



# NATIONAL COLLEGE OF MIDWIFERY

## Policy and Procedure Manual

### 2017

Revised 8/10/17

1041 Reed Street, Suite C  
Taos, NM 87571

Tel: (575) 758-8914  
Email: [info@midwiferycollege.org](mailto:info@midwiferycollege.org)  
Website: [www.midwiferycollege.org](http://www.midwiferycollege.org)

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## **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. Our business license is through the Taos County.

### **Procedure:**

Accreditation cycles are every 4 years. MEAC notifies the College when a new re-accreditation cycle begins. NCM completes a SER (Self Evaluation Report) and submits it MEAC.

Licensure by the New Mexico Commission on Higher Education is renewed every June. The application is accessed via their website.

Our business license is renewed each August. Taos County sends us a renewal notice.

Authorization to offer post-secondary midwifery education in jurisdictions where NCM will enroll students -updated 4/15/2016:

In order to accept students in a state or country NCM will obtain:

- Appropriate authorization, or
- Notice from the relevant governmental body in that jurisdiction that it is exempt from needing authorization.

When NCM would like to begin accepting students from a state/country, NCM will:

- 1) Research the laws of the state/country in regards to:
  - a) Physical presence triggers for institutions of higher education
  - b) Appropriate laws and regulations regarding institutions of higher education, foreign institutions of higher education, and the application of these requirements to NCM's specific activities/proposed activities within the state/country.
- 2) Send a letter to the department of the state/country governing higher education to determine if licensure or other approval is required.
- 3) Once an answer is received from the state/country:
  - a) NCM will consider the requirements carefully and decide whether to seek approval and comply with requirements of the state/country, or
  - b) If the requirements are too onerous for financial or other reasons:
    - i) NCM will not accept new students in that state/country.
    - ii) NCM will put a notice up on its website that NCM will not accept students within that state/country. Those NCM students who are already enrolled will not be served by NCM if they choose to move to the prohibited state/country during their current enrollment.
- 4) In the case that NCM already has students working within a state/country, and during that enrollment, NCM is notified by the state/country or becomes aware that the laws or requirements have changed and NCM is now required to obtain licensure/permission/other to have students there:
  - a) NCM will comply with requirements of the state/country, or
  - b) If the requirements are too onerous for financial or other reasons:
    - i) NCM will cease to accept students in that state/country,
    - ii) NCM will put a notice up on its website that NCM will not accept students in that state/country and those NCM students who are already enrolled will not be served by NCM if they choose to move to the prohibited state/country during their current enrollment, and

- c) NCM will make every attempt to teach out the students that are currently already enrolled and working on their program within the state/country.

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## **ENROLLMENT**

### **Timeframe for Completion**

NCM programs are each 3 year equivalents. The ASM program can be completed from 2-5 years, and the BSM bridge program can be completed between 1-5 years. Students who have not completed their programs after 2 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 2 years the student will also be responsible for paying the annual MEAC accreditation fee until graduation.

### **Types of Enrollment:**

**ASM:** \$4,900 until September 1, 2017, then \$9,000

### **BSM Bridge:**

- A. **BSM Bridge for CPM/LM:** Administrative Fee: \$4,900, plus annual fees due every year of enrollment.
- B. **BSM Bridge for NCM ASM Graduates:** Administrative Fee: \$2,500, plus annual fees due every year of enrollment.

**ASM-BSM Dual Enrollment:** Available starting September 1, 2017-December 31, 2017 or Launch of Online Program (whichever comes first). Administrative Fee: \$9000. Details: Students have 2-5 years to complete ASM program, BSM requirements must be completed no more than 18 months following ASM graduation. Annual Fees: Due every year of enrollment beyond 2 years.

**Non-Degree Programs:** A-la-carte courses/Stand-alone courses/CEU's: \$150 per credit

*Proposed:* **Academic Course Access-1 Trimester:** \$2000/trimester. Does not culminate in a degree or certificate, but credits can be used to satisfy NCM Program requirements.

### **Visas**

NCM does not sponsor student visas

### **The Application Policy:**

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

Each individual program has distinctive application forms, prerequisites and requirements. There is a checklist of all the documents needed on the Application Forms. Application forms can be found at <http://midwiferycollege.org/Apply.html> or can be emailed by request.

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

student and preceptor A. Indicate on the contract, B. Continue working together, C. Contract ends upon graduation or upon completion of a Termination of Contract form with the preceptor.

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

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

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

BSM students each require at least one preceptor.

Applications must be submitted by mail in one single packet as NCM discards incomplete applications after 60 days. Applications that are faxed or emailed are not 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 the application fee is in the NCM office, NCM reviews the materials and notifies the student of the decision regarding acceptance. The Student Rubric For Admission is completed to assess readiness to enroll and succeed in the appropriate program. The Student Rubric for Admission is distinct for each Program(ASM or BSM), and includes both objective (requirements and completed paperwork) and subjective (does the student possess the attributes necessary to be successful in the program she/he has chosen).

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 Pre-Enrollment Interview/Assessment
- ✓ 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

- ✓ Proof of Graduation from High School. Acceptable items: Diploma/High School Transcript/GED/graduation verification letter from the registrar's office of the school from which the student graduated, or another equivalent form of official proof of graduation.
- ✓ Statement of Understanding
- ✓ Pre-Enrollment Questionnaire

#### PRECEPTOR

- ✓ ASM Preceptor Application Form
- ✓ 3 Reference Forms for preceptor
- ✓ Copy of preceptor's current certification/license with Date of Expiry
- ✓ Official transcripts of prior education sent directly from the institution at which it was taken
- ✓ Preceptor's CV/Resume
- ✓ Oversight Form
- ✓ Copy of highest academic degree
- ✓ Preceptor Facility Verification Letter
- ✓ Statement of Understanding
- ✓ Pre-Enrollment Questionnaire

#### 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

#### Instructor for General Education Requirements:

- ✓ Instructor Application Form
- ✓ Contract Between Student, Instructor, and NCM (one required for each instructor)
- ✓ Transcripts of prior education proving appropriate credentials for the area of instruction to be sent to NCM directly from the institution at which they were received.
- ✓ OR documentation of at least 3 years' experience in the appropriate area
- ✓ Instructor's CV/Resume
- ✓ Oversight Form

### **BSM Application Required Documentation Checklist**

#### STUDENT

- ✓ Pre-Enrollment Interview/Assessment
- ✓ 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
- ✓ Proof of Graduation from High School. Acceptable items: Diploma/High School Transcript/GED/graduation verification letter from the registrar's office of the school from which the student graduated, or another equivalent form of official proof of graduation.
- ✓ Midwifery License or Certification
- ✓ Statement of Understanding
- ✓ Transcripts for the following college-level prerequisite courses, or if not yet taken students can complete these prerequisite courses concurrently with BSM degree program:
  - Analytical Writing



- Fundamentals of Math
- Chemistry (California students only)
- Child Growth & Development (California students only)
- ✓ Pre-Enrollment Questionnaire

## PRECEPTOR

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

### **Enrollment Procedure:**

All student/preceptor application materials are logged in the Mail Log and date stamped when received by the office. A copy of any check or money order is copied. The check/money order is stamped for deposit and placed in the deposit envelope, and the copy is attached to the student application.

Student and/or preceptors are contacted by phone and/or email when the office receives an incomplete application. An email is usually generated and sent to the student/preceptor with a list of documentation needed. Incomplete applications are held for 60 and then sent back to the student and/or preceptor.

Applications are processed only when all the documentation is complete. The NCM office usually processes applications and new contracts once a week.

Rubric is used to determine student likelihood to succeed in NCM program. See Student Enrollment Rubric

Student and preceptor information is entered into the Access database.

- Open a new file to enter student or preceptor
- Check to see if preceptor is already in Access to eliminate the possibility of a duplicate file
  - Either enter in new preceptor or check existing preceptor information, and update if necessary
- Enter information for student/preceptor in Access
- Print out student and/or Preceptor Access information sheet

Set up file folder

- Red for ASM student
- Green for Preceptor
- Yellow for BSM

Set up a new student record

Send an enrollment packet to student/preceptor

- Welcome letter
- Student record
- Orientation pamphlet – teaching guide for preceptor
- Birth calculation card

Send an email to both student and preceptor to notify them of the enrollment date.

Log out in mail log.

## **TRANSFER CREDIT:**

### **NCM Credit Transfer TO Other Institutions**

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

### **Accepting Transfer Credits FROM Other Institutions**

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.

### **Procedure for Accepting Transfer Credit**

Credits are evaluated by the Registrar using the guidelines below. Student must provide an official sealed transcript to the NCM office. The Registrar reviews this transcript for applicable credits. Any credits that are accepted as transferable are updated on the student record. A copy of the updated student record is emailed to the student and one is placed in the file. The official transcript is retained in the student file.

***The prospective credits are reviewed by the Registrar for the following items using, but not limited to the Granting Institution's Course Catalog. The Registrar uses a Credit Transfer***

**Summary Form to document the completion of the review for each student to document the acceptability of each requirement for each course evaluated.**

**Accreditation-** the courses must have been completed with an accredited institution. The registrar verifies the School's accreditation.

**Level of credit -** College-level credits required.

**Course content-** if the catalog and course description does not clarify the content of the course, NCM requires the student to complete the **NCM Transfer Credit Request Form** (2 parts in this handbook below), which includes the submission of the course syllabus. Upon receipt of this form, the Registrar or Chief Academic Officer reviews the course syllabus to ensure the content of the course matches NCM's course content significantly.

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

**Grade-** for our General Education requirements we can accept transfer credits with a grade of C- or higher. For the Midwifery Modules we need a B- or higher.

**Time-**There is no time limit for when the General Education credits were completed, but there may be a time limit for the midwifery modules, at NCM's discretion.

**Prior Learning Assessment/Advanced Placement:** NCM accepts the following to satisfy credit requirements: AP, CLEP, DSST, and ACE recommendations. NCM accepts the score recommended for credit by the granting organization. The Student provides an official transcript or results to NCM. *The NCM Registrar verifies the current guidelines from the granting organization.*

**NCM does not accept credit from 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."

**Maximum number of transfer credits:**

**General Education Requirements from Modules 1,2 & 8:** NCM will accept any and all of these as transfer credits.

**Midwifery Modules 3-7:** NCM will accept up to 15 transfer credits.

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

**NCM will accept the following maximum clinicals as transfer credit from a MEAC accredited school:**

- 10 of 10 Births as Observer
- 20 of 25 Prenatals as Assistant
- 18 of 20 Births as Assistant
- 18 of 20 Newborn Exams as Assistant
- 8 of 10 Postpartum Exams as Assistant
- 25 of 30 Well Woman Exams as Primary under Supervision
- 15 of 20 Initial Prenatals as Primary under Supervision

- 20 of 55 Prenatals as Primary under Supervision
- 15 of 25 Births as Primary under Supervision
- 10 of 20 Newborn Exams as Primary under Supervision
- 20 of 40 Postpartum exams as Primary under Supervision
- 2 of 5 NARM Continuities of Care
- 10 of 10 Out of Hospital Births

The student must complete the entire NARM Skills Form while enrolled in NCM's ASM program.

