing; or on new and significant evidence that could not have been discovered by a reasonably diligent student. Appeals shall be decided by the President, and the Board of Directors reserves the right to review, at their discretion, any decision for manifest error or inequity.

ONLINE DISCUSSION POLICY

The purpose of this online discussion policy is to provide a safe, accessible mode of communication and support amongst students, faculty and staff of NCM. Being a midwifery student or preceptor comes with challenges that are sometimes met in isolation. NCM encourages students and faculty to use online discussion spaces the college provides (Facebook and Canvas) to reach out to one another in order to seek guidance and solace in meeting challenges. Celebrate and expound on successes so that others can take inspiration. Share helpful resources and assist others in being the best students and preceptors they can be! In general NCM online discussion groups are limited to NCM students (including observers), faculty, supervisors, BOD, staff and advisors. Discussions, chats, and messages on NCM forums are for the use of NCM invited participants only and may not be distributed to anyone outside of the group or class. Nevertheless, NCM recognized that there is no way to guarantee that messages will be kept confidential. Students, staff and faculty are required to affirm and be familiar with the following rules governing behavior on the discussion group.

GUIDELINES FOR DISCUSSION GROUP AND CHATTING

NCM asks that group members follow these rules as a courtesy to other members and the midwifery community as a whole:

- Maintain confidentiality. As we all know, the world of midwifery is small and intimate. Please refrain from sharing information about others (e.g. your preceptors, your clients or other midwives) that should be kept confidential, even if names are not being used.
- It's okay to share personal stories, but when it comes to others' stories, keep discussions focused on concepts rather than on personal information.
- Consider cultural appropriateness. NCM has students from all walks of life in diverse geographic settings. Please consider whether your words might be offensive to someone of a culture different than your own.
- Practice wise speech. Be kind, honest, respectful, helpful and thoughtful.

- Come to the discussion with openness to varying perspectives and enough humility to listen deeply. Come with trust that everyone in the group is seeking to listen and to be heard.
- Consider that it is extremely difficult to interpret tone through electronic communication so avoid implying tone when reading posts as this can lead to misinterpretation.
- All defamatory, abusive, profane, threatening, offensive, or illegal materials are strictly prohibited as are hateful, negative or discriminatory comments regarding race, color, national or ethnic origin, ability, religion, marital status, sex, age, sexual orientation, gender identity and expression, economic status, formal education, language, citizenship status, veteran status, genetic and/or ancestry information, political beliefs or other identities.
- Do not post commercial solicitations.
- Consider that comments are subject to libel, slander, and antitrust laws.
- Do not post any material protected by copyright or intellectual property rights without the permission of the owner.
- Remember that while users are prohibited by this policy from reproducing and distributing posts to non-members and, while NCM believes its members will follow this Discussion Group Policy, NCM has no technical means to prevent a user from reproducing or distributing a post.

If you have any questions about the guidelines, please contact Marcy Andrew at marcya@midwiferycollege.org.

ONLINE DISCUSSION GROUP COMPLIANCE

Messages will not be screened before they are posted. However, posts that do not comply with the guidelines listed above will be removed and the author of the post will be given direction by the moderator on how to revise the post, if within reason, to meet the guidelines of the discussion group.

Anyone consistently posting out of compliance with the guidelines will be removed from the group and possibly dismissed from the College.

If a you find a post to be inappropriate:

- Take pause. Consider the possibility that you might be taking something personally that is meant to further deeper learning, which can come with a certain level of discomfort. See how others respond before choosing to respond yourself.
- Ask questions and seek clarification without inspiring conflict or confrontation.
- If you just can't shake the viewpoint that the post is inappropriate, remove yourself from the conversation and contact the moderator directly at marcya@midwiferycollege.edu .

ONLINE DISCUSSION GROUP DISCLAIMER

Discussion groups are provided as a service of the National College of Midwifery. NCM accepts no responsibility for the opinions and information posted on any NCM site by others. In no event shall NCM be liable for any damages whatsoever in connection with the use of any information posted on this site.

From time to time, posts may include attachments from users, third parties, or hyperlinks to other websites or materials ("non-NCM content"). Because NCM has no control over this non-NCM content, you acknowledge and agree that NCM is not responsible for its availability and that NCM does not endorse or warrant the accuracy of any non-NCM content. Students, staff and faculty further acknowledge and agree that NCM shall in no way be liable or responsible for such non-NCM content.

NCM does not represent or guarantee that its discussion group will be free from loss, corruption, attack, viruses, interference, malware, hacking, or other security intrusions and NCM disclaims any liability relating thereto.

By joining and using a discussion group, Students, staff and faculty acknowledge reading, understanding, and waiving any cause of action you may have against NCM with regards to this disclaimer.

LANGUAGE POLICY

NCM materials are in English at a college level of writing, speaking, and comprehension. Materials, services and classes in other languages are not currently available.

COPYRIGHT POLICY

All NCM materials are copyrighted by NCM unless they display a Creative Commons, or other license. [Copyright Act of 1976](#). Students and Faculty are responsible for any contributions they make to an NCM course, including but not limited to any feedback, blogs, discussions, assignments, comments or questions. Contributions must not:

1. contain any material which is defamatory of any person;
2. contain any material which is obscene, offensive, hateful or inflammatory;
3. promote sexually explicit material;
4. promote violence;
5. promote discrimination including discrimination based on sex, gender identity, race, color, marital status, national or ethnic origin, religion, age, sexual orientation, and/or disability;
6. infringe any copyright, database right or trademark of any other person;
7. be likely to deceive any person;
8. be made in breach of any legal duty owed to a third party, such as a contractual duty
9. or a duty of confidence;
10. promote any illegal activity;
11. be threatening, abusive or invade another's privacy, or cause annoyance, inconvenience or needless anxiety;
12. be likely to harass, upset, embarrass, alarm or annoy any other person;
13. be used to impersonate any person, or to misrepresent your identity or affiliation with any person;
14. Give the impression that they emanate from NCM, if this is not the case; or advocate, promote or assist any unlawful act such as (by way of example only) copyright infringement or computer misuse.
15. By posting your contributions you confirm that all intellectual property rights in any content posted is yours and you grant to NCM a non exclusive worldwide perpetual royalty free license to use, reproduce, modify, publish, translate and distribute the content.
16. Students and Faculty agree to indemnify NCM for any cost, expenses damages or liabilities NCM may incur relating to your contributions. NCM reserves the right to remove or edit any contributions as we deem appropriate without notice.

Prior to publishing and offering an online resources, the CDO must review it to ensure that all materials are public domain, the community preceptor has permission from the owner to use them, the items have a Creative Commons or other usage license, with which the preceptor is abiding, or the item is "Fair Use" (see description below).

If accusations of an infringement of copyright is made, NCM will take immediate action in the form of:

1. Immediately removing the questioned item from the course
2. Investigating the reported infringement.
3. Repeated infringements may lead to the person making the infringements being fired or withdrawn by NCM.

NCM is prepared to stand up for staff or students if false accusations are made.

NCM faculty and students may use the following items for instructional purposes:

- Items in the public domain as part of assignments or for instructional purposes as long as proper credit is given to the work's author, when applicable.
- Items for which they have been given permission to use by the owner.

- Items with a Creative Commons, or other usage license, providing the requirements for the type of license in followed.
- Items which fall under Fair use (*Fair use is a legal doctrine that promotes freedom of expression by permitting the unlicensed use of copyright-protected works in certain circumstances* <https://www.copyright.gov/fair-use/more-info.html>):
 - a single chapter from a book
 - an excerpt from a work that combines language and illustrations, such as a children's book, not exceeding two pages or 10 percent of the work, whichever is less
 - a poem of 250 words or less or up to 250 words of a longer poem
 - an article, short story, or essay of 2,500 words or less, or excerpts of up to 1,000 words or 10 percent of a longer work, whichever is less; or
 - a single chart, graph, diagram, drawing, cartoon, or picture from a book, periodical, or newspaper
 - Student and Faculty Multimedia projects that include copyrighted materials must
 - For multimedia projects:
 - Give credit to the sources, display the copyright notice, and provide copyright ownership information.
 - State on the opening screen and on any accompanying print material a notice that certain materials are included under the fair use exemption of the U.S. Copyright Law and have been prepared according to the multimedia fair use guidelines and are restricted from further use.
 - A maximum of 2 copies may be made-1 for the creator, one for the school's library.
 - Permission from the owners of the copyrighted materials must be obtained before any copies are made or the project is distributed.

PROMOTIONAL MATERIALS AND WEB CONTENT USE BY OUTSIDE PARTIES POLICY

NCM limits the use of all college materials, including but not limited to all content of the NCM website, brochures, and pamphlets as they are, without changes. NCM web content and promotional materials are not to be replicated, copied/pasted, paraphrased or re-published on any other agency, organization or individuals website or promotional materials. Preceptors for NCM are permitted to reference this content and our program by hyperlink to our website, or to mention our school by name only. Any use of our name and content that extends beyond the use of a hyperlink is in violation of this policy and thus our policy and procedures. Preceptors or students in violation of NCM policy and procedures are subject to disciplinary action.

POLICY REGARDING PROGRAM CLOSURE/ TEACH-OUT PLAN

In the event of program elimination or significant change in requirements, students will be provided a way to complete the program in a reasonable period compatible with accreditation standards. This may require enrollment of students at other institutions of higher education or in courses taught through NCM for a maximum of two years after discontinuation of the program with no additional cost to the students beyond that originally agreed to by the students. Remuneration is contracted individually between students and preceptors while two years of administration and operations of school activities are paid upfront by the student. Therefore NCM always has a two year fund reserve to be used in the case of closure.

ADMISSIONS AND ENROLLMENT

TYPES OF ENROLLMENT AND ASSOCIATED FEES

ASM

Students are working toward their Associates of Science in Midwifery as a direct entry midwife.

Application Fee: \$100 (non-refundable)

Administrative Fee: \$9,000

Yearly Extension Rate: \$1,500 due end of year two and each subsequent year until graduation. (see example in Timeframe for Completion Policy)

BSM BRIDGE

Students are licensed/certified midwives working toward their Bachelors of Science in Midwifery.

BSM Bridge for CPM/LM non-NCM ASM graduate

Application Fee: \$100 (non-refundable)

Administrative Fee: \$4,900

Yearly Extension Rate: \$1,500 due end of year two and each subsequent year until graduation. (see example in Timeframe for Completion Policy)

BSM Bridge for NCM ASM Graduates

Application Fee: \$100 (non-refundable)

Administrative Fee: \$2,500

Yearly Extension Rate: \$1,500 due end of year two and each subsequent year until graduation. (see example in Timeframe for Completion Policy)

ASM-BSM BRILLIANCE PATH ENROLLMENT

Now retired, ran September 1, 2017 through December 31, 2018. Details: Students have 2-5 years to complete ASM program. BSM requirements must be completed no more than 24 months following ASM graduation.

Application Fee: \$100 (non-refundable)

Administrative Fee: \$9000

Yearly Extension Rate: \$1,500 due end of year two and each subsequent year until graduation. (see example in Timeframe for Completion Policy)

NON-DEGREE STAND-ALONE COURSE ENROLLMENT

Students are not officially enrolled as students at NCM and academics to do not culminate in a degree or certificate. An official transcript is provide and midwifery credits can be used to satisfy NCM Program requirements for up to 5 years from the date of course completion on transcript. If non-degree students enroll in NCM for academics and later decide to enroll in a degree program, they must pay the full application fee for the degree program, the administrative fees they have paid as a non-degree student will be applied toward the current cost of the degree program if their application is accepted.

Application Fee: \$25 (non-refundable)

Administrative Fee: \$75 per credit

OBSERVER ACCESS TO NCM ONLINE PLATFORM ENROLLMENT

This grants access to curriculum and digital library only. No credit will be awarded to observers.

Administrative Fee: \$50 per year

VISA ENROLLMENT

NCM has SEVIS approval. Student must have US preceptors who are active preceptors with NCM.

Contracts to begin study must be approved before applying for SEVIS.

ADMISSIONS POLICY

The National College of Midwifery has open enrollment all year. Our policy is to accept all students with the appropriate prerequisites and with the ability to benefit from their chosen NCM program. This includes demonstrating readiness for the program by completing a pre-enrollment interview/assessment. Before entering our program, students are responsible for researching the laws regarding the practice of midwifery in their state, province, or country. Please note: We are currently unable to accept applications from students or preceptors in some states. Please see list online:

<https://www.midwiferycollege.edu/dem-by-state>

Each individual program has distinctive application forms, prerequisites and requirements. There is a checklist of all the documents needed on the Application Forms. Application forms can be found at <https://www.midwiferycollege.edu/apply-today-national-college-of-mid> or can be emailed by request.

The NCM contract is between the College, the Preceptor and the Student as individuals. NCM does not enter into contracts with institutions. The student-preceptor contract lasts:

1. for the length of time that the student and preceptor indicate on the contract,
2. so long as the student and preceptor continue working together,
3. until the contract ends upon graduation or upon completion of a Termination of Contract form.

Student and preceptor applicants apply as a team to the College. Preceptors must satisfy NCM's requirement for preceptors and the faculty requirements set forth by the accrediting agency (MEAC). Each preceptor application is reviewed to ensure it satisfies these requirements (See Preceptor Requirements in this Manual).

Students are required to find their own academic / clinical preceptors. The National College of Midwifery does not supply academic / clinical placements for students.

ASM Students must have at least two preceptors accounting for all ASM academic and clinical requirements in order to enroll and to complete the program. Preceptors can teach both academic and clinical portions of the program. Please note that although only one preceptor is required for the academics, at least two preceptors are required to complete the clinical portion of the program, as several of the NARM skills require the evaluation of two different preceptors.

BSM students each require at least one preceptor.

NCM does not have a campus and does not pay course instructors. Preceptors are hired directly by their students.

ENROLLMENT CRITERIA POLICY AND PROCEDURE

The following objective and subjective assessments are completed with a required score threshold for each program in order for the student to be admitted.

ASM ENROLLMENT CRITERIA

ASM Admission requires a minimum of 18 points total

Objective

- NCM has State or foreign legal authorization to teach in student's location.
 - No (No admissions)
 - Yes (2)
- Age Requirement Met (16)?
 - No (No admissions)
 - Yes (2)
- HS Diploma/GED
 - No (No admissions)
 - Yes (2)
- Student Orientation Completed
 - No (No admissions)
 - Yes (0)
- Admission Package Complete
 - No (No admissions)
 - Office staff had to call with request for follow up two or more times (1)
 - Yes with 1 or less follow up by staff (2)
- Preceptor 1 complete application package
 - No (No admissions)

- Office staff had to call with request for follow up two or more times (1)
- Yes with 1 or less follow up by staff (2)
- Preceptor 2 completed application package
 - No (No admissions)
 - Office staff had to call with request for follow up two or more times (1)
 - Yes with 1 or less follow up by staff (2)
- What is your level of proficiency with software such as various email, document, spreadsheet, and powerpoint programs?

- Not Proficient (No admissions)
- Somewhat Proficient (1)
- Very Proficient (2)
- Do you have access to a computer and internet connection?
 - No (No admissions)
 - Regular (1)
 - Continuous and Regular (2)
- If foreign, is the student able to obtain a Student F1 Visa?
 - No (No admissions)
 - Yes (0)

Subjective

- Is the student more interested in nurse midwifery or direct-entry midwifery?
 - Wants to be a certified nurse midwife. (No admissions)
 - Indicates some level of indecision around earning CPM (1)
 - Wants to be a certified professional midwife. (2)
- Does the student have a plan/vision for their midwifery career?
 - No or yes but it is totally unrealistic. (No admissions)
 - Yes, but it is somewhat undefined. (1)
 - Yes, and it is realistic. (2)
- Has the student ever done on-call work?
 - No (0)
 - Yes, but less than 6 months. (1)
 - Yes, for 6 months or greater. (2)
- Does the student know the licensing and legality in the state they plan to practice in?
 - No (No Admissions)
 - Yes, but is making assumptions about political climate changing or moving after graduation. (1)

- Yes (2)
- Has the student researched other midwifery pathways and/or institutions?
 - No (No admissions)
 - Yes, they have researched 1-2 other paths or schools. (1)
 - Yes, they have researched 3 or more other paths or schools. (2)
- Student self assessment of learning style
 - Limited or no self-motivation or organizational skills. (No admissions)
 - Somewhat self-motivated and organized. (1)
 - Very self-motivated and organized. (2)
- Student has shadowed a midwife who is practicing in the environment she wishes to work in.
 - No (1)
 - Yes (2)
- Does the student have a plan to complete the 10 births as primary in the US or Canada?
 - No (No admissions)
 - Yes (0)

BSM ENROLLMENT CRITERIA

BSM Admission requires a minimum of 20 points total

Objective

- NCM has State or foreign legal authorization to teach in student's location.
 - No (No admissions)
 - Yes (2)
- Age Requirement Met (18)?
 - No (No admissions)
 - Yes (2)
- HS Diploma/GED
 - No (No admissions)
 - Yes (2)
- Midwifery License or Certification
 - No (No admissions)
 - Yes (2)
- Student Orientation Completed
 - No (No admissions)
 - Yes (0)
- Admission Package Complete
 - No (No admissions)
 - Office staff had to call with request for follow up two or more times (1)
 - Yes with 1 or less follow up by staff (2)
- Preceptor 1 complete application package
 - No (No admissions)
 - Office staff had to call with request for follow up two or more times (1)
- Yes with 1 or less follow up by staff (2)
- Preceptor availability
 - No regularly planned mentoring (No admissions)
 - No regularly planned mentoring, but preceptor is available as needed (1)
 - Regularly scheduled mentoring (2)
- What is your level of proficiency with software such as various email, document, spreadsheet, and powerpoint programs?
 - Not Proficient (No admissions)
 - Somewhat Proficient (1)
 - Very Proficient (2)
- Do you have access to a computer and internet connection?
 - No (No admissions)
 - Regular (1)
 - Continuous and Regular (2)
- If foreign, is the student able to obtain a Student F1 Visa?
 - No (No admissions)
 - Yes (0)

Subjective

- Is the student more interested in nurse midwifery or direct-entry midwifery?
 - Wants to be a certified nurse midwife. (No admissions)
 - Indicates some level of indecision around earning direct entry BSM (1)
 - Wants to be a CPM with an BSM degree (2)
- Does the student have a plan/vision for their midwifery career?
 - No or yes but it is totally unrealistic. (No admissions)
 - Yes, but it is somewhat undefined. (1)
 - Yes, and it is realistic. (2)
- Does the student know the licensing and legality in the state they plan to practice in?
 - No (No Admissions)
 - Yes, but is making assumptions about political climate changing or moving after graduation. (1)
 - Yes (2)
- Has the student researched other midwifery pathways and/or institutions?
 - No (No admissions)
 - Yes, they have researched 1-2 other paths or schools. (1)
 - Yes, they have researched 3 or more other paths or schools. (2)
- Student self assessment of learning style
 - Limited or no self-motivation or organizational skills. (No admissions)
 - Somewhat self-motivated and organized. (1)

- Very self-motivated and organized.
(2)
- Has the student completed the 10 primary continuity of care births or does the student have a plan to complete 10

primary continuity of care births? These births must be completed after receiving their midwifery certification or license?

- No (No admissions)
- Yes (2)

ENROLLMENT PROCESS OVERVIEW

Applications must be submitted online. NCM discards incomplete applications after 60 days.

Student and preceptor(s) complete application forms and contracts, and submit these to the College along with required supporting documents and non-refundable application fee. Please note that a college transcript does not replace the requirement of a copy of the high school transcript or diploma, or GED certification. Students are required to complete the student orientation course offered online through Canvas prior to enrolling. Preceptors are required to complete the preceptor orientation course offered online through Canvas prior to being an active preceptor.

Once the application materials are complete and the application fee is in the NCM office, NCM reviews the materials and notifies the student of the decision regarding acceptance. The Student Enrollment Checklist/Assessment is completed to assess readiness to enroll and succeed in the appropriate program. The Student Enrollment Checklist/Assessment is distinct for each Program (ASM or BSM), and includes both objective measures (i.e. requirements and completed paperwork) and subjective measures (i.e. does the student possess the attributes necessary to be successful in the program they has chosen).

Once accepted, the student must pay the administrative fee in order to become enrolled, or half as an initial payment along with a completed 12 month payment plan with automatic payment set up via PayPal. Special circumstances may allow for 24 month payment plans under the discretion of the COO.

The student and their preceptor(s) are notified of official enrollment by email and letter from the College. Work done prior to enrollment is not accepted towards program completion, except through NCM's transfer credits mechanism (see policy on Transfer of Academic Credit).

ASM APPLICATION REQUIRED DOCUMENTATION CHECKLIST

STUDENT ENROLLMENT CHECKLIST

- ✓ Student Orientation Course Completed
- ✓ ASM Student Application Form
 - ASM Contract between Student, Preceptor and NCM (one required for each preceptor)
 - Non-Refundable Application Fee
 - 1 Student Photo
 - Proof of Graduation from High School. Acceptable items: Diploma/High School Transcript/GED/graduation verification letter from the registrar's office of the school from which the student graduated, or another equivalent form of official proof of graduation.
 - Statement of Understanding
- ✓ Transcripts for transferring college-level courses (if desired)
- ✓ Administrative Fee

CLINICAL AND ACADEMIC PRECEPTOR CHECKLIST

- ✓ Preceptor Orientation Course Completed
- ✓ ASM Preceptor Application Form
 - Copy of preceptor's current certification/license with Date of Expiry
 - CV/Resume
 - Oversight Form
 - Statement of Understanding
- ✓ 3 Reference Forms for preceptor

CLINICAL PRECEPTOR'S PRACTICE CHECKLIST

- ✓ Clinical Site/Practice Application
 - Diagram/ floor plan of academic and clinical space(s) to be used (only if space is not homebirth)
 - Equipment and restocking checklist for clinical facility/clinical practice
 - Safety standards form for clinical facility/clinical practice
 - Fire inspection certification (if applicable)

BSM APPLICATION REQUIRED DOCUMENTATION CHECKLIST

STUDENT ENROLLMENT CHECKLIST

- ✓ Student Orientation Course Completed
- ✓ BSM Student Application Form
 - BSM Contract between Student, Preceptor and NCM (one required for each preceptor)
 - Non-Refundable Application Fee
 - 1 Student Photo
 - Proof of Graduation from High School. Acceptable items: Diploma/High School Transcript/GED/graduation verification letter from the registrar's office of the school from which the student graduated, or another equivalent form of official proof of graduation.
 - Midwifery License or Certification
 - Statement of Understanding
- ✓ Administrative Fee
- ✓ Transcripts for transferring college-level courses (if desired)

PRECEPTOR ENROLLMENT CHECKLIST

- ✓ BSM Preceptor Application Form
- ✓ 3 Reference Forms for preceptor
- ✓ Copy of preceptor's current certification/license with Date of Expiry
- ✓ Preceptor's CV/Resume
- ✓ Oversight Form
- ✓ Copy of highest academic degree (must be Bachelor-level or above) Official transcripts of prior education sent directly from the institution at which it was taken
- ✓ Statement of Understanding

TRANSFER OF ACADEMIC CREDIT POLICIES AND PROCEDURES

NCM CREDIT TRANSFER TO OTHER INSTITUTIONS POLICY

NCM does not guarantee the transferability of credits to a college, university or institution. Any decision on the comparability, appropriateness and applicability of credit and whether they should be accepted is the decision of the receiving institution.

ACCEPTING TRANSFER CREDITS FROM OTHER INSTITUTIONS POLICY AND PROCEDURE

NCM is happy to review courses completed at other accredited colleges or universities. In order to review a credit, NCM requires an official sealed transcript from an accredited university or college, showing the course name, grade, and number of credits. In the case that the name of the course does not adequately match an NCM course title, the student can provide NCM with a syllabus or course description for the course(s) which demonstrates that the learning objectives have been satisfied.

Credits acceptable for transfer must be college level and from an accredited institution. General Education Credits must be at least C- or higher. Midwifery Modules must be 80% or higher. Please note that only NCM office can award transfer credit. A preceptor cannot award transfer credit for an entire course. However they can evaluate prior work towards the completion of a course (towards didactic assessments of a course). Once the student has satisfied all of the course requirements, the preceptor can record the grade the student earned.

ACCEPTING CREDIT FOR PRIOR NCM STAND ALONE COURSES POLICY AND PROCEDURE

An official transcript is provided for stand alone courses taken at NCM and midwifery credits can be used to satisfy NCM Program requirements for up to 5 years from the date of course completion on transcript. If non-degree students enroll in NCM for academics and later decide to enroll in a degree program, the amount paid will be applied toward the current cost of the degree program. Stand alone courses only require the student to have one academic preceptor who is qualified to teach the course(s) the student is signing up for.

CERTIFICATES POLICY

Academic credit cannot be transferred from certificates (hypnobirthing, Lamaze, breastfeeding, etc.). Transfer credits must come from an accredited university or college or institution. Students can convey the skills they learned from these certificate courses by completing the didactic assessments stated in the syllabus. If, after reviewing the NCM curriculum, the preceptor sees that **all** the didactic assessments have been met, a grade can be assigned.

ACCREDITATION REQUIREMENT POLICY

Transferred courses must have been completed with an accredited institution. The registrar verifies the school's accreditation.

EVALUATION OF COURSE CONTENT POLICY

If the course description does not clarify the content of the course, NCM requires the student to complete the NCM Transfer Credit Request Form which includes the submission of the course syllabus. Upon receipt of this form, the Registrar or Chief Development Officer reviews the course syllabus to ensure that the content of the course matches NCM's course content significantly.

ACADEMIC CREDIT VALUATION POLICY

NCM credits are semester credits (not quarter credits): 1 of NCM's academic credits = approximately 15 "contact hours." The course credits must meet or exceed NCM's matching course requirements. This can be fulfilled from a single course or combined from several courses.

MINIMUM GRADE REQUIREMENT POLICY

NCM accepts transfer credits for General Education requirements with a grade of C- or higher. For the Midwifery Modules a 80% or higher is required.

MAXIMUM TIME FRAME REQUIREMENT POLICY

There is no time limit for the following courses: BIO155G Anatomy and Physiology, HON205G Applied Microbiology, SCI122G Chemistry, ENG200G College Composition, HON211G Statistic, MATH112G College-Level Math, PSY224 Communication and Counseling, HON225G Midwifery Ethics, HON393G Community Health, ENG202G Business and Professional Communication, HON220G Midwifery Literature and Art, HON222GHistory of Midwifery.

There is a five year time limit for transferring in midwifery credits from other MEAC accredited institutions as well as a five year limit for the following courses: HON248G Cultural Issues, BIO120 Fetal Development, SOC102 Genetic Screening, HON390G Laws and Regulations.

PRIOR LEARNING ASSESSMENT/ADVANCED PLACEMENT POLICY

NCM accepts the following to satisfy credit requirements: AP, CLEP, DSST, and ACE recommendations. NCM accepts the score recommended for credit by the granting organization. The student provides an official transcript or results to NCM. The NCM Registrar verifies the current guidelines from the granting organization.

COLLEGE PLACEMENT EXAMS POLICY

A college placement exam determines what level course a student is ready to enter. As it does not confer credits for a course. NCM does not accept this type of exam as a "transfer credit."

MAXIMUM NUMBER OF TRANSFERRED GENERAL EDUCATION CREDITS POLICY

There is no maximum number of credits allowed to be transferred into NCMs programs for General Education courses provided they satisfy the requirements of transfer credits.

MAXIMUM NUMBER OF TRANSFERRED MIDWIFERY MODULE CREDITS POLICY

NCM will accept up to 15 transfer credits for midwifery modules 3-7 provided they satisfy the requirements of transfer credits.

TRANSFER OF CLINICAL CREDIT POLICY

Clinical Credits are only accepted from other MEAC Accredited schools and NARM PEP on a case by case basis at the discretion of NCM. The student must submit both the official transcript and copies of their clinical record forms (not client charts) showing client code, date completed, and preceptor name and signature.

NCM will accept the following maximum clinicals as transfer credits:

- 10 of 10 Births as Observer
- 20 of 25 Prenatals as Assistant
- 18 of 20 Births as Assistant
- 18 of 20 Newborn Exams as Assistant
- 8 of 10 Postpartum Exams as Assistant
- 25 of 30 Well Woman Exams as Primary under Supervision
- 15 of 20 Initial Prenatals as Primary under Supervision
- 20 of 55 Prenatals as Primary under Supervision
- 15 of 25 Births as Primary under Supervision
- 10 of 20 Newborn Exams as Primary under Supervision
- 20 of 40 Postpartum exams as Primary under Supervision
- 2 of 5 NARM Continuities of Care
- 10 of 10 Out of Hospital Births

- The student must complete the entire NARM Skills Form while enrolled in NCM's ASM program.
- All clinicals must meet NCM and NARM requirements.
- Student must be enrolled with NCM for a minimum of 1 year.
- The date of the first clinical to the date of the last recorded academic or clinical experience must be at least 2 years and no more than 10 years.
- Further clinical requirements may be necessary in order to ensure the student meets current NCM and NARM clinical requirements.
- Ten out of hospital births must occur within 3 years of taking the NARM Exam.

Additional Requirements for NARM PEP Transfers

NCM will accept clinical work completed as part of NARM's PEP program towards ASM clinical requirements, provided the student has submitted *all* of the following to NCM:

- ✓ Verification that preceptor(s) who facilitated PEP work are registered NARM preceptors
 - preceptor certificate from NARM or letter from NARM with confirmation of registration.
Documentation must show that preceptor(s) were certified before clinicals were recorded.

