



NATIONAL COLLEGE OF MIDWIFERY

Handbook / Catalog

2012

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Introduction to the National College of Midwifery

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 and Licensure

NCM is accredited by MEAC, The Midwifery Education Accreditation Council, a small, private accrediting agency recognized by the US Department of Education.

NCM is licensed as a Postsecondary Institution by the New Mexico Commission on Higher Education.

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, a Master of Science in Midwifery, and a Doctorate of Philosophy 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

Definition of 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.

Definition of 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.

Enrollment

Timeframe for Completion

NCM programs are each 3 year equivalents, which the student can complete between 1-5 years. Students who have not completed their programs after 3 years of enrollment are required to submit a plan of completion signed by both student and preceptor demonstrating how the student will complete the program in the remaining time. After 3 years the student will also be responsible for paying the annual MEAC accreditation fee until graduation.

The Application Process

The National College of Midwifery has open enrollment from January to October.

Each individual program has distinctive application forms, prerequisites and requirements. There is a checklist of all the documents needed for a complete application on Application Forms. Application forms can be found at www.midwiferycollege.org or can be emailed to you by request.

Applications must be submitted by mail in one single packet as NCM discards incomplete applications after 60 days. Those that are faxed or emailed will not be accepted. Please do not copy both sides of the pages.

Student and preceptor(s) complete application forms and contracts, and submit these to the College along with required supporting documents and application fee.

Once the application materials are complete and in the NCM office, NCM reviews materials and notifies the student of the decision regarding acceptance.

Once accepted, the student must pay the administrative fee in order to become enrolled.

The student and her/his 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. Please note that a college transcript does not replace the requirement of a copy of the high school transcript or diploma, or GED certification.

ASM Application Required Documentation Checklist:

STUDENT

- ✓ ASM Student Application Form
- ✓ ASM Contract between Student, Preceptor and NCM (one required for each preceptor)
- ✓ Non-Refundable Application Fee
- ✓ Administrative Fee
- ✓ 1 Student Photo
- ✓ High School Diploma/High School Transcript/GED (*Cannot be fulfilled by a college transcript*)

PRECEPTOR

- ✓ ASM Preceptor Application Form
- ✓ 3 Reference Forms for preceptor

- ✓ Copy of preceptor's current certification/license with Date of Expiry
- ✓ Copy of CEU's used for last license renewal
- ✓ Preceptor's CV/Resume
- ✓ Oversight Form
- ✓ Copy of highest academic degree
- ✓ Preceptor Facility Verification Letter

PRECEPTOR'S PRACTICE

- ✓ Diagram/ floor plan of academic and clinical space(s) to be used
- ✓ Equipment and restocking checklist for clinical facility/clinical practice
- ✓ Safety standards form for clinical facility/clinical practice

BSM Application Required Documentation Checklist

STUDENT

- ✓ BSM Student Application Form
- ✓ BSM Contract between Student, Preceptor and NCM (one required for each preceptor)
- ✓ Non-Refundable Application Fee
- ✓ Administrative Fee
- ✓ 1 Student Photo
- ✓ High School Diploma/High School Transcript/GED (*Cannot be fulfilled by a college transcript*)
- ✓ Midwifery License or Certification
- ✓ Transcripts for the following prerequisite courses, or if not yet taken students can complete these prerequisite courses concurrently with BSM degree program:
 - Statistics
 - Analytical Writing
 - Fundamentals of Math
 - Midwifery Literature & Art

PRECEPTOR

- ✓ ASM Preceptor Application Form
- ✓ 3 Reference Forms for preceptor
- ✓ Copy of preceptor's current certification/license with Date of Expiry
- ✓ Copy of CEU's used for last license renewal
- ✓ Preceptor's CV/Resume
- ✓ Oversight Form
- ✓ Copy of highest academic degree (must be Bachelor-level or above)

MSM Application Required Documentation Checklist:

STUDENT

- ✓ MSM Student Application Form
- ✓ MSM Contract between Student, Preceptor and NCM (one required for each preceptor)
- ✓ Non-Refundable Application Fee
- ✓ Administrative Fee
- ✓ 1 Student Photo
- ✓ Midwifery License or Certification
- ✓ Proof of BA or BS
- ✓ Transcripts for the following prerequisite courses, or if not yet taken students can complete these prerequisite courses concurrently with MSM degree program:
 - Statistics
 - Analytical Writing
 - Fundamentals of Math
 - Midwifery Literature & Art

PRECEPTOR

- ✓ ASM Preceptor Application Form
- ✓ 3 Reference Forms for preceptor
- ✓ Copy of preceptor's current certification/license with Date of Expiry
- ✓ Copy of CEU's used for last license renewal
- ✓ Preceptor's CV/Resume
- ✓ Oversight Form
- ✓ Copy of highest academic degree (must be Master-level or above)

PhD Application Required Documentation Checklist:

STUDENT

- ✓ PhD Student Application Form
- ✓ PhD Contract between Student, Preceptor and NCM (one required for each preceptor)
- ✓ Non-Refundable Application Fee
- ✓ Administrative Fee
- ✓ 1 Student Photo
- ✓ Midwifery License or Certification
- ✓ Proof of MA or MS

PRECEPTOR

- ✓ ASM Preceptor Application Form
- ✓ 3 Reference Forms for preceptor
- ✓ Copy of preceptor's current midwifery/medical certification/license with Date of Expiry
- ✓ Copy of CEU's used for last license renewal
- ✓ Preceptor's CV/Resume
- ✓ Oversight Form
- ✓ Copy of Preceptor's Degree PhD or MD

Accepting Transfer Credits

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 courses which demonstrates that the questions in our learning objectives have been satisfied.

Credits acceptable for transfer must be college level. General Education Credits must be at least C- or higher. Midwifery Modules must be B- / 80% or higher.

Please note that only NCM office can award transfer credit.

A preceptor cannot award transfer credit for an entire course. However she/he can evaluate prior work towards the completion of a course (towards learning objectives of a course). Once the student has satisfied the learning objectives of the course, the preceptor can give a grade for the course.

CLEP vs. college placement exams

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

NCM will accept official credits from The College-Level Examination Program® (CLEP)

<http://www.collegeboard.com/student/testing/clep/about.html>

Paying for the program

Fees Paid Directly to the College:

Students must pay the application and administrative fee upon enrollment. The National College of Midwifery does not offer payment plans.

Application fee: \$100 non-refundable

Administrative fee: \$4,900

Additional expenses:

- **Preceptor fee:**
Students hire their preceptors and are responsible for paying their preceptor directly. The College recommends \$500 a month. It is possible to negotiate another arrangement with your preceptor.
- **Books:**
Students are responsible for purchasing their own books. The College provides a recommended reading list. Many students are able to find the books used at a discounted price, or can borrow from their preceptors.
- **General Education Requirements:**
NCM highly recommend that you complete these 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.
- **Required Outside Examination for ASM Degree, such as the NARM or ACNM Exam:**
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.
- **Accreditation Fees:**
Students have 5 years to complete their program. The National College of Midwifery pays an annual accreditation fee for each student. Most students complete their program within 3 years so NCM covers these fees. If the student has not completed her/his program within 3 years, they will be responsible for the annual fee.

Financial Aid / Student Loans

The National College of Midwifery does not have any financial aid or student loans available at this time.

Due to the economy and difficult market conditions, our financial aid company is no longer able to offer loans to our students. Our students are not able to apply for federal or state grants and loans because we are not a Title IV school. NCM does not qualify for this because we do not have a campus.

Tuition refunds

When the 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 registration charge.

Administrative and Preceptor Fee Refunds:

When the student withdraws after having paid both the College and the preceptor, refunds are calculated based on the longest trimester, (January through May) or 152 days:

Withdrawal	NCM Fees refunded after enrollment	Preceptor Tuition refunded after commencement of instruction
0 - 1 day of enrollment / commencement of instruction: All Administrative Fees paid to the College except \$200 registration charges will be refunded.		
2 -16 days after enrollment:	90% of full administrative fee	90% of preceptor fee for period
17 - 38 days after enrollment:	50% of full administrative fee	50% of preceptor fee for period
39 - 76 days after enrollment:	25% of full administrative fee	25% of preceptor fee for period
Withdrawal after 76 days:	0% of full administrative fee	0% of preceptor fee for period

(Revised 1/09 to conform to NM Commission of Higher Education rule 20.D)

Programs

Common Program Requirements:

Satisfactory Academic and/or Clinical Progress

Student progress must demonstrate that they will be able to complete their programs within the allotted timeframe (see trimesterly reporting requirements).

Students who have not completed her/his program within 3 years, they must submit a plan for completion to NCM demonstrating how they will complete the remaining program requirements within the remaining time.

Students who have not submitted any work for nine consecutive months may be withdrawn from the program (see withdrawal policy).

Evaluations

Students and Preceptors are encouraged to meet at regular intervals to sign-off any skills or clinical forms, to review progress, trouble-shoot 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.