All clinicals must meet NCM and NARM requirements.

Student must be enrolled with NCM for a minimum of 1 year.

**Transfer of NARM PEP clinicals:**

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

- ✓ Passed the NARM exam,
- ✓ been awarded CPM certification, and
- ✓ be in current active and renewed CPM status

NCM must receive verification directly from NARM regarding student's CPM date and status.

Further clinical requirements may be necessary in order to ensure the student meets current NCM and NARM clinical requirements.

Minimum enrollment period for students enrolling with advanced standing is based on the number of credits to be completed. The maximum rate of completion is 20 academic credits per trimester.

**NCM Transfer Credit Request** Revised 8/26/13

**SECTION 1:**

**Transferability Assessment and Comparison Worksheet**

Use this form to compare the courses taken at a school other than NCM to NCM courses.

This form is a self-assessment tool, so there is no need to submit it to NCM unless NCM HAS NOT GIVEN YOU CREDIT for a course you have completed which you believe will satisfy an NCM course.

*In order to accept transfer credit, the course syllabus or course description must allow NCM to determine that the course meets or exceeds the content, level, credit value, learning objectives, etc. of the NCM course. Transfer of credit is not guaranteed and is at the discretion of NCM.*

**Column 1:** Using your transcript from the school you attended (or the college catalog from the school you plan to attend), fill in the information in Column 1.

**Column 2:** Using the NCM Catalog/Handbook, find the best match for the course you have taken or are considering taking at another school, and fill-in the information for that course.

**Column 3:** Answer the questions. If you answered "No" to any of the questions, then the course will not directly transfer. *In the case that the NAME and AREA OF STUDY of the course you would like to receive credit for does not clearly infer that the courses match, then you must additionally complete Section #2*

	<u>Column 1</u>	<u>Column 2</u>	<u>Column 3</u>
	Proposed Course taken or to be taken at a school other than NCM:	NCM Course:	Checklist:
Name of the School:		National College of Midwifery	

Accrediting Agency:		MEAC	Is the school accredited	Yes <input type="checkbox"/> / No <input type="checkbox"/>
Name of course:			Do these names match?	Yes <input type="checkbox"/> / No <input type="checkbox"/>
Credits:			Do the credits match or exceed NCM requirements?	Yes <input type="checkbox"/> / No <input type="checkbox"/>
Area of study or department :	Circle one: English/Comm/Hum, Math, Psychology, Chemistry, Biology, History, Art, OTHER: _____		Do the areas of study match?	Yes <input type="checkbox"/> / No <input type="checkbox"/>
Level of Study:	Circle one: High School / AP / College-level / Other: _____	College-level	Are the credits "COLLEGE-LEVEL" or "AP"?	Yes <input type="checkbox"/> / No <input type="checkbox"/>
<i>Note: NCM can only accept "college-level" or AP (Advanced Placement) credits. Please call the counseling department of your school to check if you are unsure-especially for math credits.</i>				
Grade you received for the course:			Did you receive a grade of C-/70% or higher for general education course, or B-/80% for Midwifery-focus course?	Yes <input type="checkbox"/> / No <input type="checkbox"/>
Did you answer "YES" to all the questions above?				Yes <input type="checkbox"/> / No <input type="checkbox"/>
<i>In the case that the NAME and AREA OF STUDY of the course you would like to receive credit for does not clearly infer that the courses match, then you must additionally complete Section #2</i>				

## NCM Transfer Credit Request

## SECTION 2:

Revised 8/26/13

**Step 1:** Have your official sealed transcript sent to NCM. NCM will review your transcript for transferrable credit. **SUBMIT THIS FORM ONLY IF NCM HAS NOT GIVEN YOU CREDIT** for a course you have completed which you believe will satisfy an NCM course.

**Step 2:** Carefully compare the course content and learning objectives of the course or courses you completed at another accredited institution to the matching NCM course (NCM Course Syllabi are available for comparison on our website)

**Step 3:** Complete the following form and submit it, along with your course syllabus or course description of the courses you took at another accredited institution and would like NCM to consider.

*In order to accept transfer credit, the course syllabus or course description must allow NCM to determine that the course meets or exceeds the content, level, credit value, learning objectives, etc. of the NCM course.*

*Transfer of credit is not guaranteed and is at the discretion of NCM.*

Student

Name:

\_\_\_\_\_

**NCM Course for which you are requesting transfer credit:**

Department	Course # or Code	Course Name	Date Completed	Grade	Credits

**Course/s for which you are proposing transfer credit to satisfy the above course:**

Course/s Completed at (Name of College or University):

Department	Course # or Code	Course Name	Date Completed	Grade	Credits

Explain how the Learning Objectives of the NCM course are covered by the Learning Objectives and content of the course or combination of courses proposed as transfer:

~Please attach the course syllabus/course description for the courses you completed at another accredited institution.

~NCM must be in receipt of the Official Sealed Transcript from the College or University

**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, paid upon application)

Administrative Fee for ASM or BSM Bridge: \$4,900 (One-time fee, paid at enrollment)

Annual Fees: Estimated cost \$450 per year for each year of enrollment beyond 2 years.

Fee for BSM Bridge for NCM ASM Graduate Add-on:

One-time Administrative Fee: \$2,500+

Annual Fee for each year of enrollment

**Additional expenses:**

- Tuition: Students and their preceptor(s) make whatever financial agreements they wish, provided evidence of an agreement is filed with NCM. The student pays tuition (if any) directly to the preceptor. NCM suggests \$500 per month.
- Textbooks: Students are not required to own the books required for the courses, but must find access to them. NCM does not sell books, and the books required for courses are not included in NCM's administrative fee. Many students are able to find the books used at a discounted price, or can borrow from their preceptors. Estimated Cost: \$2000 (used) \$2600 (new).
- Midwifery Equipment: Students are not required to own midwifery equipment, but must have access to it through their preceptors. Some preceptors may require that students possess some or all of their own midwifery equipment. Costs of equipment vary.
- General Education Requirements:  
NCM highly recommend that students 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. Students are required to be certified in CPR & NRP. The costs for these are the responsibility of the student, and are variable.
- 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.

**Policy and procedure:**

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

Checks or money orders are copied. The copy is attached to the student enrollment paperwork and the check or money order is stamped filed in the deposit envelope.

If a student prefers to pay via PayPal, an invoice is sent to the student.

Once the student pays, PayPal sends a notification to the college. This notification is printed and placed with the student paperwork.

The College must then go into PayPal and release the funds. A notification is emailed to the College. A copy of this is also placed with the student paperwork.

The amount of the funds is entered into the check register with a notation of the student's name.

All accreditation fees are processed as above, and entered into Access. An email acknowledgement is sent to the student, and a copy of the email is placed in the student file.

**FINANCIAL AID / STUDENT LOANS**

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

NCM is not a Title IV school. It does not qualify for this because it does not have a campus. This means that students are not be eligible for federal financial aid or deferments of student loans.

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

### **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**

(REVISED 8/2016 TO CONFORM TO NM COMMISSION OF HIGHER EDUCATION RULE 20.D)

"Enrollment period for which the student was obligated" means a quarter, semester, or other term of instruction followed by the institution which the student has begun and for which the student has agreed to pay tuition. For the Administrative Fee, NCM considers the start date to be the date the student is notified by NCM that they are officially enrolled in their program.

Refunds are calculated based on 352 day year. Tuition/fee refunds must be made within 30 calendar days of the institution receiving written notice of a student's withdrawal or of the institution terminating enrollment of the student, whichever is earlier.

Upon request by a student or the department, the institution shall provide an accounting for such amounts retained under this standard within five workdays.

- Application Fee (prior to enrollment): \$100 is non-refundable
- Cost of 2 year ASM or BSM Program: \$4900
- Yearly Extension Rate beyond 2 years: \$450 (up to 3 extensions max)

#### **2 Year Program Refund Policy**

Refund 100% (\$4,900) day 0 - 3 (business days)

Refund 90% (\$4,410) days 4 - 71

Refund 50% (\$2,450) days 72 - 176

Refund 25% (\$1,225) days 177 - 1 year anniversary date of enrollment

Refund 0% after 1 year anniversary date of enrollment

#### **Yearly Extension Rate Refund Policy**

Refund 100% (\$450) day 0 - 3 (business days)

Refund 90% (\$405) days 4 - 36

Refund 50% (\$225) days 37 - 88

Refund 25% (\$112.50) days 89 - 176

Refund 0% after 176 days of 1 year extension

#### **A-La-Carte Stand-Alone Courses at \$75/credit/trimester Refund Policy (based on one 120 day trimester)**

Refund 100% day 0 - 3 (business days) Refund amount: \$75/credit/trimester

Refund 90% days 4-12 Refund amount:\$67.50/credit/trimester

Refund 50% days 12-30 Refund amount:\$37.50/credit/trimester

Refund 25% Days 30-60 Refund amount:\$18.75/credit/trimester

Refund 0% after 60 days no refund

### **STUDENT-PRECEPTOR REMUNERATION AGREEMENT:**

Students and preceptors enter into their own financial agreements. The student pays this tuition directly to the preceptor.

#### **Discretionary Units**



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

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

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

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

**Student-Preceptor Remuneration Agreement Cancellation and Refund Policy**

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

**Preceptor Remuneration Refund Policy:**

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

After 25%; within 50% of the Discretionary Unit	75%
50% or thereafter the Discretionary Unit	100%

Updated 12/14/15 to satisfy U.S. department of education and NM POST-SECONDARY EDUCATIONAL INSTITUTION ACT 5.100.2.20

### **Refund Procedure:**

Student must send in a letter stating her/his intention to withdraw. The office will calculate the refund based on the refund policy. A refund check, if appropriate, is sent out certified mail with return receipt.

Student record is updated in Access to reflect the withdrawal. Amount of check is entered into the payments section. Once the mail receipt is returned to the office, it is stapled into the student file. A withdrawn sticker with the withdrawal date is placed on the front of the student file, and filed in the withdrawn filing cabinet.

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## **PROGRAMS-COMMON REQUIREMENTS**

### **TECHNOLOGICAL SKILLS AND EQUIPMENT REQUIRED BY THE COURSE DESIGN**

In order to complete all NCM programs, the student must have the following technological skills and equipment:

- Access to the internet, a computer and printer
- Email account that the student checks frequently
- Basic computer skills
- Basic internet navigation skills

### **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.

### **SATISFACTORY ACADEMIC AND/OR CLINICAL PROGRESS**

Students have up to 5 years to complete their program. Student must demonstrate that they will be able to complete their programs within the allotted timeframe. A Student who has not completed her/his program within 3 years, 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.

**Procedure:**

NCM requires that students send copies of completed coursework at the end of each trimester.