PAYING FOR THE PROGRAM

FEES PAID DIRECTLY TO THE COLLEGE

Students must pay the application and administrative fee (see below) upon enrollment. Administrative fees are accepted from individuals i.e. the student who is enrolling or a parent/other individual on behalf of the enrolling student and institutions or organizations providing a loan or scholarship funds. NCM does not accept third party payments i.e. the enrolling student pays another midwifery institution/site and the institution/site pays the tuition of the enrolling student.

PAYMENT PLANS

The National College of Midwifery offers a 12 month payment plan for ASM students. Students will not be enrolled without full Administrative Fee paid or initial payment of \$4,500 paid and [Payment Plan](#) signed and on file. Students must agree to pay via PayPal Automatic Billing through NCM as part of the payment plan agreement.

The National College of Midwifery accepts partial payments toward yearly extensions. With full payment due within 12 months of extension invoice.

All fees owed to the college are due prior to graduation and receipt of their diploma.

ASM NCM ASSOCIATED FEES

Application Fee: \$100 (non-refundable)

Administrative Fee: \$9,000

Yearly Extension Rate: \$1,500 due end of year two and each subsequent year until graduation.

BSM BRIDGE NCM ASSOCIATED FEES

BSM Bridge for CPM/LM non-NCM ASM graduate

Application Fee: \$100 (non-refundable)

Administrative Fee: \$4,900

Yearly Extension Rate: \$1,500 due end of year two and each subsequent year until graduation.

BSM Bridge for NCM ASM Graduates

Application Fee: \$100 (non-refundable)

Administrative Fee: \$2,500

Yearly Extension Rate: \$1,500 due end of year two and each subsequent year until graduation.

ASM-BSM BRILLIANCE PATH ENROLLMENT NCM ASSOCIATED FEES

Now retired, ran September 1, 2017 through December 31, 2018. BSM requirements must be completed no more than 24 months following ASM graduation.

Application Fee: \$100 (non-refundable)

Administrative Fee: \$9000

Yearly Extension Rate: \$1,500 due end of year two and each subsequent year until graduation.

NON-DEGREE STAND-ALONE COURSE ENROLLMENT NCM ASSOCIATED FEES

If non-degree students enroll in NCM for academics and later decide to enroll in a degree program, they must pay the full application fee for the degree program, the administrative fees they have paid as a non-degree student will be applied toward the current cost of the degree program. (see Academic Transfer Credit Policy for more information.)

Application Fee: \$25 (non-refundable)

Administrative Fee: \$75 per credit

OBSERVER ACCESS TO NCM ONLINE PLATFORM ENROLLMENT

Administrative Fee: \$50 per year

ADDITIONAL EXPENSES NOT PAID TO NCM

REMUNERATION

Students and their preceptor(s) make whatever financial agreements they wish, provided evidence of an agreement is filed with NCM. These agreements are fulfilled directly between the student and preceptor(s). Refer to Example Remuneration Agreements between student and preceptor in Contract between Student & the National College of Midwifery.

TEXTBOOKS

Students are not required to own the books required for the courses, but must find access to them. NCM does not sell books and the books required for courses are not included in NCM's administrative fee. Many students are able to find the books used at a discounted price, or can borrow from their preceptors.

Estimated Cost: \$2000 (used) \$2600 (new).

MIDWIFERY EQUIPMENT

Students are not required to own midwifery equipment, but must have access to it through their preceptors. Some preceptors may require that students possess some or all of their own midwifery equipment. Costs of equipment vary. Students should understand that they will learn to use the equipment their preceptors use and this could vary from preceptor to preceptor.

GENERAL EDUCATION REQUIREMENTS

NCM highly recommends that students complete their general education courses prior to enrollment but it is not required. General education courses for 3 credits of Math and 4 credits of English are not offered through NCM. Students may take the courses at an accredited college or university, or online source. California ASM students must complete an additional 3 credits of Chemistry and 1 credit of Early Childhood Development. Students are required to be certified in CPR & NRP. NRP certification will only be accepted from official American Academy of Pediatrics or Canadian Paediatric Society as of 1/1/2019. The costs for these are the responsibility of the student, and are variable.

REQUIRED OUTSIDE EXAMINATION FOR ASM DEGREE

Most of our ASM students sit for the NARM exam at the end of their program. Exam and certification fees are paid by the student. Please check directly with these organizations for their current costs.

FINANCIAL AID AND STUDENT LOAN POLICIES

The National College of Midwifery does not have any financial aid or student loans available at this time. NCM does have a scholarship program. See Scholarship information in this document for details. NCM also provides a realistic [Direct Entry Midwifery Apprentice Financial Calculator](#) so that all midwifery students can do a cost analysis for various DEM pathways. NCM is not a Title IV school. It does not qualify for this because it does not have a campus. This means that students are not eligible for federal financial aid or deferments of student loans.

1098-T TAX REPORTING INFORMATION

Payments made to the National College of Midwifery are usually *not* tax deductible and NCM does *not* issue 1098-T forms.

REFUND POLICIES

TUITION REFUNDS

Student must send in a letter stating their intention to withdraw, this letter is printed if sent electronically and added to student file. The office will calculate the refund based on the refund policy. A refund check, if appropriate, is sent out certified mail with return receipt. When a student withdraws prior to commencing instruction with the preceptor, the student will be refunded all administrative fees paid to the College except for \$200: \$100 non-refundable application fee and \$100 non-refundable registration charge for students who withdraw prior to commencing instruction with the preceptor. If there is a policy conflict the full administration fee and preceptor remuneration is refunded per [New Mexico State law](#). Students on payment plans with NCM will be refunded based on the full administrative fee.

Date of student withdrawal as a % of the enrollment	Portion of tuition and fees obligated and paid
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period for which the student was obligated.	that are eligible to be retained by the institution
0-3 business days	100% return
Day 4-71	90% return
Day 72-176	50% return
Day 177-352	25%
After day 352	0%

ADMINISTRATIVE AND PRECEPTOR FEE REFUNDS

When calculating refunds of the Administrative Fee, NCM considers the start date to be the date that the student is notified by NCM that they are officially enrolled in their program. Refunds are calculated based on 352 day year and based on a 2 year program cycle. Tuition/fee refunds must be made within 30 calendar days of the institution receiving written notice of a student's withdrawal or of the institution terminating enrollment of the student, whichever is earlier. Upon request by a student or the department, the institution shall provide an accounting for such amounts retained under this standard within five workdays.

- Application Fee (prior to enrollment): \$100 is non-refundable
- Administrative Fee for 2 year ASM Program: \$9000
- Administrative Fee for 2 year BSM Program non-alum: \$4900
- Administrative Fee for 2 year BSM Program alum: \$2500
- Yearly Extension Rate Fee beyond 2 years: \$1500 (up to 3 extensions max)

ASM 2 YEAR PROGRAM REFUND POLICY

Obligated period is defined as 2 year. Administrative Fee is \$9000.

Date of student withdrawal as a % of the enrollment period for which the student was obligated.	Portion of tuition and fees obligated and paid that are eligible to be retained by the institution	State protected NCM Eligible Amount to be Retained
0-3 business days	100% return	\$0
Day 4-71	90% return	\$900
Day 72-176	50% return	\$4500
Day 177-352	25%	\$6750
After day 352	0%	\$9000

BSM 2 YEAR PROGRAM REFUND POLICY

Obligated period is defined as 2 year. BSM Administrative Fee is \$4900.

Date of student withdrawal as a % of the enrollment period for which the student was obligated.	Portion of tuition and fees obligated and paid that are eligible to be retained by the institution	State protected NCM Eligible Amount to be Retained
0-3 business days	100% return	\$0
Day 4-71	90% return	\$490
Day 72-176	50% return	\$2450
Day 177-352	25%	\$3675
After day 352	0%	\$4900

Obligated period is defined as 2 year. BSM Alumni Administrative Fee is \$2500.

Date of student withdrawal as a % of the enrollment period for which the student was obligated.	Portion of tuition and fees obligated and paid that are eligible to be retained by the institution	State protected NCM Eligible Amount to be Retained
0-3 business days	100% return	\$0
Day 4-71	90% return	\$250
Day 72-176	50% return	\$1250
Day 177-352	25% return	\$1875
After day 352	0% return	\$2500

YEARLY EXTENSION RATE REFUND POLICY

Obligated period is defined as 1 year. Fee for yearly extension rate is \$1500.

Date of student withdrawal as a % of the enrollment period for which the student was obligated.	Portion of tuition and fees obligated and paid that are eligible to be retained by the institution	State protected Institution Eligible Amount to be Retained
0-3 business days	100% return	\$0

Day 4-36	90% return	\$150
Day 37-88	50% return	\$750
Day 89-176	25% return	\$1125
After day 176	0% return	\$1500

A-LA-CARTE STAND-ALONE COURSES AT \$75/CREDIT/TRIMESTER REFUND POLICY (BASED ON ONE 120 DAY TRIMESTER)

Obligated period is defined as one (1) trimester based on one 120 day trimester. Stand Alone Course Fee is \$75/credit.

Date of student withdrawal as a % of the enrollment period for which the student was obligated.	Portion of tuition and fees obligated and paid that are eligible to be retained by the institution	State protected NCM Eligible Amount to be Retained
0-3 business days	100% return	\$0
Day 4-12	90% return	\$7.50
Day 13-30	50% return	\$37.50
Day 31-60	25%	\$56.25
After day 60	0%	\$75.00

Observer Access to NCM Online Platform

No refund, these individuals are not considered students under New Mexico higher education law and therefore no refund is required.

STUDENT-PRECEPTOR REMUNERATION AGREEMENT POLICY

Students and preceptors enter into their own financial agreements.

Discretionary Units

Discretionary Units refer to a length of time (weeks, months, trimester) or activity (such as births, classes, correction of modules, defined tasks, etc.) Please note that NCM does not accept any time unit longer than a trimester. The Discretionary Unit and Remuneration associated with it is recurring through the contract length. A new Preceptor Fee Agreement can be submitted at the end of any Discretionary Unit.

Remuneration is exchanged between student and preceptor only. Remuneration can be delineated in a myriad of ways, including but not limited to an exchange of personal and professional services, office work, payment by student to preceptor, or even preceptor remuneration to the advanced student for birth assistant services when appropriate.

Remuneration is defined by Discretionary Units and includes specifics, such as type of work, dollar amounts, and acknowledgement of completion (for example a time sheet, receipt, etc.). If the remuneration is not a monetary amount there still must be a monetary amount associated with the remuneration. (e.g. 5 hours of office work @ \$15/hr).

Preceptor agrees to note the student's name or initials on all client charts for supervised clinical experiences, and to make these charts available for review, in case of audit, and as required for student certification and licensure. Preceptors are required to file (as appropriate) on all income earned from students in NCM programs with the IRS and State Taxation Department.

STUDENT/PRECEPTOR REMUNERATION AGREEMENT CANCELLATION AND REFUND POLICY

Either party may terminate this arrangement if a working relationship fails to develop or if remuneration agreements are not met according to this contract. Should the agreement be terminated prior to completion of the Remuneration Agreement timeframe, the monetary amount of the remuneration will be exchanged. The preceptors will notify NCM of any changes in writing within 30 days. Students and preceptors enter into their own financial agreements. Remunerations are exchanged and if a refund ever becomes necessary is directly between preceptor and student. The student must submit a written termination of contract and request for refund to the preceptor in writing in person or by mail.

Refunds must be made within 30 calendar days after receiving written notice of a student's withdrawal or termination of enrollment of the student. The student and preceptor agree to the following refund schedule:

PRECEPTOR REMUNERATION REFUND POLICY

Date of student withdrawal as a % of the enrollment period (Discretionary Unit) for which the student was obligated	Portion of tuition and fees obligated and paid eligible to be retained by the Preceptor
Cooling off period of at least three work days from the date of agreement or payment	All payments shall be refunded
Prior to commencing instruction of the Discretionary Unit	No more than \$100 or 5% in tuition or fees, whichever is less, may be retained by the Learning Site as registration charges
On 1 st class day of the Discretionary Unit	0%
After 1 st day; within 10% of the Discretionary Unit	10%
After 10%; within 25% of the Discretionary Unit	50%
After 25%; within 50% of the Discretionary Unit	75%
50% or thereafter the Discretionary Unit	100%

SCHOLARSHIP FUND

The National College of Midwifery is taking steps towards reducing health disparities within our maternity care systems by maintaining a scholarship fund for aspiring midwives intending to practice in underserved communities with which they personally identify. The purpose of this scholarship fund is to increase access to NCM's accredited degree programs for these aspiring midwives. This will prepare them to offer culturally sensitive, client centered, individualized midwifery care to the communities they understand best.

Elizabeth Gilmore founded NCM in 1989 as a larger expression of her conviction, "We must remove barriers to midwifery education in order to improve outcomes for mothers and babies." Now we are aware that black women and babies die around childbirth three times as often as white women and that birth outcomes in other minority groups are similarly affected by poverty, lack of services, cultural isolation and institutional racism. The value of providing accessible midwifery education to students from underserved populations is clearer than ever; these are the students who identify with their own communities, who understand the nuances of their own people's unique needs and who hold the insight and the passion to effectively meet those needs.

SCOPE AND INTENT OF THE POLICY

The National College of Midwifery holds and administers funds that provide scholarships to individuals. These scholarships enable the recipients to complete an undergraduate education in the field of midwifery. NCM has established the following procedures for awarding scholarships. These procedures ensure NCM's compliance with all applicable requirements of the Internal Revenue Code, including situations where donor/advisors have participation in the selection of recipients.

These procedures may be amended.

APPLICATION AND SELECTION PROCESS

Applicants for scholarships will be required to submit their application form, letters of recommendation and a Pre-Enrollment Interview/Assessment before consideration. Applications will be accepted on a rolling basis. The scholarship selection committee will meet at least 3 times per year to review applications and select recipients.

Recipients are to be selected on an objective and following NCM's nondiscriminatory policy. The group from which recipients are selected must be sufficiently broad so that giving scholarships to one or more members of the group benefits the community as a whole rather than benefits particular people.

NCM staff and/or members of the selection committee will contact various midwifery organizations and midwifery student discussion groups to advertise the availability of NCM's scholarships and to encourage potential recipients to submit applications for scholarship aid.

The criteria to be used in selecting scholarship recipients are designed to meet the purpose of the scholarship as described in the first paragraph of this document.

Selection Criteria

Applicants must originate from and/or must identify culturally with a population affected by institutional racism/discrimination as it relates to maternity care and hold the intention to serve this population as a midwife.

Applicants must possess a comprehensive and extensive understanding of birth justice issues within the practice and profession of midwifery through a proportionally balanced combination of personal experience, theoretical study, and community engagement.

Selection will be based on:

- Personal experience with midwifery care and/or ambitions for midwifery work
- Understanding of how midwifery care can help to bridge health disparities as they relate to race and socioeconomic status

- Need of the population in which applicant hopes to practice after graduation
- Personal connection with and ambition for serving this population
- Ability to offer culturally sensitive care in this particular demographic
- Solidity of plan of completion, including relationship with willing and capable preceptors
- Willingness to train future midwives after graduation
- Strength of pre-enrollment interview/assessment
- Financial need based on applicant's description of her financial plan and comparison of applicant's family income to federal poverty guidelines <https://aspe.hhs.gov/poverty-guidelines>
- Strength of additional biographical information regarding applicant's career, community involvement, academic and other relevant experiences

Scholarships will be used for NCM tuition and fees. In some cases at the discretion of the scholarship selection committee, scholarships or portions of scholarship funds may be used for the following qualified educational expenses:

- Course-related expenses – fees, books, supplies, and equipment required of all students for courses of instruction.
- Room and board, travel, research, clerical assistance. Payments for expenses in this group are not exempt from income tax.

NCM reserves the right to impose additional, minor reasonable restrictions and/or requirements upon the awarding of scholarships and the administration of such grants. Any substantial or material changes will be made only with approval of NCM's Board of Directors.

The selection committee will communicate by email as needed and will meet by phone conference call at least three times per year to discuss applications and to make final selection of recipients. Leading up to the conference calls, selection committee members will review all current scholarship applications, letters of recommendation and corresponding Pre-Enrollment Interview/Assessment forms. They will then complete a Scholarship Applicant Criteria Review form for each applicant. Members of the Scholarship Selection Committee may contact applicants directly as necessary to obtain any clarifying information but must inform all members of the committee of these communications so as to avoid duplicating efforts. The selection committee will inform NCM staff of it's decisions regarding selection of recipients.

The selection committee will take into account federal law regarding affirmative action (summarized below) when selecting recipients. Race may be considered as part of a holistic and flexible individual review process, but not as part of an automated mechanical process based on points or quotas. Race needs to be considered for more than just simple ethnic diversity. The focus must be on the educational benefits that derive from a diverse student body, and diversity must consider not only race but also other characteristics that contribute to diversity. Educational benefits can include cross-racial understanding, the different perspectives of students who have experienced discrimination and related disadvantages, the breakdown of racial stereotypes, and the promotion of effective participation by all racial and ethnic groups.

SCHOLARSHIP SELECTION COMMITTEE

NCM staff will appoint all members of the selection committee who will be responsible for the evaluation of candidates for scholarships covered by this policy. Members of the selection committee must disclose any personal knowledge of and relationship with any potential recipient. In a circumstance where a member would derive, directly or indirectly, a private benefit if any potential recipient were selected, the member must refrain from participation in the selection process.

The fund's donors may not control the selection committee. This means that no combination of donors, persons appointed or designated by donors, and persons (a term that includes partnerships, corporations and trusts as well as individuals) related to them may constitute a majority of the committee, be given a veto power, be allowed to chair the committee or otherwise be permitted to control the committee's decisions. If a

donor/advisor recommends a person for appointment to a selection committee based on objective criteria related to the expertise of that person, that person will not be deemed to be appointed or designated by the donor/advisor.

Donor/advisors and related persons may provide advice with respect to the selection of scholarship recipients solely as members of a selection committee. This means that donors may not pre-screen applications and choose those to be referred to the committee. It also means that donors may not make a final selection from among candidates approved by the committee.

Every member of the selection committee must adhere to the relevant policies of NCM as they may be adopted and amended from time to time, including without limitation NCM's conflict of interest and confidentiality policy.

Scholarships covered by this policy may not be awarded to any member NCM's Board of Directors, any substantial contributor to NCM or the fund, any employee of NCM, any member of the selection committee, or to any members of their families. Scholarships covered by this policy may not be made for a purpose that is not charitable.

SCHOLARSHIP RENEWALS

Scholarships will ordinarily be awarded on a one time basis. The Scholarship Selection Committee may consider renewing a scholarship on a case-by-case basis according to the status of the applicant's course of study and the purposes of the grant.

SUPERVISION OF GRANTS

SCHOLARSHIPS PAID DIRECTLY TO NCM

Unless otherwise provided in the fund agreement, money from the scholarship fund will be deposited directly into NCM's operating account for the use of the scholarship recipient's tuition and fees. NCM must use these funds to defray the scholarship recipient's tuition and fee expenses.

SCHOLARSHIP GRANTS PAID DIRECTLY TO THE RECIPIENT

If for any reason, the funds (or a portion thereof) are paid directly to the recipient to cover qualified educational expenses (defined below) other than NCM tuition and fees, the recipient must be enrolled at NCM and their standing at NCM must be consistent with the purposes and conditions of the grant.

Unless otherwise provided in the fund agreement establishing a scholarship, a condition of each scholarship is that it will be used only for qualified educational expenses. An additional condition is that no part of the scholarship shall be used as payment for teaching, research, or other services by the scholarship recipient required as a condition for receiving the scholarship.

If the funds (or a portion thereof) are paid directly to the recipient or anyone other than NCM, NCM must receive a report on the progress of each recipient of such an agreement at least once each year. This report must include a summary of the use of the funds awarded, and the recipient's courses taken (if any) and grades received (if any) in each academic period. This report must be verified by the educational institution. A final report is also required.

NCM has a duty to investigate possible diversions of scholarship funds paid directly to the recipient. Where the reports submitted or other information (including the failure to submit reports), indicate that such funds are not being used for their intended purpose, NCM is under a duty to investigate. While conducting its investigation, NCM will withhold further payments to the extent possible until any delinquent reports required under these procedures have been submitted. NCM also will take reasonable and appropriate steps to recover the funds and/or ensure restoration of the diverted funds to the purposes of the grant. The phrase "all reasonable and appropriate steps," includes legal action where appropriate, but may not include legal action if such action would in all probability not result in the satisfaction of execution on a judgment.

DISBURSEMENT OF FUNDS

Once a scholarship recipient and her preceptors have completed all required enrollment materials and the recipients' portion of the tuition payment has been received, funds may be transferred from NCM's scholarship account directly into its operating account.

RECORDKEEPING REQUIREMENTS

NCM will retain the following records in connection with all scholarships covered by this policy:

- All information obtained by NCM to evaluate the qualifications of potential recipients,
- The identification of recipients (including any relationship of any recipient to donors, NCM staff or Scholarship Selection Committee),
- The purpose and amount of each scholarship, and any additional information NCM obtains in complying with its scholarship administration procedures.

Information pertaining to unsuccessful applicants for scholarships shall be kept along with information on successful applicants. Records pertaining to any scholarship made pursuant to this policy shall be kept for no less than three years after the filing of NCM's annual tax return for the period in which the last installment of such scholarship was paid.

ADVISOR DEFINITION

A person appointed by a donor to have advisory privileges with respect to a Fund. The term also includes members of the advisor's family and businesses controlled by the advisor and family members.

DONOR DEFINITION

An individual or organization, including a corporation, partnership or trust, that makes a contribution to a Fund where such Fund is separately identified by reference to contributions of the donor and with respect to which the donor (or any person appointed or designated by such donor) has, or reasonably expects to have, advisory privileges with respect to the distribution or investment of amounts held in such Fund by reason of the donor/advisor's status as a donor. The term also includes members of the donor's family and businesses controlled by the donor and family members.

QUALIFIED EXPENSE DEFINITION

Certain expenses incurred in attending an educational institution. They are:

- Tuition and fees for enrollment and attendance.
- Course-related expenses – fees, books, supplies, and equipment required of all students for courses of instruction.
- Room and board, travel, research, clerical assistance. Payments for expenses in this group are not exempt from income tax.

RELATED PERSONS

The term includes both a donor or advisor's family members and businesses they control:

- Family Members – An individual's parents, grandparents, great grandparents, spouse, siblings, children, grandchildren, great grandchildren and the spouses of all of the above.
- Controlled Businesses – Corporations, partnerships, and trusts or estates if the donor or advisor and family members own more than 35 percent of the total combined voting power (corporations), 35 percent of the profits interest (partnerships), or 35 percent of the beneficial interest (trusts or estates).

DONATIONS

The National College of Midwifery does not actively solicit donations. Monetary donations are deposited into general operating expenses.

Gifts of office furniture or supplies or real estate will be kept if NCM can use them or they will be sold. All other donations and gifts, including vacations, airplanes, cars, etc. will be sold. At no time will the members of the Board of Directors benefit from these gifts.

We can accept monetary donations for our scholarship program, we have a set scholarship account and guidelines for awarding it, the qualifications of the candidates, application procedures, award deadlines, etc.

only awarded for required clinicals. The National College of Midwifery will accept a maximum of 20 academic credits per trimester. Students who want to take more than the maximum credit hours would need to request permission from the education committee with their proposal.

ACADEMIC COURSE SYLLABI POLICY

Syllabi can be found on NCM Online Platform Canvas. Each course syllabus gives the following information that the student & preceptor will need to complete and evaluate each course:

COURSE TITLE

Module and Name of the Course

CREDITS

Number of credits for the course.

COURSE DESCRIPTION

A basic overview of the topics to be covered.

LEARNING OBJECTIVES

Learning objectives are identified through the linking of MEAC Essential Competencies, NARM Knowledge and Skills, MANA Core Competencies, ICM Essential Competencies, and the NCM Degree Qualification Profile.

LEARNING ACTIVITIES

- A. Student reads appropriate sections from the Learning Materials/Resources.
- B. Student answers the questions listed in the didactic assessments by researching the learning materials/resources for the course and correctly citing the sources and page numbers for each of their answers.
- C. Student presents the answers to the questions listed in the didactic assessments for review by preceptor.
- D. Student participates in preceptor elaboration/discussion of didactic assessments.
- E. Student participates in recommended role-playing and/or clinical interactions

Note: The clinical requirement of NARM /Clinical Skills is completed at any time throughout the ASM apprenticeship during actual clinical practice and is NOT a requirement to complete this academic course. Typical clinical manifestations of knowledge learned in this course are identified in the learning objective document above.

LEARNING MATERIALS / RESOURCES

Please use textbooks less than 5 years old or most recent edition.

Recommended texts and resources are listed on each individual syllabus.

EVALUATION TOOLS / METHODS

Minimum passing grade for all courses is a cumulative 80% / B-. Students and preceptors are encouraged to work together until the student masters the information.

Grades are not recorded until both the student and preceptor submit end of trimester evaluations.

The student's final grade for the course is based on preceptor evaluation of the following:

- A. The preceptor evaluates each answer based on NCM rubrics.
- B. Student's answers should reflect a thorough review of current literature regarding best current practices in midwifery care.
- C. Each answer should be formed in the student's own words or paraphrased from the text. The answer should be minimal, not a rewrite of the entire text, but enough to show appropriate comprehension of the learning objective.
- D. Student identification of sources and page numbers for each of the didactic assessments. (Preceptor should do a random check to determine that sources cited are correctly identified.)

Course credit: One Academic credit equals approximately 15 hours of formal time plus 30 hours of additional study or homework. Formal time is defined as the amount of time taken to answer the assignments to the level of 80% and to complete any learning activities to the preceptor's satisfaction, including any time spent face to face with the preceptor. Informal time includes any time spent actively reading relevant sources and textbook/s, researching Learning Objectives, and studying for examinations. Percentage grade breakdown of course activities is provided within Canvas and in general look as follows, Assessments are weighted by group:

Group	Weight
Enrichment Activities	20%
Discussions	15%
Exercises	50%
Exams	15%
Total	100%

BSM ACADEMIC COURSE SYLLABI POLICY

BSM syllabi follow the same basic flow presented above.

DIDACTIC ASSESSMENT DOCUMENT POLICY

As of 2019 all new Didactic Assessment Documents will be converted to this format on review/update.

Header: Course name and date of Update

Course Title

Credits

Review the Course Syllabus for the Course Description, Learning Objectives, Learning Activities, Learning Materials/Resources and Evaluation Methods.

Enrichment Activities *Weighted Percent*

specific exercises associated with this assignment group

Discussions *Weighted Percent*

specific exercises associated with this assignment group

Exam *Weighted Percent*

not that preceptors have link to tests

Exercises *Weighted Percent*

specific exercises associated with this assignment group

ACADEMIC GRADING POLICY

All assignments must be completed a grade of 80% or higher in the course is required. Academic evaluation: Grades must be 80% or higher. Lower grades are not accepted and the course must be retaken. As of 9/1/2018, NCM does not accept letter grades or "Pass"/"Fail" grades. "Pass" grades given prior to 9/1/2018 will be calculated as 80% and letter grades given prior to 9/1/2018 will be calculated to the lowest number per letter grade as described in table below. When grading assignments preceptors should use the rubrics provided. Transfer grades for general education courses from other accredited colleges and universities are accepted to C-.

Grades:		
Letter	Number	GPA

A+	97-100	4.0
A	94-96	3.9-4.0
A-	90-93	3.5-3.8
B+	87-89	3.2-3.4
B	84-86	2.9-3.1
B-	80-83	2.5-2.8
C+	77-79	
C	74-76	
C-	70-73	
D+	67-69	
D	65-66	
F	0-64	

N/A	Not Applicable
Cert	Certified by an approved certifying agency such as American Heart Association or American Red Cross or Equivalent
I	Incomplete
W	Withdrawn
TX or TR	Transfer credits from other accredited institution may fulfill some of the NCM course requirements. Credit will be determined at the discretion of NCM based on course content and grade.

GRADING RUBRIC USED BY PRECEPTORS

Grading rubrics are provided to preceptors via the preceptor orientation course and throughout Canvas when linked to assignments. Master rubrics are maintained by the CDO in the online platform under institutional rubrics and include but are not limited to rubrics for the following types of assignments:

- Case Studies
- Client Handouts
- Informed Decision Making
- Community Resources
- Client Demonstrations
- Role Playing
- Definition/Single Answer Questions
- Descriptive Assessment
- Providing Critical Example
- Flashcards
- Discussion Questions
- Drawings
- Essay/Evaluation/Opinion/Multiple Question Answer
- Explanations
- Lists
- Presentation of Responses

- Research Summary
- Class Outlines
- Survey

Criteria used in the rubrics include but are not limited to:

- Accurate Information
- Articulate COmmunication
- Clarity of COmmunication
- Comprehensive Information
- Concise Communication
- Layout/Organization
- Level of Engagement
- Preparedness
- Presentation
- Respectful Communication
- Reliable Resources

Evaluation Tools / Methods

All courses use the following Evaluation Methods. A few courses have additional methods used. Refer to the course syllabus for methods and percentages given for each course. In general the final grade for the course is based on preceptor evaluation of the following:

- A. Didactic assessments count for 50% of the final grade. The preceptor evaluates each answer based on three elements:
 1. Answers should reflect a thorough review of current literature regarding best current practices in midwifery care.
 2. Each answer should be formed in the student's own words or paraphrased from the text. The

answer should be minimal, not a rewrite of the entire text, but enough to show appropriate comprehension of the learning objective.