Evaluation Forms

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

- Articulate accomplishments and problems in your teaching or learning.
- Voice satisfactions and challenges with one another.
- Review your 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.
- Give other suggestions and comments.

- Notify the College of changes in contact information.
1. Student-Preceptor Evaluation Form-
REQUIRED after each trimester in which the student completed program requirements.
 - 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 evaluation forms with every preceptor she/he worked with during the trimester.
 - These forms are to be completed by the student & preceptor together.
 2. Credit Value Assessment Form
Required for each course that did NOT conform to time requirement stated on the syllabus for the course (1 Academic Credit = 15 hours Formal Study + 30 Hours Informal Study).
 3. Services & Policies Evaluation Form
Evaluation of student admissions criteria, program resources, facilities, and services Form - This is another opportunity to participate in development, implementation and evaluation of the curriculum, periodic evaluation of student admissions criteria, program resources, facilities, and services.
 4. Curriculum Evaluation Form
Curriculum Review and Update - As a preceptor you are part of the curriculum review committee. Please note any changes, updates, additions or subtractions you recommend for the courses your student completed this trimester. Your participation ensures NCM programs and content remain up to date & will be reviewed by the Education Committee.
 5. Information Change Form
It is each student's and preceptor's responsibility to keep current contact information updated with NCM.
 6. Comments Form
Additional Comments / suggestions / other, which are not covered by any of the other forms.

Trimesterly Reporting Requirements

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 Form(s) for the student's program, as well as reports of academic and clinical course requirements completed within the trimester (see NCM Student Disc for the reporting forms required by each program).

NCM Trimesters:

January 1st - May 31st

June 1st - August 31st

September 1st - December 31st

- Submissions should be made in one packet by regular mail (faxes and emails are not accepted) to: National College of Midwifery, 209 State Road 240, Taos, NM 87571
- Student should submit photocopies, and keep the originals for her/his files and to continue to update as he/she 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.

- For more in-depth information, please refer to the NCM Handbook or call or email NCM: Tel: (575) 758-8914 Email: info@midwiferycollege.org
- Always use the most updated versions of all program materials. These are available for download from the NCM website: www.midwiferycollege.org

Keeping in Contact with NCM

The College sends out regular updates via email. It is the student's responsibility to keep updated contact information with the college. This includes a working email address as well as current contact information on file with the College.

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. 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.

Course Syllabi:

Students and Preceptors follow the NCM Syllabus for each course, found on the student/preceptor discs and on NCM's website. Each syllabus lists the number of Credits, Learning Objectives, Learning Activities, Learning Resources, Evaluation Methods, Study Questions, Clinical/NARM Skills, and MANA Core Competencies to be completed.

Prefixes and Suffixes and Course Numbering:

The letter prefix before each number stands for the category into which the course falls:

ENG-English

BIOL-Biology

HON-Honors level course

MATH-Mathematics

PSY-Psychology

MW-Midwifery

SOC- Sociology

Suffixes:

G- General education category.

Course Numbering:

Course numbers denote the level of difficulty, with courses in the 100 level being more basic than courses in the 400 level.

Credit Hours:

- Academic Credit Hours: 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 it takes to answer the study questions to the level of 80% and to complete any learning activities to the preceptor's satisfaction. This will include any time spent actively reading the textbook/s and answering study questions, as well as any time spent face to face with the preceptor.

- **Clinical Credit Hours:** One clinical credit equals approximately 30 clinical contact hours. The transcript lists all clinical hours, though credit is only awarded for required clinicals.

Grading:

Academic Grades must be B- / 80% / Pass or higher. Lower grades are not accepted and the course must be re-done. Students may decide with their preceptors on which grading system (Letter grades / number grades / or Pass/Fail) they would like to use.

Grades:			GPA	Definition
Letter	Number	Pass/Fail		
A+	97-100	Pass	4.0	
A	94-96		3.9-4.0	Excellent
A-	90-93		3.5-3.8	
B+	87-89		3.2-3.4	
B	84-86		2.9-3.1	Good
B-	80-83		2.5-2.8	Grades must be B- / 80% / Pass or higher (enrollees post 2005 only).
C+	77-79	Fail	Transfer grades for general education courses from other accredited colleges and universities are accepted to C-.	
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.			

Clinical Evaluation: The student must complete each NARM Skill or clinical encounter to mastery* (see definition in appendix).

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.

Learning Sites

- The National College of Midwifery does not have a campus. 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.
- 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 the College'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.*

Associate of Science in Midwifery Degree

The ASM is a three-year equivalent program, which can be completed from 1 to 5 years.

Semester Credit Hours: 107.75 (111.75 for California Students)

Prerequisites:

1. High School Diploma or GED.

General Education:

According to the Department of Education, General Education requirements fall into three categories, and there are specific requirements within each:

I. Developing Critical Thinking and Modes of Expression:

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

II. 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

III. Viewing a Wider World:

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

These courses are identified by the G suffix

ASM Academic Course Requirements:

Math & Human Life Science (12 credit hours):

BIO155G -Anatomy and Physiology	4	MW300-AP Physical Assessment	0.5
BIO120-Fetal Development	1	MW300-AP Provision of Care	1
SOC102-Genetic Screening	1	MW300-AP Complications	0.5
HON205G-Applied Microbiology	3	MW300-AP Pharmacology	1
MATH112G-Fundamental Math	3	MW300-AP Nutrition	0.5
		MW300-AP Diagnostic Lab Tests & Procedures	0.5

California Students (must complete an additional 4 credits):

MOD1-SCI102G-Chemistry	3	MW300-AP Observation & Charting	0.5
MOD2-SOC104-Child Growth & Development	1	MW300-AP- CPR	0

MW 320 Intrapartum Management (6 credit hours):

Critical Thinking & Psychosocial Issues (14 credit hours):		MW320-IP Basic Skills	1
PSY224-Communication & Counseling	1	MW320-IP Risk Screening	1
HON248G-Cultural Issues	3	MW320-IP Physical Assessment	0.5
HON223G-Evolution of Human Sexuality	3	MW320-IP Provision of Care	1
MW350-Perinatal Ed Including Lactation	3	MW320-IP Complications	1
ENG200G-Analytical Writing	4	MW320-IP Pharmacology	0.5
		MW320-IP Diagnostic Lab Tests & Procedures	0.5
<u>MW 300 Antepartum Management (6 credit hours):</u>		MW320-IP Observation & Charting	0.5
MW300-AP Basic Skills	1	MW320-IP IV THERAPY	0
MW300-AP Risk Screening	0.5		

MW 340 Postpartum Management (6 credit hours):

MW340-PP Basic Skills	1
MW340-PP Risk Screening	1
MW340-PP Physical Assessment	0.5
MW340-PP Provision of Care	1
MW340-PP Complications	1
MW340-PP Pharmacology	0.5
MW340-PP Diagnostic Lab Tests & Procedures	0.5
MW340-PP Observation & Charting	0.5

MW 360 Newborn Management (6 credit hours):

MW360-NB Basic Skills	1
MW360-NB Risk Screening	1
MW360-NB Physical Assessment	1
MW360-NB Complications	1
MW360-NB Provision of Care	0.5
MW360-NB Pharmacology	0.5
MW360-NB Diagnostic Lab Tests & Procedures	0.5
MW360-NB Observation & Charting	0.5
MW360-NB NRP -Neonatal Resuscitation	0

MW 380 Well-Woman Reproductive Health Care (6 credit hours):

MW380-WW Risk Screening	0.5
MW380-WW Physical Assessment	1
MW380-WW Provision of Care	1
MW380-WW Diagnostic Lab Tests & Procedures	1
MW380-WW Family Planning	1
MW380-WW Pharmacology	1
MW380-WW Observation & Charting	0.5

Professional Issues (24 credit hours):

HON222G-History of Midwifery	3
HON225G-Ethics	2
HON390G-Laws/Regulations	3
MW250-Protocols	1
HON393G-Community Health	3
MW350-Out of Hospital Birth	3
ENG202G-Bus. & Prof. Communications	3
HON211G-Statistics	3
HON220G-Midwifery Literature & Art	3

ASM 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.

MOD1-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.

MOD1-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.

MOD1-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.

MOD1-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.

MOD1-SCI102G-Chemistry, Credits: 3.0

A basic college chemistry course to be obtained from an accredited source approved by the National College of Midwifery.

MOD1-MATH112G-Fundamental Math, Credits: 3.0

A basic college math course to be obtained from an accredited source approved by the National College of Midwifery.

MOD2-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.

MOD2-HON248G-Cultural Issues: Cultural Competency in Health Care Delivery, Credits: 3.0

The student will explore the influence of culture, religion, and family history on an individual's perception of health and illness. Effectiveness of care can be impacted by differing beliefs about health/illness between the care provider and the care recipient, and the student will begin to bring this understanding into the midwife/client relationship to best support the mother and her significant others.