NCM reviews all student records for academic and/or clinical progress at the end of each trimester when student records are updated. At least once a year, each student is called to discuss their progress.

Each student's file is reviewed to assure consistent submission of completed coursework. Students who have failed to submit coursework in a timely manner are counseled. NCM works closely with students to encourage them to succeed.

Students who have been enrolled for 3 years are required to submit a plan of completion. This plan is signed by both student and preceptor.

Follow up phone calls and emails are tracked on the Outlook Calendar.

**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 teaching or learning.
- Voice satisfactions and challenges between student and preceptor.
- Review goals and develop a plan for the coming trimester,
- Participate in development, implementation and evaluation of the curriculum, evaluation and advancement of students, periodic evaluation of student admissions criteria, program resources, facilities, and services.
- Participate in comprehensive curriculum review.

- Give other suggestions and comments.
- Notify the College of changes in contact information.

### Student-Preceptor Evaluation Form-

REQUIRED after each trimester in which the student completed program requirements.

- To be completed ONLINE: 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 separately

#### **Procedure:**

Evaluation forms must be included in the end of trimester submissions. NCM does not count any completed coursework or clinicals without an evaluation.

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

Evaluations allow NCM to evaluate any feedback to see if there are any comments that need immediate response. The original copy of the evaluation is filed in the student's file, and a copy is placed in the preceptor's file.

### 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).

#### **Procedure:**

The Credit Value Assessment Form is forwarded to the Education Committee for their review.

### Services & Policies Evaluation Form

Evaluation of student admissions criteria, program resources, facilities, and services Form - This is another opportunity for students and preceptors to participate in development, implementation and evaluation of the curriculum, periodic evaluation of student admissions criteria, program resources, facilities, and services.

#### **Procedure:**

This form is reviewed annually. If a suggestion is adapted, an email is sent to the student or preceptor thanking them.

### Curriculum Evaluation Form

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

**Procedure:**

All completed forms are forwarded to the Education Committee for review.

**Information Change Form**

It is each student's and preceptor's responsibility to keep current contact information updated with NCM.

**Procedure:**

Changes are updated in the student file, in Access and on the student record.

**Comments Form**

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

**Procedure:**

The information on the comments form is forwarded to the appropriate person or committee. Each comment receives a response. NCM gives a personal acknowledgement for a suggestion that we implement.

**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.

**NCM Trimesters:**

Spring (SP): January 1 - April 30th

Summer (SU): May 1 - August 31

Fall (FA): September 1 - December 31

- Submissions should be made in one packet by regular mail (faxes and emails are not accepted) to: **National College of Midwifery, 1041 Reed St, Suite C, Taos, NM 87571.**
- Student should 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.
- The most updated versions of all program materials are available for download from the NCM website: [www.midwiferycollege.org](http://www.midwiferycollege.org). Students are encouraged to check the website periodically. NCM will send out emails to notify students and preceptors when there are significant changes.

**Procedure:**

All documents received in the office are date stamped and listed in the Mail Log. Student submissions are reviewed and information is entered onto the student record.

Open Student Record/Transcript. Fill in the current date at the top right hand corner of the form.

**Evaluations:** Student must have an evaluation form that covers work performed with each preceptor for the trimester period. This is filled in on the student record.

**Grades:** A copy of the student record is submitted by student and preceptor with the date of completion, grade, preceptor signature and date on bottom left corner. The date and grade is filled in on student record, with the preceptor's name and date of submission.

Grades that do not have a corresponding evaluation are highlighted and a notation is placed on the student record. The grades will not be accepted until the evaluation is received in the office.

**Clinical forms:** Copies of the clinical forms are submitted at the end of the trimester. NCM checks each clinical form for approved preceptor signatures and dates. Signatures that are not from approved preceptors are not valid. The accepted clinicals are totaled on the page with the initials of the reviewer.

The clinical numbers and the date of the most recent completed clinical are filled in on the Student Record.

Clinicals that do not have a corresponding evaluation is highlighted and a notation is placed on the student record. The clinical numbers will not be accepted until the evaluation is received in the office.

**NARM Skills:** NARM Skills forms are checked for dates of completion and preceptor signatures. Signatures that are not from approved preceptors are not valid.

The date of the most recent NARM skill is entered on the student record. When all NARM skills are completed, it is also filled in on the Student Record.

A copy of the updated student record is emailed to both the student and preceptor. A copy of the updated student record is printed, dated and initialed by the reviewer and filed in the Student file.

**STUDENT-PRECEPTOR RELATIONSHIPS**

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

In order for NCM to accept work done towards completion of any NCM program all of the following must be true when the work was done:

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

**Procedure:**

Any work submitted by a student that is signed off by someone who is not the student’s approved preceptor is not accepted. The signature or grades are highlighted, and a notation is made on the paperwork. The student is informed that the work is not accepted and encouraged to send in the student/preceptor contract and any paperwork needed to approve the preceptor. The work is not retro-actively accepted.

**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.
- Full time is considered 12-18 credits per trimester. The National College of Midwifery will accept a maximum of 20 academic credits per trimester.

**GRADING:**

Academic Grades must be B- / 80% 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 they would like to use).

<b>Grades:</b>			<b>GPA</b>	<b>Definition</b>
<b>Letter</b>	<b>Number</b>	<b>Pass/Fail</b>		
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).

### **COURSE NUMBERING:**

100-399 Undergraduate courses

400-499 Bachelor-Focus courses

### **LEARNING SITES**

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

### **Procedure:**

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

### **COMPLIANCE WITH FERPA:**

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

<http://www2.ed.gov/policy/gen/guid/fpco/ferpa/index.html>

NCM's online learning platform (which will not go into use until NCM's proposed online program is approved by the Accrediting agency) is fully compliant with FERPA regulations. Canvas allows access to student information only to those to whom permission is granted. By default, that is the administrator for the Institution's Canvas instance and faculty who are teaching courses in which the student is enrolled. All access to Canvas is encrypted. There are no exceptions. When transmitting SIS data, the information is safe in transit and, when it arrives in the Canvas system, it is protected by the same account and role-based permissions that secure all other data.

### **COMPLIANCE WITH HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA):**

NCM does not require or keep personal health information.



## 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. NCM cannot confirm whether the course or program meets requirements for professional licensure in the student's state. Prior to Enrollment, NCM provides the student with current contact information for any applicable licensing boards, and advise the student to determine whether the program meets requirements for licensure in the state where the student lives.

### NCM IS REQUIRED TO PROVIDE INFORMATION ON HOW OUR PROGRAMS FULFILL LICENSURE REQUIREMENTS,

AND CONTACT INFORMATION FOR EVERY STATE: NCM's ASM program satisfies NARM's clinical requirements for CPM and MEAC's Essential Competencies for Midwives. However, all states have state-specific licensure requirements that NCM may not satisfy. Many states conform to NARM and MEAC requirements, but some have additional clinical, academic, and/or other requirements beyond the basic ASM or BSM requirements. NCM does not know the exact and changing requirements for licensure of each state. For this reason, prior to enrolling in NCM's program, students must contact the state/jurisdiction regulatory agency directly for licensure requirements. Contact information is listed in the table below:

Procedure: this list is provided to all applicants on all student application forms

Alaska	Alaska Department of Commerce, Community & Economic Development Division of Corporations, Business, & Professional Licensing State Board of Certified Direct-Entry Midwives P.O. Box 110806 Juneau, AK 99811-0806 (907) 465 2580 license@alaska.gov http://www.commerce.alaska.gov/occ/	Florida	Fl. Department of Health Medical Quality Assurance/ Licensure Services 4042 Bald Cypress Way Tallahassee, FL Phone: 850 -488-0595 Fax: 850 - 245-4791 http://www.floridahealth.gov		dlibsdahc@mt.gov
Arizona	Health Services, Department of 150 N. 18th Avenue Phoenix, AZ 85007 (602) 364 2536 http://www.azdhs.gov/als/index.htm	Idaho	Idaho State Board of Midwifery Idaho Bureau of Occupational Licenses 700 W. State St., PO Box 83720 Boise, ID 83720-0063 (208) 334 3233 mid@ibol.idaho.gov http://ibol.idaho.gov/IBOL/	New Hampshire	Midwifery Council NH Office of Professional Licensure and Certification 121 South Fruit Street Concord, NH 03301 (603) 279 8860 drcranny@yahoo.com
Arkansas	Arkansas Department of Health Women's Health 5800 West 10th Street, Suite 401 Little Rock, AR 72204 (501) 661 2480 adh.whgen@arkansas.gov http://www.healthy.arkansas.gov	Indiana	Professional Licensing Agency Attn: Direct Entry Midwifery Committee 402 W. Washington Street, Room W072 Indianapolis, IN 46204 Phone Number: (317) 234-2060 Fax Number: (317) 233-4236 Email: pla3@pla.in.gov	New Jersey	The State of New Jersey: Department of Law and Public Safety: Division of Consumer Affairs: State Board of Medical Examiners: Midwifery Liaison Committee 140 E Front St, 2nd Floor, PO Box 183 Trenton, New Jersey 08625 Phone: 609-826-7100 http://www.njconsumeraffairs.gov/mid/Applications/Application-for-Licensure-as-a-Midwife.pdf
California	Department of Consumer Affairs Medical Board of California Licensing Program 2005 Evergreen Street, Suite 1200 Sacramento, CA 95815 (916) 263 2382 webmaster@mbc.ca.gov http://www.mbc.ca.gov	Louisiana	Louisiana State Board of Medical Examiners Office of Continuing Education 630 Camp Street New Orleans, LA 70130-3400 (504) 568 6820 ext 233 lsbmever@lsbme.org http://www.lsbme.louisiana.gov	New Mexico	New Mexico Department of Health, Maternal Health 2040 South Pacheco Santa Fe, NM 87505 (505) 476 8866 catherine.avery@state.nm.us http://archive.nmhealth.org
Colorado	Department of Regulatory Agencies Division of Registrations 1560 Broadway, Suite 1340 Denver, CO 80202 (303) 894 2440 http://www.dora.state.co.us/registrations/index.htm	Minnesota	Minnesota Board of Medical Practitioners 2829 University Ave. S.E., Suite 500, University Park Plaza Minneapolis, MN 55414-3246 (612) 617 2130 medical.board@state.mn.us http://www.bmp.state.mn.us/	Oregon	Oregon Health Licensing Agency 700 Summer St NE #320 Salem, OR 97301-1287 (503) 378 8667 http://www.oregon.gov/ohla https://www.oregon.gov/oha/hlo/Pages/Board-Direct-Entry-Midwifery-License.aspx
		Montana	Montana Board of Alternative Health Care 301 South Park, 4th Floor, PO Box 200513 Helena, MT 59620-0513 (406) 841 2394		