3. Student identification of sources and page numbers for each of the didactic assessments.

(Preceptor should do a random check to determine that sources cited are correctly identified.)

B. Enrichment Activities, including research essays and summaries of articles: 20%

C. Discussions: 15%

D. Tests and Exams: 15%

CRITERIA USED TO ASSESS STUDENT READINESS FOR CLINICAL TRAINING

The preceptor determines the criteria they use to assess student readiness for clinical training following the clinical requirements for the program the student is enrolled in. Generally, NCM recommends that students practice the clinical skill at least one time with the clinical preceptor prior to attempting on or with a client.

There may however, be times that this is not possible.

CLINICAL GRADING/EVALUATION POLICY

The student must complete each NARM Skill or clinical encounter to mastery (see definition in this document or on NCM clinical forms).

COURSE NUMBERING

100-399 Undergraduate courses

400-499 Bachelor-Focus courses

GPA

Grade point average (GPA) is calculated by dividing the total amount of grade points earned by the total amount of credits completed. A grade point average may range from 0.0 to a 4.0. P/NP (Pass/No Pass) courses are not factored in the student's GPA. I (Incompletes) and W (Withdrawals) do not receive grade points and do not have an effect on the GPA.

SATISFACTORY ACADEMIC AND/OR CLINICAL PROGRESS

Students have up to 5 years to complete their program. Student must demonstrate that they will be able to complete their programs within the allotted time frame. A student who has not completed their program within 2 years must submit a plan for completion to NCM signed by both the student and the preceptors demonstrating how they will complete the remaining program requirements within the remaining time.

NCM requires that students send copies of completed coursework at the end of each trimester (refer to Trimester Reporting pg. 20) Students who have not submitted any work for nine consecutive months may be withdrawn from the program.

ATTENDANCE REQUIREMENTS

Students determine along with the preceptors how often to meet for academic and clinical instruction; attendance requirements are determined by the preceptors.

NCM requires that students make academic and/or clinical progress each trimester. If a student does not submit progress two trimesters in a row office staff contacts the student to discuss the issue and provide program advisement which may include the requirement of a new plan of completion and/or the recommendation that the student take a leave of absence if applicable. (Please see Dismissal Policy in the case of no communication from student.)

ASSESSMENT/EVALUATION

Students and Preceptors are encouraged to meet at regular intervals to sign-off any skills or clinical forms, to review progress, troubleshoot problem areas and to make plans.

Academic Evaluation: Preceptors evaluate academic progress according to the evaluation mechanism detailed on the syllabus for each subject. These mechanisms may include: quizzes, tests, skill evaluations, discussion, project completion, etc.

Clinical Evaluation: Simply being present at or participating in an activity does not guarantee that a student will be given credit for it. The student must demonstrate mastery* of each required clinical encounter and NARM Skill.

STUDENT AND PRECEPTOR EVALUATION POLICY

The completion of evaluations by the student & preceptor provides the opportunity to:

- Articulate accomplishments and problems in teaching or learning
- Voice satisfactions and challenges between student and preceptor
- Review goals and develop a plan for the coming trimester
- Participate in development, implementation and evaluation of the curriculum, evaluation and advancement of students, periodic evaluation of student admissions criteria, program resources, facilities, and services
- Participate in comprehensive curriculum review including development, implementation, and evaluation of curriculum
- Give other suggestions and comments
- Notify the College of changes in contact information

The Student and Preceptor Evaluation Forms are REQUIRED after each trimester in which the student completed program requirements.

- The Student-Preceptor Evaluation Form must be completed online and must accompany all End of Trimester Paperwork for all program requirements completed within this trimester: (Academic Grade Sheet, Clinical Record Sheets, Updated NARM Skills Form, etc)
- Student must submit an evaluation form for every preceptor they worked with during the trimester.
- Preceptor must submit an evaluation form for every student they worked with during the trimester.
- Preceptor must affirm that all federal and state safety standards, universal precautions, hazardous materials and waste management are maintained after initial enrollment each trimester via the trimester evaluations.
- These forms are to be completed by the student & preceptor separately
- Student-Preceptor evaluations are kept confidential so that students and preceptors can feel comfortable reporting honestly.

Student and preceptor evaluation forms must be received within 45 days of the end of the previous trimester. Evaluations submitted after 45 days will be reviewed with the following trimester evaluations so will not receive timely responses.

PRECEPTOR EVALUATION OF STUDENT POLICY

When preceptors sign on with the College, they agree to meet with their student(s) “weekly or at a regularly scheduled time to review clinical and academic progress, troubleshoot problem areas, build on areas of strength and debrief any adverse clinical outcomes.” These regularly scheduled meetings are at the heart of NCM’s student evaluation process. Preceptors are encouraged to call on NCM staff for extra support when students run into challenges that cannot be successfully addressed in these meetings.

The assessment of students based on these regular meetings is summarized in an evaluation that preceptors are required to submit at the end of each trimester for each of their students in which they rate the following:

- Student’s academic and clinical work reflects appropriate degree level work.
- Student has achieved the learning outcomes & progress expected for this trimester.

- Student takes action based on feedback during regularly scheduled meetings and based on Student-Preceptor Evaluations.

These indicators are measured by the following rating system: Poor, Fair, Satisfactory, Good or Excellent. Office staff will compile the results of the evaluations and send them to the president. The president or her designee will review the data within six weeks of the end of the trimester. In the case that a preceptor measures the student's achievement in any of the indicators as fair or poor, NCM president or her designee will contact the preceptor who filled out the evaluation to seek clarification for what challenges are being faced by the student. The president or her designee will engage in problem solving with the preceptor and seek resources, teaching methods, and/or accommodations that might remedy the situation. The president or her designee, at the preceptor's discretion, will contact the student directly to offer counseling and follow up.

STUDENT AND PRECEPTOR EVALUATION PROCEDURE

Evaluations are completed through survey monkey forms at the end of every trimester submission. Evaluations allow NCM to evaluate any feedback to see if there are any comments that need immediate response. NCM does not count any completed coursework or clinicals without an evaluation; they are recorded but considered incomplete.

Evaluation submissions are updated on the student record. Missing evaluations and associated grades and/or clinicals are highlighted and noted on the student record.

The NCM president will immediately be notified by the office staff of any:

- incident reports,
- termination forms,
- complaints,
- public comments, or
- reports of abusive communications between preceptor and student and/or NCM.

Approximately six weeks after the end of the trimester, NCM office staff will create a spreadsheet in SurveyMonkey compiling the results of the student/preceptor evaluation for that trimester and will highlight any of the following scores on NCM's Student Evaluation of Preceptor survey:

- A score of 1 or more questions answered as "Poor",
- A score of 3 or more questions answered as below "Satisfactory".

This will be sent to the NCM president no later than eight weeks after the end of the trimester. NCM president will follow up with students and preceptors as needed according to the policies outlined in the Preceptor/Instructor Qualifications and Requirements Policy. The president or designee will review the data within eight weeks of the end of the trimester. In the case that a preceptor measures the student's achievement in any of the indicators as fair or poor, NCM president or her designee will contact the preceptor who filled out the evaluation to seek clarification for what challenges are being faced by the student. The president or designee will engage in problem solving with the preceptor and seek resources, teaching methods, and/or accommodations that might remedy the situation. The president or designee, at the preceptor's discretion, will contact the student directly to offer counseling and follow up. The president or designee will work with the student and preceptor, helping them to implement a plan and following their progress until the issues are resolved.

In the case that preceptors do not respond to requests for clarification and problem solving, the president or their designee will make a second attempt at contacting the preceptor. If there is still no response, the student will be placed in a group which includes other randomly selected students to be contacted directly by the president or their designee with an offer for individual guidance and support.

END OF TRIMESTER SUBMISSIONS

All students are required to send an End-of-Trimester Submission to NCM at the end of each trimester the student was active. This submission *must include the appropriate Student-Preceptor Evaluation* monkey survey for the student's program as well as reports of academic and clinical course requirements completed within the trimester. **End-of-Trimester Submissions must be received within 45 days of the end of the previous trimester. This should allow ample time for students to get signatures from their preceptors and send in documentation.**

- Submissions should be made **in one packet by regular mail** (faxes and emails are not accepted) to: National College of Midwifery, 1041 Reed St, Suite C, Taos, NM 87571.
- Student should only submit one-sided photocopies to NCM, and keep the originals for their files and to continue to update as they proceeds through the program.
- Student Name should appear on every page submitted.
- Preceptor Verification signatures with current date must appear on all official forms.
- Work done prior to enrollment, or with someone who is not the student's official NCM preceptor at the time the work was done will not be eligible to satisfy program requirements.
- The most updated versions of all program materials are available for download on Canvas.
- Students are encouraged to check the website periodically. NCM will send out emails to notify students and preceptors when there are significant changes.

The following forms are available on the website and in the orientation courses and are reviewed by the staff as part of the review of student preceptor evaluations.

CREDIT VALUE ASSESSMENT FORM

The Credit Value Assessment Form is required for each course that the student and/or preceptor found did NOT conform to time requirement stated on the syllabus for the course (1 Academic Credit = 15 hours Formal Study + 30 Hours Informal Study).

SERVICES & POLICIES EVALUATION FORM

The Services and Policies Evaluation Form provides another opportunity for students and preceptors to participate in development, implementation and evaluation of the curriculum, periodic evaluation of student admissions criteria, program resources, facilities, and services.

CURRICULUM EVALUATION FORM

Curriculum Review and Update - Preceptors are able to participate in the curriculum review process by completing the Curriculum Evaluation form. This form includes recommendations for any changes, updates, additions or subtractions.

INFORMATION CHANGE FORM

It is each student's and preceptor's responsibility to keep current contact information updated with NCM by filling out the Information Change Form.

COMMENTS FORM

Additional Comments / suggestions / other, which are not covered by any of the other forms are submitted on the Comments Form.

STUDENT-PRECEPTOR RELATIONSHIPS

Work done prior to enrollment, or with someone who is not the student's official NCM preceptor at the time the work was done will not be eligible to satisfy program requirements. Work done with a preceptor who has failed to maintain her/his licensure/certification as required by the state, unencumbered by holds/investigations/disciplinary action of any kind will not be accepted towards program completion. In order for NCM to accept work done towards completion of any NCM program all of the following must be true when the work was done:

1. The student must be a Current Student with NCM.
2. The preceptor must be a Current Preceptor for NCM.

3. The student and preceptor must have a current approved and complete Contract between Student, Preceptor and the National College of Midwifery on file with NCM.
4. The student and preceptor must each have received notification from NCM acknowledging their relationship.

CHOOSING A MIDWIFERY PRECEPTOR

More information on this topic can be found in the student orientation course. NCM does not match students with preceptors. Students must find their own preceptors. Students must have preceptors when they enroll in the College. It is important to try to find the right match for you. Please remember that you will need 2 preceptors in order to complete the clinical portions of the program.

How to find a preceptor?

- Check out NCM's Bulletin Board and Preceptor Opt In List
- Send out an email to everyone in your address book to see if they or someone they know has used a local midwife.
- Local listings or state organization for midwives
- Midwives Alliance of North America at www.mana.org. Contact the representative for your region
- CNMs can be preceptors of the College; contact your state chapter of the ACNM.
- Physicians practicing obstetrics can be preceptors of the College.

The preceptor should be excited about providing the student with midwifery training, and be willing to tend to the paperwork required by the College (syllabi, evaluations, transcripts, peer-review, etc.) At the interview with your potential preceptor NCM suggests that you discuss the following subject areas:

- Length of study: Students can complete our program within 2-5 years. Most of our students complete their program within 2-3 years.
- Remuneration/Payment: Students compensate their preceptor directly. If you are going to do a trade, please remember you must write up a contract, this will help you to avoid any misunderstandings. NCM suggests reviewing/revising the contract every trimester.
- Trial period: If you do not know each other very well, it is sometimes wise to informally work for 1-3 months together to see if you are a good fit. If at the end of that time, you find it is not a good fit, both people can walk away with no hard feelings.
- The ADA does allow employers, preceptors etc. to ask potential students if they are able to perform the functions needed for a midwifery student. This may include questions regarding heavy lifting, sight, hearing, fine motor skills, ability to function with little sleep, and the ability to go up and down stairs. The College is available to help students and preceptors to think through reasonable accommodations for students with disabilities.

Sample Questions for Prospective Preceptors & Students

These questions are presented here to help the student and preceptor start a dialog about working together.

- Why do you want to be a midwife?
- Describe your idea of apprenticeship. What is your role as a student? What is the preceptor's role?
- Have you been in an apprenticeship with another preceptor?
- Have you been to any births?

Is the potential preceptor familiar with the National College of Midwifery program?

How will your program be structured?

- How long do you think you will take to complete the program? Does your preceptor feel this is a reasonable time frame? Is their practice busy enough to provide you with the clinicals you need to complete in this time?
- What is your learning style? Hands-on? Independent learner? Formal or structured instruction?
- How will you integrate your academics with the clinicals? How much time each week will you spend on academics? Clinicals?
- Discuss what you would do during your 1st month? After 6 months? 1 year?
- Discuss the preceptor's clinical load- is it sufficient to support minimum clinical requirements?

What is your availability?

- Do you have a current job? Will you continue to work during your apprenticeship?
- When did you want to start your apprenticeship?
- What hours are you available on a weekly basis
- If you have children, discuss your child care arrangements

Additional subjects to discuss

- How do you handle stress? Sleep-deprivation?
- Do you have reliable transportation? Cell phone service?
- Do you have any medical conditions?
- Do you use any social or recreational drugs, alcohol or prescribed medications?

How will your education help you to reach your goal for becoming a midwife? Where do you see yourself working after completing the program?

Some preceptors have students sign a contract separate from the one students and preceptors sign with the college. These contracts can include the following:

- Length of apprenticeship
- Time requirements / attendance / time off
- Hygiene and professional appearance
- Confidentiality
- Remuneration to preceptor
- Completion of assignments and evaluations

If you need assistance email the NCM office.

LEARNING SITE POLICY

The National College of Midwifery does not have a campus. Preceptors must complete the facility diagrams, safety standards and equipment restocking forms as part of the preceptor application process. Site safety procedures must meet federal and state standards.

Learning sites will vary depending on the location of the preceptorship. It is the student's responsibility to ascertain whether the preceptor(s) can provide the variety and number of clinical experiences required. The preceptor(s) will directly provide the student with the required clinical experiences.

Preceptor sites may have requirements and policies regarding students in their training program that are different from NCM's (e.g., the time frame within which a student must complete training, state registration for students, etc). It is the student's responsibility to know the preceptor and state requirements for direct-entry midwives and students in the state they are apprenticing in or planning to practice in.

LEARNING SITES PROCEDURE

Preceptors must complete the facility diagrams, safety standards and restocking forms as part of the preceptor application process. Safety procedures must meet federal and state standards. The forms must be submitted prior to preceptor approval.

CULTURALLY APPROPRIATE APPRENTICESHIPS FOR OUT OF COUNTRY CLINICALS POLICY

FOR PRECEPTORS

All out of country preceptors, if not originating from the country in which they are practicing, must designate cultural advisors from that country who are available to answer questions, guide students through various ethical considerations and act as cultural translators as needed in the clinical setting.

Preceptors working in out of country clinical sites are required to administer Cultural Preparedness Training to all students before the start of any clinical contact between students and clients in the out of country site.

Preceptors must submit to NCM an outline of their Cultural Preparedness Training program which includes:

- Required reading and/or participation in online courses and methods of comprehension assessment
- Specifics of required language acquisition and methods of language skills assessment
- Required cultural exposure (i.e. home stays, contact with local communities, on the ground cultural orientation experiences)
- Syllabus for cultural orientation course that includes all of the following Competencies, Attitudes and Behaviors, and Knowledge Acquisition:

COMPETENCIES

At the completion of the course, students will be able to:

- Discuss social determinants of health, health equity, social justice, and governmental policy and their impact on the distribution of health services in the area of practice.
- Discuss unique healthcare needs of the communities being served and distinctive strategies for meeting those needs, taking into consideration local socio economics, politics, health disparities, and cultural influences
- Demonstrate knowledge of effective advocacy strategies for health systems improvement including Interpersonal and Communication Skills, Cultural Competency and Humility, and Collaborative Care
- Demonstrate an understanding of Systems Based Practices and how the practice in which students are working interacts respectfully and effectively within the its larger unique health care system
- Demonstrate sufficient language skills, cultural awareness and ability to work with cultural advisors/translators to deliver collaborative, informed consent driven care with sensitivity to sociocultural and health literacy issues
- Recognize practice limitations and an understanding of system resources

ATTITUDES AND BEHAVIORS

The student will demonstrate attitudes and behaviors that encompass:

- Commitment to lifelong learning about cultural competency and humility
- Commitment to recognizing personal biases and stereotypes related to health care delivery
- Understanding the need to balance compassion, humanism, realism, and practicality in the consideration of health care delivery

KNOWLEDGE

Students will be prepared to apply in a clinical setting their knowledge of:

- Specific socioeconomic, environmental, and political factors as determinants of health and disease in the specific area of practice
- Health and human rights issues and determinants of health specific to population being served (e.g., psychological impact of trauma, limited monetary resources, limited access to services, etc)
- Social, environmental, geographic, and telecommunication factors influencing the ability of the health system to provide adequate services
- Specific needs of the medically underserved

- Sociocultural and psychological factors influencing health literacy and interaction with the local health system
- Cultural approaches to health with emphasis on maternal infant health
- Disease specific consequences due to regional and genetic influences of health
- Availability and safety (or lack thereof) of medication and medical backup services
- Unique health care delivery methodology and outcomes data where available for specific clinical setting in which students are working
- Epidemiology where available of infectious and chronic disease
- Resources and issues pertinent to travel medicine, health risk prevention, health maintenance, and variations in health care services for students.
- Non-medical issues (e.g., political, safety, environmental, and climate factors) unique to international travel
- Specific safety factors, legal considerations, and personal freedoms that might be handled differently when working in specific area
- How to adapt evidence-based resources and tools for use in limited-resource health care settings

FOR STUDENTS

In the case that a student is traveling out of their country of origin to train overseas, NCM requires that the student complete the following free online course on Ethics and Global Health:

<http://ethicsandglobalhealth.org/index.shtml>.

At the completion of the Cultural Preparedness Training administered by the student's clinical preceptor(s), the student will take the Cultural Preparedness Survey and submit it to NCM through SurveyMonkey.

<https://www.surveymonkey.com/r/H8GYGNW>

CULTURALLY APPROPRIATE APPRENTICESHIPS FOR OUT OF COUNTRY CLINICALS PROCEDURE

The student/preceptor contract asks the question "Is the student is traveling out of their country of origin to train overseas?" If the contract indicates yes, staff emails the student and preceptor with this policy and informs the dyad that until the student completes the Ethics and Global Health course and the NCM Cultural Preparedness Survey the contract will not be approved and no academic or clinical work will be accepted. NCM registrar will provide instruction to all preceptors who will be offering out of country clinical experiences to NCM students that they must submit an outline of their Cultural Preparedness Training program as part of their application. This outline will be forwarded to the NCM president who will review the outline to ensure that it includes:

- Required reading and/or participation in online courses and methods of comprehension assessment
- Specifics of required language acquisition and methods of language skills assessment
- Required cultural exposure (i.e. home stays, contact with local communities, on the ground cultural orientation experiences)
- Syllabus for cultural orientation course that includes all of the Competencies, Attitudes and Behaviors, and Knowledge Acquisition as outlined in the policy.

NCM president will review on a yearly basis all Cultural Preparedness Surveys that have submit it to NCM through SurveyMonkey. <https://www.surveymonkey.com/r/H8GYGNW>. If concerns regarding the efficacy of the training arise during the review of the surveys, NCM president will be in communication with the appropriate out of country preceptors to offer support in improving Cultural Preparedness Training. NCM requires that the student complete the following free online course on Ethics and Global Health:

<http://ethicsandglobalhealth.org/index.shtml>.

ASSOCIATE OF SCIENCE IN MIDWIFERY DEGREE

ASSOCIATE OF SCIENCE IN MIDWIFERY DEGREE REQUIREMENTS POLICY

The ASM is a three-year equivalent program, which can be completed from 2 to 5 years.

ASM CREDIT REQUIREMENTS

112.88 (116.88 for California Students)

PREREQUISITES

High School Diploma or GE

BLOCK SYSTEM

Students in the ASM program follow the Academic Block System provided in the next table.

In the case of a student enrolled prior to May 30, 2018 who has completed HON248G Cultural Issues and 20 credits the student may apply for an exception in writing with the CDO who will grant the exemption. In the case of a student enrolled prior to May 30, 2018 who has completed 20 credits but who has not completed HON248G Cultural Issues the student may apply for an exception in writing with the CDO who will grant a limited exemption with a requirement that the student complete HON248G within two semesters. In the case that a preceptor and/or student would like to petition for a exception to the academic block system outside of the two aforementioned situations, they must put their request in writing and submit it to the president for review. The proposal must include the proposed order in which the courses will be completed and must specify the reasoning behind that order. The president will then bring the proposal to the education committee who will make a decision about whether or not to accept the proposal as is, accept it with conditions or deny it. The decision of the education committee will be communicated by the president to the preceptor and/or student who submitted the proposal.

Notes on course order by block:

		Academic Courses		Credits	
		FOUNDATION COURSES:		29.0	
FOUNDATION COURSES Foundation Courses must be taken in Foundation Block order	1	BIO155G Anatomy and Physiology	4.0		
		HON248G Cultural Issues	3.0		
		PSY224 Com. & Counseling	1.0		
	2	BIO120 Fetal Development	1.0		
		SOC102 Genetic Screening	1.0		
		MW330 Perinatal Ed Incl Lactation	3.0		
		HON225G Midwifery Ethics	2.0		
	3	HON205G Applied Microbiology	3.0		
		HON393G Community Health	3.0		
		SCI122G Chemistry *CA	3.0		
	4	SOC104 Child Growth & Dev.*CA	1.0		
		ENG202G Bus. & Prof. Com.	3.0		
			CORE COURSES:		30.0
	CORE COURSES Core Courses must be taken in Core Block order	1	MW300 AP Basic Skills	1.0	
			MW301 AP Risk Screening	0.5	
			MW302 AP Physical Assessment	0.5	
MW303 AP Provision of Care			1.0		
MW304 AP Complications			0.5		
MW308 AP Nutrition			0.5		
MW305 AP Pharmacology			1.0		
MW306 AP Diag LabTests&Proc.			0.5		
MW307 AP Observation & Chart.			0.5		
MW320 IP Basic Skills			1.0		
2		MW321 IP Risk Screening	1.0		
		MW322 IP Physical Assessment	0.5		
		MW323 IP Provision of Care	1.0		
		MW324 IP Complications	1.0		
		MW329 IV THERAPY	0.0		
		MW325 IP Pharmacology	0.5		
		MW326 IP Diag LabTests&Proc.	0.5		
		MW327 IP Observation & Chart.	0.5		
		MW340 PP Basic Skills	1.0		
		MW341 PP Risk Screening	1.0		
3		MW342 PP Physical Assessment	0.5		
		MW343 PP Provision of Care	1.0		
		MW344 PP Complications	1.0		
		MW345 PP Pharmacology	0.5		
		MW346 PP Diag LabTests&Proc.	0.5		
		MW347 PP Observation & Chart.	0.5		
		MW360 NB Basic Skills	1.0		
		MW361 NB Risk Screening	1.0		
		MW362 NB Physical Assessment	1.0		
		MW363NB Provision of Care	0.5		
4		MW364 NB Complications	1.0		
		MW365 NB Pharmacology	0.5		
		MW366 NB Diag LabTests&Proc.	0.5		
		MW367 NB Observation & Chart.	0.5		
		MW380 WW Family Planning	1.0		
		MW381 Well Woman Risk Screening	0.5		
		MW382 WWPhysical Assessment	1.0		
		MW383 WWProvision of Care	1.0		
MW385 WW Pharmacology	1.0				
MW386 WW Diag LabTests&Proc.	1.0				
MW387 WW Observation & Chart.	0.5				
		FLEX COURSES:		25.0	
FLEX COURSES Flex Courses: Can be taken in any order in any block	HON223G Human Sexuality	3.0			
	ENG200G College Composition	4.0			
	HON211G Statistics	3.0			
	MATH112G College-Level Math	3.0			
	HON390G Laws/Regulations	3.0			
	HON220G Midwifery Lit. & Art	3.0			
	HON222G History of Midwifery	3.0			
	MW350 Out of Hospital Birth	3.0			
		Total Academic Credits:		84.0	

GENERAL EDUCATION

According to the New Mexico Department of Higher Education, General Education requirements fall into three categories and there are specific requirements within each category. (These courses are identified by the G suffix):

Developing Critical Thinking and Modes of Expression

- English Composition..... 7 credits
- Mathematics.....3 credits
- Critical Thinking Analysis..... 6 credits

Establishing a Common Background

- Historical Perspectives.....3 credits
- Basic Natural Sciences with Lab.....4 credits
- Human Thought and Behavior.....3 credits
- Social Analysis.....3 credits
- Literature or Fine Arts.....3 credits

Viewing a Wider World

- Community Issues, consumers, etc....6 credits

ASM CLINICAL EXPERIENCE REQUIREMENTS:		Effective January 1, 2013		
Clinical Timeframe:		Clinical Requirements must span at least 2 years under the supervision of the student's approved NCM preceptor		
Required Clinicals:	Hours/visit	Required	Hours	Credits
Observes:				
Births as Observer	N/A	10	N/A	N/A
Assists Under Supervision:				
Initial Prenatal Assists	1 hour	3	3	0.07
Prenatal Assists	30 minutes	22	11	0.24
Birth Assists	12 hours	20	240	5.33
Newborn Exam Assists	30 minutes	20	10	0.22
Postpartum Exam Assists	1 hour	10	10	0.22
Primaries Under Supervision:				
Well Woman/Family Planning	30 minutes	30	15	0.33
Initial Visits	1 hour	20	20	0.44
Prenatal	30 minutes	55	27.5	0.37
Birth as Primary	24 hours	25	600	13.33
Newborn Exams	30 minutes	20	10	0.22
Postpartum Exams	1 hour	40	40	0.89
NARM Continuity of Care	N/A	5	N/A	N/A
NARM Out of Hospital Births	N/A	10	N/A	N/A
NARM Clinical Skills	~45 minutes per skill	682	504.00	11.2
SUB TOTALS:			986.50	32.88
NARM Clinical Skills			517.50	Credits in Academics
CLINICAL TOTALS:			1504.00	32.88

(Conversion to semester credit hours: 45 clinical contact hours = 1 credit hour)

CLINICAL APPRENTICESHIP LICENSING REQUIREMENTS POLICY

Some states require a license for midwifery apprentices to attend births as students. It is the responsibility of the student to look into this before enrolling in NCM.

GENERAL INSTRUCTIONS FOR CLINICALS

Each NCM Clinical Record Form lists the scope of the skill, the student role, the type of preceptor supervision required, the skill demonstration by the student necessary for the student to receive credit, and any other special requirements. The Student is responsible for recording completion of clinicals on the NCM Clinical Record Form. Entries should be made in chronological order and printed clearly. The Preceptor must sign (not initial) every line. Students should not start a new page for each form each trimester, but should fill a master original copy of each form and only submit photocopies of forms with recent entries.

TRIMESTERLY REPORTING OF COMPLETED CLINICALS TO NCM

Student submits one-sided photocopies of updated forms at the end of each trimester to document progress, and retains the original forms to continue filling in. All clinical submissions must be sent after completion of Student and Preceptor Evaluation Forms online.

GUIDELINES FOR VERIFYING DOCUMENTATION OF CLINICAL EXPERIENCE

The student and preceptor must follow the guidelines in NARM's Candidate Information Bulletin (CIB) online, including but not limited to the following: Student's and preceptor's care at the encounter must be reflected on the client's chart via name or initials, in case of audit. The student must have access to the original client charts for all births and procedures documented. The original client charts shall be kept by the preceptor. Client confidentiality must be protected by identifying them on these Clinical Record Forms with a unique client code under "Client # or Code," to reference the client chart, using one code for each client pregnancy.

ORDER OF CLINICAL EXPERIENCE COMPLETION

The NARM Skills may be completed in any order according to the Student's clinical Preceptors discretion and evaluation of the student reaching Mastery over the skill.

At least 18 of the 20 Births as Assistant (Form #3) must be completed prior to beginning Births as a Primary Midwife under Supervision (Form #9). The rest of the forms do not need to be completed in any specific order and it is up to the discretion of the preceptor as to whether the student is competent enough to act as Primary Midwife under Supervision at clinicals. All forms need to be completed prior to applying for permission to take the NARM Exam.

CLINICAL CREDIT

Simply being present at or participating in a clinical activity does not guarantee that a student will be given credit for it. The preceptor will only sign off a clinical when the student has demonstrated the minimum required skill competency level to the preceptor's satisfaction, as appropriate for the individual skills as defined on each clinical record form for each entire clinical experience (Active Participation for Assists vs. Mastery for Primaries). With the exception of 10 Birth Observes, work done prior to enrollment, or with someone who is not the student's official NCM preceptor at the time the work was done will not be eligible to satisfy program requirements. Students may submit additional clinicals beyond NCM requirements. These extra clinicals and clinical contact hours will be listed on the student transcript; however credit is only given for required clinicals.

BIRTH EXPERIENCE IN SPECIFIC SETTINGS

Of all the births a student attends during training (as Observer, Assistant, or Primary Midwife under Supervision), at least 2 must be planned hospital births (these cannot be intrapartum transports but may be antepartum referrals) and 5 must be home births.