MOD2-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.

MOD2-MW350-Perinatal Ed 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.

MOD2-SOC104-Child Growth & Development, Credits: 1.00

A basic Child Growth and Development course to be obtained from an accredited source with approval from the National College of Midwifery.

MOD2-ENG200G-Analytical Writing, Credits: 4.00

A basic College English and writing course to be obtained from an accredited source with approval from the National College of Midwifery.

MOD3-MW300-Antepartum Basic Skills, Credits: 1

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.

MOD3-MW300- 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.

MOD3-MW300-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.

MOD3-MW300-Antepartum Provision of Care, Credits: 1.0

This course serves as an academic overview of antepartum management by a midwife of a healthy pregnant woman 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.

MOD3-MW300- 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.

MOD3-MW300- 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.

MOD3-MW300- 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.

MOD3-MW300- 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.

MOD3-MW300-AP 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.

MOD3-MW300-AP- CPR, Credits: 0.00

This course must be completed with a recognized CPR Certifying agency, resulting in a certification. Online courses are not acceptable.

MOD4-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.

MOD4-MW320- 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.

MOD4-MW320- 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.

MOD4-MW320- 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.

MOD4-MW320- 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.

MOD4-MW320- 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.

MOD4-MW320- 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.

MOD4-MW320- 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.

MOD4-MW320-IP IV 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.

MOD5-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.

MOD5-MW340-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.

MOD5-MW340-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.

MOD5-MW340-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.

MOD5-MW340-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.

MOD5-MW340-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.

MOD5-MW340-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.

MOD5-MW340-Postpartum Observation & Charting, Credits: 0.5

In this course, the student learns how to evaluate the physiologic 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.

MOD6-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.

MOD6-MW360-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.

MOD6-MW360-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.

MOD6-MW360-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.

MOD6-MW360-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 post-natal care is also included in this course.

MOD6-MW360-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.

MOD6-MW360-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.

MOD6-MW360-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.

MOD6-MW360-NB NRP -Neonatal Resuscitation, Credits: 0.0

Students are required to take the most current version of this certification course with a licensed instructor and submit proof to the National College of Midwifery upon completion.

MOD7-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.

MOD7-MW380-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.

MOD7-MW380-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.

MOD7-MW380-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 confusing and increasing the student's capacity to explain risk to a client.

MOD7-MW380-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.

MOD7-MW380-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.

MOD7-MW380-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.

MOD8-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.

MOD8-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.

MOD8-HON390G-Midwifery Laws & Regulations, Credits: 2.0

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 she/he 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 on-going responsibility of the (student) midwife to stay informed of the legal issues in her state as they are often subject to change.

MOD8-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.

MOD8-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 women 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 her own community and adapt her services to better serve the local need.

MOD8-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.

MOD8-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.

MOD8-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.

MOD8-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.

ASM Clinical Experience Requirements:

1. A minimum of 12 months of clinical experience under the supervision of the NCM approved preceptor at a single site or a variety of sites.
2. All clinical activities must be directly supervised* by their NCM preceptor and must be completed to the level of mastery*(see definitions in appendix)
3. The following requirements by the North American Registry of Midwives (NARM)

Clinical Requirements:	Required Visits	Hours/Visit	Hours/Skill	Credits/Skill
30 Well Woman / Family Planning	30	30 minutes	15 hours	0.50
20 Initial Visits	20	1 hour	20 hours	0.67
55 Prenatals	55	30 minutes	27.5 hours	0.92
20 Labor Assists	20	12 hours	240 hours	8.00
20 Del Newborn & Placenta as Primary	20	24 hours	480 hours	16.00
20 Newborn Exams	20	30 minutes	10 hours	0.33
40 Postpartum Mother & Baby Exams	40	1 hour	40 hours	1.33
3 NARM Continuity of Care	3	n/a		
10 NARM Out of Hospital Births	10	n/a		
Total:			832.5	27.75
NARM Clinical Skills			517.5	in Academics
			Total Hours	Total Credits
Clinical Totals:			1350	27.75

Conversion to semester credit hours: 30 clinical hours = 1 credit hour

Guidelines for Documentation of Clinical Experience

Mastery: Simply being present at or participating in a clinical 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. Mastery of a clinical skill consists of the 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®.

Direct Supervision: The preceptor must be in direct supervision of all clinical activities: This means the preceptor was present and in control at all times during the entire activity, catalyzed the important decision making processes, elicited the student's rationales for her/his decisions, and oversaw the student's charting.

Guidelines for Verifying Documentation of Clinical Experience

It is important for students to keep good records. Students should update their clinical forms daily and have the preceptor sign off either on a daily or weekly basis.

Preceptors are required to correctly and completely chart.

The student should do the following:

- As soon as the birth is over, photocopy the relevant portions of the chart.
- White-out the names of the clients, and make sure to put the code of the chart on the photocopies so that it can be referenced in the event of an audit.
- Be sure that both the Student's and Preceptor's initials are in the correct places on the chart.

NARM Guidelines for Charting (Please check the NARM website for updated requirements):

"In response to multiple requests for clarification about the role of the Preceptor in the NARM application/ certification process, NARM has developed the following step-by-step guidelines

based on the instructions set forth in the Candidate Information Bulletin. These guidelines are suggestions for successful completion of the application documentation.

1. The preceptor and applicant together should—
 - a. review the three (3) separate practice documents required by NARM—Practice Guidelines, Informed Consent, and Emergency Care Form.
 - b. review all client charts (or clinical verification forms from a MEAC accredited school) referenced on the NARM Application and confirm that the preceptor and applicant names/signatures appear on each part of the chart/form that is being referenced.
 - c. confirm that the signatures/initials of the applicant and preceptor are on every chart/form for: initial exam, history and physical exam, complete prenatal exams, labor, birth and immediate postpartum exam, newborn exam, and complete follow-up post partum exams listed on the NARM Application. Be sure the numbers written on the application forms are the same number of signatures/initials for both the applicant and the preceptor on the charts/forms.
 - d. check all birth dates and dates of all exams for accuracy.
 - e. check all codes to make sure there are no duplicate code numbers. Each client must have their own unique code. If there is more than one birth with any given client, there must be a different code assigned for each subsequent birth.
2. If a preceptor has more than one student (applicant), each chart must have a uniform code that all students will use. Students should not develop different codes for the same client.
3. Preceptors need to be sure their forms show that the student participated as primary under supervision and that the preceptor was present in the room for all items the preceptor signs. For example, the arrival and departure times at the birth should be documented on the chart for both the applicant and the preceptor. At the time of clinical experience, preceptors and students should initial each visit.
4. Applicants should have access to or copies of any charts listed in the application, Form 112a-f and Form 200 with Code in case of audit.

The Informed Consent document used by the apprentice/student should not indicate that she is a CPM, even if she is in the application process. The CPM designation may not be used until the certificate has been awarded.

Preceptors who sign off on experiences they did not witness risk losing their ability to sign as a preceptor in the future and also risk losing their CPM certification.”

<http://narm.org/wp-content/uploads/2011/02/cib.pdf> 5/3/11

Outside Examination:

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.

NARM Exam

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 her/his 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.

Applying to take the NARM Exam:

ASM Students must apply directly to NARM to take the Exam, but she/he must also obtain permission to test from the College.

1. NARM Exam Application:

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 form: <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 to take the NARM exam is sent via email to students a month to 6 weeks prior to the deadline. This permission packet can also be found on our website, or the office will be happy to email one to the student at her/his request.
- Submission of the permission packet by the deadline does not guarantee permission to take the exam.
- The ASM Student must submit a NARM Exam Permission Packet for each exam she/he plans to take. If the student is not given permission to take the NARM exam, she/he must submit another permission packet for the next exam she/he plans to take.

3. Deadlines to Request NCM Permission to take the NARM Exam:

NARM Exam	Deadline (date of receipt by NCM*)
February	November 15 th (of the preceding year)
August	May 15 th
October	July 15 th

*The Deadline is the day the student's request arrives in NCM's office, NOT the day it was postmarked. Please send items early to ensure they arrive in NCM's office by the deadline above. Although the dates of the exam may vary, the NCM deadlines to have all paperwork completed and into the NCM office remains the same.

What happens after the Exam:

One of the forms in the permission packet is a results release form. This allows NARM to send student test results directly to NCM.

When NCM receives student 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.

The graduation packet includes:

Diploma

Official Letter
Final Transcript
An official sealed transcript
Graduate survey

Graduation

Associate of Science in Midwifery Degree Awarded:

1. When prerequisites are met
2. When skills, clinical and academic course requirements are successfully completed
3. When outside examination is successfully completed
4. All outstanding fees to The National College of Midwifery are paid
5. All library books and videos are returned
6. When the College has documentation of the above

Certificate in Midwifery Awarded:

When the student completes all requirements but does not take or fails the outside examination.

Licensing and Certification Post Graduation

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.