South Carolina	South Carolina Department of Health and Environmental Control: Health Licensing Contact Info: S.C. DHEC Health Regulation 2600 Bull Street Columbia, SC 29201 Phone: 803-545-4370 - Michelle Hatcher <a href="http://www.scdhec.gov/">http://www.scdhec.gov/</a>
Tennessee	Council of Certified Professional Midwifery 665 Mainstream Drive, 2nd Floor Nashville, TN 37243 Phone: 615-532-4384 1-800-778-4123 <a href="http://health.state.tn.us/boards/Midwifery/index.htm">http://health.state.tn.us/boards/Midwifery/index.htm</a>
Texas	Midwifery Program, Professional Licensing and Certification Division Texas Department of Health 1100 West 49th Street Austin, TX 78756-3183 (512) 834 4523
Utah	Utah Department of Commerce Division of Occupational & Professional Licensing 160 East 300 South, PO Box 146741 Salt Lake City, UT 84114-6741 (801) 530 6628 DOPLWeb@utah.gov <a href="http://dopl.utah.gov/">http://dopl.utah.gov/</a>
Vermont	Vermont Secretary of State Office of Professional Regulation: Midwife Licensing City Center, 89 Main Street, 3rd floor Montpelier, VT 05620-3402 (802) 828 2373 aprille.morrison@sec.state.vt.us <a href="http://www.sec.state.vt.us">http://www.sec.state.vt.us</a>
Virginia	Virginia Board Of Medicine Perimeter Center 9960 Mayland Drive, Suite 300 Henrico, VA 23233-1463 Phone: 804-367-4600 <a href="http://www.dhp.virginia.gov/Medicine/advisory/mw/">http://www.dhp.virginia.gov/Medicine/advisory/mw/</a>
Washington	Department of Health 101 Israel Rd SE Tumwater, WA 98501 (360) 236 4700 customerservice@cpaboard.wa.gov <a href="http://www.doh.wa.gov">http://www.doh.wa.gov</a>

Wisconsin	WI Department of Safety & Professional Services Division of Professional Credential Processing 1400 E. Washington Ave., P.O. Box 8935 Madison, WI 53708-8935 (608) 266 2112 web@dps.wi.gov <a href="http://dps.wi.gov">http://dps.wi.gov</a>
Wyoming	BOARD OF MIDWIFERY Attn: Veronica Skoranski 1800 CAREY AVE., 4TH FLOOR CHEYENNE, WY 82002 (307) 777 3628 veronica.skoranski@wyo.gov <a href="http://plboards.state.wy.us/midwifery/index.aspx">http://plboards.state.wy.us/midwifery/index.aspx</a>
<b>NCM programs do not satisfy licensure requirements OR Midwifery License is not available to direct entry midwives in the following states/jurisdictions:</b>	
Alabama	
American Samoa	
Connecticut	
Delaware	
District of Columbia	
Georgia	
Guam	
Hawaii	
Illinois	
Iowa	
Kansas	
Kentucky	
Maine	
Maryland	

Massachusetts
Michigan
Mississippi
Missouri
Nebraska
Nevada
New York
North Carolina
North Dakota
N. Marianas Islands
Ohio
Oklahoma
Pennsylvania
Puerto Rico
Rhode Is.
South Dakota
West Virginia
Philippines

## **NCM POLICY FOR CULTURALLY APPROPRIATE APPRENTICESHIPS**

For Preceptors:

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

Preceptors working in out of country clinical sites are required to administer Cultural Preparedness Training to all students before the start of any clinical contact between students and clients in the out of country site. Preceptors must submit to NCM an outline of their Cultural Preparedness Training program which includes:

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

### Competencies

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

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

### Attitudes and Behaviors

The student will demonstrate attitudes and behaviors that encompass:

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

### Knowledge

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

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

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

For Students:

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

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

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

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

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## **ASSOCIATE OF SCIENCE IN MIDWIFERY DEGREE**

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

**Semester Credit Hours:** 112.88 (116.88 for California Students)

**Prerequisites:**

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 (These courses are identified by the G suffix):

**Developing Critical Thinking and Modes of Expression:**

English Composition..... 7 credits

Mathematics.....3 credits

Critical Thinking Analysis..... 6 credits

**Establishing a Common Background:**

Historical Perspectives.....3 credits

Basic Natural Sciences with lab.....4 credits

Human Thought and Behavior.....3 credits

Social Analysis.....3 credits

Literature or Fine Arts.....3 credits

**Viewing a Wider World:**

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

Area	Course Code	Course	Credits
<b>A00X</b>	<b>Area I: Communications</b>		
A001	ENG200G	College Composition	4.0
A001	ENG202G	Bus. & Prof. Communications	3.0
<b>B00X</b>	<b>Area II: Mathematics</b>		
B001	HON211G	Statistics	3.0
B001	MATH112G	College-Level Math	3.0
<b>C00X</b>	<b>Area III: Laboratory Science</b>		
C001	SOC102	Genetic Screening	1.0
C001	BIO120	Fetal Development	1.0
C001	BIO155G	Anatomy and Physiology	4.0
C001	HON205G	Applied Microbiology	3.0
C002	HON393G	Community Health	3.0
C003	SCI122G	Chemistry *	3.0
<b>D00X</b>	<b>Area IV: Social/Behavioral Sciences</b>		
D001	HON223G	Human Sexuality	3.0
D001	HON248G	Cultural Issues	3.0
D001	PSY224	Communication & Counseling	1.0
D001	SOC104	Child Growth & Development *	1.0
D002	HON225G	Midwifery Ethics	2.0
D002	HON390G	Laws/Regulations	3.0
<b>E00X</b>	<b>Area V: Humanities &amp; Fine Arts</b>		
E001	HON220G	Midwifery Literature & Art	3.0

E002	HON222G	History of Midwifery	3.0
<b>F00X</b>	<b>Area VI: Midwifery Core Curriculum</b>		
F001	MW300	Antepartum Basic Skills	1.0
F001	MW301	AP Risk Screening	0.5
F001	MW302	AP Physical Assessment	0.5
F001	MW303	AP Provision of Care	1.0
F001	MW304	AP Complications	0.5
F001	MW305a	AP Pharmacology <i>General</i>	0.5
F001	MW305b	AP Pharmacology <i>Herbs&amp;Homeopathy</i>	0.5
F001	MW306	AP Diag Lab Tests&Procedures	0.5
F001	MW307	AP Observation & Charting	0.5
F001	MW308	AP Nutrition	0.5
F002	MW320	Intrapartum Basic Skills	1.0
F002	MW321	IP Risk Screening	1.0
F002	MW322	IP Physical Assessment	0.5
F002	MW323	IP Provision of Care*	1.0
F002	MW324	IP Complications	1.0
F002	MW325	IP Pharmacology	0.5
F002	MW326	IP Diag Lab Tests&Procedures	0.5
F002	MW327	IP Observation & Charting	0.5
F002	MW329	IV THERAPY	0.0
F003	MW340	Post Partum Basic Skills	1.0
F003	MW341	PP Risk Screening	1.0
F003	MW342	PP Physical Assessment	0.5
F003	MW343	PP Provision of Care	1.0
F003	MW344	PP Complications	1.0
F003	MW345	PP Pharmacology	0.5
F003	MW346	PP Diag Lab Tests&Procedures	0.5
F003	MW347	PP Observation & Charting	0.5
F004	MW360	Newborn Basic Skills	1.0
F004	MW361	NB Risk Screening	1.0
F004	MW362	NB Physical Assessment	1.0
F004	MW363	NB Provision of Care	0.5
F004	MW364	NB Complications	1.0
F004	MW365	NB Pharmacology	0.5
F004	MW366	NB Diag Lab Tests&Procedures	0.5
F004	MW367	NB Observation & Charting	0.5
F005	MW380	WW Family Planning	1.0
F005	MW381	Well Woman Risk Screening	0.5
F005	MW382	WWPhysical Assessment	1.0
F005	MW383	WWProvision of Care	1.0
F005	MW385	WW Pharmacology	1.0
F005	MW386	WW Diag LabTests&Procedures	1.0
F005	MW387	WW Observation & Charting	0.5
F006	MW250	Midwifery Protocols	1.0
F006	MW330	Perinatal Ed Incl Lactation	3.0

Effective January 1, 2013

**ASM CLINICAL EXPERIENCE REQUIREMENTS:**

**Clinical Timeframe:**

Clinical Requirements must span at least **2 years** under the supervision of the student's approved NCM preceptor

Required Clinicals:	Hours/visit	Required	Hours	Credits
<b>Observes:</b>				
Births as Observer	N/A	10	N/A	N/A
<b>Assists Under Supervision:</b>				
Initial Prenatal Assists	1 hour	3	3	0.10
Prenatal Assists	30 minutes	22	11	0.37
Birth Assists	12 hours	20	240	8.00
Newborn Exam Assists	30 minutes	20	10	0.33
Postpartum Exam Assists	1 hour	10	10	0.33
<b>Primaries Under Supervision:</b>				
Well Woman/Family Planning	30 minutes	30	15	0.50
Initial Visits	1 hour	20	20	0.67
Prenatal	30 minutes	55	27.5	0.92
Birth as Primary	24 hours	25	600	20.00
Newborn Exams	30 minutes	20	10	0.33
Postpartum Exams	1 hour	40	40	1.33
NARM Continuity of Care	N/A	5	N/A	N/A
NARM Out of Hospital Births	N/A	10	N/A	N/A
<b>SUB TOTALS:</b>			<b>986.50</b>	<b>32.88</b>
<b>NARM Clinical Skills</b>			517.50	Credits in Academics
<b>CLINICAL TOTALS:</b>			<b>1504.00</b>	<b>32.88</b>

(Conversion to semester credit hours: 30 clinical contact hours = 1 credit hour)

**General Instructions for Clinicals:** Each NCM Clinical Record Form lists the scope of the skill, the student role, the type of preceptor supervision required, the skill demonstration by the student necessary for the student to receive credit, and any other special requirements. The Student records completion of clinicals on the NCM Clinical Record Forms. Entries should be made in Chronological order and printed clearly. The Preceptor must sign, not initial, every line. Students should not start a new page for each form each trimester, but should fill a master of each form.

**Trimesterly Reporting of Completed Clinicals to NCM:** Student submits photocopies of updated forms at the end of each trimester to document progress, and retains the original forms to continue filling-in. All clinical submissions must be accompanied by a Student-Preceptor Evaluation Form for each preceptor.

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

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

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

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



**Out of Country Clinicals:** When completing NARM Exam application materials, NCM students are not required to submit Out of Country (OOC) Birth Sites Form 230 listed on NARM Forms 200 and 204.

Out of Country Clinical sites that are NARM approved, do not have to submit a copy of the safety inspection.

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

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

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

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

### **ASM Clinical Requirements Descriptions:**

### **Clinicals Completed in the role of an Observer:**

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

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

### **10 Births as an Observer (NCM Clinical Record Form #1)**

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

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

### **Clinicals Completed as an Assistant to the Primary Midwife:**

Requires Direct Supervision by the Student's approved NCM Preceptor.