OUT OF COUNTRY CLINICAL FORM REQUIREMENTS

When completing NARM Exam application materials, NCM students are not required to submit Out of Country (OOC) Birth Sites Form 230 listed on NARM Forms 200 and 204. Out of Country Clinical sites that are NARM approved do not have to submit a copy of the safety inspection.

CLINICAL EXPERIENCE MAX AND MINIMUM TIME FRAME REQUIREMENTS

Clinical experience documented on these forms must span at least 2 years. NCM begins counting these two years with the date of the first clinical entered on forms #1-11 that occurred during enrollment and under the direct supervision of an approved preceptor. All clinicals must occur within 10 years prior to the student's passing the NARM exam, and 10 of the experiences reported on NARM Out of Hospital Birth Documentation Form 204 must take place no earlier than 3 years prior to the NARM exam. See [Transfer of Clinical Credit Policy](#).

CLINICAL SKILLS AND EXPERIENCE DEFINITIONS

DIRECT SUPERVISION

(Required for all clinicals, except for the “10 Birth Observes”). The preceptor must be physically present and in control at all times during the entire activity, must catalyze the important decision making processes, elicit the student's rationales for their decisions, and oversee the student's charting. Preceptors may ONLY sign off experiences which they personally directly supervised and witnessed.

ACTIVE PARTICIPANT/PARTICIPATION

(This is the required demonstration of competence necessary for student to receive credit for all Clinicals as “Assistant.”) The student must be actively involved in the clinical activity, including, but not limited to charting, hands-on assisting, & participation in management decisions. As an assistant the student will learn through active involvement to perform the clinical skills of a midwife during all stages of pregnancy, labor, delivery and postpartum mother and newborn care. **Student readiness for serving as Primary Under Supervision at a clinical exam or birth is at the discretion of the supervising preceptor, and may require more than the minimum number of experiences as Assistant Under Supervision listed on the forms.**

MASTERY

(This is the required demonstration of competence for all NARM Skills and Clinicals the student attends as “Primary Midwife under Supervision.”) The student must demonstrate competent and confident provision of safe, evidence-based midwifery care for the individual Clinical Skills including: Etiology, sequelae, appropriate management and follow-up for the individual patient, appropriate times and reasons for consult and referral, access to relevant resources and information, complete, thorough and timely record keeping, appropriate, professional, and compassionate management of every task involved, receptiveness and responsiveness to patient's concerns, explanation of midwifery decisions and actions as they relate to possible outcomes and their wider impact, based on the Midwives Model of Care®

<http://cfmidwifery.org/mmoc/define.aspx>.

ASM CLINICAL REQUIREMENTS DESCRIPTIONS

CLINICALS COMPLETED IN THE ROLE OF AN OBSERVER

No Direct Supervision required. Attendance may be verified by any witness who was present at the birth.

Student Demonstration necessary to receive credit: The student's presence at the birth in any capacity.

10 BIRTHS AS AN OBSERVER (NCM CLINICAL RECORD FORM #1)

(Must include 2 Planned Hospital Births -may NOT be IP Transports)

This is the only clinical requirement that can be done prior to enrollment, and without the direct supervision of an NCM preceptor. The student must attend 10 births in any setting in any capacity (observer, doula, family member, friend, beginning apprentice, etc.). Attendance may be verified by any witness who was present at the birth. These 10 Births may take place prior to OR during enrollment at NCM, but must be no more than 10 years prior to the student sitting the NARM Exam. Although Observes completed prior to enrollment and not under the direct supervision of an approved preceptor will be accepted, the dates of these Observes will not be considered when calculated the minimum 2 year time frame that students are required to be enrolled.

CLINICALS COMPLETED AS AN ASSISTANT TO THE PRIMARY MIDWIFE

Requires Direct Supervision by the Student's approved NCM Preceptor as an active participant.

25 PRENATAL EXAMS AS AN ASSISTANT UNDER SUPERVISION (NCM CLINICAL RECORD FORM #2)

A Prenatal consists of most of the following, but is not limited to: preparation, chart review, weight, blood pressure, pulse, fetal heart tones, baby's position, evaluation of size for dates, education and counseling for gestational age specific topics, any necessary lab work, education and counseling for any discomforts, evaluation for need for referral to social or medical resources, charting by SOAP method, cleanup, arrangement for next visit, filling out referral forms and lab slips.

Estimated time per visit: 30 minutes.

(These must include at least 3 Initial Prenatals)

Initial Prenatal consists of most of the following, but is not limited to: the same items as a regular prenatal, PLUS intake interview, history (medical, gynecological, family) and a complete physical examination. These items may take place over several visits, but are counted by the student as one Initial Prenatal.

Estimated time per visit: 1 hour.

20 BIRTHS AS AN ASSISTANT UNDER SUPERVISION (NCM CLINICAL RECORD FORM #3)

A Birth as Assistant Under Supervision consists of most of the following, but is not limited to: set-up, assistance to the midwife in whatever they request, assisting the mother and family, participating and learning about charting, evaluating pre-labor, practicing admission evaluation and admission procedures, keeping track of progress and normalcy of labor, practicing taking and charting vital signs, counting baby's heartbeat, practicing evaluating FHT, practice providing comfort measures, preparing and coaching mother for actual birth, preparing mother's partner to provide comfort measures or to participate in delivery, practice assisting with the birth and placenta, practice evaluating newborn response and vitals, practice assisting with newborn exam, evaluating the placenta for normalcy, practice with the establishment of immediate breastfeeding, assisting midwife with clean-up, sterilizing, repairing, restocking, re-ordering equipment, making plans for follow-up visit. At least 18 of these must be completed prior to beginning births as primary under supervision.

A MAXIMUM of 2 of these births may be IP Hospital Transports.

Estimated time per birth assist: 12 hours.

20 NEWBORN EXAMS AS ASSISTANT (NCM CLINICAL RECORD FORM #4)

A Newborn Exam consists of most of the following, but is not limited to: apgar, gestational age assessment, reflexes, head to toe physical, application of erythromycin to the eyes and injection of vitamin K, metabolic screening, referral for hearing screening, referral for pediatric follow-up, weight and measurements, footprinting, birth certificate, souvenir certificate for parents, registration for social security and Medicaid.

These exams must be done within 12 hours of the birth.

Estimated time per visit: 30 min.

10 POSTPARTUM EXAMS AS ASSISTANT (NCM CLINICAL RECORD FORM #5)

A Postpartum Visit to Mother and Baby consists of most of the following, but is not limited to: preparation, chart review for follow up on such things as the need for RhoGAM and ABO incompatibility, etc, check baby weight gain, physical assessment and vitals, assessment of lochia, counseling regarding breastfeeding/bottle feeding, counseling and education for mother and family regarding nutrition for mother and baby, any necessary lab work, education and counseling for any discomforts, evaluation for referral to social and/or medical resources, evaluation of baby for dehydration, answering parents' questions, check health of umbilical cord and removal of clip if necessary, check healing of any stitches/ tears, evaluation for need for referral to social or medical resources, charting by SOAP method, cleanup, arrangement for next visit, filling out any necessary referral forms and lab slips.

These visits must be done between 12 hours and 6 weeks following the birth.

Estimated time per visit: 1 hour.

CLINICALS COMPLETED AS PRIMARY MIDWIFE UNDER SUPERVISION

Requires Direct Supervision by the Student's approved NCM Preceptor with student demonstrating Mastery of clinical skills.

30 WELL WOMAN/FAMILY PLANNING AS PRIMARY UNDER SUPERVISION (NCM CLINICAL RECORD FORM #6)

A well woman exam consists of most of the following, but is not limited to: preparation, chart review, complete physical assessment including, but not limited to: bimanual exam to screen for colorectal and endometrial cancer; pap smear; collection of samples for STIs; breast exam; and counseling on the following items: family planning; prevention and detection of STIs; nutrition and exercise relating to bone density; hormonal changes and physical and mental comfort measures relating to the interconceptual period and menopause; and attention to general social, physical and emotional well-being, charting, and cleanup. Student mastery of the PAP smear/STI sample is required.

Estimated time per visit: 30 min.

20 INITIAL PRENATALS AS PRIMARY UNDER SUPERVISION (NCM CLINICAL RECORD FORM #7)

An Initial Prenatal consists of most of the following, but is not limited to: preparation, chart review, intake interview, history (medical, gynecological, family), complete physical examination, weight, blood pressure, pulse, fetal heart tones, baby's position, evaluation of size for dates, education and counseling for gestational age specific topics, any necessary lab work, education and counseling for any discomforts, evaluation for need for referral to social or medical resources, charting by SOAP method, cleanup, arrangement for next visit, filling out referral forms and lab slips. These items may take place over several visits, but are counted by the student as one Initial Prenatal.

Estimated time per visit: 1 hour.

55 PRENATALS AS PRIMARY UNDER SUPERVISION (NCM CLINICAL RECORD FORM #8)

A Prenatal consists of most of the following, but is not limited to: preparation, chart review, weight, blood pressure, pulse, fetal heart tones, baby's position, evaluation of size for dates, education and counseling for gestational age specific topics, any necessary lab work, education and counseling for any discomforts, evaluation for need for referral to social or medical resources, charting by SOAP method, cleanup, arrangement for next visit, filling out referral forms and lab slips.

Estimated time per visit: 30 min.

25 BIRTHS AS PRIMARY UNDER SUPERVISION (NCM CLINICAL RECORD FORM #9)

At least 18 Births as Assistant under Supervision must be completed prior to beginning this form.

15 births must include at least 1 prenatal. (5 must include full continuity of care and must additionally be recorded on NARM Continuity of Care-Practical Experience Form 200).

A MAXIMUM of 3 of these births may be Intrapartum Transports to Hospital.

Births as Primary Under Supervision means that the apprentice demonstrates the ability to perform all aspects of midwifery care to the satisfaction of the preceptor, who is physically present and supervising the apprentice's performance of skills and decision making. The apprentice is present for all stages of labor and delivery, and immediate postpartum, makes all clinical decisions for all stages of labor and delivery, and immediate postpartum, is able to articulate the rationales for these decisions, and charts or directs the charting of all stages of labor and delivery, and immediate postpartum.

Estimated time per birth: 24 hours.

20 NEWBORN EXAMS AS PRIMARY UNDER SUPERVISION (NCM CLINICAL RECORD FORM #10)

A Newborn Exam consists of most of the following, but is not limited to: apgar, gestational age assessment, reflexes, head to toe physical, application of erythromycin to the eyes and injection of vitamin K, metabolic screening, referral for hearing screening, referral for pediatric follow-up, weight and measurements, foot-printing, birth certificate, souvenir certificate for parents, registration for social security and Medicaid.

This exam must be done within 12 hours of birth.

Estimated time per visit: 30 min.

40 POSTPARTUM VISITS AS PRIMARY UNDER SUPERVISION (NCM CLINICAL RECORD FORM #11)

A Postpartum Visit to Mother and Baby consists of most of the following, but is not limited to: preparation, chart review for follow up on such things as the need for RhoGAM and ABO incompatibility, etc, check baby weight gain, physical assessment and vitals, assessment of lochia, counseling regarding breastfeeding/bottle-feeding, counseling and education for mother and family regarding nutrition for mother and baby, any necessary lab work, education and counseling for any discomforts, evaluation for referral to social and/or medical resources, evaluation of baby for dehydration, answering the parent's questions, check health of umbilical cord and removal of clip if necessary, check healing of any stitches/ tears, evaluation for need for referral to social or medical resources, charting by SOAP method, cleanup, arrangement for next visit, filling out any necessary referral forms and lab slips.

These visits must be done between 12 hours and 6 weeks following the birth.

Estimated time per visit: 1 hour.

NARM SKILLS (NCM'S MEAC ABBREVIATED NARM SKILLS FORM)

Skill's background and knowledge are taught within the academic courses, but preceptor demonstration, student practice, and evaluation of the student takes place in a clinical setting.

Estimated clinical time spent on each NARM Skill: 45 minutes.

STUDENTS ENROLLED PRIOR TO JANUARY 1, 2019

Students who enrolled prior to January 1, 2019, may choose to follow the policy below but once making the switch the student is no longer grandmothers into this policy.

NARM Skills

All NARM Skills must be completed as directed in Pam Weaver and Sharon Evans book, *Practical Skills Guide for Midwifery*; this is not turned in but a random audit of the complete set of signatures in the book may be done.

MEAC Abbreviated Skills

Additionally, this list of MEAC abbreviated NARM skills must be completed and submitted to NCM. Note that 4 skills require the separate evaluation of two preceptors.

STUDENTS ENROLLED AFTER TO JANUARY 1, 2019

NARM Skills (NCM'S NARM Skills Form)

When available NARM Skills must be completed as directed in Pam Weaver and Sharon Evans book, *Practical Skills Guide for Midwifery*; signatures do not have to be collected in this resource.

NARM Form 201a must be completed but is not turned in, however, a random audit of the complete set of signatures may be done.

MEAC Abbreviated Skills

Additionally, this list of MEAC abbreviated NARM skills must be completed and submitted to NCM. Note that 4 skills require the separate evaluation of two preceptors.

NARM Skills background is taught within the academic courses, but preceptor demonstration, student practice and evaluation of the student takes place in a clinical setting. 4 skills require the separate evaluation of two preceptors.

ADDITIONAL CLINICAL FORMS REQUIRED

NARM FORM 200: CONTINUITY OF CARE

All of these 5 Births as Primary under Supervision must include Full Continuity. Each must include 5 prenatals spanning 2 trimesters, the birth, newborn exam, and 2 postpartum exams. Only approved NCM

Preceptors may sign this form when they have observed the student's skills in the spaces marked "Witness."

NARM FORM 204: OUT OF HOSPITAL BIRTH

10 of the Births as Primary under Supervision must be in an out of hospital setting, and must occur within 3 years of taking the NARM Exam, and must occur in the U.S./Canada. Only approved NCM Preceptors may sign this form in the spaces marked "Witness."

These forms may be filled with clinicals that have already been entered on NCM Primary Midwife under Supervision Forms #'s 7-11. (Please use NARM's official versions of these forms and read the instructions carefully, as these will be part of the student's NARM Exam Application). MEAC students are not required to submit Out of Country (OOC) Birth Sites Form 230 listed on Forms 200 and 204.

NARM FORM 102: BIRTH EXPERIENCE BACKGROUND FORM

Use the births from forms #1, 3 and 9 to fill in this form.

Please note: on this form in the line "Number Observed," list the births from Form #1: 10 Births as an Observer.

In the line, "Number Active Participant," list the births from Form #3: 20 Births as an Assistant under Supervision.

In the lines, "Number Primary under Supervision" and "Number Primary/Co-Primary" use Form #9: 25 Births as Primary Under Supervision, divided in the following way: In the spaces for "Number Primary Under Supervision," list 20 of these births with a maximum of 2 IP transports. In the spaces for "Number Primary/Co-Primary," list the remaining 5 of these births with a maximum of 1 IP transport. "Co/Primary" is when two primary midwives work together, this term is only applicable to the NARM State Equivalency application route.

CLINICAL REQUIREMENT SUMMARY SHEET (NCM CLINICAL RECORD FORM #12)

Use this form to summarize completion of all NCM and NARM clinical requirements.

PRACTICE GUIDELINES, EMERGENCY TRANSFER/TRANSPORT FORMS, AND INFORMED CONSENT FORMS

These forms are required by NCM for graduation from the ASM program. They are completed by the student during the MOD8-MW250-Midwifery Protocols and MOD8-HON390G-Midwifery Laws & Regulations courses. The preceptor reviews and approves the student's Practice Guidelines/Protocols, Emergency Transfer/Transport Forms, and Informed Consent Forms as part of MOD8-MW250-Midwifery Protocols and MOD8-HON390G-Midwifery Laws & Regulations courses (see course syllabi). These forms are a sample of what the student plans to use in future practice. These items must satisfy the requirements of both NARM and the state in which the student plans to practice in the future. The student must NEVER indicate on these forms that they is a midwife prior to actual attainment of midwifery licensure or certification.

Student researches NARM's guidelines for Practice Guidelines/Protocols, Emergency Transfer/Transport Forms, and Informed Consent Forms, reviews samples from other midwives and birth centers, and the laws and Practice Guidelines of the state in which they is studying or plans to practice in the future. If the student is international, they may use the guidelines from the state of New Mexico. Using the research and samples, the student constructs their own Practice Guidelines/Protocols, Emergency Transfer/Transport Forms, and Informed Consent Forms.

It is acceptable for the student to use the Practice Guidelines/Protocols, Emergency Transfer/Transport Forms, and Informed Consent Forms of their state, or that are used by their preceptor as templates for creating their own documents. In this case, the student must check the documents carefully to ensure that they adhere to NARM guidelines, state law and generally accepted procedures.

SUBMISSION TO NCM

- The student must submit an official letter to the College letting it know which official state practice guidelines the student will be following. This must be on file with the National College of Midwifery prior to graduation.
- Emergency Transport/Transfer Form and Informed Consent Form can be submitted with the letter stating official state practice guidelines student will be following along with their end of trimester submission.

STUDENT PARTICIPATION IN MIDWIFERY OR HEALTH-RELATED ORGANIZATIONS

Completion of the Community Health course with a grade of 80% or more serves as proof of student membership in a midwifery or health-related organization, or attendance at midwifery or health-related organization meeting.

OUTSIDE EXAMINATION REQUIREMENT

Passing an outside examination is a requirement for the issuance of The Associate of Science in Midwifery (ASM) degree. The candidate must submit evidence of successful completion of a state midwifery licensing examination, a state midwifery association examination, or a national midwifery examination. The student is responsible for all expenses, requirements and prerequisites for taking outside exams.

EXTENDED CALIFORNIA CREDITS

Students who have graduated from our ASM program and want to add the courses to meet the requirements for California licensure will be charged \$250. The student is still responsible for transcript fees. Students must complete the California requirements within 1 calendar year and must be enrolled for a minimum of 1 trimester period.

The student must submit a ASM Contract between student, preceptor and NCM. Student completes the required didactic assessments in the IP Provision of Care course and submits grades on the student record and an evaluation signed by preceptor.

Student will also complete a 3 credit Chemistry course and a 1 credit Early Child Growth and Development course with an accredited college, university or online course. The College must receive an official sealed transcript in order to award transfer credits.

Once we receive all the required documentation, NCM will revoke the original diploma and graduation date and reissue a new diploma and graduation date.

The new student transcript and diploma will be sent to the California Medical Board with the L12 Form provided by the student.

ASSOCIATE OF SCIENCE IN MIDWIFERY DEGREE REQUIREMENTS PROCEDURE

CLINICAL FORMS

NCM checks each clinical form for approved preceptor signatures and dates. Signatures that are not from approved preceptors are not valid. A copy of the updated student record is emailed to both the student and preceptor. Clinicals that do not have a corresponding evaluation are highlighted and a notation is placed on the student record. The clinical number will not be accepted until the evaluation is received in the office.

PRACTICE GUIDELINES, EMERGENCY TRANSFER/TRANSPORT FORMS, AND INFORMED CONSENT FORMS

Practice Guidelines/Protocols, Emergency Transfer/Transport Forms, and Informed Consent Forms are submitted to NCM with the end of trimester reports. The submission must be accompanied with an Evaluation Form. Submission of proof of membership or attendance at midwifery or health-related organization meeting via Community Health course grade on official transcript is acceptable. The date is entered on the Student Record to indicate that this requirement has been met. A copy of the updated student record is emailed to both the student and preceptor. A copy of the updated student record is printed, dated and initialed by the reviewer and filed in the student file.

NARM EXAM

Once they receive the NARM Exam Permission Packet, NCM staff completes an audit of the student file. Once it is determined that the student has met the requirements to take the NARM exam, Form #3 Permission to Test is signed by NCM Official. Form #3 and Form #2 NARM Exam Results Information Release Form of the permission packet are both scanned and sent to NARM by email. Also attached to that email is the student's final transcript with Registrar's signature in pdf form. When NCM receives student passing test results, the College processes graduation packets. Students should expect to receive their graduation packets in approximately 1 month from the day the results were received.

SURVEY AFTER THE NARM EXAM

NCM tracks number of attempts for the purpose of the education committee evaluating trends of pass rates by demographics and other characteristics of students. This policy is to help the College understand what steps are useful in studying for the NARM exam in order to provide better counseling to students who are struggling to pass the exam. The survey includes the following questions:

- How many times have you attempted the NARM exam?
- Demographic questions (same as other surveys)
- Can you please detail what steps you took to prepare for the exam?
- Approximately, how many weeks did you prepare for the exam?
- Approximately, how many hours per day did you prepare for the exam?
- What do you feel was the most helpful step you took to prepare for the exam?
- After you first took the exam, how did you feel you had done on the exam?
- Which book(s) and other resource(s) did you find most useful?
- Approximately, how many births did you attended in any capacity prior to taking the exam?

CERTIFYING EXAMS, GRADUATION, CERTIFICATION AND LICENSURE

STUDENT LICENSING AND CERTIFICATION POST GRADUATION POLICY

Graduation does not guarantee midwifery licensure. It is each student's responsibility to keep current with the laws of the state or country in which they are studying and to fulfill the licensure requirements in the jurisdiction in which they plan to apply for licensure and practice. NCM cannot confirm whether the course or program meets requirements for professional licensure in the student's state. Prior to enrollment, NCM provides the student with current contact information for any applicable licensing boards, and advise the student to determine whether the program meets requirements for licensure in the state where the student lives.

NCM is required to provide information on state certification and licensure requirements and provide prospective students with contact information for every state. NCM does not guarantee that our program fulfills each state's requirements, due diligence regarding this research is the responsibility of the student. NCM's ASM program satisfies NARM's clinical requirements for CPM certification and MEAC's Essential Competencies for Midwives. However, all states have state-specific licensure requirements that NCM may not satisfy. Many states conform to NARM and MEAC requirements, but some have additional clinical, academic, and/or other requirements beyond the basic ASM or BSM requirements. NCM does not know the exact and changing requirements for licensure of each state. For this reason, prior to enrolling in NCM's program, students must contact the state/jurisdiction regulatory agency directly for licensure requirements and keep abreast of any changes that may occur during their apprenticeship. Contact information is listed in this table on NCM's website.

NARM EXAMINATION REQUIREMENTS, ELIGIBILITY, AND APPLICATION

REQUIREMENTS FOR NARM CERTIFICATION

In order to qualify for NARM Certification as a Certified Professional Midwife through NCM's MEAC accredited pathway students must fulfill the eligibility requirements (below), apply to take the NARM exam (below), and pass the NARM exam. NARM should send the exam results to NCM but it is the responsibility of the student to ensure they have been received in the College's office. (See Graduation below.)

ELIGIBILITY TO TAKE THE NARM EXAM

ASM students must have completed all ASM program requirements and all ASM academic and clinical coursework must be on file with NCM before requesting permission to take the NARM exam. NCM highly recommends that the student requests an evaluation of their file and an updated student record in advance of requesting permission to take the NARM exam to ensure all completed coursework is correct and has been received by the office. Form #12 will be used to process this evaluation request.

APPLYING TO TAKE THE NARM EXAM

ASM Students must apply directly to NARM to take the Exam, but they must first obtain permission to test from the College.

1. NARM Exam Application:

NARM no longer has three set test dates; dates vary depending on testing location.

NARM Applications must be sent directly to NARM, not NCM. It is the student's responsibility to meet NARM deadlines. Contact NARM for updated application forms and testing sites/dates:

<http://narm.org/narm/equivalency-applicants/graduate-of-a-meac-accredited-program/>

2. Obtaining Permission from NCM to take the NARM Exam:

- In order to take the exam, you must obtain permission from National College of Midwifery. In order to apply for permission you must complete and submit the NARM Exam Permission Packet to NCM. The permission packet is available for download from the NCM website and in the 'Student Orientation' course on Canvas.

- Submission of the permission packet does not guarantee permission to take the exam.
- If the student is not given permission to take the NARM exam, they must submit another permission packet or send missing documentation as soon as possible.
- NCM does not allow students to take the NARM exam prior to completion of the ASM course and clinical requirements.

4. Students may take the NARM exam multiple times. Please refer to the NARM website for more information about this.

GRADUATION PROCESS

NCM processes graduations year round. Students should expect to receive their graduation packets approximately 4-6 weeks following the release of their NARM exam results to NCM. It is the student's responsibility to ensure that the NCM office has received the official NARM or other approved test results. After completion and verification of the graduation requirements the office staff mails a graduation packet to the student which includes includes:

- The student's diploma
- Official Letter
- Final Transcript
- An official sealed transcript
- NCM Stickers

GRADUATION REQUIREMENTS

Associate of Science in Midwifery Degree will be awarded when:

1. prerequisites are met,
2. all skills, clinical and academic course requirements are successfully completed,
3. an outside certifying examination is successfully completed,
4. all outstanding fees to The National College of Midwifery are paid,
5. the graduate /exit survey is completed,
6. the College has documentation of the above.

Certificate in Midwifery Awarded when the student completes all requirements listed above but does not take or fails the outside examination.

Bachelor of Science in Midwifery Degree will be awarded when:

1. prerequisites are met,
2. all clinical and academic course requirements are successfully completed,
3. the student's portfolio is reviewed by the College,
4. all outstanding fees to The National College of Midwifery are paid,
5. the graduate /exit survey is completed,
6. the College has documentation of the above.

GRADUATE SURVEY FORMS

Graduate Survey Forms are sent to all graduates and asks for suggestions and comments regarding all aspects of NCM including program curriculum, planning and evaluation, policy-making, preceptor evaluation, and student services. At the Board of Directors meeting, these are reviewed and any necessary changes are made to the programs, policy, or student service. Suggestions and comments regarding curriculum are forwarded to the Education Committee for review, evaluation and integration as appropriate. Policy and Procedure, Handbook/Catalogue suggestions are forwarded to the Executive Staff weekly meeting agenda.

In the case that a suggested change would represent a "Substantive Change," the issue is saved for the Board of Directors and presented at their annual meeting for a final decision. All versions of the handbook/catalogue and NCM Policy and Procedure manual are maintained in the Digital Library. The preceptor or student who suggested a change is notified of their part in the development of the curriculum.

GRADUATE FOLLOW-UP POLICY

Graduates are invited to participate in a survey for 3 years following graduation. This survey asks if they are currently working as a midwife, if they remained in their communities practicing midwifery or in a related field. Whether they received their CPM, and what states they are licensed in. Graduate surveys are completed by students online via Survey Monkey.

ADDITIONAL DOCUMENTATION FOR SPECIFIC LICENSURE REQUIREMENTS

It is the student's responsibility to find out the licensure requirements for the state(s) where they are seeking licensure. Students may request that NCM send items to a state so that the student can apply for licensure or certification in that state. The student must allow NCM 4-6 weeks from first request for processing by office. The student is responsible for officially requesting these materials from NCM, which may include, depending on the state:

- Student Final Transcript in "Official Sealed Transcript" envelope
- Certified copies of diploma,
- NCM-applicable portions of state licensure applications
- Further information on NCM programs

CERTIFICATION

The student applies directly to NARM for their Certified Professional Midwife credential. The College will send a copy of the student's final transcript to NARM upon graduation upon the student's request.

STATE LICENSURE

Students apply directly to their state(s) for licensure. It is the student's responsibility to notify NCM, provide instructions and necessary forms for any special requirements that the student would like NCM to provide to their chosen exam, certification, or licensing organization. It is recommended that the student provide the College with the requirements prior to graduation so that the College can complete them during the graduation process.

Students seeking California licensure should send in Form L12 from their licensure packet to the College. NCM will complete and send it directly to the California Medical Board.

Students seeking Washington licensure are required to show acceptable AIDS education and training. NCM is happy to provide this documentation upon student request and which must include the following per Statutory Authority: RCW [43.70.280](#). WSR 98-05-060, § 246-12-270, filed 2/13/98, effective 3/16/98.

1. The regulatory entity will accept education and training that is consistent with the model curriculum available from the office on AIDS.
2. AIDS education and training must include, but is not limited to, the following: Etiology and epidemiology; testing and counseling; infection control guidelines; clinical manifestations and treatment; legal and ethical issues to include confidentiality; and psychosocial issues to include special population considerations.

BACHELORS OF SCIENCE IN MIDWIFERY DEGREE

BACHELOR OF SCIENCE IN MIDWIFERY DEGREE (BRIDGE PROGRAM) POLICIES

The BSM bridge program is a two year program which can be completed from 1 to 5 years.

BSM CREDIT REQUIREMENTS

147.75 (California Students: 152.75 credits)

PREREQUISITES

- High School Diploma or GED
- NCM-recognized state or national midwifery license or certification (satisfies 67.75 credits toward BSM Requirements)
- Prerequisite college-level courses to be completed at another accredited college or university. These may be completed concurrently with NCM coursework (see NCM policy on accepting transfer credits):
 - Analytical Writing: 4 credits
 - Math: 3 credits

BSM students in California must additionally complete:

- Chemistry: 3 credits
- Child Growth and Development: 1 credit.

Completed NCM ASM Coursework will transfer directly to satisfy BSM courses.

BSM ACADEMIC BLOCK SYSTEM

Students in the BSM program follow the Academic Block System provided in the next table.

In the case of a student enrolled prior to May 30, 2018 students who have completed a minimum of 20 credits may apply for an exception in writing with the CDO who will grant the exemption.