Certified Professional Midwife (CPM)

The student applies directly to NARM for this credential. The College will send a copy of the student's final transcript to NARM upon graduation at the student's request (This is included in one of the forms in the NARM Exam Permission Packet).

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.

California students should send in Form L12 from their licensure packet to the College. Please remember to fill out the top portion.

Bachelor of Science in Midwifery Degree

The BSM is a one-year equivalent, which can be completed from 1 to 5 years.

Semester Credit Hours: 146.75

Prerequisites High School Diploma or GED and one of the following:

	Satisfies credits towards BSM requirement
A) College-recognized state or national midwifery license or certification And the following academic courses or transfer credits to be evaluated by the College (Prerequisite courses may be completed concurrently with NCM coursework):	94.75
1. Exploring Statistics.....	3
2. Midwifery Literature and Art.....	3
3. Analytical Writing.....	4
4. Fundamentals of Elementary Math.....	3
OR	
B) NCM Associate of Science in Midwifery Degree	107.75

Course Requirements:

- MW 480: 1 additional clinical year past licensing or certification to include 10 births mentored by preceptor.....24 credits

Research

Please see the Research Guidelines section of this handbook. The Bachelor's thesis must be based on a research project pre-approved by the College Faculty Board and carried out under the supervision of an approved preceptor.

- Thesis based on a clinical research project.....15 credits
- Place a bound copy of the thesis in the College library

Graduation

Bachelor of Science Degree in Midwifery Awarded:

1. When prerequisites are met
2. When course requirements are completed
3. When Senior Thesis is accepted by the Faculty Board
4. When bound copy of Senior Thesis is placed in the College library

Master of Science in Midwifery Degree

The MSM is a two-year equivalent, which can be completed from 1 to 5 years.

Graduate Semester Credit Hours: 30

Prerequisites:

- College–recognized state or national midwifery license or certification
- B.A. or B.S. including Analytical Writing, Statistics, College-level Math, Midwifery Literature and Art.

Please note: Prerequisite courses may be completed concurrently with NCM coursework.

Course Requirements:

MSM Core Courses:	Credits
MW500 100 MANA Statistics Births.....	4
MW510 Mother / Baby Media Project.....	3
MW520 Development of Policy & Procedure for Clinical Practice...	3
MW540 Community Maternal- Child Health Analysis.....	3
MW560 Mother / Baby Program Development.....	3
MW580 Elective with Midwifery Curriculum Development.....	4

MSM Course Descriptions

MSM- MW 500: 100 Births Recorded on the MANA Statistics Data Base. Credits: 4
The MSM candidate completes a small study using the data on at least 100 births that they have attended that have been submitted to the MANA Statistical Database. This study includes risk assessment, transfers, breastfeeding and perineal suturing.

MSM- MW 510: Media or Art Project for Publication or Display. Credits: 3
The MSM candidate produces a media or art product that communicates important health messages to the community. This course gives the student experience in the tools and methods of communicating with the community regarding health issues.

MSM- MW 520: Development of Policies and Procedures for Clinical Practice. Credits: 3
The MSM candidate develops and refines the Policy and Procedures for her own clinical practice.

MSM- MW 540: Analysis of Your Community's Maternal Child Health. Credits: 3
The MSM candidate compares the health of mothers and babies in her own community with those of populations in other states, country, and world. This allows the student to identify areas needed for improvement in her own community and strategies for making those improvements.

MSM- MW 560: Development of a Community Program to Help Mothers/Babies. Credits: 3
The MSM candidate develops and implements a community program to help mothers and babies. The program should be based on actual community need. The student researches the most successful strategies, develops a strategy, and actually starts a working community program to help mothers and babies.

MSM- MW 580: Elective with Midwifery Curriculum Development. Credits: 4

The student creates a 3-credit Master's Level course from one of the following categories: Healthcare in Underdeveloped Countries, History of Medicine, Epidemiology, Medical Anthropology, Statistics, Other-approved by the College. The student submits her/his course syllabus to the College for review. Once the student has successfully created a course that can be approved by the College, the student is given permission to go ahead and complete the course. The course must include a Title, Credit Value, Course Description, Learning Activities, Learning Materials/Resources, Learning Objectives, and Evaluation Tools/Methods. The student receives 3 credits for completing the course and 1 credit for creating it.

Research

Please see the Research Guidelines section of this handbook. The Master's thesis must be based on a research project pre-approved by the College Faculty Board and carried out under the supervision of an approved preceptor.

- Master's Thesis10 credits
- Publish article based on thesis in a midwifery journal
- Write an abstract of the research for the College
- Place a bound copy of the thesis in the College library

Master of Science in Midwifery Degree Awarded:

1. When prerequisites are met
2. When course requirements are complete
3. When Master's Thesis is accepted by the Faculty Board
4. When article summarizing thesis is published in midwifery journal
5. When College has documentation of all of the above

Doctorate of Philosophy in Midwifery

The PhD is a three-year equivalent, which can be completed from 1 to 5 years.

Graduate Semester Credit Hours: 60

Prerequisites:

- College-recognized state or national midwifery license or certification
- M.A. or M.S. degree
- MW500 100 MANA Statistics Births

Academic Requirements:

PhD Candidates must complete 42 Semester Credits relevant to the areas of the candidate's research, focused on some aspect of midwifery or maternal child health.

Before beginning, each student creates a comprehensive overview of their program including a syllabus for each of their courses to satisfy the required number of academic credits, including:

Applied Statistics

Protocol Design

Scientific Method

Current Issues in Midwifery Practice (choose 3):

Barriers to midwifery practice

Midwifery ethics

Accreditation in developing countries

Sociology of midwifery

Candidates either self-author courses using the NCM PhD Syllabus Outline, to be completed upon approval from NCM, or submit PhD-Level credits completed at another accredited college or university for review by NCM for transfer credit.

Example:

Doctorate of Philosophy in International Maternal Child Health Care	Credits
NCM 500: History of Health Care	3
NCM 501: Statistics and Health Care	3
NCM 502: Midwifery Anthropology & Cultures of the World	3
NCM 503: Philosophy of Midwifery Ethics Through Mentorship	3
NCM 504: Leadership in Critical Decision-Making	6
NCM 505: Global Health Learning in Maternal Child Health	6
NCM 506: Practical Project to Improve Maternal Child Health	6
NCM 507: Focused Independent Study of Dissertation Topic	6
NCM 508: Mentorship Development	6

Research

Please see the [Research Guidelines](#) section of this handbook. The doctoral dissertation must be based on a research project pre-approved by the College Faculty Board and carried out under the supervision of an approved preceptor.

- Doctoral Dissertation based on a research project pre-approved by the College Faculty Board under the supervision of an approved preceptor..... 18 credits
- Publication of the research results in a professional journal or as a book

- Presentation of the research to a major national or international midwifery conference (e.g. MANA, ACNM, ICM, etc.)
- Write an abstract of the research for the College
- Place a bound copy of the Dissertation in the College Library

Doctorate of Philosophy in Midwifery Awarded:

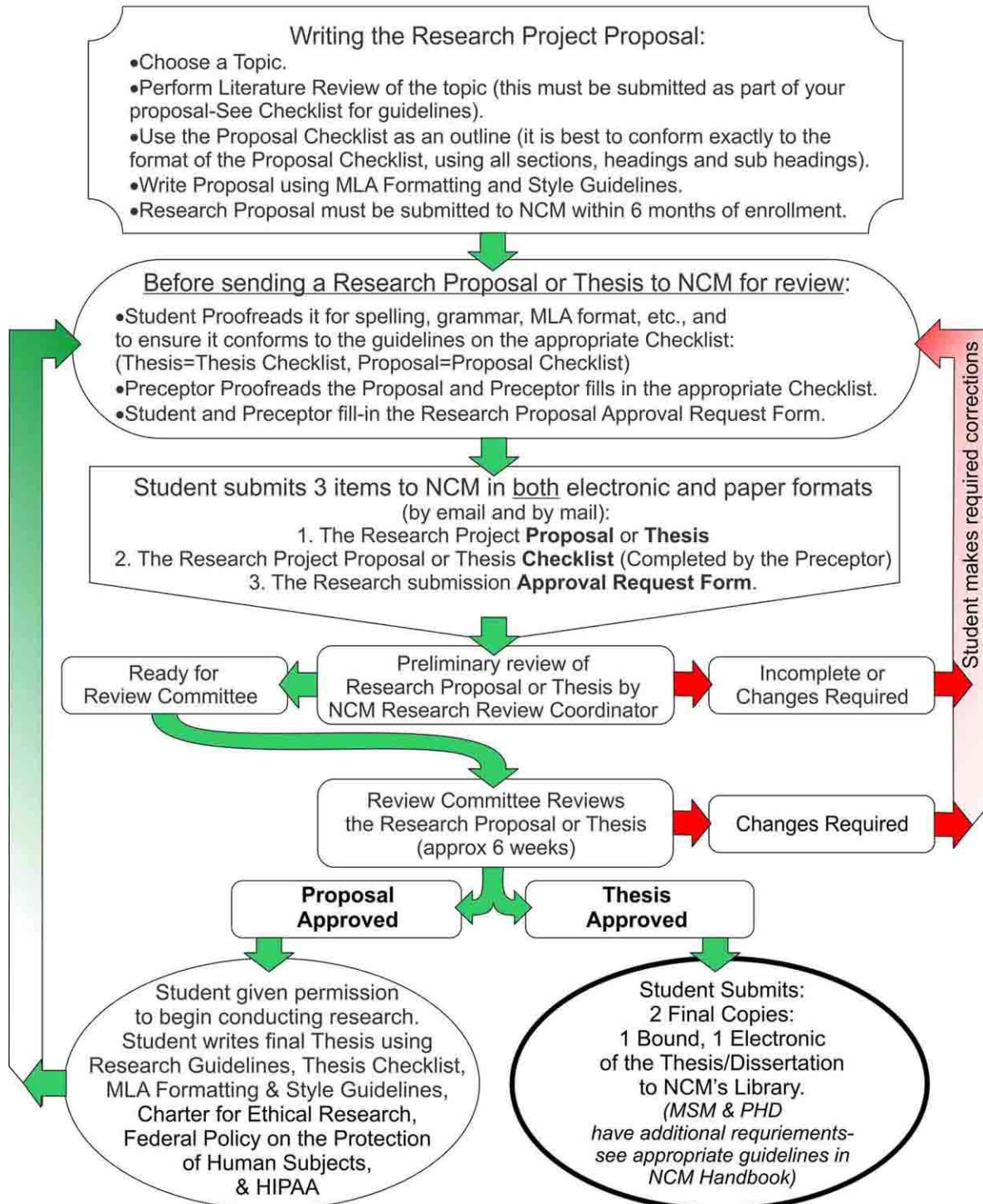
1. When prerequisites are met
2. When course requirements are complete
3. When Doctoral Dissertation is accepted by Faculty Board
4. When Doctoral Dissertation is published in a professional journal or as a book
5. When Doctoral Dissertation is presented at a major midwifery conference
6. When bound copy of the Doctoral Dissertation is placed in the College Library
7. When the College has documentation of all of the above

Research Guidelines

NCM's BSM, MSM, and PhD programs are research-based, all requiring a final Thesis or Dissertation based on a research project pre-approved by the College Faculty Board and carried out under the supervision of an approved preceptor.

Research Review Process:

Research Review Flow Chart



Research Project and Proposal Requirements:

All NCM candidates must adhere to the following guidelines for independent research projects in fulfillment of requirements for Bachelor of Science, Master of Science, and PhD Degree in Midwifery.

Research proposals must:

- **Be submitted and approved prior** to the commencement of data collection.
- **Consist of primarily original research** – that is contributing something new to the field of midwifery.
- **Be firmly grounded in, and informed by, existing research.** Your proposal should demonstrate knowledge of existing research and show where the new data or perspective provided by your project may contribute to ongoing analyses.
- **Contain data collection methods** that can be demonstrated to be safe for study participants. First and foremost, do no harm.
- **Adhere to standards of informed consent** and voluntary participation for all study subjects.
- **Demonstrate that the candidate has reflected** adequately on the possible ethical and political ramifications of the proposed research.
- **Demonstrate that the candidate has a grasp of the scientific method** and how to write using established scientific formats (include all the following sections: Introduction/Purpose, Thesis, Hypothesis (if ____, then ____, because ____), Literature Review, Methods, Results, Conclusion, Bibliography.
For more clarification see: <http://www.scribd.com/doc/2511201/How-To-Write-A-Thesis>).
- **Basic formatting and style** should follow MLA guidelines.

Proposal Format:

A written proposal containing the following components must be sent to, and approved by, the college prior to the commencement of data collection.

1. Introduction/Purpose – This section provides some brief introductory and summary statements on the area you propose to study. It should be very succinct (1-2) paragraphs and provide the reader with an immediate idea of what you are proposing to do. The final sentence of this section is your thesis, purpose or hypothesis statement. This is a one-sentence summary of the entire research proposal. For example, a study on optimal fetal positioning might have the following purpose statement: The purpose of this study is to examine the effects of prenatal pelvic rocking exercises on fetal presentation at the onset of labor.

2. Thesis/hypothesis – This section provides more detailed information on the purpose statement put forth in the introduction. This is generally a statement of what you expect to find and should include one or more hypotheses to be tested. For example, in the case of the optimal fetal position example above one hypothesis might be that women who spend 30 minutes per day between 37 weeks gestation and delivery in the hands and knees position performing pelvic rocking exercises will be less likely to have a baby in a posterior position at the onset of labor.

3. Literature Review – This section is a brief overview of the literature available on your topic. The point of the literature review section is to summarize what has been done so far on the topic and to demonstrate areas where more research is needed. In this section, students make a case for why their proposed study is necessary based on gaps in the literature.

4. **Methods** – In this section students cover all of the methods that will be used. These should be presented in the order they will be implemented in. These usually include:

A) **Recruitment:** How will participants be recruited (letters, email or flyer posting etc.)?

The most important part of this section is to demonstrate that you will guard against coercion and insure that participation is fully voluntary. See sample recruitment questionnaire (Appendix A).

B) **Projected sample size:** How large will your sample size be? Provide justification for your projected sample size. Will your sample be randomly collected or will you collect data on all individuals who volunteer?

C) **Informed Consent:** Demonstrate that informed consent will be insured for each participant. See sample informed consent form (Appendix B). How will you provide informed consent without biasing the results of your study?

D) **Confidentiality:** How will you insure confidentiality for participants? Pseudonyms? Coded numbers for participants?

E) **Data collection methods:** Once your sample is selected how will you go about collecting data, i.e. direct observation, questionnaire, survey, interviews, etc.?

F) **Data Analysis:** How will you analyze your data? For example, a specific software program for statistical analysis? Or qualitative analysis of themes from birth stories or other text based data?

G) **Funding:** If students have applied for or received funding from an external granting institution to cover research expenses, a list of these institutions and any guidelines or specific requirements/restraints dictated by them should be listed. Explain how your project conforms to these guidelines.

5. **Results** – In this section the student describes expected results and the format that will be used to present findings, i.e. text, tables, graphs, charts, video footage and/or photographs etc. The latter two require additional informed consent documentation. See sample visual representation forms (Appendix C).

6. **Conclusion** – This section includes a discussion of the projected significance of your project. What might it lead to and what further work needs to be done? This is also where researchers discuss how they will disseminate results. What will you do with your findings? Present it at a conference or a meeting of local midwives in your community? Attempted publication in Midwifery Today, Mothering Magazine or a refereed journal? All research that is published in any format must have documented informed consent and strict confidentiality of participants (**see individual submission, publication, & presentation requirements for BSM, MSM, and PhD**)

7. **Bibliography** – Include full citations for all of the sources pertinent to your topic. See Keene and Adams (2002) for help with formatting.

Research Project Format:

The following is an outline for submission of the final project. All NCM research projects must:

1. **Be based on the original research outlined in your proposal.** If unforeseen circumstances force a change of project, a new proposal must be submitted and approved prior to the commencement of data collection. If it necessary to change or modify only a small portion of the approved study, NCM must be notified in writing of proposed amendments to the original proposal.

2. **Demonstrate that the candidate has a grasp of the scientific method** and how to write using established scientific formats.
3. **Have already been done in the field.** This should include a detailed review of the work of others and a discussion of how your findings contribute to, refute, and/or expand upon existing knowledge in your field.
4. **Include a brief historical overview** of work in your field.

5. **Include** the following sections:

A. **Introduction** – As with the introduction/purpose section of the proposal, the introduction in the final research project should include brief summary statements on the area or subfield of midwifery research you have examined. It should provide the reader with an immediate idea of what you have done and found. The final sentence of the first or second paragraph is your thesis, purpose or hypothesis statement. This is the same or (more likely) the modified one-sentence summary of the project used in your proposal. Introductions generally include:

- a. **A quotation or illustrative story/example** that captures initial attention of your intended audience (avoided if intended for a clinical journal).
- b. **Brief summaries of information** on the background, nature, and scope of the problem.
- c. **Brief narrative** of how you came to select the research topic (again avoided if intended for a clinical journal).
- d. **Summary of the entire project** – thesis or purpose statement, methods and findings.

B. **Literature Review** - This section is a comprehensive overview of the literature available on your topic and is generally expanded and modified from the review in your proposal. Given the hindsight of having completed the project, students should make sure the literature review provides the reader with all of the pertinent background they will need to understand original findings and interpretations. The point of the literature review section is to summarize what has been done so far on the topic and to demonstrate areas where more research is needed. In this section, students make a case for why their study was necessary based on gaps in the literature.