Student Demonstration necessary to receive credit: Active Participant\* (see definition)

### **25 Prenatal Exams as an Assistant under Supervision (NCM Clinical Record Form #2)**

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

Estimated time per visit: 30 minutes.

(These must include at least 3 Initial Prenatals)

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

Estimated time per visit: 1 hour.

### **20 Births as an Assistant under Supervision (NCM Clinical Record Form #3)**

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

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

Estimated time per birth assist: 12 hours.

### **20 Newborn Exams as Assistant (NCM Clinical Record Form #4)**

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

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

Estimated time per visit: 30 min.

### **10 Postpartum Exams as Assistant (NCM Clinical Record Form #5)**

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

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

Estimated time per visit: 1 hour.

### **Clinicals Completed as Primary Midwife Under Supervision:**

Requires Direct Supervision by the Student's approved NCM Preceptor.

Student Demonstration necessary to receive credit: Mastery\* (see definition)

### **30 Well Woman/Family Planning as Primary under Supervision (NCM Clinical Record Form #6)**

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

Student mastery of the PAP smear/STI sample is required.

Estimated time per visit: 30 min.

### **20 Initial Prenatals as Primary under Supervision (NCM Clinical Record Form #7)**

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

Estimated time per visit: 1 hour.

### **55 Prenatals as Primary under Supervision (NCM Clinical Record Form #8)**

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

Estimated time per visit: 30 min.

### **25 Births as Primary under Supervision (NCM Clinical Record Form #9)**

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

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

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

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

Estimated time per birth: 24 hours.

### **20 Newborn Exams as Primary under Supervision (NCM Clinical Record Form #10)**

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

This exam must be done within 12 hours of birth.

Estimated time per visit: 30 min.

### **40 Postpartum Visits as Primary under Supervision (NCM Clinical Record Form #11)**

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

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

Estimated time per visit: 1 hour.

### **NARM Skills (NCM's MEAC Abbreviated NARM Skills Form)**

NARM Skills on this form must be completed as directed in Pam Weaver and Sharon Evans book, *Practical Skills Guide for Midwifery*. NARM Skills background is taught within the academic courses, but preceptor demonstration, student practice and evaluation of the student takes place in a clinical setting. 4 skills require the separate evaluation of two preceptors.

Estimated clinical time spent on each NARM Skill: 3 hours, 24 minutes.

### **Additional Clinical Forms Required:**

#### **NARM Form 200: Continuity of Care:**

All of these 5 Births as Primary under Supervision must include Full Continuity. Each must include 5 prenatal spanning 2 trimesters, the birth, newborn exam, and 2 postpartum exams. Only approved NCM Preceptors may sign this form in the spaces marked "Witness."

#### **NARM Form 204: Out of Hospital Birth:**

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

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

#### **NARM Form 102: Birth Experience Background Form**

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

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

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

In the lines, "Number Primary under Supervision" and "Number Primary/Co-Primary" use Form #9: 25 Births as Primary Under Supervision, divided in the following way: In the spaces for "Number Primary Under Supervision," list 20 of these births with a maximum of 2 IP transports. In the spaces for "Number Primary/Co-Primary," list the remaining 5 of these births with a maximum of 1 IP transport.

### **CLINICAL REQUIREMENT SUMMARY SHEET (NCM Clinical Record Form #12)**

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

#### **Procedure:**

All course work submitted is date stamped and logged into the mail log. Copies of the clinical forms are submitted at the end of the trimester. Students must also submit an evaluation form from each preceptor who signed the clinical form, covering the trimester dates of work submitted.

NCM checks each clinical form for approved preceptor signatures and dates. Signatures that are not from approved preceptors are not valid. The accepted clinicals are totaled on the page with the initials of the reviewer.

The clinical numbers are filled in on the Student Record. A copy of the updated student record is emailed to both the student and preceptor. A copy of the updated student record is printed, dated and initialed by the reviewer and filed in the Student file.

Clinicals that do not have a corresponding evaluation is highlighted and a notation is placed on the student record. The clinical number will not be accepted until the evaluation is received in the office.

### **Practice Guidelines, Emergency Transfer/Transport Forms, Informed Consent Forms**

These forms are required by NCM for graduation from the ASM program. They are completed by the student during the MOD8-MW250-Midwifery Protocols and MOD8-HON390G-Midwifery Laws & Regulations courses. They are a sample of what the student plans to use in future practice. These items must satisfy the requirements of both NARM and for the state in which the student plans to practice in the future. The student must NEVER indicate on these forms that she/he is a midwife prior to actual attainment of midwifery licensure or certification.

Research: Student researches NARM's guidelines for Practice Guidelines/Protocols, Emergency Transfer/Transport Forms, and Informed Consent Forms, reviews samples from other midwives and birth centers, and the laws and Practice Guidelines of the state in which she/he is studying or

plans to practice in the future. If the student is international, she/he may use the guidelines from the state of New Mexico.

Composition: Using the research and samples, the student constructs her/his own Practice Guidelines/Protocols, Emergency Transfer/Transport Forms, and Informed Consent Forms.

It is acceptable to use the Practice Guidelines/Protocols, Emergency Transfer/Transport Forms, and Informed Consent Forms of her/his state, or that are used by her/his preceptor, then the student must check these carefully to ensure that they adhere to state law and generally accepted procedures.

**Preceptor Review:**

The preceptor reviews and approves the student's Practice Guidelines/Protocols, Emergency Transfer/Transport Forms, and Informed Consent Forms as part of MOD8-MW250-Midwifery Protocols and MOD8-HON390G-Midwifery Laws & Regulations courses (see course syllabi).

**Submission to NCM:**

- Practice Guidelines/Protocols completed by the student are submitted electronically on a disc to NCM,
- *OR* the student may submit an official letter to the College letting it know which official state practice guidelines the student will be using. This must be on file with the National College of Midwifery prior to graduation.
- Emergency Transport/Transfer Form and Informed Consent Form can be submitted on the disc with the Practice Guidelines/Protocols, or if they are short (1-2 pages) they may be submitted separately on paper.

**Student Participation in Midwifery or Health-Related Organizations:**

Proof of student membership in a midwifery or health-related organization, or attendance at midwifery or health-related organization meeting required.

**Procedure:**

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



**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 no longer has three set test dates.  
 NARM Applications must be sent directly to NARM, not NCM. It is the student’s responsibility to meet NARM deadlines. Contact NARM for updated application forms and testing sites/dates: <http://narm.org/narm/equivalency-applicants/graduate-of-a-meac-accredited-program/>
2. Obtaining Permission from NCM to take the NARM Exam:
  - In order to take the exam, you must obtain *permission* from National College of Midwifery. In order to apply for permission you must complete and submit the NARM Exam Permission Packet to NCM. The permission packet is available for download from the NCM website. 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.
  - If the student is not given permission to take the NARM exam, she/he must submit another permission packet.
3. NCM has three Test Permission Dates:

**DEADLINES TO REQUEST NCM PERMISSION TO TAKE THE NARM EXAM:**

<b><i>February 1, 2015</i></b>	May 1, 2015	September 1, 2015
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\*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.

4. NCM does not allow students to take the NARM exam prior to completion of the program.

**Procedure:**

NCM reviews each student's file to insure everything is complete. Students who have incomplete files are allowed to send in paperwork before the deadline, at NCM's discretion.

Once it is determined that the student has met the requirements to take the NARM exam, they are notified by email. The permission letter is signed by NCM and faxed to NARM. A copy of the permission letters are also sent to NARM via mail.

A copy of the test results release letter is faxed and sent by mail to NARM within 1 week of the test date.

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.

**Graduation**

NCM processes graduations three times per year. Students should expect to receive their graduation packets approximately 1 month following the graduation date.

- March 15
- July 15
- November 15

It is the student's responsibility to ensure that the NCM office has received the official NARM or other approved test results in our office by one of the graduation dates above.

The graduation packet includes:

Diploma

Official Letter

Final Transcript

An official sealed transcript

Graduate survey

**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 Graduate /exit survey is completed
7. 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.

**Graduation Procedure:****ASM:**

Upon receipt of official notification that the student passed her/his NARM/ASN/State Licensing Exam:

**Items that must be placed in graduate's file:**

Copies of the following:

- NCM NARM Exam Permission Request Form
- NCM Permission Letter to NARM
- NARM Results Release
- NARM/ASNM/State Licensing Exam Results
- “Congratulations Graduate” Letter
- Final Transcript
- Diploma

**Items to be mailed to graduate:**

Originals of the following:

- Diploma (in plastic sleeve)
- “Congratulations Graduate” Letter
- 1 Student Final Transcript unsealed
- 1 Student Final Transcript in “Official Sealed Transcript” envelope
- Graduate survey (with return addressed and stamped [if in USA] envelope)

Extra Optional inserts:

- Brochure
- Due Date Chart
- Stickers
- Etc.

**Items to be mailed to NARM:**

(For students that have requested that their final transcripts be sent to NARM so that they can apply for CPM)

- Cover letter listing names and graduation dates of students
- Official transcripts for the students

**Additional Items and mailings:**

IT is the student’s responsibility to find out the licensure requirements for the state/s where they are seeking licensure. Students may request that NCM send items to a state so that the student can apply for licensure or certification in that state, the student is responsible for officially requesting these materials from NCM, and may include, depending on the state:

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

**Items that must be placed in NARM EXAM file for the appropriate date:**

Copy of Exam results

Copy of letter sent to NARM with official student transcripts for graduates

**Finalizing the Student Record/Transcript:**

Check student name &

Check student address to match NARM EXAM Permission application form

Change date of Transcript on upper right corner to today’s date

Enter date of NARM or other exam and result

Enter final credits, date of graduation, GPA (if applicable)  
 Enter words "Associate of Science in Midwifery" (or degree level as appropriate)  
 Enter words "Degree Awarded \_\_\_\_\_" (date) or Certificate Awarded and date

Exam Type (one required for ASM Degree):			Date	Result
NARM			08/15/12	Pass
State				
Other:				

Graduation			
	Date	GPA	Credits
	08/15/12	4.0	107.75

Associate of Science in Midwifery  
 Degree Awarded August 15, 2012

Final Transcript  
 09/18/12

Seal

Registrar: Anna Khamsamran

Exam Type (one required for ASM Degree):			Date	Result
NARM			08/15/12	Pass
State				
Other:				

Graduation			
	Date	GPA	Credits
	08/15/12	3.9	111.75

Associate of Science in Midwifery  
 Degree Awarded August 15, 2012

Final Transcript  
 09/18/12

Seal

Certificate in Midwifery  
 Completed November 09, 2011

Registrar: Anna Khamsamran

Examples: \_\_\_\_\_ or \_\_\_\_\_

### **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.

### **Extended California Credits**

Students who have graduated from our ASM program and want to add the courses to meet the requirements for California licensure will be charged \$500.