Notes on course order by block:

		Academic Courses		Credits
		FOUNDATION COURSES:		38.0
FOUNDATION COURSES Foundation Courses must be taken in Foundation Block order	1	BIO155G Anatomy and Physiology	4.0	
		PSY224 Com. & Counseling	1.0	
	2	BIO120 Fetal Development	1.0	
		SOC102 Genetic Screening	1.0	
		HON225G Midwifery Ethics	2.0	
	3	HON205G Applied Microbiology	3.0	
		HON393G Community Health	3.0	
		SCI122G Chemistry *CA	3.0	
		SOC 104 Child Growth & Dev. *CA	1.0	
		ENG202G Bus. & Prof. Com.	3.0	
	4	MW 400 Midwifery Research Methods	4.0	
		ENG 404 Writing & Presenting on MW Topics	4.0	
		MW460 Evidence Based Practice in MW Care	4.0	
HON450 Applied Topics in MW Practice: Dev. of P&P		4.0		
		FLEX COURSES:		47.0
FLEX COURSES Flex 1 Courses: Can be taken in any order in Foundation Blocks 1 and 2. Flex 2 Courses: Can be taken in any order in Foundation Blocks 3 and 4.	Flex 1	HON223G Human Sexuality	3.0	
		ENG200G College Composition	4.0	
		HON211G Statistics	3.0	
		MATH112G College-Level Math	3.0	
		HON390G Laws/Regulations	3.0	
		HON220G Midwifery Lit. & Art	3.0	
		HON222G History of Midwifery	3.0	
		MW323 IP Provision of Care *CA	1.0	
	Flex 2	MW480 Ten Mentored Births	24.0	
			Total Academic Credits:	

PORTFOLIO SUBMISSION REQUIREMENTS

The BSM-Focus Courses include a portfolio of projects to be submitted to NCM. These projects are listed on the course syllabi. The students preferred email will be needed. The NCM office will create a DropBox folder named after the student. DropBox>NCM>BSMPortfolio>StudentName. The office can then “share” it with the student to give them access. The student must set up a free “Dropbox” account at <https://www.dropbox.com/>. Students will then create subfolders that are titled after the courses on the BSM Portfolio Tracking form.

BACHELOR OF SCIENCE DEGREE IN MIDWIFERY AWARDED

1. When prerequisites are met
2. When course, portfolio & program requirements are successfully completed
3. When all trimester evaluations are completed
4. All outstanding fees to The National College of Midwifery are paid
5. When Graduate /exit survey is completed
6. When the College has documentation of the above

BACHELOR OF SCIENCE IN MIDWIFERY DEGREE (BRIDGE PROGRAM) PROCEDURES

Each student assignment must be submitted via the shared DropBox sent by the NCM office staff. Labeled assignments as listed on the BSM Portfolio Tracking Form. After the completion of all of the portfolio requirements the student should submit the BSM Portfolio Tracking Form via DropBox or email. After Administrative Assistant reviews the student’s transcript and portfolio, when all requirements including trimester evaluations are completed the dropbox link to the student’s portfolio is forwarded to the CDO who has 30 days to approve the portfolio for graduation. If the CDO finds the work inadequate to the degree

learning level the student will be notified which portfolio requirements must be corrected and resubmitted. A copy of the final student record and a diploma is sent to the student.

MSM AND PHD COURSES

NCM no longer offers MSM or PhD as of March 2017. All MSM students enrolled have completed their program of study. All students currently enrolled in the PhD program will be given a reasonable time period to complete their programs per policy and procedure in previously published editions of this manual the handbook/catalogue. New policy and procedures, if needed, will be developed via special committee of the education committee such that the special committee is made of members with terminal level degrees or midwifery faculty with a master's level degree and a minimum 5 years experience.

CATALOG

COURSE DESCRIPTIONS

Courses with the MW prefix use current research in midwifery and obstetrics to broaden the student's understanding of the NARM skills and MANA Core Competencies learned under clinical supervision. Course with prefixes other than MW are NCM general education courses while only those with the suffix G are considered by the New Mexico Department of Higher Education, General Education requirements fall into three categories and there are specific requirements within each category.

BIO155G -Anatomy and Physiology, Credits: 4.0

This course provides a thorough survey of human anatomy and physiology, including proper identification of body planes and sections along with the structure and function of all major organ systems. This course includes an introduction to basic histology including cell structure, metabolism, and division, semi-permeable membranes, and enzymes.

BIO120-Fetal Development, Credits: 1.0

This course follows the origin and development of the fetus from zygote to birth, requiring an understanding of the month-by-month development of fetal structure and the growth of fetal capacities. This course explores the structure and function of the placenta, chorionic villi, umbilical cord, and amniotic sac and fluid.

SOC102-Genetic Screening: Human Genetics, Credits: 1.0

This course provides an introduction to the principles of genetics. Students are expected to master a basic understanding of how genetic traits are passed on and how the internal and external environment of the cell can affect this process. Emphasis is placed on understanding the effects of teratogens and the unique vulnerability of the fetus to maternal exposure during key periods in development.

HON205G-Applied Microbiology, Credits: 3.0

This course provides a survey of microbiology, covering bacteria, viruses, fungi, and protozoa. Students are introduced to cellular structure, growth, protein synthesis, and replication, and learn the role of microorganisms in human disease, the stages of infection, and diagnosis. The role and action of antibiotics, sterilization, and antimicrobials are also covered.

PSY224-Communication & Counseling, Credits: 1.0

This course provides an exploration of the impact that language and attitude can have on the new parents' abilities to integrate information and make decisions and the midwife's responsibility to communicate in a manner that encourages understanding and growth. It includes an overview of therapeutic modalities, the role of cultural background in communication, and the importance of the midwife's communication style and emotional support in order for the parents to absorb new information and take on the role of parenthood.

HON248G-Cultural Issues: Cultural Competency in Health Care Delivery, Credits: 3.0

Student will explore unconscious bias and privilege while reflecting on how these affect a midwife's ability to provide culturally appropriate care. Students will participate in activities that promote cultural humility while developing skills for working with populations that are culturally different from their own. An understanding of the basis of health disparities will be fostered and solutions will be explored. The role of the midwife in addressing social and physical determinants of health will be discussed.

HON223G-Evolution of Human Sexuality, Credits: 3.0

A survey of the physiological, psychological and social perceptions of reproductive functioning and sexual response in men and women. This course seeks to broaden the student's perspective concerning individual and cultural attitudes surrounding the topics of sex and sexual behavior in a way that is relevant to our diverse and ever-changing population.

MW350-Perinatal Education Including Lactation, Credits: 3.0

This course has two sections: 1. Ensures the student knows the appropriate information that should be provided to clients in a childbirth class through designing a childbirth education curriculum outline and teaching a childbirth education series. 2. Provides a comprehensive introduction to human lactation and the breastfeeding relationship. This course is not intended to train the student as a lactation consultant but rather provide a solid background of understanding about the mechanics and importance of breastfeeding. Emphasis is placed on the skills to identify and solve common problems that occur during early breastfeeding when both mother and baby are most likely to be in midwifery care.

MW300-Antepartum Basic Skills, Credits: 1.00

This course provides a basic academic foundation from which students will build a comprehensive understanding of the basic skills used by a midwife caring for a healthy mother and fetus during the antepartum period. This course covers the use of techniques, instruments and equipment that monitor the growth and development of the fetus and the well-being of the pregnant mother. Information in this course is framed in the context of OSHA regulations as they relate to the midwifery workplace, and clinical skills most commonly practiced by Certified Professional Midwives.

MW301- Antepartum Risk Screening, Credits: 0.50

This course provides an academic framework for obtaining and using specific information about the client and her environment to make a clear assessment of the level of risk she may encounter over the course of her pregnancy, as well as discerning the appropriate time to refer her to other professionals. Diagnostic tests and bio-technical screening methods are included as elements to understanding risk status. The course focuses on the areas of history taking that are used for obtaining information that is vital in risk assessment.

MW302-Antepartum Physical Assessment, Credits: 0.50

This course is designed to prepare the midwife to identify symptoms, and to perform the skills needed to provide a complete physical assessment of women during the antepartum period within the scope of midwifery practice. Presented symptoms are used as a guide to discover the cause, and to discriminate between the normal and pathological. Emphasis is placed on increasing the student's knowledge of how to perform physical assessment and understand abnormal findings.

MW303-Antepartum Provision of Care, Credits: 1.0

This course serves as an academic overview of antepartum management by a midwife of a healthy pregnant women and fetus. Topics in this course include the determination of pregnancy, the evaluation of normal physiological and psychological changes in pregnancy, the formulation of a comprehensive care plan including the client and her family, and the thorough education of the client about her pregnancy and

the factors that may affect it. Common questions, risks, and comfort measures for the antepartum period are covered in detail.

MW304- Antepartum Complications, Credits: 0.5

This course prepares the student midwife to identify and deal with complications of the antepartum period. These complications include hypertensive disorders, low birth weight, polyhydramnios and oligohydramnios, low-lying placenta or placenta previa, fetal demise, abnormal fetal lie and presentation, size/dates discrepancies, hydatidiform mole, multiple gestation, abortion, Rh or ABO incompatibility, ectopic pregnancy, post-dates pregnancy, and the effect of common diseases on pregnancy.

MW305- Antepartum Pharmacology, Credits: 1.0

This course covers both allopathic and non-allopathic medications/drugs, including an in-depth introduction to the theory and practice of both herbalism and homeopathy. It introduces the student to the structure and function of receptor sites, and requires a thorough understanding of dosage, absorption, metabolism, drug interactions, side effects, and allergies, as well as the importance of carefully considering the client's individual factors when deciding to administer medications.

MW306- Antepartum Nutrition, Credits: 0.5

The Nutrition course provides student midwives with information regarding nutrition during the antepartum period. The course covers education of clients regarding nutritional and non-allopathic dietary supplements, and teaches midwives to individualize each recommendation. This course also includes identifying individual nutritional patterns, RDA recommendations, effects of malnutrition (both maternal and fetal), and facilitating access to better nutrition during pregnancy.

MW307- Antepartum Diagnostic Lab Tests & Procedures, Credits: 0.5

This course reviews diagnostic tools used in testing and identifying abnormalities and determining normal development and maternal health during the antepartum period. Tests covered include ultrasound, genetic screening, tests for Rh and ABO incompatibility, non-stress and biophysical profile tests, tests for liver function, group B strep test, testing for STIs, testing maternal urine for protein and sugars, and testing for anemia and diabetes.

MW308-Antepartum Observation & Charting, Credits: 0.5

This course teaches observation and charting of the antepartum period. Basics of charting are covered, including legal considerations. How to chart client's subjective experiences and the provider's objective findings, the assessment of these findings, and the importance of formulating a care plan based on these findings. Charting of maternal risk at each visit, of telephone consults and follow-up, and of risk findings requiring physician consult or transfer are also covered.

MW320-Intrapartum Basic Skills, Credits: 1.0

This course establishes a baseline of care for evaluation of the intrapartum period including monitoring fetal heart tones, progress of labor, monitoring vitals and values of normalcy. This course also includes review and competency of basic skills and tools utilized during the intrapartum period.

MW321- Intrapartum Risk Screening, Credits: 1.0

In this course, students will gain basic understanding of how the midwife determines the normal progression of labor and delivery. Students will learn how to evaluate the risk status of a mother at the onset and

duration of labor. The student is asked to evaluate the risk factors that can arise in the intrapartum period and gain understanding of how to recognize or rule out signs and symptoms of complications that can change the mother's risk status.

MW322-Intrapartum Physical Assessment, Credits: 0.5

This course is designed for students to gain a thorough understanding of the structures most involved with labor and delivery: the female pelvis, the uterus and the fetal skull. Students learn the anatomy of the soft and bony structures of the female pelvis, how they adapt to the process of labor and how the midwife evaluates the presentation and progression of the fetal skull through these structures. The structure of the fetal skull is reviewed in detail including how it adapts to the pelvis during labor, cardinal movements of the baby during labor and how these factors may affect progress of labor. Students also learn how the midwife identifies and evaluates malpresentation.

MW323- Intrapartum Provision of Care, Credits: 1.0

In this course, students learn the many aspects of labor management including identification, evaluation and management of the stages and progression of labor. Normal physiological and psychological changes, nourishment, hydration, signs of maternal exhaustion, comfort measures, and evaluation of fetal well-being are covered in detail in this course.

MW324- Intrapartum Complications, Credits: 1.0

This course introduces the topics of the prevention, identification, and proper response for complications during the intrapartum period. These complications including: preterm labor, preterm rupture of membranes, cord prolapse, fetal heart tone problems, dysfunctional labor patterns and *cephalopelvic disproportion*, maternal exhaustion, uterine rupture, placental abruption, malpresentations, shoulder dystocia and others.

MW325- Intrapartum Pharmacology, Credits: 0.5

This course covers both allopathic and non-allopathic medications used during the intrapartum period. Allopathic medicines used in the hospital, (not used by licensed midwives) are reviewed so students gain understanding of the indications for use, effects, and possible side effects of medications used in obstetrics. Students learn which allopathic medications licensed midwives may utilize for normal labor and delivery in the out-of-hospital environment. Homeopathic and herbal medications for use during labor and delivery are also covered.

MW327-Intrapartum Diagnostic Lab Tests & Procedures, Credits: 0.5

This course reviews diagnostic tools that are used during intrapartum care. Students learn tools to confirm rupture of membranes, evaluate urine for health indicators and other common tests. This course reviews the indications and efficacy of electronic fetal monitoring, ultrasound, and uses of x-ray in labor.

MW328-Intrapartum Observation & Charting, Credits: 0.5

This course reviews the observation and objective data that must be recorded at the appropriate intervals to obtain proper medical documentation of labor and delivery. Special topics such as consults, transfers, consents and waivers are covered in this course.

MW329-Intrapartum Intravenous Therapy, Credits: 1.0

This course covers the indications for IV therapy in labor and delivery, procedures for establishing, administering, and discontinuing an intravenous catheter and fluids as well as aseptic technique. Risks and complication of IV insertion and transfusion of fluids are also covered. This course is meant to cover all of the information that is provided in an IV certification class. A course with supervision by a certified IV therapy instructor may also be submitted in-lieu of this course.

MW340-Postpartum Basic Skills, Credits: 1.0

This course provides a basic academic foundation from which students will build a comprehensive understanding of the basic skills used by a midwife caring for a healthy mother during the postpartum period. This course covers the use of techniques, instruments and equipment that are essential to assessing and helping to maintain the physical well-being of the mother after birth. Information in this course is framed in the context of OSHA regulations as they relate to the midwifery workplace, and clinical skills most commonly practiced by Certified Professional Midwives.

MW341-Postpartum Risk Screening, Credits: 0.5

The objective of this course is for students to learn how to evaluate the risk status of a mother after the birth, including continued screening for signs and symptoms of obstetric or medical complications. This course provides an academic framework for obtaining and using specific information about the client and her environment to make a clear assessment of the level of risk she may encounter during the postpartum period, as well as discerning the appropriate time to refer her to other professionals. The course focuses on the areas of history taking that are used for obtaining information that is vital in risk assessment.

MW342-Postpartum Physical Assessment, Credits: 0.5

This course is designed for students to gain a thorough understanding of the physiological and anatomical changes of the postnatal period. The student will learn how to conduct a physical examination during the early postpartum period and evaluate the normal changes that occur through six weeks postpartum. The students will gain an understanding of how to assess the breasts postpartum and how this relates to critical breastfeeding support for mothers. Emphasis is placed on increasing the student's knowledge of how to perform physical assessment and understand abnormal findings.

MW343-Postpartum Provision of Care, Credits: 1.0

This course covers management of the postpartum period from its initiation to 6-weeks including: delivery of the placenta, care of the placenta and umbilical cord, estimation and management of blood loss, continual assessment of maternal well-being, assisting mother to initiate and persist in breast feeding, facilitation of the attachment and bonding between infant and parents, and management of pain, constipation, and hemorrhoids. The student learns the provision of education, guidance and support to mother and family.

MW344-Postpartum Complications, Credits: 1.0

This course covers the prevention, identification, and proper response for common complications during the postpartum period, including: hemorrhage (immediate and delayed), shock, puerperal morbidity, puerperal infection, mastitis, hematoma, and subinvolution and other complications. This course examines the vital role of bonding, and the importance and methods of screening for child abuse.

MW345-Postpartum Pharmacology, Credits: 0.5

This course covers pharmacology relating to common problems that arise during the postpartum period. Many pharmaceuticals are covered including the uses of RhoGAM®, Pitocin, methergine, rubella vaccine, antibiotics, iron, and herbal or homeopathic remedies for the relief of common postpartum complications and discomforts.

MW347-Postpartum Diagnostic Lab Tests & Procedures, Credits: 0.5

An introduction to the lab tests and procedures performed during the postpartum period. Student learns how to obtain samples of urine, lochia, breast milk, and the reasons for testing each of these.

MW348-Postpartum Observation & Charting, Credits: 0.5

In this course, the student learns how to evaluate the physiological and anatomical changes of the mother in the postpartum period, as well as her behavioral and psychological responses to childbearing. Students learn the rationale and appropriate measurement of postpartum vital signs, the importance of chart review and history review at this stage, the charting of additional history, physical and pelvic status, and consults and referrals, and the creation of a postpartum management plan.

MW360-Newborn Basic Skills, Credits: 1.0

This course focuses on the basic professional skills needed to assess the condition of the newborn. It includes gathering and recording information to develop an individualized plan, the use of techniques, instruments, and equipment to monitor the growth and development of the newborn. Skills are framed in the context of OSHA regulations as they relate to the midwifery workplace, and the use of clean and aseptic technique and universal precautions.

MW361-Newborn Risk Screening, Credits: 0.5

This course provides an understanding of how to use information from the mother's health and reproductive history to assess the level of risk to the newborn. Fetal anomalies and problems at birth are examined to determine the impact they may have on the newborn.

MW362-Newborn Physical Assessment, Credits: 1.0

This course is designed to teach the student the anatomy and physiology of the newborn as well as assess the general health and appearance of the newborn. Students will become competent in performing a complete newborn exam and understanding the deviations from normal that sometimes occur in the newborn.

MW363-Newborn Complications, Credits: 1.0

This course covers the identification, assessment, and understanding of neonatal problems and abnormalities. Neonatal complications such as pathological jaundice, neonatal infection and congenital defects are covered in detail with emphasis placed on an understanding of underlying causes.

MW364-Newborn Provision of Care, Credits: 0.5

This course covers the care of the newborn during its transition into extrauterine life and in the weeks after birth. Emphasis is placed on understanding the normal physiology of newborn transition, and how this

understanding relates to care provided by the midwife. Management of common concerns and routine postnatal care is also included in this course.

MW365-Newborn Pharmacology, Credits: 0.5

This course covers the various allopathic and non-allopathic medications that might be used for the care of a newborn in the postpartum stage. The student will learn about the use of oxygen and medications that aid in the resuscitation of a newborn. The various options for ophthalmic and vitamin K prophylaxis are covered in detail.

MW367-Newborn Diagnostic Lab Tests & Procedures, Credits: 0.5

This course examines diagnostic tests commonly used during the neonatal period. Student will learn what the community standards regarding the indications for, administration of and the risks/benefits of bio-technical screening techniques. Emphasis is placed on understanding normal lab values in the healthy newborn and the significance of abnormal test results.

MW368-Newborn Observation & Charting, Credits: 0.5

This course covers the importance of charting observed and objective information on the neonate, including consults and transfers. Student will learn how to apply the principles of informed consent and client confidentiality, and learn about the pertinent waivers that may need to be obtained.

MW380-Well Woman Risk Screening, Credits: 0.5

This course is designed to introduce students to risk screening as it relates well-woman care. Students will use a wide variety of web-based sources to understand risk assessment as it relates to screening for sexual transmitted infections (STIs), cancer, and other health issues. Students are introduced to current guidelines in sexual and reproductive healthcare by reviewing the most recent, evidence-based publications released by national health agencies such as the Centers for Disease Control and the National Cancer Institute.

MW382-Well Woman Physical Assessment, Credits: 1.0

Through this course, the student will learn how to perform a complete physical examination relevant to the well-woman visit. This course focuses in-depth on anatomical structures that are examined during well-woman care and the skills needed to screen clients for possible abnormalities or pathology. The course is broken down into four sections: general exam, breast exam, pelvic exam and rectal exam.

MW384-Well Woman Provision of Care, Credits: 1.0

This course is designed to guide students through the basic principles of providing care during the inter-conception, pre-conception and/or well-woman periods. The course gives a thorough overview of topics that are relevant to a midwife providing well-woman care and a strong base upon which the student can develop their understanding of how this type of care fits into the scope of practice of a midwife.

MW385-Well Woman Pharmacology, Credits: 1.0

This course is designed to give students a thorough introduction to pharmacology as it relates to well-woman care. The pharmacology of contraception methods is explored in-depth in this course in addition to an exploration into non-allopathic protocols for common well-woman problems.

MW386-Well Woman Family Planning, Credits: 1.0

This course is designed to increase the students' understanding of family planning methods. Barrier, hormonal, surgical, and fertility awareness methods are explored in detail in this course. Students are asked to research all types of family planning methods, including methods that are only available for practitioners with prescriptive privileges as a means of preparing the student to counsel clients effectively in their family planning options.

MW387-Well Woman Diagnostic Lab Tests & Procedures, Credits: 1.0

This course provides a thorough review of diagnostic tests that may be performed during a well-woman visit. This course gives an overview of diagnostic testing that is outside of the scope of practice of most midwives in an effort to inform students about topics that may require discussion and referral during a well-woman visit. Cancer screening and interpretation of the pap test/smear is emphasized in this unit as a means of reducing confusion and increasing the student's capacity to explain risk to a client.

MW388-Well Woman Observation & Charting, Credits: 0.5

This course covers the significance of and methods for documenting well-woman care. Student learns to apply the principles of informed consent and client confidentiality.

HON222G-History of Midwifery, Credits: 3.0

A broad exploration of the history, culture and politics of midwifery in the United States throughout the 19th and 20th centuries. In this course, students look at the changes that took place in early medicine and dominant American culture that created a severe decline in midwifery care and the subsequent effects on childbearing women. Special attention to political topics such as the rise of obstetrics and decline of midwives, issues of licensing and education, medicalization of childbirth, the natural childbirth movement, and the rise of homebirth midwifery help students understand the world they are preparing to practice in today.

HON225G-Ethics, Credits: 3.0

This course explores the theory and practice of informed consent and mutual decision-making. Students answer theoretical and situational dilemmas that practitioners may face when providing care in this way. This course also aims to provide a general understanding of importance and complexity of ethics in healthcare. Students explore the role of their own ethics and personal opinions in the process of informed consent and how this can affect the care they provide. As these topics are cornerstones of midwifery care, this course aims to set a foundation to guide students in questions that will be a significant part of their midwifery practice.

HON390G-Midwifery Laws & Regulations, Credits: 3.0

This course outlines the important questions for students to understand about the legislation and regulations regarding midwifery nationally and in their local jurisdiction. These questions are designed as a guide for students to investigate the laws in the jurisdiction where the student studies and will practice, know them intimately, and compare them with MANA guidelines. As midwifery laws are created on a state level, there is a wide range in state laws and it is ongoing responsibility of the (student) midwife to stay informed of the legal issues in the student's state as they are often subject to change.

MW250-Midwifery Protocols, Credits: 1.0

In this course, students explore the difference between protocols and practice guidelines including the legal implications for midwives and patients. Students explore the elements that are necessary to design practice protocols or guidelines for all aspects of midwifery care: antepartum care, intrapartum care, newborn care, postpartum, and well woman care. As the North American Registry of Midwives and many states require practice protocols or guidelines, this course is essential for student midwives learning how to draft their own upon graduation to be used in their own private practice.

HON393G-Community Health, Credits: 3.0

Using both a national and international focus, students look at women's health and maternity care through the lens of a public health care model. By analyzing issues of geography, race, age, access to care, availability of practitioners, health problems associated with poverty, nutrition, and women's rights, students gain an understanding of spectrum of issues that affect the health status of childbearing people and children as well affect the provision of health care. The intent of this course is to facilitate the student's understanding of a more complete picture of the quality of the maternal-child health in the student's own community and adapt their services to better serve the local need.

MW350-Out of Hospital Birth, Credits: 3.0

In the United States, the re-emergence of home birth as a grassroots movement brought two concepts into focus in American culture: midwifery care and out-of-hospital birth. These ideas came at a time of highly interventional birth practices, and brought to light that birth is not necessarily safer in the hospital for low-risk women. In this course, students study midwives and out-of-hospital birth in their communities via biographies, live interviews, research and popular resources. In the context of this information, the course requires students to conduct multiple interviews with local care providers to understand the interactions and philosophies of care providers in and out of the hospital setting as they coordinate care for childbearing women. Students will engage with their communities in a way that may help to facilitate communication and coordination in future interactions.

ENG202G-Business & Professional Communications, Credits: 3.0

Communication is a huge part of what midwives do in their role as educators and as mid-level health care providers. Professionalism, accuracy and efficacy in communication are crucial in the provision of care and professional coordination of care. This course aims to provide students with an understanding of both the need for and steps to achieve effective communication in professional interactions. Learning activities include: practicing business writing skills with help of step-by-step study guide; practicing the SBAR communication technique during transport situations; creating an outline for a business plan; development of clear informational materials on midwifery services; and development of a presentation on a plan for reduction of maternal and infant risk in the student's community that could be presented to any party.

HON211G-Introduction to Statistics for Midwives, Credits: 3.0

This course provides midwifery students with the basic statistical skills needed to interpret scientific studies. Students will learn the fundamentals of the scientific method and implementation of research studies, an overview of commonly applied statistical methods used in health research, practice analyzing actual birth related studies and exposure to basic calculation of descriptive statistics. Students also look at ethical and political issues around how statistics are gathered and calculated, the process involved in the creation of clinical studies and how results from these are applied to maternity care.

HON220G-Midwifery Literature & Art, Credits: 3.0

In this course, students delve into the vast bibliography of books on the history, culture and art of midwifery. Through this course, the student explores the diverse and passionate history of midwives via book reports on selected works and interviews with midwives. Students gain understanding of the arts and culture that have developed with the rise of midwives and natural childbirth movement. Students are asked to undertake a creative project of their own using any artistic medium to express their own passion and thoughts about themselves and their work as midwives.

BSM-Focus Requirements Course Descriptions:

BSM-MW400-Introduction to Midwifery Research Methodologies, Credits: 4

This course is an introduction to scientific research methods as they apply to midwifery and health sciences. The course gives a detailed description of the key concepts of both qualitative and quantitative approaches to research. All of the core concepts for designing a research proposal are covered in this course. This course aims to give the midwife an entry-level understanding of skills that apply to research development.

BSM-ENG 404-Introduction to Writing & Presenting on Midwifery Topics, Credits: 4

This course is designed to introduce the BSM student to methods of professional writing and presentation of midwifery topics. The course uses online resources to guide students in the development of writing skills and technique appropriate to the field of midwifery research. Students develop writing and presentation experience by practicing the rules of professional writing and using current standards in professional research presentation.

BSM-HON450-Applied Topics in Midwifery Practice: Development of Policy & Procedures, Credits: 4

This course is designed to apply the tools learned in the BSM research courses to clinical practice in the development of evidence-based clinical guidelines. The midwife-student is charged with researching, analyzing and distilling clinical information relevant to their practice. This course is an opportunity for students to apply their understanding of research directly to every day practice.

BSM-MW460-Introduction to Evidence Based Practice in Midwifery Care, Credits: 4

This course builds on the concepts covered in the course *Introduction to midwifery research methodologies*. Students learn to analyze and understand research and medical literature through the development of critical appraisal skills. In this course the area between research and practice is bridged giving students practical tools for problem-solving clinical questions and converting research into practice.

FACULTY

ACTIVE PRECEPTOR POLICY

An Active Preceptor is a preceptor who has completed the Preceptor Orientation course, has been enrolled by the College as a Preceptor and if enrolled in a calendar different than their original calendar year is enrolled in or who has completed the current Preceptor Guidelines [year] course.

CLINICAL PRECEPTORS UPPER LIMIT OF NUMBER OF STUDENTS POLICY

The college does not put an upper limit on the number of students a preceptor can accept. However, it is the responsibility of the preceptor to gauge their capacity to meet students' clinical needs based on their client load, their teaching skills, and the time they have to commit to teaching. The preceptor must accurately represent this information to the student both verbally and within their contract. Students are reminded that they must complete all the requirements of their program in 5 years. If a preceptor is unable or unwilling to provide the opportunities required by the student, the student will need to seek out additional preceptors and opportunities.

FACULTY JOB DESCRIPTIONS

Special thanks to Valencia Community College for publishing the document, "Strengthening the Role of Part-Time Faculty in Community Colleges. Example Job Description for Part-Time Faculty:Valencia College - Job Description and Essential Competencies," which NCM utilized to write these sections of the Policy and Procedure Manual.

ACADEMIC AND CLINICAL PRECEPTORS

Primarily responsible for teaching in the discipline or discipline areas in which they have specific training and/or competence and/or teaching under supervision in the discipline or discipline areas in which they have minimal training and/or competence. Plans, organizes, teaches, and provides feedback to promote and direct student learning in keeping with NCM's values and in a manner that meets the NARM Skills, MEAC Essential Competencies, ICM Core Competencies, NCM's Lumina degree-level competencies, and state and/or federal requirements. Responds to students in a timely manner and communicates with the College using the tools and resources that the college provides.