C. **Methodology** – this section expands on and provides more specific details on the actual methods implemented. It should include all of the components listed above for the methods section in the proposal with the following additions:

- i. **Any modifications** made to the project while you were implementing it. Almost every research project entails some modifications of the original methods proposed.
- ii. **Justification for the methods** you used. “Methods” refers to the actual activities engaged in during data collection while “methodology” literally means the study of methods. Methodology sections, thus, generally include a description of methods and a justification of, and critical reflection on, the methods you employed. Why did you use them? Generally this is because other researchers have tried them with success in the past. You should cite a handful of these researchers. How well did they work? What, if any, problems did you encounter, and how did you modify methods as needed? Researchers are generally self critical in this section preempting any attacks on methodological flaws. For example, if you know that the midwives you studied did not keep accurate records of transports, you might note that your data can only provide estimates of transport rates. Based on what you know of the practice, is the estimated

rate high or low in your opinion? This section equips the reader to evaluate the accuracy and validity of your findings.

D. Results – In this section students describe pertinent findings, but do not offer any interpretations of them. Charts and graphs are almost always used to summarize results. Readers should be able to read this section and know exactly what you found. Particular methods dictate values that should be reported (see learning objectives for the NCM Introduction to Statistics for Midwives course). For example, sample size, means and standard deviations should be reported for all statistical analyses. Only the results pertinent to your thesis/hypothesis statement should be reported here as extraneous findings generally confuse the issue. Save those for future papers.

E. Discussion – In this section students discuss the significance of findings and relate them to the other research available.

i. **Make clear what your arguments are and then summarize the evidence** for each assertion.

ii. **What do your findings mean** for childbearing women and for midwifery as a field? The significance of your findings should be made clear here and supported by all available evidence. Describe the theoretical and /or applied significance of your findings. This usually involves critiquing and debunking competing explanations.

iii. **Point out any exception or problems with the data** that muddy or complicate your interpretations. How might you address unsettled points?

F. Conclusion – No new information should be presented in the conclusion. The conclusion is simply a place to restate your thesis/hypotheses and your main findings. At the end of the conclusion, it is common for researchers to point out areas of future study and to pinpoint information needed to further clarify their own arguments/findings on the topic

G. Acknowledgements – This section generally includes acknowledgment of:

i. **The institution/s that supported your research** like NCM.

ii. **Study participants.**

iii. **Any granting institution/s** that provided funding.

H. References – Include full citations for all resources cited in the final research paper. See Keene and Adams (2002) for help with formatting.

Preceptors

(Also see “Student-Preceptor Relationships” under “Common Program Requirements” in this handbook)

Choosing a Midwifery Preceptor

NCM does not match students with preceptors. Students must find their own preceptors. Students must have a preceptor 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?

- Send out an email to everyone on your list 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.

Things to talk about:

- Length of study:
Students can complete our program within 1-5 years. Most of our students complete their program within 2-3 years.
- Payment:
Students pay their preceptor directly. If you are going to do a trade, please remember to write up a contract. This will avoid any misunderstandings. You can always evaluate it every 6 months so that everyone feels there is a fair exchange.
- 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 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.)

Sample Questions for Prospective ASM Preceptors & Students

Sample questions for preceptor and student to discuss

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’s 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 her/his 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?

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
- Payment to preceptor
- Completion of assignments and evaluations

If you need assistance, please call or email the NCM office.

Faculty/Preceptors

The National College of Midwifery recognizes the following categories of practitioners as acceptable preceptors for training midwives:

1. Licensed Midwives
2. Midwives holding College-accepted certification by their State midwifery organization
3. Certified Nurse Midwives
4. Physician Assistant Midwives
5. Licensed Physicians practicing Obstetrics

Preceptor Qualifications

The preceptor must hold at least the academic credential sought by the midwifery student.

Associate of Science in Midwifery Preceptors:

- Licensed Midwives
 - Must have license issued by the jurisdiction in which the midwifery practice is located
 - Must have had one year of experience since licensing
- Certified Midwives
 - Must have a certification from a College approved state or national midwifery organization
 - Must have had one year of experience since certification
- Certified Nurse Midwives
 - Must have had one year of experience since certification
- Physician Assistant Midwives
 - Must have had one year of experience since licensing
- Licensed Physicians practicing obstetrics
 - Must have had one year of experience since licensing

In addition, in accordance with the Midwifery Education Accreditation Council Standards, the Associate Degree student must have one (or more) preceptor(s) registered with the College who must be able to provide the student with the opportunity to obtain the clinical skills and experiences required for attainment of the Certified Professional Midwifery credential available from the North American Registry of Midwives, including the supervision in homes or other out-of-hospital settings.

Bachelor of Science in Midwifery Preceptors:

- Licensed Midwives or Certified Midwives
 - Must have a BA or BS degree.
 - Must have a License issued in the state where the practice is located or local or national certification
 - Must have had one year of experience since licensing or certification.
- Certified Nurse Midwives
 - Must have a BA or BS degree.
 - Must have had one year of experience since certification.
- Physician Assistant Midwives
 - Must have a BA or BS degree.
 - Must have had one year of experience since licensing.
- Licensed Physicians practicing obstetrics
 - Must have had one year of experience since licensing.

Master of Science in Midwifery Preceptors:

- Licensed Midwives or state Certified Midwives
 - Must have an MS or MA degree.
 - Must have had one year of experience since licensing or certification.
- Certified Nurse Midwives
 - Must have an MS or MA degree.
 - Must have had one year of experience since certification.
- Physician Assistant Midwives
 - Must have an MS or MA degree.
 - Must have had one year of experience since licensing.

- Licensed Physicians with Research Experience
 - Must have had one year of experience since licensing

Doctor of Philosophy in Midwifery Preceptors:

- A person holding a Ph.D. in any health-related field.
- A Licensed Physician, with doctoral-level research experience

Preceptor Job Description: Rights, Responsibilities, and Requirements

Preceptors must meet the requirements detailed under “Preceptor Qualifications”.

In addition, must agree to meet all of the following:

1. Must be able to provide the student with the required academic and/or clinical experience and supervision.
2. Must hold the equivalent or higher academic degree than that sought by the student.
3. Must be either: Licensed Midwife, Midwife holding College-approved certification by my state midwifery organization, Certified Nurse Midwife, Physician Assistant Midwife, or Licensed Physician practicing obstetrics.
4. Must have had at least one year of on-the-job experience since licensure/certification.
5. Must agree to provide grades for the academic requirements, and transcripts of experiences supervised by me.
6. Must agree to 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, Clinical Record Forms, updated MEAC Abbreviated NARM Skills form, and Syllabi for upcoming trimester at the end of each trimester. These items are due each January 31st, June 30th and September 30th.
7. Must have formulated a supervision and back-up plan based on these regulations and guidelines, which will promote the safety of mothers and babies, which adhere to the supervision requirements of our State’s midwifery regulations and of the guidelines of all relevant State midwifery associations.
8. Must practice within the midwifery guidelines of the state midwifery association, or the CPM Guidelines, in the absence of state guidelines.
9. Must agree to be evaluated annually based on trimesterly student-preceptor evaluations, work submitted, and internal incident reports, and to participate in NCM Supervision of my teaching participate in two-way evaluation sessions
10. Must agree to submit student and preceptor evaluations and plans for the upcoming trimester at the end of each trimester,
11. Must agree to incorporate the International Confederation of Midwives Core Competencies for Midwifery Preceptors into the teaching process.
12. Must ensure that the College has all updated/renewed documents relevant to the status as a preceptor, including:

<ol style="list-style-type: none"> a. Copy of current certification/license b. Copy of most advanced degree c. ASM Contract for each student enrolled in NCM d. 3 References (upon application) e. Curriculum vitae/ Resume 	<ol style="list-style-type: none"> f. Floor plan of academic and clinical space to be used, showing fire extinguishers, smoke alarms, and emergency exit plan g. Equipment and restocking checklist for clinical facility h. Safety Form listing standards followed in practice
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13. Must 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.
14. Must agree to meet with my 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.
15. Must be aware that the College provides free counseling and mediation services to students and preceptors. In the event of any conflict or dispute with her/his student, the preceptor agrees to contact the College administration for mediation services, and agrees to encourage the student to contact the College administration for additional counseling by College staff. The College will fill out an internal incident report evaluating my handling of the disagreement, and that a copy of this report will be sent to the preceptor, while another copy will be placed in the preceptor's College file.
16. Must understand that the following are the conditions for probation or termination by National College of Midwifery:
 - a. Preceptor fails to adhere to the duties set out in this contract
 - b. Preceptor fails to provide student with the required academic or clinical supervision
 - c. Preceptor fails to debrief student to her satisfaction after an adverse clinical outcome, and subsequently fails to engage in mediation by college administration as requested by student
17. Must agree to report to the College any changes in a student's status, such as completion of clinical and academic requirements, successful completion of NARM or state midwifery certification exams, or withdrawal from the program.
18. Must agree to sit on the Faculty Advisory Board as an advisor to the College, and to sit on review committees for research projects by Bachelor, Master and Doctoral degree candidates of the College.
19. Must agree to review the College materials for the student and to send the College any recommendations for improvements.
20. Understand that the preceptor may attend and will be informed of annual College Board meetings.
21. Understand that the preceptor may gain access to her/his personal preceptor file maintained by the College.
22. Understand that the preceptor may be paid tuition directly by the student according to this mutually agreed upon contract. A copy of this contract will be kept in the student's College files.
23. Understand that the preceptor may 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 pay me according to the Student-Preceptor Contract, and will notify the College in writing of such occurrence.
24. Understand that the preceptor may request mediation services with the student from the college administration at any point this is needed and I may participate in the College Grievance Procedure according to College policy at any time this is needed.
25. Must be aware that the preceptor is required to file with the IRS and my State taxation department on all income earned from students in NCM programs.