Student must complete the California requirements within 1 calendar year and must be enrolled for a minimum of 1 trimester period.

The student must submit a student application, and contract with a preceptor. Student completes the required coursework learning objectives in IP Provision of Care, and submits grades on the student record and an evaluation signed by preceptor.

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

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

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

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## **BACHELOR OF SCIENCE IN MIDWIFERY DEGREE**(BRIDGE PROGRAM)

The BSM bridge program can be completed from 1 to 5 years.

**Semester Credit Hours:** 147.75 (California Students: 152.75 credits)

### **Prerequisites**

- High School Diploma or GED
- NCM-recognized state or national midwifery license or certification (satisfies 67.75 credits toward BSM Requirements)

Prerequisite college-level courses to be completed at another accredited college or university. These may be completed concurrently with NCM coursework (see NCM policy on accepting transfer credits):

- Analytical Writing: 4 credits
- Math: 3 credits

*BSM students in California must additionally complete:*

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

### **BSM Core Curriculum** (*Click here to go to Error! Reference source not found.*)

	<b>Credits</b>
BIO155G -Anatomy and Physiology	4.00
BIO120-Fetal Development	1.00
SOC102-Genetic Screening	1.00
HON205G-Applied Microbiology	3.00
PSY224-Communication & Counseling	1.00
HON223G-Evolution of Human Sexuality	3.00
HON222G-History of Midwifery	3.00
HON225G-Ethics	2.00
HON390G-Laws/Regulations	3.00
HON393G-Community Health	3.00
ENG202G-Bus. & Prof. Communications	3.00
HON211G-Statistics	3.00
HON220G-Midwifery Literature & Art	3.00
<i>BSM Students in California must additionally complete:</i>	
MW320-IP Episiotomies, Anesthesia & Analgesia (CA Students only)	1.00

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

### **BSM-Focus Requirements**

BSM MW400-Midwifery Research Methods	4.00
BSM ENG 404-Writing & Presenting on Midwifery Topics	4.00
BSM HON450-Applied Topics in Midwifery Practice: Development of Policy & Procedures	4.00
BSM MW460-Evidence Based Practice in Midwifery Care	4.00
BSM MW480: 1 Additional clinical year past licensing or certification to include 10 births mentored by preceptor	24.00

**Portfolio submission requirements:**

The BSM-Focus Courses include a portfolio of projects to be submitted to NCM. These projects are listed on the course syllabi. The student must set up a free “Dropbox” account at <https://www.dropbox.com/> . Please see the instructions on NCM’s webpage for BSM.

**Graduation****Bachelor of Science Degree in Midwifery Awarded:**

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

**Procedure:**

The Review Coordinator notifies the Registrar when the student has completed all of the requirements for graduation.

The student record is updated and the student information is updated in Access. A final copy of the student information sheet showing the graduation date is printed out and filed in the student file.

A copy of the final student record, a diploma and student survey is sent to the student and logged out in the mail log.

A graduated sticker with the date is placed on the front of the student file and filed in the Graduated Students filing cabinet.

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## **MSM AND PHD COURSES**

NCM no longer offers MSM or PhD as of March 2017. All students currently enrolled in the MSM or PhD program will be given a reasonable time period to complete their programs.

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## **PRECEPTORS**

NCM does not match students with preceptors. Students must find their own preceptors. Students must have a preceptor when they enroll in the College. ASM students need 2 preceptors in order to complete the clinical portions of their program.

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

- Licensed Midwives
- Midwives holding College-accepted certification by their State or national midwifery organization
- Certified Nurse Midwives
- Physician Assistant Midwives
- Licensed Physicians practicing Obstetrics

### **PRECEPTOR/INSTRUCTOR QUALIFICATIONS**

Academic faculty is required to provide her/his own office space, internet, and computer equipment.

Clinical Preceptors are required to provide her/his own clinical space, as necessary.

The preceptor must hold at least the academic credential sought by the midwifery student. College policy is to recognize the CPM credential or local state midwifery licensing as equivalent to the ASM degree. .

For all courses with prefixes other than “MW” including General Education, NCM will only accept preceptors with the same or higher academic credential the student is seeking *or must hold certificates or degrees appropriate to their area of instruction or, when neither certificates nor degrees are available in this subject area, have a minimum of three years’ experience in the relevant field.*

Midwives practicing in states where licensure is required must provide a copy of current licensure in order to be approved. Approved preceptors must maintain their licensure/certification as required by their state, unencumbered by holds/investigations/disciplinary action of any kind during active instruction and supervision of their NCM student(s).

Effective January 1, 2015 All instructors of the Core Midwifery curriculum must have at least two years’ experience post licensure/ certification in full scope midwifery practice.

<b>Preceptor Types:</b>	<b>I. Minimum Degree Required</b>	<b>II. Area of Degree</b>	<b>III. Holds valid national certification as a midwife (CPM, CM, CNM) AND/OR evidence of current licensure as a practitioner who provides women’s health or maternity care, AND Evidence of at</b>	<b>IV. Timeframe experience in the specific academic</b>	<b>V. Alternative qualifications to years of experience in the specific</b>
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			least two years of current, full-scope midwifery practice	<b>area</b>	<b>academic are</b>
<b>A. Clinical Preceptor</b>	see III	see III	yes-minimum 2 years	n/a	n/a
<b>B. Academic MW Preceptor (supervised)</b>	see III	see III	yes-minimum 2 years	n/a	n/a
<b>C. Academic MW Preceptor (unsupervised)</b>	Associate	any	yes-minimum 2 years	n/a	n/a
<b>D. Academic General Education Preceptor (supervised)</b>	Bachelor	any	n/a	3years	6 credits or 90 CEU's in specific academic area
<b>E. Academic General Education Preceptor (unsupervised)</b>	Master	specific area of instruction	n/a	3years	6 credits or 90 CEU's in specific academic area
<b>F. Academic General Education SUPERVISOR</b>	Master	specific area of instruction	n/a	3years	6 credits or 90 CEU's in specific academic area

#### Faculty Supervision Required by Program/Degree Level:

	Licensure Required  CPM or Legally recognized in a jurisdiction/state/province as a practitioner who provides women's health & maternity care (minimum 2 years current full-scope experience in full midwifery care)	Degree Level Required  Degree Level	Evaluation/Supervision Required	
			Trimesterly	Annually
<b>NCM Program:</b>				
<b>ASM (all)</b>	YES	Associates	NO	YES
<b>ASM Core Midwifery Courses</b> (courses with MW prefix only & clinicals)	YES	None	YES	YES
<b>ASM Core Midwifery Courses</b>	YES	Associates	NO	YES
<b>General Education Courses</b>	NO	The degree level at which the student is learning or higher (In appropriate area of instruction-3 years experience)	NO	YES
<b>BSM</b>	YES	Bachelors	NO	YES

#### Associate of Science in Midwifery Preceptors:

- Licensed Midwives
  - Must have license issued by the jurisdiction in which the midwifery practice is located
- Certified Midwives
  - Must have a certification from a College approved state or national midwifery organization

- Certified Nurse Midwives
- Physician Assistant Midwives
- Licensed Physicians practicing obstetrics

The Associate Degree student must have two (or more) preceptors registered with the College who must be able to provide the student with the opportunity to obtain the clinical skills and experiences required by NARM.

**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
- Certified Nurse Midwives
  - Must have a BA or BS degree.
- Physician Assistant Midwives
  - Must have a BA or BS degree.
- Licensed Physicians practicing obstetrics

**General Education Instructors:**

- Instructors of requirements that are not core midwifery curriculum do not need to be midwives, but
- Must hold certificates or degrees appropriate to their area of instruction or,
- when neither certificates nor degrees are available in this subject area, have a minimum of three years' experience in the relevant field.

**APPROVED GENERAL EDUCATION SUPERVISORS AND GENERAL EDUCATION PRECEPTORS POLICY**

In order to ensure that NCM students have their learning needs met through adequate faculty the following policy has been developed for general education courses.

For all courses with prefixes other than “MW” these courses are known as General Education (GE) courses. All GE courses must be taught by a General Education preceptor/instructor, these instructors do not need to be midwives, but NCM will only accept preceptors who:

- a. Hold the same or higher academic credential the student is seeking or,
- b. Hold certificates or degrees appropriate to their area of instruction or,
- c. When neither certificates nor degrees are available in this subject area, have a minimum of three years' experience in the relevant field.

General Education instructors will be supervised by approved faculty or can petition for exception. (All supervising faculty are pre-approved as a General Education instructor in their general or specific subject area.) Supervising faculty must have

- a. A master-level degree or higher in the subject they are supervising or,
- b. A bachelor-level degree with 3 years experience in the subject they are supervising.

Preapproved general and specific subject supervisor degrees are listed in **Error! Reference source not found.**

*Table 1: Preapproved Degrees for General & Specific Subjects:*

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

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

General Education instructors who do not qualify as supervisors may petition to be unsupervised in specific courses they have special qualifications to teach. Unsupervised general education instructors in specific areas must have

- at least a bachelors degree AND one of the following,
  - 3 years documented relevant experience in the specific subject area or,
  - 6 college credits in the specific subject area or,
  - 90 CEUs in the specific subject area.

Approval as unsupervised in one area does not grant the general education instructor to be unsupervised in any other area.

Supervision:

General education faculty is encouraged to communicate with their supervisor about any questions they have concerning material, adult learning strategies, and general mentoring of students. General education

faculty members who have a student in any given trimester must communicate with their supervisor regarding their academic interactions. This communication must be documented and forwarded to the college and kept in the preceptor file. Required communication is as follows:

1. Document of graded assignments must to be forwarded to the supervisor via email, fax, or online platform.
2. Final grade will be approved in consultation between the general education faculty and their supervisor.
3. Documentation of the above is completed using the Gen-Ed Final Grade Approval Worksheet (<https://www.surveymonkey.com/r/P6J9WZ9>)

**The following list of questions is meant to help potential supervisors, instructors, students and staff evaluate at what level a potential faculty member qualifies.**

*Does the applying instructor have one of the following:*

- hold the same or higher academic credential the student is seeking or,
- hold certificates or degrees appropriate to their area of instruction or,
- when neither certificates nor degrees are available in this subject area, have a minimum of three years' experience in the relevant field?

**If yes, then the preceptor qualifies as a general education instructor under supervision for all general subject areas.**

*Does the applying instructor hold at least a bachelors and one of the following:*

- 3 years documented relevant experience in the specific subject area or,
- 6 college credits in the specific subject area or,
- 90 CEUs in the specific subject area?