ESSENTIAL FUNCTIONS

1. Using NCM prepared syllabi, learning resources, audio/video resources, and didactic assessments, preceptors prepare and deliver instruction to students in community.
2. Prepares instructional materials. Provides feedback on students' progress, including evaluation of student mastery of course and program outcomes.
3. Provides feedback to students in matters related to academic success in a timely manner.
4. Prepares and submits required documentation including, when supervised, supplemental teaching resources, completed didactic assessments, final course grades, and other information as requested or required by policy and the college.
5. Maintains current knowledge about and encourages students to utilize services available to them from the college.
6. Is familiar with and maintains behavior and actions consistent with college policies.
7. Maintains professional development/growth according to personal needs and requirements for certification.
8. Performs other duties as assigned.

QUALIFICATIONS

1. Appropriate level of education, certifications and/or experience. See Preceptor/Instructor Qualifications and Requirements Policies.

2. Professional commitment to education.
3. A demonstrated commitment to equity.
4. Ability to perform all of the Essential Functions of the job with or without reasonable accommodation.
5. Ability to work evening and/or weekend hours as required.

KNOWLEDGE, SKILLS & ABILITIES

1. Ability to develop and implement diverse teaching and learning strategies that accommodate the learning styles of students and that promote both acquisition and applications of knowledge and understanding (Learning Centered Teaching Strategies).
2. Ability to use consistent, timely formative and summative assessment measures to enhance learning (Assessment).
3. Ability to design learning opportunities that acknowledge, draw upon and are enriched by student diversity in the preceptorship (Inclusion and Diversity).
4. Ability to design and implement curriculum that aligns elements of student learning toward growth in NARM Skills, MEAC Essential Competencies, ICM Core Competencies, NCM Lumina degree-level competencies, and state and/or federal requirement and progression through course sequences (Outcomes Based Practice).
5. Commitment to stay current and continually improve knowledge and understanding of the discipline (Professional Commitment).
6. Ability to continuously examine the effectiveness of teaching, counseling, librarianship and assessment methodologies in terms of student learning by engaging in the scholarship of teaching and learning (Scholarship of Teaching and Learning).
7. Knowledge of, ability to develop, and commitment to use emerging technologies and alternative assessment methods appropriately, including the online learning resource.
8. Ability to evaluate, develop, and implement curriculum enhancements and evaluate student admissions criteria, program resources, facilities, and services.
9. Skill in the use of personal computers and general office software.
10. Ability to effectively communicate interpersonally (in group and one on one settings), orally, and in writing.
11. Knowledge of NARM Skills, MEAC Essential Competencies, ICM Core Competencies, NCM's Lumina degree-level competencies, and state and/or federal requirements unless serving only as a GE Supervisor without midwifery credentials in which case the Supervisor must possess at a minimum the knowledge of NCM's Lumina degree-level competencies.
12. Knowledge of state and federal regulations including but not limited to:
 - a. FERPA,
 - b. Copyright,
 - c. Plagiarism,
 - d. safety standards,
 - e. universal precautions,
 - f. hazardous materials and waste management.
13. Ability to meet with student weekly or at a regularly scheduled time to review clinical and academic progress, troubleshoot problem areas, build on areas of strength, and debrief any adverse clinical outcomes.
14. Knowledge of the Student Services provided by the College.
15. Ability to debrief the student to their satisfaction after an adverse clinical outcome.

SUPERVISORS

Primarily responsible for supervising Minimally Qualified General Education Faculty teaching in discipline or discipline areas in which the Supervisor has specific training and/or competence. Provides learning and teaching resources to promote and supervise student learning in keeping with NCM's values and in a manner that meets the NARM Skills, MEAC Essential Competencies, ICM Core Competencies, NCM's Lumina degree-level competencies, and state and/or federal requirement. Responds to preceptors and students in a timely manner and communicates with the College provided tools and resources.

ESSENTIAL FUNCTIONS

1. Using NCM prepared syllabi, learning resources, audio/video resources, and didactic assessments, Supervisors research and provide resources, instructional materials and mentoring in adult learning as needed. They also make themselves available to provide teaching strategies to preceptors.
2. Provides feedback to students in matters related to academic success in a timely manner.
3. Prepares and submits required documentation including confirmation of final course grades, and other information as requested or required by the Supervisor Trimester Responsibilities Policy and Procedures and any other requirements set forth by the college.
4. Maintains current knowledge about and encourages students to utilize services available to them from the college.
5. Submits to the Education Committee meaningful suggestions for the augmentation, expansion and prioritization of innovative learning activities.
6. Monitors and mediates online discussions per the online discussion policy.
7. Is familiar with and maintains behavior and actions consistent with college policies.
8. Maintains professional development/growth according to personal needs and requirements for certification.
9. Performs other duties as assigned.

QUALIFICATIONS

1. Appropriate level of education, certifications and/or experience. See Qualified Academic Preceptors and Supervision Policy.
2. Professional commitment to education.
3. A demonstrated commitment to diversity.
4. Ability to perform all of the Essential Functions of the job with or without reasonable accommodation.
5. Ability to work evening and/or weekend hours as required.

KNOWLEDGE, SKILLS & ABILITIES

1. Ability to develop and implement diverse teaching and learning strategies that accommodate the learning styles of students and that promote both acquisition and applications of knowledge and understanding (Learning Centered Teaching Strategies).
2. Ability to develop formative and summative assessment measures to enhance learning (Assessment).
3. Ability to design learning opportunities that acknowledge, draw upon and are enriched by student diversity in the preceptorship (Inclusion and Diversity).
4. Ability to design and implement curriculum that aligns elements of student learning toward growth in NARM Skills, MEAC Essential Competencies, ICM Core Competencies, NCM Lumina degree-level competencies, and state and/or federal requirement and progression through course sequences (Outcomes Based Practice).
5. Commitment to stay current and continually improve knowledge and understanding of the discipline (Professional Commitment).

6. Ability to continuously examine the effectiveness of teaching, counseling, librarianship and assessment methodologies in terms of student learning by engaging in the scholarship of teaching and learning (Scholarship of Teaching and Learning).
7. Knowledge of, ability to develop, and commitment to use emerging technologies and alternative assessment methods appropriately, including the online learning resource.
8. Ability to evaluate, develop, and implement curriculum enhancements and evaluate student admissions criteria, program resources, facilities, and services.
9. Skill in the use of personal computers and general office software.
10. Ability to effectively communicate interpersonally (in group and one on one settings), orally, and in writing.
11. Knowledge of NARM Skills, MEAC Essential Competencies, ICM Core Competencies, NCM's Lumina degree-level competencies, and state and/or federal requirements unless serving only as a GE Supervisor without midwifery credentials in which case the Supervisor must possess at a minimum the knowledge of NCM's Lumina degree-level competencies.
12. Knowledge of state and federal regulations including but not limited to:
 - a. FERPA,
 - b. Copyright,
 - c. Plagiarism,
 - d. safety standards,
 - e. universal precautions,
 - f. hazardous materials and waste management as they apply to the course being Supervised.
13. Ability to meet with student weekly or at a regularly scheduled time to review academic progress, troubleshoot problem areas, and build on areas of strength.
14. Knowledge of the Student Services provided by the College.

FACULTY TERMS OF EMPLOYMENT

ACADEMIC AND CLINICAL PRECEPTORS

- Academic and Clinical Preceptors are not NCM employees but are rather affiliates of the college.
- Academic and Clinical Preceptors retain the right to compensation for preceptorship with the understanding that this is by a direct exchange between student and preceptor according to a mutually agreed upon remuneration contract. A copy of this contract will be kept in the student's College files.
- Academic and Clinical Preceptors have the responsibility to file with the IRS and their State taxation department on all income earned from students in NCM programs.
- As affiliates of the College, Academic and Clinical Preceptors agree to fulfill the role of preceptor with all rights and responsibilities listed under the appropriate section(s) of Preceptor Job Description: Rights and Responsibilities.

ACADEMIC GENERAL EDUCATION SUPERVISORS

- Academic General Education Supervisors are independent contractors.
- Each contract is project based but does not last longer than one trimester plus 6 weeks in order for end of trimester responsibilities to be concluded.
- Work days and hours are at the discretion of the Supervisor.
- NCM has not retained the right to control the details of a Supervisor's performance but rather retains the right to not utilize the Supervisor's services again if the performance for a trimester is not deemed adequate by the education committee. (Degree of Instruction)

- While Supervisors are evaluated by the preceptors they are supervising this is not used as a measure of the details of how the work was performed, but rather the end result, effectiveness as a Supervisor. (Evaluation System)
- Supervisors are not required to completed the Preceptor Orientation or Annual Preceptor Guidelines course but are rather given access to these training for personal and professional self development. Supervisors are hired based on an established knowledge of cultural competency and versatility, competency based education, and adult learning. (Training)
- As an independent contractor the Supervisor is responsible for the equipment and software they utilize in working for NCM. (Significant Investment)
- NCM does not reimburse Supervisors for expenses including but not limited to phone and internet as these are considered regular business expenses of the contractor. (Unreimbursed Expenses)
- There is the possibility that a contracted Supervisor will lose money during the time of contract due unknown factors involving the amount of time spend to interact and provided resource to students and supervised preceptors. (Opportunity for Profit/Loss)
- Supervisors are free and encouraged to seek out other instructional opportunities. (Services Available to the Market)
- Supervisors are paid a flat fee for the supervision of a course according to a fee schedule set by number of credit hours each trimester. (Method of Payment)
- NCM does not provide any employee benefits including but not limited to insurance, pension plans, paid vacation, sick days, and disability insurance to Supervisors. (Employee Benefits)
- There is no expectation that the relationship between contracted Supervisor and NCM will continue indefinitely, rather the contract is written for a given trimester plus no more than 6 weeks to complete deliverables. (Permanency of the Relationship)

PRECEPTOR JOB DESCRIPTION: RIGHTS AND RESPONSIBILITIES

ACADEMIC PRECEPTORS

1. Responsibility to develop and implement diverse teaching and learning strategies that accommodate the learning styles of students and that promote both acquisition and applications of knowledge and understanding.
2. Responsibility to NCM provided formative and summative assessment measures to enhance learning in a timely and consistent manner.
3. Responsibility to design learning opportunities that acknowledge, draw upon and are enriched by student diversity in the preceptorship.
4. Responsibility to design and implement instruction that aligns elements of student learning toward growth in NARM Skills, MEAC Essential Competencies, ICM Core Competencies, NCM Lumina degree-level competencies, and state and/or federal requirement and progression through course sequences (Outcomes Based Practice).
5. Responsibility to stay current and continually improve knowledge and understanding of the discipline.
6. Responsibility to continuously examine the effectiveness of teaching, counseling, librarianship and assessment methodologies in terms of student learning by engaging in the scholarship of teaching and learning.
7. Responsibility to use emerging technologies and alternative assessment methods appropriately, including the online learning resource.
8. Responsibility to continuously meet the requirements detailed under “Preceptor Qualifications and Requirements”

9. Responsibility to complete the Preceptor Orientation course and the annual Preceptor Guidelines course.
10. Responsibility to participate in the General Education Supervision process as appropriate.
11. Responsibility to provide the student with all or part of the required academic instruction, assessments, and mentorship necessary to be successful in their program of study.
12. Responsibility to provide numerical grades for the end of trimester academic courses completed.
13. Responsibility to timely submit a progress report at the end of each trimester consisting of signed copies of the following: Student-Preceptor Evaluation, Student Record with new grades, and Plan of Completion for upcoming trimester at the end of each trimester.
14. Responsibility to meet with students within 2 weeks of trimester ending to prep with student trimester reporting requirements.
15. Responsibility toward the value of student evaluations each trimester the dyad completes requirements together.
16. Responsibility to provide timely, respectful communication between and with all NCM affiliates including Students, other Preceptors, Supervisors, Staff and NCM Affiliates.
17. Responsibility to submit an official and immediate termination form when a contract with a student is being terminated.
18. Responsibility to incorporate the International Confederation of Midwives Core Competencies for Midwifery Preceptors into the teaching process.
19. Responsibility to provide the College with all current documents relevant to the status as a preceptor, including but not limited to:
 - a. Copy of certification/license (upon application and uploaded annual in the Preceptor Guidelines Course)
 - b. Copy of most advanced degree
 - c. Contract for each student enrolled in NCM
 - d. Curriculum vitae/ Resume (upon application)
 - e. 3 References (upon application)
 - f. Floor plan of academic space to be used, showing fire extinguishers, smoke alarms, and emergency exit plan (upon application)
 - g. Statement of Understanding (upon application)
20. Responsibility to be compliant with all state and federal regulations including but not limited to:
 - a. FERPA,
 - b. Copyright,
 - c. Plagiarism,
 - d. safety standards,
 - e. universal precautions,
 - f. hazardous materials and waste management.
21. Responsibility to meet with student weekly or at a regularly scheduled time to review clinical and academic progress, troubleshoot problem areas, build on areas of strength, and debrief any adverse clinical outcomes.
22. Responsibility to the awareness of Student Services provided by the College as well as a commitment to inform students of any services believed to be of benefit. These services include but are not limited to:
 - a. Academic advising
 - b. Tutoring
 - c. New student orientation
 - d. Financial aid advisement
 - e. Clinical Placement Support
 - f. Personal Counseling

- g. Career placement services, including information about NARM certification and state licensure requirements, credentials, practice, and/or employment opportunities
 - h. Social support services including how to stay connected with other NCM students
23. Responsibility to follow the following conditions with the understanding that these are conditions for probation or termination by National College of Midwifery:
 - a. Adhere to the duties set out in contract,
 - b. Provide the student with the required academic supervision,
 - c. Debrief the student to their satisfaction after an adverse clinical outcome,
 - d. Engage in mediation by college administration as requested by student,
 - e. Adhere to all NCM policies and procedures.
 24. Responsibility to report to the College any changes in a student's status, such as withdrawal from their NCM program
 25. Responsibility to participate on the Faculty Advisory Board
 - a. through trimesterly student evaluations, and the
 - b. annual FAB survey.
 26. Responsibility to file with the IRS and their State taxation department on all income earned from students in NCM programs. Responsibility and right to work with NCM in the improvement, development, implementation, and evaluation of curriculum, the evaluation and advancement of students, the evaluation of student admissions criteria, program resources, facilities, and services.
 27. Right to free counseling and mediation services provided by the College to help in disputes or challenges between students and preceptors.
 28. Right to attend and be informed of annual College Board meetings.
 29. Right to access to personal preceptor file maintained by the College.
 30. Right to compensation for preceptorship with the understanding that this is by a direct exchange between student and preceptor according to a mutually agreed upon remuneration contract. A copy of this contract will be kept in the student's College files.
 31. Right to terminate student-preceptor relationship with any student if a working relationship is not in place or fails to develop, or if the student fails to compensate according to the Student-Preceptor Contract, and will notify the College in writing of such occurrence.
 32. Right to participate in the College Grievance Procedure at any time this is needed.

CLINICAL PRECEPTORS

1. Responsibility to develop and implement diverse teaching and learning strategies that accommodate the learning styles of students and that promote both acquisition and applications of knowledge and understanding.
2. Responsibility to NCM provided formative and summative assessment measures to enhance learning in a timely and consistent manner.
3. Responsibility to design learning opportunities that acknowledge, draw upon and are enriched by student diversity in the preceptorship.
4. Responsibility to design and implement instruction that aligns elements of student learning toward growth in NARM Skills, MEAC Essential Competencies, ICM Core Competencies, NCM Lumina degree-level competencies, and state and/or federal requirement and progression through course sequences (Outcomes Based Practice).
5. Responsibility to stay current and continually improve knowledge and understanding of the discipline.
6. Responsibility to continuously examine the effectiveness of teaching, counseling, librarianship and assessment methodologies in terms of student learning by engaging in the scholarship of teaching and learning.

7. Responsibility to use emerging technologies and alternative assessment methods appropriately, including the online learning resource.
8. Responsibility to continuously meet the requirements detailed under “Preceptor Qualifications and Requirements”
9. Responsibility to complete the Preceptor Orientation course and the annual Preceptor Guidelines course.
10. Responsibility to provide the student with all or part of the required clinical experience and direct supervision.
11. Responsibility to provide signed and chart documented transcripts of clinical experiences directly supervised by preceptor.
12. Responsibility to timely submit a progress report at the end of each trimester consisting of signed copies of the following: Student-Preceptor Evaluation, Clinical Record Forms, and updated MEAC Abbreviated NARM Skills form at the end of each trimester.
13. Responsibility to meet with students within 2 weeks of trimester ending to prep with student trimester reporting requirements.
14. Responsibility to provide supervision and back-up plan based on these regulations and guidelines, which will promote the safety of clients and newborns, which adhere to the supervision requirements of the midwife’s State’s midwifery regulations and of the guidelines of all relevant State midwifery associations.
15. Responsibility to practice within the midwifery guidelines of the state midwifery association or, in the absence of state guidelines, the CPM Guidelines.
16. Responsibility toward the value of student evaluations each trimester the dyad completes requirements together.
17. Responsibility to provide timely, respectful communication between and with all NCM affiliates including Students, other Preceptors, Supervisors, Staff and NCM Affiliates.
18. Responsibility to submit an official and immediate termination form when a contract with a student is being terminated.
19. Responsibility to engage in Peer Review of all negative clinical outcomes within 60 days, and must file an NCM Incident Report with the College, within the same timeframe.
20. Responsibility to meet with student weekly or at a regularly scheduled time to review clinical and academic progress, troubleshoot problem areas, build on areas of strength, and debrief any adverse clinical outcomes.
21. Responsibility to maintain their licensure/certification as required by their state, unencumbered by holds/investigations/disciplinary action of any kind during active instruction and supervision of their NCM student(s).
22. Responsibility to provide the College with all current documents relevant to the status as a preceptor, including but not limited to:
 - a. Copy of certification/license (upon application and uploaded annual in the Preceptor Guidelines Course)
 - b. Copy of most advanced degree
 - c. Contract for each student enrolled in NCM
 - d. Curriculum vitae/ Resume (upon application)
 - e. 3 References (upon application)
 - f. Floor plan of clinical space to be used, showing fire extinguishers, smoke alarms, and emergency exit plan (upon application)
 - g. Equipment and restocking checklist for clinical facility (upon application)
 - h. Safety Form listing standards followed in practice (upon application)
 - i. Statement of Understanding (upon application)
23. Responsibility to be compliant with all state and federal regulations including but not limited to:
 - a. FERPA,

- b. Copyright,
 - c. Plagiarism,
 - d. safety standards,
 - e. universal precautions,
 - f. hazardous materials and waste management.
24. Responsibility to the awareness of Student Services provided by the College as well as a commitment to inform students of any services believed to be of benefit. These services include but are not limited to:
- a. Academic advising
 - b. Tutoring
 - c. New student orientation
 - d. Financial aid advisement
 - e. Clinical Placement Support
 - f. Personal Counseling
 - g. Career placement services, including information about NARM certification and state licensure requirements, credentials, practice, and/or employment opportunities
 - h. Social support services including how to stay connected with other NCM students
25. Responsibility to follow the following conditions with the understanding that these are conditions for probation or termination by National College of Midwifery:
- a. Adhere to the duties set out in contract,
 - b. Provide the student with the required clinical supervision,
 - c. Debrief the student to their satisfaction after an adverse clinical outcome,
 - d. Engage in mediation by college administration as requested by student,
 - e. Adhere to all NCM policies and procedures.
26. Responsibility to report to the College any changes in a student's status, such as withdrawal from their NCM program
27. Responsibility to participate on the Faculty Advisory Board
- a. through trimesterly student evaluations, and the
 - b. annual FAB survey.
28. Responsibility to file with the IRS and their State taxation department on all income earned from students in NCM programs.
29. Responsibility and right to work with NCM in the improvement, development, implementation, and evaluation of curriculum, the evaluation and advancement of students, the evaluation of student admissions criteria, program resources, facilities, and services.
30. Responsibility to disclose the volume of clinical interactions and the probable time frame necessary for completion of the program's clinical requirements with the student.
31. Responsibility to be in *direct supervision* (be physically present to diagnose, authorize, and approve all work performed) of all the clinical encounters, births, and NARM skills for which the preceptor signs off.
32. Responsibility to supervise the student's mastery (confidence and competence) of the NARM skills, using the text Practical Skills Guide to Midwifery by Sharon Evans and Pam Weaver as a guide, and to document her acquisition of these skills each trimester on the [NARM Form 201a](#) and the [MEAC Abbreviated NARM Skills List](#).
33. Responsibility to note the student's name or initials on all client charts for supervised clinical experiences, must agree to help student understand client coding with numbers or letters (no names on NCM client charts or NARM submissions) and to make these charts available for review, in case of audit by NCM or NARM.
34. Right to free counseling and mediation services provided by the College to help in disputes or challenges between students and preceptors.

35. Right to attend and be informed of annual College Board meetings.
36. Right to access to personal preceptor file maintained by the College.
37. Right to compensation for preceptorship with the understanding that this is by a direct exchange between student and preceptor according to a mutually agreed upon remuneration contract. A copy of this contract will be kept in the student's College files.
38. Right to terminate student-preceptor relationship with any student if a working relationship is not in place or fails to develop, or if the student fails to compensate according to the Student-Preceptor Contract, and will notify the College in writing of such occurrence.
39. Right to participate in the College Grievance Procedure at any time this is needed.

ACADEMIC GENERAL EDUCATION SUPERVISORS

1. Responsibility to develop and implement diverse teaching and learning strategies that accommodate the learning styles of students and that promote both acquisition and applications of knowledge and understanding.
2. Responsibility to NCM provided formative and summative assessment measures to enhance learning in a timely and consistent manner.
3. Responsibility to design learning opportunities that acknowledge, draw upon and are enriched by student diversity in the preceptorship.
4. Responsibility to design and implement instruction that aligns elements of student learning toward growth in NARM Skills, MEAC Essential Competencies, ICM Core Competencies, NCM Lumina degree-level competencies, and state and/or federal requirement and progression through course sequences (Outcomes Based Practice).
5. Responsibility to stay current and continually improve knowledge and understanding of the discipline.
6. Responsibility to continuously examine the effectiveness of teaching, counseling, librarianship and assessment methodologies in terms of student learning by engaging in the scholarship of teaching and learning.
7. Responsibility to use emerging technologies and alternative assessment methods appropriately, including the online learning resource.
8. Responsibility to continuously meet the requirements detailed under "Preceptor Qualifications and Requirements".
9. Responsibility to provide the supervised preceptor with all or part of the required academic mentorship necessary to be successful in instructing the preceptor's student in their program of study.
10. Responsibility to send a confirmation of supervision and final grade approval (or denial) to the AA when the preceptor has concluded instruction and grading and the required review has been completed.
11. Responsibility to timely submit supervision reports to the office at the end of each trimester of supervision.
12. Responsibility to provide ongoing communication, minimum 1 time per month each trimester they are supervising, to both students and supervised preceptors via Canvas. The first communication should be to introduce themselves.
13. Responsibility to load relevant, meaningful and up to date audio and video resources that the student and supervised preceptor can utilize during community instruction. This is uploaded in the "Audio/Video Resources" section of the OLR.
14. Responsibility to timely provide student requested resources and learning strategies.
15. Responsibility to timely provide supervised preceptor requested resources and teaching strategies.
16. Responsibility to request the full set of didactic assessments graded by the supervised preceptor. The request if unanswered shall be sent no more than two more times, sent every 2 weeks to both

- the student and the supervised preceptor. If the didactic assessment is not received the grade is not recorded in the student's official transcript.
17. Responsibility to evaluate per grading policy at least 10% of the didactic assessments of at least one student per trimester per supervised preceptor. This audit must be completed within 4 weeks of receipt.
 18. Responsibility to make meaningful suggestions for the augmentation, expansion and prioritization of innovative learning activities; submitting these to the Education Committee on a trimesterly basis.
 19. Responsibility to monitor and mediate online course discussions per the online discussion policy.
 20. Responsibility to provide timely, respectful communication between and with all NCM affiliates including Students, other Preceptors, Supervisors, Staff and NCM Affiliates.
 21. Responsibility to incorporate the International Confederation of Midwives Core Competencies for Midwifery Preceptors into the teaching process.
 22. Responsibility to provide the College with all current documents relevant to the status as a preceptor, including but not limited to:
 - a. Copy of certification/license (upon application and uploaded annual in the Preceptor Guidelines Course)
 - b. Copy of most advanced degree
 - c. Curriculum vitae/ Resume (upon application)
 - d. 3 References (upon application)
 - e. Floor plan of academic space to be used, showing fire extinguishers, smoke alarms, and emergency exit plan (upon application)
 - f. Statement of Understanding (upon application)
 23. Responsibility to be compliant with all state and federal regulations including but not limited to: FERPA and Copyright law.
 24. Responsibility to the awareness of Student Services provided by the College as well as a commitment to inform students of any services believed to be of benefit. These services include but are not limited to:
 - a. Academic advising
 - b. Tutoring
 - c. New student orientation
 - d. Financial aid advisement
 - e. Clinical Placement Support
 - f. Personal Counseling
 - g. Career placement services, including information about NARM certification and state licensure requirements, credentials, practice, and/or employment opportunities
 - h. Social support services including how to stay connected with other NCM students
 25. Responsibility to follow the following conditions with the understanding that these are conditions for termination by National College of Midwifery:
 - a. Adhere to the duties set out in contract,
 - b. Provide the preceptor with the required supervision,
 - c. Engage in mediation by college administration as requested by student,
 - d. Adhere to all NCM policies and procedures.
 26. Responsibility to file with the IRS and their State taxation department on all income earned through their contract with NCM.
 27. Right to participate on the Faculty Advisory Board.
 28. Right to work with NCM in the improvement, development, implementation, and evaluation of curriculum, the evaluation and advancement of students, the evaluation of student admissions criteria, program resources, facilities, and services.
 29. Right to access the Preceptor Orientation course and the annual Preceptor Guidelines course.

30. Right to free counseling and mediation services provided by the College to help in disputes or challenges between students and preceptors.
31. Right to attend and be informed of annual College Board meetings.
32. Right to access to personal preceptor file maintained by the College.
33. Right to compensation as outlined in contract with NCM.
34. Right to terminate relationship with NCM and will notify the College in writing of such occurrence.
35. Right to participate in the College Grievance Procedure at any time this is needed.

PRECEPTOR TRAINING POLICY AND PROCEDURE

Preceptor training and continuing education including updates in knowledge and technology are provided to preceptors in three main ways: courses offered online, the newsletter, and social media posts. (See Newsletter Policy and Social Media Policy for more information about these specifics.) Courses offered online include preceptor orientation which is required prior to submission of grades or clinical documentation to NCM, the annual update required to be completed by December 31 of each year.

The Preceptor Orientation course is designed to provide new preceptors with information about how to navigate the course and experientially the online platform. It is where preceptors are informed about how to supervise and document clinical experiences, affirm acceptance of the online discussion policy, learn how to partake in the preceptor opt-in list, gain access to syllabi, the digital library and the student orientation for reference. It provides easy access to the NCM Handbook, instructional planning, teaching, grading and supervision. How to submit end of trimester grades, clinicals, and evaluations including optional forms for NCM improvement. The orientation course provides an overview of the college including NCM/s mission, values, and goals, beginning training in cultural awareness and humility, competency based education, healthy student and preceptor relationships, how to establish ground rules and contracting recommendations between student and preceptors, and preparing and nurturing preceptor/student relationships. The orientation course provides methodology for honest and respectful communication, understanding plagiarism, HIPAA training resources, NCM’s policy on incivility and workplace violence, evaluation, mediation, grievance and termination of contracts, and practicing nonviolent communication. The course also introduces preceptors to NCM’s scholarship program, includes a course evaluation and a certificate of completion.

PRECEPTOR GUIDELINES [YEAR]

The course is created in January of each year and runs for the calendar year. The course is called “Preceptor Guidelines [YEAR]”. Newly contracted preceptors are only required to complete the Preceptor Orientation course and will be enrolled in the Preceptor Guidelines course the next calendar year. The Education Committee develops the course using the outline below. Staff sends a list of Active Preceptors to the CDO the first week of January based on the preceptors who have completed the orientation course and have a current license/certificate on file. The current license and certificate will either be in the formstack preceptor application/enrollment if they are new or in the current Preceptor Guidelines course by December 1. (see definition of Active Preceptor for more information) The CDO enrolls active preceptors into the Preceptor Guidelines course for the appropriate year in January and the preceptors have 12 months to complete the training. All active preceptors as of the start date are added to the course and are required to complete the course by December 31 of each year.

ADDING ADDITIONAL PRECEPTOR POLICY AND PROCEDURE

Additional preceptors may be added after a student begins their apprenticeship. New preceptors to NCM must fill out the complete preceptor application, take the current Preceptor Guidelines course and complete a student/preceptor contract.

- Preceptors who have been previously approved by NCM must sign a student/preceptor contract. All information in the preceptor file must be current. Preceptor must complete Preceptor Guidelines course for that year if not already completed.
- All student/preceptor contracts must be approved by the NCM office. Work done prior to approval will not count towards student's program. Once the contracts are approved, student and preceptors are notified by email.
- A new preceptor will be sent a notification email with the start date of student/preceptor enrollment and welcome letter (if applicable).

MULTIPLE PRECEPTORS FROM THE SAME FACILITY POLICY AND PROCEDURE

Multiple preceptors may be added from the same facility. Each preceptor must submit the following:

- Appropriate level NCM Contract between student, preceptor and NCM
- Preceptor application form
- Resume/CV
- Copy of current license
- 3 references
- Preceptor Facility Verification statement
- Oversight form

The Facility will need to fill out

- Safety form – fire inspection must be included as well as lines 4 & 5 with protocols listed
- Facility diagram
- Restocking form

All forms can be found on our website at www.midwiferycollege.edu. Student/preceptor contract for multiple preceptors at the same facility are processed the same as other student/preceptor contracts.