Clinical Preceptors additionally:

1. Must have disclosed the volume of clinical interactions and the probable time frame necessary for completion of the program's clinical requirements with the student.
2. Must agree 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.

3. Must agree 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 MEAC Abbreviated NARM Skills List.
4. Must agree 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.
5. 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.

Preceptor Evaluation & Supervision:

Beginning in 2011, all preceptors must submit an evaluation with the grades and clinical documentation for any trimester in which they were active.

The evaluations are reviewed by the office staff and if there are any issues raised by the student and/or preceptor, they are referred to the President or the Education Committee to be resolved in a timely manner.

Preceptors are evaluated on an annual basis by the President or her designee. NCM evaluates the preceptor using the following:

1. Student/preceptor evaluation form submitted at the end of each trimester
2. Consideration of the communications with preceptor and student, office staff, incident reports, and termination forms
3. Review of oversight form

The Annual Preceptor Evaluation, Guidance & Direction Form addresses the following:

1. Implementation of learning plans specific to the student's degree level
2. Identification of expected learning outcomes for the student
3. Identification of student's learning style and the strategy to match it
4. Identification of obstacles/resistance to her student's learning and the strategy to address it.
5. Identification of her student's talents and the strategy to maximize them
6. Implementation of formative assessments
7. Implementation of summative assessments
8. Addressing issues raised in the trimesterly student/preceptor evaluation
9. Resolution of disagreements and addressing incident reports
10. Action taken action based on review

Written Evaluation Reports will be sent to preceptors and a copy placed in the preceptor's file.

Changing Preceptors / Termination of student and preceptor contract

Sometimes the student and preceptor find they are not a good match. If you decide to discontinue your working relationship, both student and preceptor need to 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.

Mediation is available through the office only if both parties agree.

Preceptor Enrollment

See “Enrollment”

Adding a preceptor

New preceptors to NCM must fill out the complete preceptor application and 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.

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

Adding Multiple preceptors from the same Facility

Each preceptor must submit the following:

- 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

The Student and Preceptors will also need to fill out:

- Student/Preceptor contract for multiple preceptors

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

All forms can be found on our website at www.midwiferycollege.org or we will be happy to email it to you upon request.

Preceptor Teaching Guides

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

Academics:

(Please refer to the individual course syllabi on the student/preceptor discs. Syllabi are also available for download from our website: <http://www.midwiferycollege.org>)

Elements of academic training/learning

- 1) Preceptor and Student review the course syllabus for credit value, learning objectives, learning materials, learning activities, and evaluation methods.
- 2) Student reads text(s)/source (less than 5 years old).
- 3) Student answers Learning Objective Questions from course syllabus, and cites text and page number where she/he found the answer.
- 4) Preceptor Elaborates in lesson (some courses are very long and will need to be broken down into smaller sections by the preceptor):

Academic Lesson plan overview

Introduction

- Contact (a relevant catchy story or something to get the attention of the student/s)
- Course Title and Name of Preceptor
- Objectives (can be read directly from the syllabus): “By the end of this session you will be able to..._____”
- Value (may be same as the contact- This is usually the Course Description on the syllabus).
- Conduct (what the student should be doing while the preceptor is teaching)

Body

- Teach the learning objectives-answer the learning objective study questions on the syllabus.
- Give examples from your real life experience.
- Give examples of when the student will see it/use it during the apprenticeship.

Summary

- Learning Objectives: “You are now able to..._____”
- Restate value
- When will they see/use this in required NARM Skills and/or MANA Core Competencies for the course.
- Ask if the student has additional questions?

4) Preceptor goes over Study Questions with student and evaluates student completion, understanding of the information, and ability to locate the information in a current text/source.

5) Student takes quiz/test.

6) Preceptor records completion of the course by entering the grade and date, on the student record form and signing and dating her name. Passing grade is 80%, however, the preceptor and student should work together for 100% understanding of the Learning Objectives.

7) Student uses material in clinical setting and in NARM Skills (completed throughout the apprenticeship)

Clinical Visits and NARM Skills:

(Please see the clinical page of the student/preceptor disk for NARM Skills Requirements and Comprehensive Clinical Care Requirements, as well as recording and record keeping guidelines)

Lesson plan for clinical visits (Actual or Role Play):

Briefing:

Briefing ensures that the student knows what is the purpose of the visit is, knows what she 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 she/he 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 she/he learned/practiced, has instant feedback on what she/he 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 she/he has Questions?

Births: Preparation for Births for Students in Training

Briefing:

- Identify:
 - Client
 - 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

Definitions:

***Mastery** of a clinical skill or Core Competency consists of the 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®.

****Direct supervision:** a circumstance of treatment in which the preceptor must be present on the premises to diagnose, authorize, and approve all work performed on the patient by the student/s.

Student Policies

Student's Rights and Responsibilities

Students agree to all of the following:

1. Must have read and I 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 one year, 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. Must submit a plan for completion to NCM signed by my preceptor and student, and the student will be responsible for annual accreditation fees. If the student has not completed her/his program within 3 years, The student further understands that ASM is a 3-year equivalent program, which can be completed from 1 to 5 years. The 5-year limit for completion of my degree includes any time taken on inactive status, and that my annual accreditation fee must be paid even during those years I 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 my 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 her/his 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 include 30 Well Woman/Family Planning Visits, 20 Initial Prenatal Visits, 55 Prenatal Visits, 20 Labor Assists, 20 Deliveries of Newborn and Placenta as Primary Midwife, 20 Newborn Examinations, 40 Postpartum Exams of Mother and Baby, 10 of the 20 Births as Primary must be in Out of Hospital Setting, and 3 Continuities of Care. Additionally I must complete the MEAC Abbreviated NARM Skills Form. These clinicals must take place over at least 12 months 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 her/his clinical experiences and to have her/his preceptor personally supervise, evaluate and sign off on all her/his clinical experiences.
14. Understand that if the student desires more clinical experience he/she can request the College refer her/him to a high volume birth clinic.
15. Understand that NARM requires that 10 of the student's births as primary must be completed within 3 years of taking the NARM exam.
16. Understand that NARM requires the signatures of 2 preceptors on 4 of the NARM Skills.
17. Understand that all academic and clinical work submitted towards the student's degree is subject to approval by NCM.
18. Understand that upon enrollment with NCM or any other MEAC school, NARM requires me to purchase an application packet including the paperwork I will need to complete prior to taking the NARM exam.
19. Understand that the administrative fee paid to NCM may be deductible on the student's personal income taxes, but that the fees paid to the student's preceptor are not deductible.
20. Understand that there are different routes of entry to midwifery. The National College of Midwifery trains Direct Entry Midwives not Nurse Midwives.
21. Understand that there are different learning styles. The National College of Midwifery is geared towards the innovative learner vs. learners requiring more structure. And understand that this is a self-directed program.
22. Understand that the National College of Midwifery does not have a job placement program and that upon graduation; it is the student's, not the College's responsibility to find employment as a midwife.
23. 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.
24. Understand the steps the student must take to become a CPM and/or gain state licensure.
25. Understand that the National College of Midwifery is accredited by a small, private accrediting agency, the Midwifery Education Accreditation Council (MEAC), recognized by the US Department of Education. Most colleges and universities are accredited directly by the US Department of Education, through one of their five regional agencies. These schools only accept credits from schools with the same type of accreditation. If the student is planning to continue with another college or university, it is her/his responsibility to check with them if they will accept credit from NCM.
26. Understand that if the student plans to seek licensure in **California** she/he must complete two additional courses, in Chemistry and Child Development, and additional Learning Objectives in anesthesia/analgesia, suturing and episiotomies.
27. Understand the clinical requirements for the student's degree and the number of clinical experiences she/he will receive with each preceptor. If the number of clinical experiences she/he will receive with a particular preceptor will not suffice for the student's program requirements, the student has an *additional clinical preceptor_enrolled* with the National College of Midwifery. The student further understands that she/he will not be enrolled until she/he has contracts accounting for all clinical experiences.
28. 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.