**If yes, then the preceptor qualifies as a general education instructor without supervision for the above specific area.**

*Does the applying instructor have a Masters or PhD level degree listed in the last column of table 1?*

**If yes, then the preceptor qualifies as an unsupervised general education instructor as well as supervising faculty for the General Subject listed in the first column and all of the general education courses listed under that general subject area in the row for which their qualifying degree(s) are listed in the last column.**

*Does the applying instructor have a Masters or PhD level degree listed in the second to last column of table 1*

**If yes, then the preceptor qualifies as an unsupervised general education instructor as well as supervising faculty for the specific course listed in the second column.**

### NCM Faculty Types:

Clinicals	Core Midwifery Modules		General Education		
A	B	C	D	E	F
Qualifies as a Clinical Preceptor	Qualifies as a Supervised Instructor for all "MW" Academic Courses	Qualifies as an Unsupervised Instructor for ASM "MW" Academic Courses	Qualifies as a Supervised General Education Instructor for all areas	Qualifies as an Unsupervised General Education Instructor for the specific subject area(s) in which she/he has experience	Qualifies as Supervising Faculty and Unsupervised General Education Instructor for the specific subject area(s) in which she/he has experience
▼	▼	▼	▼	▼	▼

I. Midwifery Certification / Licensure	▶	Holds valid national certification as a midwife (CPM, CM, CNM) AND/OR evidence of current licensure as a practitioner who provides women's health or maternity care, AND Evidence of at least two years of current, full-scope midwifery practice		NO Midwifery license required
II. Degree level	▶	AND A. Holds an Associate-level degree or higher (Holds the same or higher academic credential the student is seeking)	▼ Holds a Bachelors-level degree or higher ▼	▼ Holds at Least a Masters-level degree or higher in the subject they are supervising
III. Degree Area	▶	OR- B. Holds certificates or degrees appropriate to their area of instruction	AND 3 years documented relevant experience in the specific subject area	
IV. Experience	▶	OR- C. When neither certificates nor degrees are available in this subject area, have a minimum of three years' experience in the relevant field.	OR- 6 college credits in the specific subject area	
V. Experience Area	▶		OR- 90 CEUs in the specific subject area.	

### **Procedure:**

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

### **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 of state or national midwifery organization, Certified Nurse Midwife, Physician Assistant Midwife, or Licensed Physician practicing obstetrics.
4. Must have had at least two years of on-the-job experience since licensure/certification.
5. Must agree to provide grades for the academic requirements, and transcripts of experiences supervised by preceptor.
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 31<sup>st</sup>, June 30<sup>th</sup> and September 30<sup>th</sup>.
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.
  10. Must agree to incorporate the International Confederation of Midwives Core Competencies for Midwifery Preceptors into the teaching process.
    - a. Must ensure that the College has all updated/renewed documents relevant to the status as a preceptor, including:
    - b. Copy of current certification/license
    - c. Copy of most advanced degree
    - d. ASM Contract for each student enrolled in NCM
    - e. 3 References (upon application)
    - f. Curriculum vitae/ Resume
    - g. Floor plan of academic and clinical space to be used, showing fire extinguishers, smoke alarms, and emergency exit plan
    - h. Equipment and restocking checklist for clinical facility
    - i. Safety Form listing standards followed in practice
  11. Statement of Understanding
  12. 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.
  13. 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.
  14. 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.
  15. 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
  16. 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.
  17. Must agree to participate through evaluations as part of the Faculty Advisory Board.
  18. Must agree to review the College materials for the student and to send the College any recommendations for improvements.
  19. Understand that the preceptor may attend and will be informed of annual College Board meetings.
  20. Understand that the preceptor may gain access to her/his personal preceptor file maintained by the College.

21. Understand that the preceptor is paid tuition directly by the student according to a mutually agreed upon contract. A copy of this contract will be kept in the student's College files.
22. 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 according to the Student-Preceptor Contract, and will notify the College in writing of such occurrence.
23. 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.
24. 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.

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.

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

- Student/preceptor evaluation form submitted at the end of each trimester
- Consideration of the communications with preceptor and student, office staff, incident reports, and termination forms

If no issues have been raised, the preceptor will be contacted stating that no issues have been brought to NCM's attention. All preceptors will be reminded that guidance and support is available to them as needed.

**Preceptor Counseling and Remediation:**



Preceptor counseling and remediation is meant to ensure that the preceptor understands and follows NCM's policies and procedures, and is meant to help resolve issues in the preceptor's training methods, skills or student-preceptor interactions that could be improved.

Items that initiate a counseling session between NCM President or her designee and the preceptor:

- Incident Reports
- On NCM Student-Preceptor Evaluations:
  - A score of 1 or more questions answered as "Poor"
  - A score of 3 or more questions answered as below "Satisfactory"
  - An official complaint against the preceptor by the student

Steps:

1. NCM President or her designee will contact the student to discuss the issue or poor performance of the preceptor. NCM President will offer support and guidance to student and will strongly encourage student to approach preceptor directly in search of a resolution. Student requests for confidentiality will be strictly honored by NCM President and staff though it will be explained to students that NCM may not be able to offer resolution without open communication.
2. So long as confidentiality can be maintained to the extent requested by the student, preceptor counseling session between the preceptor and NCM's President or her designee will be initiated. This is meant to identify the issue, and ensure that the preceptor knows how and has tools to correct the issue.
  - a. If there is no way to maintain confidentiality then a mandatory "blind" preceptor mentoring group will be set up with all preceptors who have had a poor review in the previous year plus a random sampling of at least the same number of preceptors with excellent reviews. This group will be moderated by the President of the college and various scenarios will be discussed including any that are currently presenting as an issue.
3. If the next trimester's evaluation shows the issue is resolved, then the preceptor is removed from counseling and remediation status. If no improvement is shown, then a second counseling session is undertaken.
4. At the end of the 2<sup>nd</sup> trimester. If the evaluation shows the issue is resolved, then the preceptor is removed from counseling and remediation status. If there is no improvement, the preceptor will be put on administrative hold and not be allowed to teach or take on any new students for a period of 1 year.

To re-enroll the preceptor must:

- i. The preceptor writes a statement to NCM explaining what steps she/he has taken to resolve the issue, will include any retraining or CEU's completed, and will state that she/he clearly understands NCM's policies and promises to follow them.
- ii. It is at the President's discretion whether to re-accept the preceptor or not.

This is the case for situations where counseling and remediation have been initiated and also where adherence to confidentiality concerns have prevented direct counseling and remediation to be initiated.

Written Evaluation Reports will be emailed to preceptors and a copy placed in the preceptor's file. Copies of student-preceptor evaluation forms retained in the preceptor file are discarded following the Preceptor Annual Evaluation.

### **NCM Staff Review of Course and Instructor Evaluations Completed by Students**

1. At the end of each course, summaries of Review Online Course and Preceptor Evaluations and Online Course Preceptor Self Evaluation surveys will be forwarded to the Education Committee.

### **Education Committee Review of End of Trimester Courses and Instructors**

1. Review learning objectives submitted by course instructors for evaluation.
2. Review summaries of survey feedback as submitted by NCM staff.
3. Ensure that Preceptor / Instructor Evaluation & Supervision Policy is being followed.
4. Review any other suggestions made by staff, students, instructors and/or board members.
5. All of the following will be evaluated and reviewed using the new data collection tools provided through Canvas.
  - a. Overall curricular strengths and areas for improvement based on cumulative assessment of student achievement of learning objectives.
  - b. Student performance, specifically assessment and achievement of learning objectives will be cross referenced with all Core Competencies and Degree Qualifications, thus allowing NCM to recognize areas which need improvement.
  - c. When multiple students have inquiries concerning specific assignments, a review will be conducted using Canvas resources to determine what the challenge is, i.e. writing style, time spent on the assignment, learning outcome, repetition, focus on non-competency activity, etc., which will allow NCM to put a strong focus on the actual problem so that a specific change can be made to improve student learning experience and educational outcome. Ultimately, this review will always focus on strengthening the core competencies.

### **Notification of Change:**

When online courses are updated, the new material will be available to any students that enrolls in the course. Anything requiring immediate attention by the students/preceptors is also announced in a mass email from NCM to all current students and preceptors. NCM will also post relevant notification of changes in a regular newsletter or update on the website:

**LINK:** <http://www.midwiferycollege.org/Updates.html>

### **Education Committee Five-Year Review of Curriculum**

The NCM Education Committee will perform a comprehensive review of the entire curriculum every five years in order to:

1. Determine if the curriculum needs to be changed to come into compliance with new core competencies, state requirements, and to stay current with midwifery knowledge, technology, standards of practice, scope of practice and national trends in policy and practice.
  - a. Note this is easily tracked via online platform as each type of competency and degree qualifications is linked to specific activities and learning objectives.  
Keep pace with new technology in adult learning and educational platforms.

Any course not taught within the previous 5 years will be reviewed as per Course Review Completed by Course Instructors in addition to the Five Year Review.

Review of evaluation tools and methods based on SER requirements and student/preceptor feedback regarding clarity and ability to facilitate student learning reported on trimester evaluations.

Review of NCM student handbook to reflect any change in curriculum content and learning methods.

### **Notification of Change:**

Every 5 years, after the Board of Directors has approved the changes and updates made by the Education Committee, NCM will distribute the new information to all current students and preceptors. NCM posts a regular newsletter or update on the website:

**LINK:** <http://www.midwiferycollege.org/Updates.html>

### **TERMINATION OF STUDENT AND PRECEPTOR CONTRACT**

#### **Procedure:**

The student-preceptor contract lasts for as long as the student and preceptor A. Indicate on the contract, B. Continue working together during enrollment in NCM, C. Contract ends upon graduation or upon completion of a Termination of Contract form with the preceptor.

If a student or preceptor decides to discontinue their working relationship, both student and preceptor fill out a "Termination of Student and Preceptor Contract" form and submit it to the office.

Any work completed by the student should be signed off by the preceptor and submitted to the College within 30 days. Students should make sure that financial obligations are fulfilled.

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

A copy of the Termination of Contract form is placed in the student's and preceptor's file. This information is updated in Access.

### **STUDENT ADDING ANOTHER PRECEPTOR**

New preceptors to NCM must fill out the complete preceptor application, and complete a student/preceptor contract.

#### **Procedures:**

- 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 student's program. Once the contracts are approved, student and preceptors are notified by email.
- A new preceptor will be sent the enrollment packet.

### **Adding Multiple preceptors from the same Facility**

Each preceptor must submit the following:

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

The Facility will need to fill out:

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

All forms can be found on our website at [www.midwiferycollege.org](http://www.midwiferycollege.org) or we will be happy to email it upon request.

### **Procedure:**

Student/Preceptor contract for multiple preceptors at the same facility are processed the same as other student/preceptor contracts.

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

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## **PRECEPTOR TEACHING GUIDES**

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

### **Preceptor Guidance and Teaching Requirements:**

**The Preceptor creates a learning plan with the Student and assures appropriate degree-level work:**

Completion of a "Plan of Completion" prior to starting work together, clarifies the timeframe and expectations of progress throughout the program.

For Academic requirements: The Student and Preceptor use NCM's course syllabi, which outline the time/credit requirements, Learning Activities, Resources, Learning Objectives, and Evaluation Methods.