- All student/ preceptor contracts must be approved by the NCM office. Work done prior to approval will not count towards student's program. Once the contracts are approved, student and preceptors are notified by email.

PRECEPTOR/INSTRUCTOR QUALIFICATIONS AND REQUIREMENTS POLICIES

QUALIFIED ACADEMIC PRECEPTORS AND SUPERVISORS POLICY

NCM's requirements related to qualified faculty seek to ensure that students have access to faculty members who are experts in the subject matter they teach and who can communicate knowledge in that subject to their students. These requirements hold with the Higher Learning Commission's Guideline Determining Qualified Faculty Through HLC's Criteria for Accreditation and Assumed Practices, "Faculty teaching in career...and occupational associate's degree programs should hold a bachelor's degree in the field and/or a combination of education, training and tested experience." The preceptor must hold at least the academic credential sought by the midwifery student. College policy is to recognize the CPM credential or local state midwifery licensing as equivalent to an ASM degree. This document refers to this as "Associate/CPM Equivalent" and recognizes these preceptors as Qualified Midwifery Faculty and experts in midwifery. All preceptors participate in yearly supervision in the form of Review of Student Evaluations and Annual Preceptor Education. All courses with the prefix "MW" are midwifery specific courses. All courses with prefixes other than "MW" are considered General Education courses.

Midwifery Courses

Qualified Midwifery Faculty (preceptors) in the ASM programs may teach courses with the prefix "MW". They must show evidence of a valid current national certification as a midwife (CPM, CM, CNM) AND/OR licensure as a practitioner who provides women's health or maternity care AND evidence of at least two years of current, full-scope midwifery practice. Full-scope experience is defined as having the skills and abilities as defined by the NARM Competencies.

Qualified Midwifery Faculty (preceptors) in the BSM programs may teach courses with the prefix "MW". They must show evidence of a valid current national certification as a midwife (CPM, CM, CNM)

AND/OR licensure as a practitioner who provides women's health or maternity care AND evidence of at least two years of current, full-scope midwifery practice AND a Bachelor's degree. Full-scope experience is defined as having the skills and abilities as defined by the NARM Competencies.

General Education Courses

Qualified General Education Faculty (preceptors) in the ASM program teach without trimesterly supervision are primarily identified by holding credentials in a pre-approved degree specific to their area of instruction at the Bachelor's level (see Pre-Approved List of Disciplines/Subfields) OR,

- must gain approval from NCM to qualify through one of the following pathways:
 - Experience Pathway: must have an Associate's degree or higher which is not pre-approved but which is related to the subject area of instruction and 3 years relevant experience with at least 6 months experience within the last 5 years, OR
 - College Credit Pathway: 18 college credits in the specific subject area with at least 9 credits within the last 5 years.

Qualified General Education Faculty (preceptors) in the BSM programs who teach non-MW General Education courses without trimesterly supervision must hold a pre-approved certificate or degree specific to their area of instruction and have (see Pre-Approved List of Disciplines/Subfields) OR,

- must gain approval from NCM to qualify through one of the following pathways:
 - Experience Pathway: must have a Bachelor's degree or higher which is not pre-approved but which is related to the subject area of instruction and 3 years relevant experience with at least 6 months experience within the last 5 years, OR
 - College Credit Pathway: 18 college credits in the specific subject area with at least 9 credits within the last 5 years.

To qualify through either the Experience Pathway or the College Credit Pathway requires a petition to the CDO and the approval from the Education Committee. See [Petitioning to Teach as Qualified General Education Faculty Policy and Procedure](#) for more details.

Qualified General Education Faculty are not required to be Qualified Midwifery Faculty (they are not required to be certified/licensed practitioners who provide women's health or maternity care).

Minimally Qualified General Education Faculty (preceptors) in the ASM programs may teach non-MW General Education courses but must be supervised by a Qualified General Education Faculty provided by NCM. There are no Minimally Qualified General Education Faculty exempt from Supervision. [Qualified Midwifery Faculty for the ASM program](#) are all considered minimally qualified General Education Faculty. NCM does not work with Minimally Qualified General Education Faculty who do not qualify as Midwifery Faculty.

Minimally Qualified General Education Faculty (preceptors) in the BSM programs may teach non-MW General Education courses but must be supervised by a Qualified General Education Faculty provided by NCM. There are no Minimally Qualified General Education Faculty exempt from Supervision. [Qualified Midwifery Faculty for the BSM program](#) are all considered minimally qualified General Education Faculty. NCM does not work with Minimally Qualified General Education Faculty who do not qualify as Midwifery Faculty.

PETITIONING TO TEACH AS QUALIFIED GENERAL EDUCATION FACULTY POLICY

Tested experience may substitute for an earned credential or portions thereof; this allows NCM to determine that a faculty member is qualified based on experience that the Education Committee determines is equivalent to the degree it would otherwise require for a faculty position. This experience should be tested experience in that it includes a breadth and depth of experience outside of the classroom in real-world situations relevant to the discipline in which the faculty member would be teaching. NCM does not exclusively consider years of teaching experience as "tested experience", although other experiential factors may be considered on a case-by-case basis by the Education Committee. Tested experience qualifications are established for specific general education courses and include types of certifications or additional

credentials, continuing education credits and experiences. Petitioners are expected to have a strong case for tested experience qualification and not just a desire to not be under supervision.

PETITIONING TO TEACH AS QUALIFIED GENERAL EDUCATION FACULTY PROCEDURE

Preceptors who do not qualify via the Pre-Approved List of Discipline/Subfield to teach a General Education Course without trimesterly supervision must provide the following for each General Education (GE) course they wish to teach at the Qualified GE Faculty Level (without supervision). With this information, the Education Committee will consider their petition. An email of petition to teach without supervision should be sent to the Chief Development Officer detailing:

- the exemption pathway the preceptor is seeking
- the names of the course(s) for which they are seeking exemption from supervision
- If seeking approval through the Experience Pathway, they must submit proof of:
 - a Bachelor’s degree or higher which is not pre-approved but which is related to the subject area of instruction and
 - 3 years relevant experience with at least 6 months experience within the last 5 years
- If seeking approval through the College Credit Pathway, they must submit proof of:
 - 18 college credits in the specific subject area with at least 9 credits within the last 5 years.

Approval as Qualified GE Faculty in one area does not grant the preceptor to be Qualified GE Faculty in any other general education area.

The Education Committee peer reviews the petition within 3 business days of receipt and responds no later than 5 business days from the initial petition with either a request for more information, approval or denial.

REQUIRED ACTIONS OF MINIMALLY QUALIFIED (SUPERVISED) GE PRECEPTORS

Throughout the trimester, Minimally Qualified GE Faculty teaching under supervision will provide their supervisor with the following for each general education course they are teaching:

- Resources (websites, podcasts, etc) used to teach this course (not what the student found but rather any additional resources the preceptor provided to supplement the student's learning).
- Requests for resources as well as adult learning and teaching mentorship in the specific discipline.

At the end of the trimester, preceptors teaching under supervision will provide their supervisor with the following for each general education course they are teaching:

- An electronic copy of the didactic assessments completed (it is acceptable for some of these to have been completed in discussion and or group and therefore have nothing entered),
- A copy of test scores
- The student’s grade, which the supervisor will approve once the above documentation has been reviewed.

SUPERVISOR DESIGNATION POLICY

Qualifying at the Qualified GE Faculty level in a given area does not mean that NCM considers the faculty member a Supervisor. The designation of Supervisor is given by the Education Committee and requires an employment contract with NCM.

PRE-APPROVED LIST OF DISCIPLINES/SUBFIELDS FOR DETERMINING QUALIFIED GE FACULTY IN SPECIFIC GENERAL EDUCATION COURSES

Area I: Communications			Credits	Degrees Applicable	Pre Approved Masters Degrees for Supervising Faculty for Specific Subject Areas	Pre Approved Masters Degrees for Supervising Faculty for General Subject Areas
A001	ENG200G	College Composition	4.00	ASM/BSM	Communications	English, Literature
	ENG202G	Bus. & Prof. Communications	3.00	ASM/BSM	Communications, Business, Administration	
A001B	(BSM)ENG404	Writing & Presenting on Midwifery Projects	4.00	BSM	Communications	
Area II: Mathematics						
B001	HON211G	Statistics	3.00	ASM/BSM	Engineering (all disciplines), Mathematics, Physics, Statistics, Computer Science	
	MATH112G	College-Level Math	3.00	ASM/BSM		

Area III: Laboratory Science						
C001	BIO120	Fetal Development	1.00	ASM/BSM	Genetic Counselor Certified Nurse Midwife Certified Midwife	Medical Doctor, Naturopathic Doctor
	BIO155G	Anatomy and Physiology	4.00	ASM/BSM	Physical Therapy	
	HON205G	Applied Microbiology	3.00	ASM/BSM	Microbiology	
	SOC102	Genetic Screening	1.00	ASM/BSM	Genetic Counselor Certified Nurse Midwife Certified Midwife	
	HON393G	Community Health	3.00	ASM/BSM	Public Health, Community Health, Health Education	
C002	SCI122G	Chemistry	3.00	ASM/BSM CA requirement	Chemistry (all disciplines)	
Area IV: Social/Behavioral Sciences						
D001	HON223G	Human Sexuality	3.00	ASM/BSM		Psychology Counseling (all disciplines), Sociology
	HON248G	Cultural Issues	3.00	ASM/BSM	Social Work, Human Services	
	PSY224	Communication & Counseling	1.00	ASM/BSM	Communications	
	SOC104	Child Growth & Development	1.00	ASM/BSM CA requirement	Early Childhood Education	
D002	HON225G	Midwifery Ethics	2.00	ASM/BSM	Ethics	Philosophy, Law, Political Science
	HON390G	Laws/Regulations	3.00	ASM/BSM	Public Health	
D002B	(BSM)HON450	Applied Topics in Midwifery Practice: Develop Policy & Procedures	4.00	BSM		
Area V: Humanities & Fine Arts						
E001	HON220G	Midwifery Literature & Art	3.00	ASM/BSM	History, Art	English, Literature
	HON222G	History of Midwifery	3.00	ASM/BSM	History	

FACULTY TYPES

ASM PRECEPTOR TYPES

	I. Minimum Degree Required	II. Area of Degree	III. Minimum License and Clinical Requirement	IV. Alternative qualifications to years of experience in the specific academic area	V. Supervision	
					Trimesterly	Yearly (Review of Student Evaluations and Annual Preceptor Education)
Clinical Preceptor	Associate/CPM Equivalent	see III	Yes	n/a	No	Yes
ASM Qualified Midwifery Faculty (teaches only MW Courses)	Associate/CPM Equivalent	see III	Yes	n/a	No	Yes
ASM Minimally Qualified General Education Faculty (supervised)	Associate/CPM Equivalent	any	Yes	n/a	Yes	Yes
ASM Qualified General Education Faculty	Bachelors	pre-approved specific area of instruction	n/a	*see Petition Process	No	Yes

BSM PRECEPTOR TYPES

					V. Supervision

	I. Minimum Degree Required	II. Area of Degree	III. Minimum Clinical Requirement National certification as a midwife (CPM, CM, CNM) AND/OR licensure as a practitioner who provides women's health or maternity care (minimum 2 years current full-scope midwifery practice)	IV. Alternative qualifications to years of experience in the specific academic area	Trimesterly	Yearly (Review of Student Evaluations and Annual Preceptor Education)
BSM Qualified Midwifery Faculty (teaches only MW Courses)	Bachelor	any	Yes	n/a	No	Yes
BSM Minimally Qualified General Education Faculty (supervised)	Bachelor	any	Yes	n/a	Yes	Yes
BSM Qualified General Education Faculty	Bachelor	pre-approved specific area of instruction	n/a	*see Petition Process	No	Yes

SUPERVISOR TRIMESTER RESPONSIBILITIES POLICY AND PROCEDURES

In keeping with the HLC requirements related to qualified faculty, NCM will not terminate and may renew contracts with current Supervisors. However, this updated policy on Determining Qualified Faculty will be utilized to hire any new Supervisors with all current Supervisors required to meet the new criteria by September 1, 2019.

Supervision of instructional lesson planning and teaching is provided on an institutional level through the Preceptor Orientation Course and through the Annual Preceptor Guidelines Course.

The Registration course forces dyads to be enrolled by staff so that staff can inform a supervisor who they will be supervising, this also allows for late trimester enrollment without compromising supervisor communications. The supervisor provides ongoing communication, minimum 1 time per month each trimester they are supervising, to both students and supervised preceptors via Canvas. The first communication should be to introduce themselves.

The Supervisor is responsible for loading relevant, meaningful and up to date audio and video resources that the student and supervised preceptor can utilize during community instruction. This is uploaded in the "Audio/Video Resources" section of the OLR.

The Supervisor is responsible for providing any student requested resources and learning strategies within 1 week of the request. The Supervisor is responsible for providing any supervised preceptor requested resources and teaching strategies within 1 week of the request.

The Supervisor is responsible for requesting the full set of didactic assessments graded by the supervised preceptor. The request if unanswered shall be sent no more than two more times, sent every 2-4 weeks to both the student and the supervised preceptor. If the didactic assessment is not received the grade is not recorded in the student's official transcript.

The Supervisor is responsible for evaluating per grading policy at least 10% of the didactic assessments of at least one student per trimester per supervised preceptor. This audit must be completed within 4 weeks of receipt.

The Supervisor is responsible for sending a confirmation of supervision and final grade approval (or denial) to the AA when the preceptor has concluded instruction and grading and the required review has been completed.

Supervisors are expected to make meaningful suggestions for the augmentation, expansion and prioritization of innovative learning activities; submitting these to the Education Committee on a trimesterly basis.

When students choose to engage in the optional online discussions via the OLR it is the responsibility of the Supervisor to monitor and mediate these discussions per the online discussion policy. Students and preceptors are made aware of the responsibilities and the availability of the Supervisor before they begin the course.

PRECEPTOR QUALIFICATION REVIEW PROCEDURE

Preceptors must complete the Preceptor Orientation course prior to being enrolled. Preceptor qualifications are reviewed during the enrollment process. Once a preceptor is approved, both student and preceptor are notified by email. New preceptors are sent an enrollment packet in the mail. Potential preceptors who do not meet NCM qualifications are notified and their paperwork is returned to them.

CHANGING PRECEPTORS/TERMINATION OF STUDENT-PRECEPTOR CONTRACT

The student-preceptor contract lasts for as long as the student and preceptor:

1. Indicate on the contract,
2. Continue working together during enrollment in NCM,
3. Contract ends upon graduation or upon completion of a Termination of Contract form with the preceptor.

If a student or preceptor decides to discontinue their working relationship, both student and preceptor fill out a "Termination of Student and Preceptor Contract" form and submit it to the office. Any work completed by the student should be signed off by the preceptor and submitted to the College within 30 days. Students should make sure that financial obligations are fulfilled. If the working relationship ends not amicably, mediation is available through the office only if both parties agree.

ACADEMIC COURSE INSTRUCTION, EVALUATION, GRADING & CLINICAL TRAINING

PRECEPTOR TEACHING GUIDES

Preceptors and Students are encouraged to use the teaching and learning materials in tandem.

Preceptor Guidance and Teaching Requirements:

The Preceptor creates a learning plan with the Student and assures appropriate degree-level work:
Completion of a "Plan of Completion" prior to starting work together, clarifies the timeframe and expectations of progress throughout the program.
<u>For Academic requirements:</u> The Student and Preceptor use <u>NCM's course syllabi</u> , which outline the time/credit requirements, Learning Activities, Resources, Learning Objectives, and Evaluation Methods.
<u>For Clinical requirements:</u> The Student and Preceptor use <u>NCM's Clinical Record Forms and Instructions</u> , which outline the requirements and the level of student demonstration for each clinical experience, the type of preceptor supervision required, and the student demonstration necessary to be awarded credit. NARM Skills must be completed following the guidelines in Practical Skills Guide for Midwifery by Evans and Weaver, and must be completed at "Mastery" level.
The Preceptor evaluates the Student Learning Outcomes:
<u>For Academic courses:</u> The Student will be able to answer the Learning Objective questions, and will complete course content and credit requirements. They will be able to utilize this information as it corresponds to the practice of midwifery. The Student will be able to apply the information to clinical and real-world practice.
<u>For Clinical and NARM Skills:</u> The Student will be able to competently and confidently perform all skills when appropriate, and demonstrate all clinical skills to "mastery" level prior to being signed off on Clinical Record Forms.
The Preceptor tailors their teaching approach to the Student's learning style:
Regularly scheduled meetings between Student and Preceptor allow time to review clinical and academic progress, troubleshoot problem areas, build on areas of strength, and debrief any adverse clinical outcomes.
The Preceptor addresses any obstacles or resistance the Student may have to learning:
Stating clear expectations and following-through with review and evaluation of student work in a timely manner allows for identification of student obstacles or resistance to learning, as well as addressing the student needs. This interaction and feedback gives the Student and Preceptor the ability to experiment or adjust to improve Student learning.
The Preceptor maximizes the Student's special talents:
Through encouragement, personal interaction, and immediate feedback, the Preceptor reinforces good habits and addresses any learning, study or performance issues for the Student that need adjustment. This allows the building of Student confidence and cements the Student's special talents, while allowing for growth and building of new skills.
The Preceptor uses the following FORMATIVE (learning process) assessment tools:
NCM Formative Assessment Tools include the Preceptor's personal evaluation of the Student's demonstration of clinical skills to ensure the student achieves " <u>Mastery</u> ."
NCM Clinical Record Forms and instructions state the level of student demonstration required in order to receive credit. The Preceptor personally evaluates each clinical experience that they signs off. Generally the student must demonstrate completion of each Clinical and NARM Skill to the preceptor, to "mastery" level of competence and confidence.

The Preceptor uses the following SUMMATIVE (final evaluation, such as testing) assessment tools:

NCM Summative Assessment Tools include Learning Objectives and Tests completed during NCM Academic courses.

The Syllabus for each academic course outlines the Evaluation Methods that the Preceptor will use to assess Student achievement, and clarify how to grade each course. The minimum score required for a passing grade is 80%.

Preceptors resolve Incident Reports in the following manner:

Preceptors agree to engage in Peer Review of all negative clinical outcomes within 60 days, and must file an NCM Incident Report with the College, within the same timeframe.

ACADEMIC COURSE SYLLABI POLICY

Syllabi can be found on NCM Online Platform Canvas. Each course syllabus gives the following information that the student & preceptor will need to complete and evaluate each course:

COURSE TITLE

Module and Name of the Course

CREDITS

Number of credits for the course.

COURSE DESCRIPTION

A basic overview of the topics to be covered.

LEARNING OBJECTIVES

Learning objectives are identified through the linking of MEAC Essential Competencies, NARM Knowledge and Skills, MANA Core Competencies, ICM Essential Competencies, and the NCM Degree Qualification Profile.

LEARNING ACTIVITIES

- A. Student reads appropriate sections from the Learning Materials/Resources.
- B. Student answers the questions listed in the didactic assessments by researching the learning materials/resources for the course and correctly citing the sources and page numbers for each of their answers.
- C. Student presents the answers to the questions listed in the didactic assessments for review by preceptor.
- D. Student participates in preceptor elaboration/discussion of didactic assessments.
- E. Student participates in recommended role-playing and/or clinical interactions

Note: The clinical requirement of NARM /Clinical Skills is completed at any time throughout the ASM apprenticeship during actual clinical practice and is NOT a requirement to complete this academic course. Typical clinical manifestations of knowledge learned in this course are identified in the learning objective document above.

LEARNING MATERIALS / RESOURCES

Please use textbooks less than 5 years old or most recent edition.

Recommended texts and resources are listed on each individual syllabus.

EVALUATION TOOLS / METHODS

Minimum passing grade for all courses is a cumulative 80% / B-. Students and preceptors are encouraged to work together until the student masters the information.

Grades are not recorded until both the student and preceptor submit end of trimester evaluations.

The student's final grade for the course is based on preceptor evaluation of the following:

- A. The preceptor evaluates each answer based on NCM rubrics.

B. Student's answers should reflect a thorough review of current literature regarding best current practices in midwifery care.

C. Each answer should be formed in the student's own words or paraphrased from the text. The answer should be minimal, not a rewrite of the entire text, but enough to show appropriate comprehension of the learning objective.

D. Student identification of sources and page numbers for each of the didactic assessments. (Preceptor should do a random check to determine that sources cited are correctly identified.)

Course credit: One Academic credit equals approximately 15 hours of formal time plus 30 hours of additional study or homework. Formal time is defined as the amount of time taken to answer the assignments to the level of 80% and to complete any learning activities to the preceptor's satisfaction, including any time spent face to face with the preceptor. Informal time includes any time spent actively reading relevant sources and textbook/s, researching Learning Objectives, and studying for examinations. Percentage grade breakdown of course activities is provided within Canvas and in general look as follows, Assessments are weighted by group:

Group	Weight
QUICK LINK	0%
Audio/Video Resources	0%
Enrichment Activities	20%
Discussions	15%
Exercises	50%
Exams	15%
Total	100%

BSM ACADEMIC COURSE SYLLABI POLICY

BSM syllabi follow the same basic flow presented above.

DIDACTIC ASSESSMENT DOCUMENT POLICY

As of 2019 all new Didactic Assessment Documents will be converted to this format on review/update.

Header: Course name and date of Update

Course Title

Credits

Review the Course Syllabus for the Course Description, Learning Objectives, Learning Activities, Learning Materials/Resources and Evaluation Methods.

Enrichment Activities *Weighted Percent*

specific exercises associated with this assignment group

Discussions *Weighted Percent*

specific exercises associated with this assignment group

Exam *Weighted Percent*

not that preceptors have link to tests

Exercises *Weighted Percent*

specific exercises associated with this assignment group

ACADEMIC COURSE EVALUATION

Minimum passing grade for each course is a cumulative 80%. Students and preceptors are encouraged to work together until the student masters the information.

ACADEMIC GRADING POLICY

All assignments must be completed a grade of 80% or higher in the course is required. Academic evaluation: Grades must be 80% or higher. Lower grades are not accepted and the course must be retaken. As of 9/1/2018, NCM does not accept letter grades or “Pass”/“Fail” grades. “Pass” grades given prior to 9/1/2018 will be calculated as 80% and letter grades given prior to 9/1/2018 will be calculated to the lowest number per letter grade as described in table below. When grading assignments preceptors should use the rubrics provided. Transfer grades for general education courses from other accredited colleges and universities are accepted to C-.

Grades:		
Letter	Number	GPA
A+	97-100	4.0
A	94-96	3.9-4.0
A-	90-93	3.5-3.8
B+	87-89	3.2-3.4
B	84-86	2.9-3.1
B-	80-83	2.5-2.8
C+	77-79	
C	74-76	
C-	70-73	
D+	67-69	
D	65-66	
F	0-64	
N/A	Not Applicable	
Cert	Certified by an approved certifying agency such as American Heart Association or American Red Cross or Equivalent	
I	Incomplete	
W	Withdrawn	
TX or TR	Transfer credits from other accredited institution may fulfill some of the NCM course requirements. Credit will be determined at the discretion of NCM based on course content and grade.	

GRADING RUBRIC

Grading rubrics are provided to preceptors via the preceptor orientation course and throughout Canvas when linked to assignments. Master rubrics are maintained by the CDO in the online platform under institutional rubrics and include but are not limited to rubrics for the following types of assignments:

- Case Studies
- Client Handouts
- Informed Decision Making
- Community Resources
- Client Demonstrations
- Role Playing
- Definition/Single Answer Questions
- Descriptive Assessment
- Providing Critical Example
- Flashcards
- Discussion Questions
- Drawings
- Essay/Evaluation/Opinion/Multiple Question Answer

- Explanations
- Lists
- Presentation of Responses
- Research Summary
- Class Outlines
- Survey
- Clarity of COmmunication
- Comprehensive Information
- Concise Communication
- Layout/Organization
- Level of Engagement
- Preparedness
- Presentation
- Respectful Communication
- Reliable Resource

Criteria used in the rubrics include but are not limited to:

- Accurate Information
- Articulate COmmunication

Evaluation Tools / Methods

All courses use the following Evaluation Methods. A few courses have additional methods used. Refer to the course syllabus for methods and percentages given for each course. In general the final grade for the course is based on preceptor evaluation of the following:

- Exercises within the didactic assessment document count for 50% of the final grade. The preceptor evaluates each answer based on three elements:
 - Answers should reflect a thorough review of current literature regarding best current practices in midwifery care.
 - Each answer should be formed in the student's own words or paraphrased from the text. The answer should be minimal, not a rewrite of the entire text, but enough to show appropriate comprehension of the learning objective.
 - Student identification of sources and page numbers for each of the didactic assessments. (Preceptor should do a random check to determine that sources cited are correctly identified.)
- Enrichment Activities, including research essays and summaries of articles: 20%
- Discussions: 15%
- Tests and Exams: 15%

INSTRUCTION OF ACADEMICS, CLINICAL VISITS/NARM SKILLS, AND BIRTHS:

ELEMENTS OF ACADEMIC TRAINING/LEARNING

- Please refer to the individual course syllabi on NCM online platform Canvas.
- Preceptor and student review the course syllabus for credit value, learning objectives, learning materials, learning activities, and evaluation methods.
- Student reads text(s)/source listed in the syllabus.
- Student answers didactic assessments from course syllabus, and cites text and page number where they found the answer.
- Preceptor teaches course, grading assignments using rubric provided and being an active participant in the student's enrichment activities and discussions.

ACADEMIC LESSON PLANNING OVERVIEW

See Preceptor Orientation Course for detailed information on developing academic lessons.

CRITERIA USED TO ASSESS STUDENT READINESS FOR CLINICAL TRAINING

The preceptor determines the criteria they use to assess student readiness for clinical training following the clinical requirements for the program the student is enrolled in. Generally, NCM recommends that students practice the clinical skill at least one time with the clinical preceptor prior to attempting on or with a client. There may however, be times that this is not possible.

CLINICAL GRADING/EVALUATION POLICY

The student must complete each NARM Skill or clinical encounter to mastery (see definition in this document or on NCM clinical forms)..

LESSON PLAN FOR CLINICAL VISITS (ACTUAL OR ROLE PLAY) AND NARM SKILLS

(Please see Student Orientation Course for NARM Skills Requirements and Comprehensive Clinical Care Requirements, as well as recording and record keeping guidelines)

Briefing

Briefing ensures that the student knows what is the purpose of the visit is, knows what they has to learn or practice during the visit, knows what to do to be an effective assistant, and knows how to conduct herself/himself during the visit.

- Who is the Client?
- Purpose / Goals for the visit?
- Learning Objectives (for the student): “By the end of this visit you will be able to..._____”
- Issues, if any (this could be special considerations for the particular client or for the procedures you are going to perform)
- Student conduct during visit birth (very clear Expectations), Example: stand to one side and watch and chart the visit. Or- Student will perform pelvic exam. Or- Preceptor will demonstrate and then will ask the student to practice_____.
- What should a student do if they have a question or disagree with the preceptor during the visit? Example: ask at debrief, do not do so in front of the client, or for technical questions they can ask the preceptor during the visit.
- Step-by-step instructions for the skill that you are going to perform.
- Important notes- Example: When you are going to touch the client, don’t forget to ask first, when you use the stethoscope, don’t forget to make sure it is warm first, etc.

During the visit

Preceptor demonstrates and then students practice one at a time under the *direct supervision*** of the preceptor.

Appropriate Charting & *preceptor and student initials must appear at the appropriate places.*

Debrief

Debriefing ensures that the student knows what they learned/practiced, has instant feedback on what they did well and specifically what to do to improve.

- Praise: “I really liked the way you _____”
- Identify problems, give specific corrections: “I saw some problems_____. Next time avoid the problem by doing _____.”
- Restate Learning Objectives: “You are now able to _____.”
- Restate Value: Answer the question why did we do what we did and why it is helpful or necessary to the midwife or client.
- Preceptor immediately signs off relevant clinical and NARM forms for items which the student has achieved mastery*. If mastery* was not achieved, the preceptor must immediately explain why it was not achieved and explain how mastery can be achieved later.
- Ask the student/s if they has Questions?

PREPARATION FOR BIRTHS FOR STUDENTS IN TRAINING

Briefing: *Briefing ensures that the student knows vital information about the birthing person. Suggested information to include:*

- Client’s Name
- Client’s family or people attending the birth or doulas, etc.
- Supervisory midwife (Preceptor/s)
- Primary midwife (Student/s)
- Assistant midwife (Student/s)
- Issues, if any for the particular client or location or type of birth: ie waterbirth.
- Learning Objectives (for each student): “By the end of this birth you will be able to..._____”

- Student conduct during birth (very clear Expectations), for example: the Assistant midwife will stand to one side and watch and chart the birth. Help whenever and wherever asked. Or Student acts as Primary Midwife under direct supervision of the Preceptor.
- What should a student do if they have a question or disagree with the preceptor during the birth? Example: ask at debrief, do not do so in front of the client. Or ask the preceptor out of the presence of the client.
- Important notes- Example: When you are going to touch the client, don't forget to ask first, when you use the stethoscope, don't forget to make sure it is warm first, etc.