Student dismissal

Dismissal

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

- Refusal 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 confidentiality, dishonesty, stealing, plagiarism, sexual harassment, and violation of any local, state and federal laws.

Withdrawal from the Program

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 and re-enrollment

Reinstatement:

Students have 5 years to complete their program. If you withdrew and are still within the original 5 year timeframe, you 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 her program. She would need to finish her program by 2005.

- There is a \$500 re-instatement fee.
- Student would also be responsible for past due, current, and future accreditation fees for each year that she/he is 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 timeframe. 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:

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.

Student with Disabilities

The Americans With Disabilities Act is designed to protect persons with disabilities from discrimination. They recommend that the “essential functions” necessary for performing the proposed job, schooling, etc., be fully described so that the candidate can determine if she/he can perform these “essential functions”. The “essential functions” for midwifery students might be described as follows:

1. To read and understand technical and scientific material
2. To apply knowledge obtained from books, classes, clinical experiences to real-life situations
3. To memorize facts and test successfully for them
4. To write coherent essays analyzing health problems
5. To research topics relevant to midwifery practice and present findings
6. To perform differential diagnoses based on information given by the patient and obtained by oneself clinically
7. To perform clinical skills for obtaining physical information from clients
8. To perform clinical skills essential to the physical tasks that may be necessary during prenatal, birth, post-partum, newborn and well-women care
9. To lift and reposition clients
10. To perform motor skills such as suturing, starting IVs, intubating, injecting, driving vehicles
11. To correctly administer medications
12. To work long hours at a time, sometimes without much break, even for days at a time
13. To communicate successfully with clients, their families, your colleagues, doctors, hospitals, laboratories, emergency services, community resources
14. To elicit essential information from clients to ascertain their state of health
15. To record clients' health and progress and fill out required official documents
16. To tell the truth about your knowledge of any facts relevant to a clients' health
17. To tell the truth about your skills levels
18. To refer all clients who are out of your scope of expertise/practice to appropriate practitioners
19. To keep confidential all information about all clients
20. To teach clients about the functioning of their bodies, during the prenatal, intrapartum, postpartum, newborn, interconceptional and menopausal phases of life
21. To orient clients to resources, information, behaviors, practitioners that could help them with their health
22. To inform clients of available alternatives
23. To obtain informed consent before undertaking any treatment or testing
24. To perform self-evaluation and preceptor evaluation

25. To successfully perform midwifery skills under preceptor supervision and to gradually take increased responsibility until you can perform all midwifery tasks independently
26. To seek assistance from qualified persons whenever in doubt
27. To maintain self-health, mental, physical, and spiritual

The ADA does allow employers, preceptors, etc., to ask a student if they can perform the essential functions. Employers/preceptors can ask the student to describe or demonstrate how they will perform an essential function. They can also test for aptitude, physical agility, intelligence and specific skills.

The College Administration is available to help students and preceptors think through reasonable accommodations for students with disabilities.

Grievance Policy

Individuals will not be discriminated against as a consequence of making a complaint. Each complaint will be handled in a respectful, objective and confidential manner. The student and/or preceptor have the right to ask for a different mediator if they desire.

Student-preceptor disagreements usually happen when there is a miscommunication about expectations. The College staff makes every effort to find out all the details and listens in a non-judgmental way. Most of the time, having an objective and compassionate listener is enough. The Staff member will offer mediation.

In the case of a conflict between a student and a preceptor, the College will ask that the complaint be made in writing. The College will respond within 30 days. Once the complaint is received, logged into the mail log, a Grievance tracking sheet is started. This will track the grievance to ensure timely response.

Each individual will be asked if they would like counseling and/or mediation. The student and/or preceptor are free to accept or reject counseling and/or mediation. Individuals will not be discriminated against as a consequence of making a complaint, or rejecting counseling or mediation, or choosing another mediator.

The College's goal is to help the student and/or preceptor an amicable solution, and to offer assistance in securing the desired result. The Staff will take notes on all conversations relating to the matter, keeping confidentiality for all individuals. The report will include both points of view, any actions taken by the College, and the resolution reached. This report will be placed in the student's and preceptor's files, as well as in the grievance file for easy reference during accreditation reviews.

In the event that a Student and a Preceptor no longer wants to work together, the College will send each of them a form that terminates their relationship. This form asks if the parting is mutual and again asks if they would like the College to mediate. The form allows each side an opportunity to state their view point and also asks the preceptor to complete any paper work and turn it into the College within 30 days. It also asks if the student has any outstanding payments to the preceptor.

If the Staff is unable to resolve the conflict to the satisfaction of both parties, and both parties desire to continue the process, the matter will be referred to the President. The President will

respond within 30 days and provide mediation by phone. If the student and/or preceptor are dissatisfied with this resolution, they may request mediation from the Board of Directors. The Board of Directors will have 60 days to respond to a written request from the student and preceptor.

All grievances, written notes from phone calls and mediations, the NCM Board, detailing the outcome of these processes, will be maintained in the College's complaint file for a minimum of seven years.

In the case of a complaint against the College, a written complaint will be sent to the President of the College, who will respond in writing within 30 days. If the President's response is unsatisfactory, the complaint will be forwarded to the Board of Directors. The Board of Directors will respond within 60 days of receipt of the complaint. Written evidence of the outcome of the complaint and the NCM Board will be maintained in the College's complaint file for a minimum of seven years.

New Mexico Complaint Registration

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.

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

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.

Non-Discrimination policy

The National College of Midwifery admits staff, faculty, and students of any race, color, national or ethnic origin, religion, sex, physical ability and sexual orientation, to all rights, privileges, programs, and activities generally accorded or made available to staff, faculty, or students of the College. The National College of Midwifery does not discriminate on the basis of race, color, national or ethnic

origin, religion, sex, physical ability or sexual orientation in the administration of its educational policies, admissions policies, or any other college-administered program.

Student Services

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. We are happy to help you successfully complete your program.

Learning Resources

- A booklist is included in the course materials for the Associate Degree. In the event that a student is unable to obtain a needed book, the College may have it available for lending.
- The College Office can always be consulted for ideas for accessing locally available resources. The College is committed to helping students and preceptors obtain needed resources.
- If you have access to the Internet, and wish to access health-related research articles, we recommend the National Library of Medicine's PubMed: <http://www.ncbi.nlm.nih.gov/PubMed/>.
- Another wonderful resource is the World Health Organization Reproductive Health Library, an online database (requires subscription) focused on research in maternal/child health worldwide. Be sure to check your local library, your hospital library, your local college and university libraries

Book Lending Policy

Students can borrow up to 3 books at a time. The College sends the library materials via UPS with proper insurance to cover replacement value. The College charges the student's credit card for the price of shipping and insurance. An email is sent to the student with the amount charged to their credit card and 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.

Advising, Counseling, Tutoring

It is the student's responsibility to meet weekly or at regular intervals with her/his 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 tutoring resources.

The College is available to assist with any questions and concerns. A phone appointment can be made for brain-storming and problem-solving.

Student Orientation & Handbook

An ASM orientation pamphlet is sent to all new students and preceptors. It is also available on the disc and in the Catalog/Handbook. It is the student's responsibility to review the orientation pamphlet with her/his preceptor(s). Students and preceptors are welcome to call the College for additional assistance with orientation to the College's materials and their implementation.

BSM, MSM & PhD students will be contacted by email by the Review Coordinator after enrollment to arrange an orientation phone call.

Job Placement

The National College of Midwifery does not offer job placement. Please check our bulletin board on our website for posted positions.

Credentials, practice, employment after graduation

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 will be practicing.

Transcript requests

Please submit a completed transcript request form along with payment to the office.

College Governance

Student and Preceptor Participation in College Governance

Students and their preceptors are invited to attend the College's annual board meeting, which takes place in New Mexico, to provide feedback to the College and directly participate in directing the program. Agendas for the Annual Meeting are posted on the College's website. 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 administration. Suggestions are further solicited from students and faculty on trimesterly Evaluation Forms.

Faculty

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

Faculty Advisory Board

The NCM Board shall create a Faculty Advisory Board which shall be composed of current and former NCM midwifery preceptors as well as interested individuals representing a variety of fields related to midwifery and maternity care who are widely known for their commitment to midwifery and the preservation of the normal process of childbearing.

Purpose:

- To provide NCM with consultation and support in the development of policies and programs;
- To lend stature to NCM by the individual's association with the school;
- To serve as reminders to NCM and the community of the worldwide support enjoyed by midwives;
- To provide NCM students, staff and Board with models and inspiration through the individual's work and publications.

Board of Directors

The Board of Directors is made up of members chosen at the annual meeting and consists of President, Vice President, Secretary and Treasurer. They meet annually or more often as needed.

Current members

Ezra Depperman - President
Jenny West - Vice President
Mary Ann Baul - Treasurer
Franziska Ortega-Moore - Secretary
Cassandra Jah