During the birth:

- Preceptor *Directly supervises*** students acting as primary midwife and assistant midwife.
- Appropriate Charting & *preceptor and student initials must appear at the appropriate places.*

Debrief:

- Praise: "I really liked the way you _____"
 - Identify problems: "I saw some problems _____. Next time avoid the problem by doing _____."
 - Restate Learning Objectives: "You are now able to _____."
 - Restate Value
 - Preceptor immediately signs off relevant clinical and NARM forms for items which the student has achieved mastery. If mastery was not achieved, the preceptor must immediately explain why it was not achieved and explain how mastery can be achieved later.
 - Chart Review
 - Answer additional student questions
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STUDENT POLICIES

REGISTRATION COURSE DEVELOPMENT POLICY AND PROCEDURE

Students affirm acceptance of policy and handbook revisions in each registration course. A link to the new/revised handbook is provided. A registration course is set up for each program. The registration is based on the block system with a new block opening up when a student affirms completion of a previous block. To make a new trimester registration a copy of the previous registration is made and links to the courses are rechecked. General Education courses cannot be self-enrolled the student must email the CDO with the name of their academic preceptor, their email and the GE course(s) they wish to be enrolled in. This allows the CDO to contact the Supervisor that a new dyad has been added to their course and triggers the Supervisor to contact the dyad with the requirements and available resources.

STUDENT'S RIGHTS AND RESPONSIBILITIES

Students agree to all of the following:

1. Must have read and understand the description of the curriculum in the National College of Midwifery Student Handbook for the Associate Degree in Midwifery.
2. Must keep a current working email address as well as current contact information on file with the College, and understands that if the College is unable to contact the student for a period of 9 months, without prior arrangement, the student will be withdrawn.
3. Understand that enrollment by itself does not guarantee the issuing of a degree. The Associate of Science in Midwifery Degree will be awarded only when all of the following are completed and documentation of all is on file at the College administration headquarters:
 - When skills, clinical and academic course requirements are successfully completed;
 - When outside examination is successfully completed;
 - When the student has paid all college fees in full
4. Understand that if the student chooses not to take an outside examination, after completion of all other coursework, or if the student fails the exam, the National College of Midwifery will issue a Certificate of Midwifery.
5. If the student has not completed their program within 3 years, the student must submit a plan for completion to NCM signed by preceptor and student, and the student will be responsible for annual accreditation fees. The student further understands that ASM is a 3-year equivalent program, which can be completed from 2 to 5 years. The 5-year limit for completion of the degree includes any time taken on inactive status, and that the annual accreditation fee must be paid even during those years the student may be on inactive status.
6. Must understand that the student, not the preceptor, is responsible for organizing and directing the student's studies and all attendant NCM paperwork.
7. Must submit a progress report consisting of copies of the following: Student-Preceptor Evaluation, Student Record with new grades, Clinical Record Forms, and updated MEAC Abbreviated NARM Skills form. All submissions must be signed and dated by the supervising preceptor and all work submitted to the College must be accompanied by an evaluation with every preceptor with whom the student has worked during the trimester.
8. Must agree to contact NCM for counseling and/or mediation services in the case of any conflict or dispute with the preceptor
9. Understands that the student will not receive their diploma and final transcript until any outstanding fees are paid to the College.

10. Must complete all 8 academic modules of the NCM Learning Objectives, including: 12 credit hours in Math and Human Life Science, 14 credit hours in Critical Thinking and Psychosocial Issues, 6 credit hours Antepartum Management, 6 credit hours in Intrapartum Management, 6 credit hours in Postpartum Management, 6 credit hours in Newborn Management, 6 credit hours in Well-Woman Reproductive Health Care, and 25 credit hours in Professional Issues.
11. Must meet Clinical Experience Requirements adhering to the requirements of the North American Registry of Midwives (NARM). These clinicals must take place over at least 2 years under the direct supervision of an approved, credentialed preceptor/s with whom the student has a Contract between the Student, Preceptor, and the National College of Midwifery on file with NCM. These can take place at a single site or a variety of sites.
12. Must note student's presence at supervised clinical experiences in patient charts by name or initials, subject to audit.
13. Understand it is the student's responsibility to keep a detailed and updated logbook of all their clinical experiences and to have their preceptor personally supervise, evaluate and sign off on all their clinical experiences.
14. Understand that if the student desires more clinical experience they can request the College refer the student to a high volume birth clinic.
15. Understand that NARM requires the signatures of 2 preceptors on 4 of the NARM Skills.
16. Understand that all academic and clinical work submitted towards the student's degree is subject to approval by NCM.
17. The National College of Midwifery does not issue 1098 T forms. NCM does not qualify as an eligible educational institution because chooses not to participate in the Department of Education's student aid programs. Please refer to IRS Publication 970.
18. Understand that there are different routes of entry to midwifery. The National College of Midwifery trains Direct Entry Midwives not Nurse Midwives.
19. Understand that the National College of Midwifery does not have a career placement program and that upon graduation; it is the student's, not the College's responsibility to find employment as a midwife.
20. Understand that the legal status of midwifery varies from state to state. It is the student's responsibility to know the laws in the state in which the student will practice upon completion of the NCM program.
21. Understand the steps the student must take to become a CPM and/or gain state licensure.
22. Understand that if the student is planning to continue with another college or university, it is their responsibility to check with them if they will accept credit from NCM.
23. Understand that if the student plans to seek licensure in **California** they must complete two additional courses, in Chemistry and Child Development, and additional Learning Objectives in anesthesia/analgesia, suturing and episiotomies.
24. Understand the clinical requirements for the student's degree and the number of clinical experiences they will receive with each preceptor. If the number of clinical experiences they will receive with a particular preceptor will not suffice for the student's program requirements, they will need an *additional clinical preceptor enrolled* with the National College of Midwifery. The student further understands that they will not be enrolled until they has contracts accounting for all clinical experiences.
25. Understands that in the case of any adverse clinical outcome, the preceptor agrees to debrief with my student to the satisfaction of both of preceptor and student. If either preceptor or student cannot reach satisfaction on the completion of the debriefing process, both agree to contact the College administration for mediation services.
26. Work done prior to enrollment, or with someone who is not the student's official NCM preceptor at the time the work was done will not be eligible to satisfy program requirements.

STUDENT DISMISSAL POLICY

STUDENT DISMISSAL FROM AN ACADEMIC PRECEPTOR

Student dismissal from an academic preceptor is at the sole discretion of the preceptor. Refunds for remuneration are between the student and the preceptor per their contract which must be in alignment with New Mexico Higher Education statute concerning educational refunds.

STUDENT DISMISSAL FROM A CANVAS COURSE

NCM reserves the right to dismiss a student from participation in a general education course using the online resource platform for a given trimester for the following:

- Unsatisfactory academic progress.
- Students or Preceptors will be dismissed for unprofessional or unethical conduct including, but not limited to, violation of NCM policy, confidentiality, dishonesty, stealing, plagiarism, sexual harassment, and violation of any local, state and federal laws.

STUDENT DISMISSAL FROM A CLINICAL SETTING

Student dismissal from a clinical setting and/or with a clinical preceptor is at the sole discretion of the clinic or clinical preceptor. Refunds for clinical fees and/or remuneration are between the student and the preceptor per their contract which must be in alignment with New Mexico Higher Education statute concerning educational refunds.

STUDENT DISMISSAL FROM NCM AND THEIR PROGRAM POLICY

Students can be dismissed from the National College of Midwifery for the following:

- Failure to comply with the trimesterly reporting requirements.
- Failure to meet the financial obligations to the College.
- Unsatisfactory academic progress.
- Failure to contact the College or respond to College communications over the course of 9 months.
- Failure to complete the program within 5 years.
- Students or Preceptors will be dismissed for unprofessional or unethical conduct including, but not limited to, violation of NCM policy, confidentiality, dishonesty, stealing, plagiarism, sexual harassment, and violation of any local, state and federal laws.

STUDENT DISMISSAL BY PRECEPTOR

Refer to “Termination of Student and Preceptor Contract Policy and Procedure”.

STUDENT DISMISSAL FROM NCM AND THEIR PROGRAM PROCEDURE

NCM tries to work with students for a successful completion of their program. Office staff will follow-up with student with first line of communication in an email to respond by a deadline. The office staff will make a second attempt by phone and email before withdrawing students. Students are withdrawn from the program after efforts of working with the student and meeting deadlines has failed. A letter of withdrawal is sent by mail. Withdrawn students can request program reinstatement within 5 years of original enrollment date. NCM will dismiss students and preceptors for unprofessional or unethical conduct including, but not limited to, violation of NCM policy, confidentiality, dishonesty, stealing, plagiarism, copyright infringement, sexual harassment, and violation of any local, state and federal laws.

WITHDRAWAL FROM THE PROGRAM POLICY

Students and preceptors will notify the College of the student’s withdrawal from the program in writing and include the following information:

- Reason for withdrawal.
- Submission of completed academic and clinical work to date.
- Preceptor’s final evaluation of the student.
- Student’s final evaluation of the preceptor.

REINSTATEMENT POLICY

Students have 5 years to complete their program. If a student withdrew and are still within the original 5 year timeframe, they can apply for reinstatement.

Example: Student enrolled in 2000, but needed to withdraw due to medical reasons in 2002. Then in 2003, student wanted to complete the program. The student would need to finish her program by 2005.

- There is a \$500 reinstatement fee.
- Student would also be responsible for past due, current, and future accreditation fees for each year that they are enrolled.
- Student would need new contracts with preceptors
- Submits a plan of completion signed by student and the preceptors. This plan of completion will include a month to month outline of work to be completed, and submissions at the end of each trimester, within the remaining time frame. The plan must be approved by NCM.
- All current academic and clinical requirements will apply.
- Student understands that missing any of the deadlines will result in being permanently withdrawn from the program.

Reinstatement is at the discretion of the National College of Midwifery.

RE-ENROLLMENT POLICY

Student will send in new application as well as current application and administrative fees. The new enrollment date allows student 5 years to complete the program. New contracts with preceptors are needed. All current requirements will apply. *Re-enrollment is at the discretion of the National College of Midwifery.*

EXTENSION OF PROGRAM POLICY

Students have 5 years to complete their program. At the end of the 5 years, a student can request an extension. Extensions are decided on a case to case basis, taking into consideration if the student has consistently submitted coursework and the amount of work that is needed to complete the program. Extensions are meant to be a way for a student who has only 2 births or 1 course to complete their program. All academic credit must follow the “Maximum Time Frame requirement” policy. If credits are outside of maximum timeframe student pays a la carte fees or transfers in credits per “Transfer of Academic Credit Policy and Procedure”. Extensions are granted for up to 6 months to allow the student to complete their program. Extensions are granted by the President.

Students must request the extension in writing. Students must also submit a plan of completion that shows how the remaining work will be completed within the extension time period, signed by both student and preceptor. Student will be required to pay the current extensions rate including but not limited to fees associated with a la carte non-general education courses necessary to replace expired courses.

STUDENT SERVICES

STUDENT SERVICES POLICY

The National College of Midwifery is a College without Walls. Our students study in their own communities so we do not have a campus. We welcome students to contact us by phone or email to discuss questions or concerns. If a Student desires a service that is not listed they are encouraged to contact NCM to discuss if the College can begin providing the service on an individual or institutional basis.

ACADEMIC ADVISING

Academic Advising is made available via the Orientation Course and the Student Resources webpage. In the orientation page, under student services a page as well as on the website the following contact information is made available:

WHAT IS ADVISING?

Academic advising is a shared responsibility between staff, preceptors and a student. Advisors help students clarify values and goals, assist with the selection of courses, are informed about educational options, degree requirements, policies and procedures and monitor and evaluate progress towards reaching proposed goals. We recommend that you keep in frequent contact with your advisors.

OTHER WAYS ACADEMIC ADVISORS CAN ASSIST YOU:

- Help you in your goal to ensure success
- Provide correct current academic information
- Provide information regarding alternatives, limitations and possible consequences of academic decisions.
- Refer students to institution resources to meet their needs
- Review progress towards degrees to assure early detection of problems

WAYS THAT STUDENTS CAN HELP THEMSELVES:

- Be an active participant in your advising appointment
- See your advisor early in the trimester or just prior to the start of the trimester in order to have adequate time for your questions
- Be on time for appointments or email early to cancel so another student can use the appointment time
- Review materials in advance and make a list of questions
- Follow through on referrals and recommendations made during the advising session
- Keep your Plan of Completion up to date

GETTING YOU TO THE NEXT LEVEL

To make an appointment for advising, please email our office at: info@midwiferycollege.edu, call (575) 758-8914.

The office staff provides academic advising if it concerns paperwork and forwards midwifery specific questions to the midwifery staff who correspond to determine who is best qualified and able to answer the question. If the question lies more in the realm of general education i.e. transfer of credits etc these are forwarded to the CDO/CAO. If the question concerns supervision it is forwarded to the CDO. If the question concerns counseling, mediation, complaints or grievances it is forwarded to the president. If the question centers more around equity, access or diversity it is forwarded to the president and the CBJO. Questions of a nature not specified above shall be directed by the COO to at least two members of the executive staff who will determine how best to advise the student.

TUTORING AND MENTORSHIP

It is the student's responsibility to meet weekly or at regular intervals with their preceptor(s) to update paperwork, to communicate any difficulties with academic or clinical materials, and to obtain advice and counseling. Students and preceptors will need to determine if tutoring will be needed in any area. If so, the preceptor can direct the student to the CDO who will provide tutoring directly or connect the student with a paid student tutor at the CDOs discretion baring in mind time and expertise in the subject matter. Tutoring and Mentorship opportunities are made available via the Orientation Course, the Student Resources webpage, and the preceptor Opt-In list. In the orientation page, under student services a page as well as on the website the following information about obtaining help with homework or connecting with a student tutor. "We desire to create an educational atmosphere that students will love being around. Our programs are intended to empower students to tackle challenges and take on experiences that may be new to them. At National College of Midwifery, we are constantly striving to make learning fun and dynamic so that all of our students can accomplish their goals. If you find yourself struggling with your academic goals please reach out to [Cassandra](#) to be connected with a student tutor. You may also contact Cassandra to sign up to be a paid student tutor (recommendation from the professor (academic preceptor) in course(s) desired required)." The preceptor opt-in list also has a column dedicated to those preceptors who are available for mentorship.

INDIVIDUALIZED GUIDANCE AND SUPPORT FOR STRUGGLING STUDENTS POLICY AND PROCEDURE

Students and preceptors are encouraged to reach out to the NCM staff to seek individualized guidance and support in the case that students are encountering unique challenges in achieving their goals. In this case, the president or her designee will create an individualized learning plan for the student and will create methods for monitoring and evaluating achievement within that plan.

In the case that individualized guidance and support is needed for students, the president or her designee will compile all email communications relating to the guidance support within their Brownrice account. Any other communications will be well documented and stored appropriately. Any follow up tasks will be added to the Student Support project within Asana until issues are resolved.

NARM STUDY COURSE

NCM is currently working to make a more robust NARM study course, if the Student is within 6 months of sitting for the NARM exam they may be enrolled by staff in this online course which has a game that creates case studies and a list of pregnancy challenges and necessary knowledge to know from memory for each. In 2019 NCM is working to develop multiple practice tests.

FAILING NARM OR OTHER CERTIFYING EXAM POLICY

When NCM is notified that a student has failed the NARM or other certifying exam the President of the college attempts to make contact via email and/or phone to offer support, guidance, mentorship and counseling to help the student cope with the stress of this event as well as to come up with a plan for studying and passing the exam on the next attempt.

STUDENT ORIENTATION & HANDBOOK

Students must view the NCM Orientation videos and review the [orientation course](#) in the NCM online resource prior to submitting academic or clinical work to the college. The NCM Handbook/Catalog is posted on the NCM website in its most updated version as well as in the orientation course. Students must download this for their review prior to enrollment. Students and preceptors are welcome to call the College for additional assistance with orientation to the College's materials and their implementation.

FINANCIAL AID ADVISEMENT

The National College of Midwifery does not have any financial aid or student loans available at this time. NCM does have a scholarship program, see *Scholarship* section for details.

NCM is not a Title IV school. It does not qualify for this because it does not have a campus. This means that students are not eligible for federal financial aid or deferments of student loans. Payments made to the National College of Midwifery are usually *not* tax deductible and NCM does *not* issue 1098-T forms.

CLINICAL PLACEMENT

Students are required to find and contract with their own preceptors however, NCM supports students in their efforts to find clinical placements and preceptors in the following ways:

- NCM's [Bulletin Board](#), review it for preceptors and clinical sites seeking students or submit your own posting of students seeking preceptors
- Contact the Midwife association of your state.
- Check out available preceptors in NCM's compiled [Preceptor Opt-In List](#) where available preceptors update their information.
- Contact NCM's office for more support: info@midwiferycollege.edu

HIGH VOLUME CLINICAL TRAINING BIRTH CENTERS

Within the US there are higher volume birth centers, which specialize in providing clinical opportunities for students for a fee (note this is not covered by your NCM tuition and would be an additional fee to you the student).

PERSONAL COUNSELING AND MEDIATION

The President provides counseling and mentorship to staff, faculty and students. If the President feels the issue is outside her abilities, comfort or scope, the President will refer the staff, faculty or student to a licensed counselor or counseling service. Mediation is provided by the President as requested by any staff, faculty and/or student. Mediation is recommended in the case of a request for contract termination, and/or a filed complaint or grievance.

CAREER PLACEMENT

The National College of Midwifery does not offer direct job placement. Students can look on the bulletin board on our website for posted positions. Access to career placement services, including information about [NARM certification](#) and [state licensure requirements, credentials, practice, and/or employment opportunities](#) can be found on our website and in our Orientation Course.

SOCIAL SUPPORT SERVICES

Social support services are provided via chat capabilities within courses on the Canvas platform, the private student Facebook group, and through the organic process of cohorts being formed by students following the academic blocking. The Canvas chat, online discussions and the private facebook group are all subject to the Online Discussion Policy. Online Discussions and Chats via canvas are only actively supervised in the general education courses by the course supervisor, other courses are supervised by the CDO if and when there is a complaint. The student Facebook group can be accessed by the President and CDO, however, for the purpose of maintaining privacy as much as possible no staff member supervises the group unless there is a complaint. All policies must be followed by all parties when interacting with social support services.

LEARNING RESOURCES

A complete program book list is available in the student orientation course. A course specific booklist is included in the syllabi for the Associate and Bachelor Degree courses. The staff can always be consulted for ideas for accessing locally available resources; the College is committed to helping students and preceptors obtain needed resources.

NCM has compiled an extensive set of advanced research [Resources](#) with access to numerous free journal articles. Students, Faculty and Staff have access to the ScienceDirect database through NCM's

articlechoice subscription. Students can query this academic database of millions of scholarly articles, journals and book titles dating back to 1823.

NCM has additionally set up a WorldCat library linked to the NCM website under “resources” and “Library” booklist to show where the text can be bought online in new, used, or electronic format. It additionally shows the closest public library where the book can be found.

<http://www.worldcat.org/profiles/midwiferycollege/lists/3547316>

Libraries/Librarian Duties

Physical Library: Book Lending Policy and Procedure

NCM maintains a physical library by purchasing books as requested by the student and mailing them directly to the student. Students can borrow up to 3 books at a time for a 2 month period. The student completes a check out form and returns it to the Office. The College sends the library materials via UPS with proper insurance to cover replacement value. The College charges the student via a PayPal invoice for the price of shipping and insurance. An email is sent to the student with the the UPS tracking number and delivery date. Student must pay shipping costs to return the items via UPS, or FedEx and must insure the package for at least the replacement value of the items.

Digital Library

A digital library is made available to all observers, non-degree seeking, and degree seeking students as well as all clinical and academic preceptors and staff. All eligible Digital Library participants are automatically enrolled in the Digital Library. The digital library is maintained on Canvas. The following information will have a dedicated page to each topic: Legal Information about content maintained in the Digital Library, How to Contact and utilize the librarian for accessing digital articles, Information about the Physical Library, NARM Candidate Information Booklet. The following research education and teaching will be provided in a dedicated page to each topic: How to utilize PubMed, Finding Free Online Articles, Help Evaluating Research Articles, Works Cited, and Finding Research Articles. NCM maintains two subscriptions: Midwifery Matters (the copyright agreement does not include preceptors) and an Elsevier Subscription - Sciencedirect Choice Subscription. Students, staff and faculty contact the librarian for any digital article they are requesting. In addition to every a section of resources for every ASM course offered the digital library maintains information on the following topics:

1. Academic Precepting
2. Clinical Precepting
3. Competency Based Education
4. Cultural Issues (includes birth justice topics)
5. General Observation and Charting
6. Insurance Billing
7. Lactation
8. Online Teaching
9. Perinatal Education
10. Placenta
11. Midwifery Policy Development
12. Midwifery Protocols
13. Midwifery Research Methods

ELECTRONIC COMMUNICATION

It is vital for communication that you keep your email updated with the office. Email [Clorinda](#) or find the form for updating information on the website.

WEBSITE

NCM maintains a website at www.midwiferycollege.edu and is working to continually update resources and information. Send corrections to [Cassandra](#).

BULLETIN BOARD

The main purpose of the bulletin board is to highlight clinical apprenticeship and job opportunities as well as other opportunities to NCM students and preceptors. Anyone can request a posting on the bulletin board from any staff member who has discretion to post it. Post may be kept for one year, when the opportunity expires, or removed at the discretion of staff or the request of the original posting person. Updates are made per the website maintenance procedure.

SOCIAL MEDIA POLICY

It is the policy of NCM to provide relevant and accurate information for staff, students, and faculty on our primary social media venues (Facebook and Twitter). NCM does not focus on parenting facts and information often but does provide limited information on these topics only as a way to help students think about ways to communicate with clients on these topics. NCM is primarily concerned with information being read and integrated into critical thinking and may therefore choose a mainstream article to present a topic and provide as a secondary link the peer reviewed journal article for reference or the other way around if the intent is to engage students in the critical appraisal of research. A minimum of 90% of NCM's total social media posts in any given year will pertain to NCMs pillars of knowledge.

NEWSLETTER

A newsletter is published electronically at least three times a year on or around the end of each trimester and sent to the email on file through Mailchimp. Previous copies are maintained on the website.

COLLEGE GOVERNANCE

STUDENT AND PRECEPTOR PARTICIPATION IN COLLEGE GOVERNANCE

Students and their preceptors are invited to attend the College's board meetings, which takes place in New Mexico with phone and online services utilized for those outside of New Mexico, to provide feedback to the College and directly participate in directing the program. The agenda for the next meeting is a maintained and updated by the President. For the current proposed agenda and/or next meeting date and time please contact the President. Those unable to attend are encouraged to call, write, or email the College with their thoughts and opinions on agenda items or any other topics relating to the College. In addition, feedback is solicited of graduates on surveys sent out by the Office. Suggestions are further solicited from students and faculty on trimesterly Evaluation Forms.

FACULTY ADVISORY BOARD

The Faculty Advisory Board which is composed of current and former NCM academic and clinical preceptors. The purpose of this board is to:

- Provide NCM with consultation and support in the development of policies and programs;
- Lend stature to NCM by the individual's association with the school;
- Serve as reminders to NCM and the community of the worldwide support enjoyed by midwives;
- Provide NCM students, staff and Board with models and inspiration through the individual's work and publications.

TRIMESTER PROCEDURE

All preceptors participate in the Faculty Advisory Board at the end of each trimester when they submit an evaluation and during the annual Faculty Advisory Board survey. The evaluation gives the preceptor the opportunity to participate in development, implementation and evaluation of the curriculum, evaluation and advancement of students, specifically the supervision and evaluation of student learning in the clinical setting, including any specific responsibilities linked to NARM requirements for student supervision and evaluation while the survey provides the opportunity to participate in the periodic evaluation of student admissions criteria, program resources, facilities, and services.

NCM reviews all the comments and suggestions and appreciates all feedback to improve our program. Preceptors are thanked when their suggestions are incorporated into NCM's programs.

ANNUAL PROCEDURE

NCM will send out an annual electronic survey to the Faculty Advisory Board during the winter trimester.

This survey must include:

- Request for faculty recommendations for specific library resources that address and build competency in diversity and cultural versatility
- Request for faculty recommendations for specific library resources that address and build competency in direct entry midwifery would you recommend NCM integrate into the curriculum and/or have available as a reference for students?"
- Review and evaluate student admissions criteria
- Review and evaluate the requirements of program resources, facilities, and services

BOARD OF DIRECTORS

The Board of Directors is made up of 5 members and consists of President, Vice President, Secretary and Treasurer.

Current members

Ezra Depperman - President

Carolina Nkouaga – Vice President and Treasurer

Jonathan Hill- Secretary
Martha Andrew - member
currently recruiting - Member

The Board of Directors meets annually in person, to elect officers, approve the previous meeting's minutes, approve the budget, set policy, engage in strategic planning, and address issues of concern, especially concerns or complaints raised by students, faculty and graduates. Quarterly meetings can be held via phone or video conference calls if needed.

During the year, a file is kept of all the suggestions and complaints from the Trimesterly Student Preceptor Evaluations, email and phone communications, and Graduate Surveys. The Board will address each of these at the meeting.

Draft agendas and materials are distributed to Board members prior to the meeting. Minutes are kept by the Secretary of the Board. A copy of the minutes are distributed to Board members and filed in the binder.

The NCM Board of Directors reviews the enrollment and graduation numbers at the Annual Meeting that is held in a physical location. During this meeting, recruitment and marketing is discussed in conjunction with enrollment projections and if necessary a separate committee is convened.

Each staff member gives a report about his/her individual administrative functions, including any proposed changes or issues. These reports include Student Admissions, Financial Aid, Personnel/human resource management, Financial Management, Regulatory Compliance Oversight, facilities and equipment needs, Learning Resources, and etc. If necessary, a separate committee is convened.

WAYS TO SUPPORT OUR SCHOOL

Give Our Students the Tools to Succeed

Your donations of time and resources to National College of Midwifery are put towards our operating budget, providing support for our core programs, and inspiring our students to strive for more. As part of the National College of Midwifery community, you are involved in preparing midwives intellectually, with clinical and counseling skills to thrive in their careers and provide clients and their families with exceptional midwifery care.

SOCIAL MEDIA

Following, liking, and commenting on NCM's social media platforms is a great way to stay up to date about college's activities, midwifery research and helps to spread the word about the institution. Please leave us a review on our Facebook page: <https://www.facebook.com/NationalCollegeMidwifery/>

CONTINUING YOUR EDUCATION

Designed for practicing midwives, licensed or certified midwives may apply directly to our Bachelor of Science Bridge Program. This program adds a strong academic base to the midwife's practical midwifery knowledge and skills. Achieve your professional goals without compromising your practice and family commitments. Our self-paced, flexible, apprenticeship-based programs are adaptable to the needs of the individual student or preceptor. Students study in their own community or create a study plan that allows them to travel to other cities or countries.

Alumni administrative fees are deeply discounted and usually take only 3 additional trimesters to complete their BSM.

BECOMING A PRECEPTOR

National College of Midwifery has an outstanding team of dedicated academic and clinical preceptors, all of whom are determined to help students succeed. Our team members offer support and guidance, uniquely tailored to each student. Our goal is to provide an environment where teachers are valued for their outside-the-box thinking, creative ideas, and connection with their students. Passing on the skills and passion for her work is one of the biggest gifts a midwife can give to the world. As an NCM preceptor, you will have the freedom to script a unique agreement with your student(s) based on how your distinctive practice dovetails with your students' educational goals. This autonomy and flexibility, along with needed guidance and support from NCM staff makes it especially gratifying to be a preceptor with NCM.

PRECEPTOR OPT-IN LIST

Become part of NCM's inclusive preceptor opt-in list. Email [Cassandra](#) with your Name and gmail associated email account and receive a line to fill out in this resource which details who you are as a midwife and what you are looking for in a student.

SCHOLARSHIP

Consider making a donation to our scholarship fund, NCM has secured a significant grant which matches all donations! <https://www.paypal.com/uk/fundraiser/charity/1948021>

AMAZON SMILES

Support the National College of Midwifery when you shop at Amazon through their [Smile Campaign](#).

BOARD OF DIRECTORS

Dive right in, have an immediate and drive impact and join the active, diverse and fun board of directors. Contact [Marcy](#) for more information.

EQUITY TASK FORCE

NCM is always looking for diverse members of our Equity Task Force. Contact [Margaret](#) for more information and how your positionality would bring a unique aspect to this advisory group.

ETHICS COMMITTEE

Occasionally NCM finds the need for an ethics committee to review some aspect of the College's work. If you have a background in law, philosophy, ethics or other related field please contact [Marcy](#) to see how you can become part of the Ethics Committee.

EDUCATION COMMITTEE

The Education Committee meets at least 3 times a year for approximately 90 minutes. Students and Preceptors can both be part of this committee which reviews all aspects of admissions, curriculum and education. Contact [Cassandra](#) to receive information on when meetings are scheduled.

FACULTY ADVISORY BOARD

NCM has several boards which review various aspects of the college including curriculum and literature resources. If you would like to help with these reviews please contact us! Contact [Cassandra](#) for more ways you can contribute to this Board's responsibilities.

Special Thank You

NCM would like to acknowledge and thank the following organizations which made their statements and policies accessible to the College for use in our development of our Equity Statement, Non Discrimination Policy, Religious Accommodations, Lactating Persons Policy, Service Animal Policy and our institutions ADA policy as well as the volunteer advisors on our Equity and Access Taskforce.

[Tufts University](#)

[Society for Human Resource Management](#)

NCMs Equity and Access Taskforce

Special thanks to Valencia Community College for publishing the document, “Strengthening the Role of Part-Time Faculty in Community Colleges. Example Job Description for Part-Time Faculty:Valencia College - Job Description and Essential Competencies,” which NCM utilized to write these sections of the Policy and Procedure Manual.