For Clinical requirements: The Student and Preceptor use NCM's Clinical Record Forms and Instructions, which outline the requirements and the level of student demonstration for each clinical experience, the type of preceptor supervision required, and the student demonstration necessary to be awarded credit. NARM Skills must be completed following the guidelines in

Practical Skills Guide for Midwifery by Evans and Weaver, and must be completed at "Mastery" level.

**The Preceptor evaluates the Student Learning Outcomes:**

For Academic courses: The Student will be able to answer the Learning Objective questions, and will complete course content and credit requirements. They will be able to utilize this information as it corresponds to the practice of midwifery. The Student will be able to apply the information to clinical and real-world practice.

For Clinical and NARM Skills: The Student will be able to competently and confidently perform all skills when appropriate, and demonstrate all clinical skills to "mastery" level prior to being signed off on Clinical Record Forms.

**The Preceptor tailors her/his teaching approach to the Student's learning style:**

Regularly scheduled meetings between Student and Preceptor allow time to review clinical and academic progress, troubleshoot problem areas, build on areas of strength, and debrief any adverse clinical outcomes.

**The Preceptor addresses any obstacles or resistance the Student may have to learning:**

Stating clear expectations and following-through with review and evaluation of student work in a timely manner allows for identification of student obstacles or resistance to learning, as well as addressing the student needs. This interaction and feedback gives the Student and Preceptor the ability to experiment or adjust to improve Student learning.

**The Preceptor maximizes the Student's special talents:**

Through encouragement, personal interaction, and immediate feedback, the Preceptor reinforces good habits and addresses any learning, study or performance issues for the Student that need adjustment. This allows the building of Student confidence and cements the Student's special talents, while allowing for growth and building of new skills.

**The Preceptor uses the following FORMATIVE (learning process) assessment tools:**

NCM Formative Assessment Tools include the Preceptor's personal evaluation of the Student's demonstration of clinical skills to ensure the student achieves "Mastery."

NCM Clinical Record Forms and instructions state the level of student demonstration required in order to receive credit. The Preceptor personally evaluates each clinical experience that she/he signs off. Generally the student must demonstrate completion of each Clinical and NARM Skill to the preceptor, to "mastery" level of competence and confidence.

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

NCM Summative Assessment Tools include Learning Objectives and Tests completed during

NCM Academic courses.

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

**Preceptors resolve Incident Reports in the following manner:**

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

**Overview of NCM Course Syllabi:**

Syllabi can be found on your NCM disc and on NCM's website:

<http://www.midwiferycollege.org/AcademicProgram/Pages/ASMacademics.html>

Each course syllabus gives the following information that the student & preceptor will need to complete and evaluate each course:

**Course Title:** Module and Name of the Course

**Credits:** Number of credits for the course. This will also give an idea of how long the course should take to complete based on the following conversion: *One Academic credit equals approximately 15 hours of formal time plus 30 hours of additional study or homework. Formal time is defined as the amount of time taken to answer the Learning Objectives to the level of 80% and to complete any learning activities to the preceptor's satisfaction, including any time spent face to face with the preceptor. Informal time includes any time spent actively reading relevant sources and textbook/s, researching Learning Objectives, and studying for examinations.*

**Course Description:** A basic overview of the topics to be covered and a list of the NARM Skills and MANA Core Competencies attached to the course.

**Learning Activities:**

- A. Student reads appropriate sections from the Learning Materials/Resources.
- B. Student answers the questions listed in the Learning Objectives by researching the Learning Materials/Resources for the course and correctly cites the sources and page numbers for each of their answers.
- C. Student presents answers the questions listed in the Learning Objectives for review by preceptor.

- D. Student participates in preceptor elaboration/discussion of Learning Objectives.
- E. In the case that the required texts are more than 5 years old, the student must research, prepare & present a summary of current best midwifery care/practices appropriate to the topic of the course from a current journal article/study, less than 5 years old.
- F. Recommended Role-playing and/or Clinical Interactions  
*Note: The clinical requirement of NARM /Clinical Skills is completed at any time throughout the ASM apprenticeship during actual clinical practice and is NOT a requirement to complete this academic course.*

### **Learning Materials / Resources:**

*Recommended texts and resources are listed on each individual syllabus. Please use textbooks less than 5 years old or most recent edition.*

### **Evaluation Tools / Methods:**

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

Final grade for the course is based on preceptor evaluation of the following:

A. Learning Objectives count for 50% of the final grade.

The preceptor evaluates each answer based on three elements:

1. Answers should reflect a thorough review of current literature regarding best current practices in midwifery care.
2. Each answer should be formed in the student's own words or paraphrased from the text. The answer should be minimal, not a re-write of the entire text, but enough to show appropriate comprehension of the learning objective.
3. Student identification of sources and page numbers for each of the Learning Objectives. (Preceptor should do a random check to determine that sources cited are correctly identified.)

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

C. Discussions: 15%

D. Tests and Exams: 15%

### **Learning Objectives:**

**A.** The student must research, prepare & present a summary of an aspect of current best midwifery care/practices appropriate to the topic of the course from a current journal article/study. *This not required if the texts used to answer the learning objective questions are less than 5 years old.*

**B.** Student answers the Learning Objective questions listed on the syllabus and cites the sources and page numbers (*accounts for 80%-90% of the final grade-see evaluation methods above*).

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## **Instruction of Academics, Clinical Visits/NARM Skills, and Births:**

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### **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?
5. 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.
  6. Student takes quiz/test.
  7. 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.



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

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### **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?

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## **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

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## **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. If the student has not completed her/his program within 3 years, the student must submit a plan for completion to NCM signed by preceptor and student, and the student will be responsible for annual accreditation fees. The student further understands that ASM is a 3-year equivalent program, which can be completed from 2 to 5 years. The 5-year limit for completion of the degree includes any time taken on inactive status, and that the annual accreditation fee must be paid even during those years the student may be on inactive status.
6. Must understand that the student, not the preceptor, is responsible for organizing and directing the student's studies and all attendant NCM paperwork.
7. Must submit a progress report consisting of copies of the following: Student-Preceptor Evaluation, Student Record with new grades, Clinical Record Forms, and updated MEAC Abbreviated NARM Skills form. All submissions must be signed and dated by 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 clinicals must take place over at least 2 years under the direct supervision of an approved, credentialed preceptor/s with whom the student has a Contract between the Student, Preceptor, and the National College of Midwifery on file with NCM. These can take place at a single site or a variety of sites.
12. Must note student's presence at supervised clinical experiences in patient charts by name or initials, subject to audit.
13. Understand it is the student's responsibility to keep a detailed and updated logbook of all 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 the signatures of 2 preceptors on 4 of the NARM Skills.
16. Understand that all academic and clinical work submitted towards the student's degree is subject to approval by NCM.
17. The National College of Midwifery does not issue 1098T forms. We do not qualify as an eligible educational institution because we are not eligible to participate in the Dept of Education's student aid programs. Please refer to IRS Publication 970.
18. Understand that there are different routes of entry to midwifery. The National College of Midwifery trains Direct Entry Midwives not Nurse Midwives.
19. Understand that the National College of Midwifery does not have a job placement program and that upon graduation; it is the student's, not the College's responsibility to find employment as a midwife.
20. Understand that the legal status of midwifery varies from state to state. It is the student's responsibility to know the laws in the state in which the student will practice upon completion of the NCM program.
21. Understand the steps the student must take to become a CPM and/or gain state licensure.
22. Understand that if the student is planning to continue with another college or university, it is her/his responsibility to check with them if they will accept credit from NCM.
23. 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.
24. 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, she/he will need 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.

25. Understands that in the case of any adverse clinical outcome, the preceptor agrees to debrief with my student to the satisfaction of both of preceptor and student. If either preceptor or student cannot reach satisfaction on the completion of the debriefing process, both agree to contact the College administration for mediation services.

26. Work done prior to enrollment, or with someone who is not the student's official NCM preceptor at the time the work was done will not be eligible to satisfy program requirements.

## **STUDENT DISMISSAL**

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

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

### **Procedure:**

NCM tries to work with students for a successful completion of their program. Students are withdrawn from the program after efforts of working with the student and meeting deadlines has failed. A letter of withdrawal is sent registered mail with return receipt.

Student record is updated in Access to reflect the withdrawal. Once the mail receipt is returned to the office, it is stapled into the student file. A withdrawn sticker with the withdrawal date is placed on the front of the student file, and filed in the withdrawn filing cabinet.

NCM will expel students and preceptors for unprofessional or unethical conduct including, but not limited to, violation of confidentiality, dishonesty, stealing, plagiarism, copyright infringement, sexual harassment, and violation of any local, state and federal laws.

NCM will document all information and contact any persons involved in the unprofessional or unethical conduct complaint. A written summary will be sent to the President of the College, who will make a decision and respond in writing within 45 days. The President can appoint a review committee if necessary.

If the President's response is unsatisfactory, a complaint can be submitted to the Board of Directors. The Board of Directors will respond within 60 days of receipt of the complaint. If the

student or preceptor is still unsatisfied with the decision, they can use the grievance mechanism for the State of New Mexico.

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.

### **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.

### **Procedure:**

Student record is updated in Access to reflect the withdrawal. A copy of the updated student record sheet is printed from Access and placed in the student file.

If refund is applicable, the amount of refund is calculated. Amount of check is entered into the payments section in Access. Once the mail receipt is returned to the office, it is stapled into the student file.

A withdrawn sticker with the withdrawal date is placed on the front of the student file, and filed in the withdrawn filing cabinet.

### **REINSTATEMENT AND RE-ENROLLMENT**

#### **Reinstatement:**

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

Example: Student enrolled in 2000, but needed to withdraw due to medical reasons in 2002. Then in 2003, student wanted to complete 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.*

**Procedure:**

When a student is reinstated, they must send in a new application and new preceptor contracts, reinstatement fee and any accreditation fees due.

NCM will review the student record to see if the work completed previously meets the current academic and clinical requirements, and will approve the plan of completion.

Student and preceptor information is updated into the Access database.

- Check to see if preceptor is already in Access to eliminate the possibility of a duplicate file
  - Either enter in new preceptor or check existing preceptor information, and update if necessary
- Print out student and/or Preceptor Access information sheet

Set up new file folder if needed for the preceptor.

Send an enrollment packet to student/preceptor

- Welcome letter
- Student record
- Disc
- Orientation pamphlet – teaching guide for preceptor
- Birth calculation card

Send an email to both student and preceptor to notify them of the enrollment date.

Log out in mail log.

**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.*

**Procedure:**

Students who are re-enrolling must send in a new application and new preceptor contracts as well as current application and administrative fees.

NCM will review the student record to see if the work completed previously meets the current academic and clinical requirements.

Student and preceptor information is entered into the Access database.

- Open the student file
- The new enrollment dates are entered onto the student record. The old enrollment dates must be noted in the file.
  
- Check to see if preceptor is already in Access to eliminate the possibility of a duplicate file
  - Either enter in new preceptor or check existing preceptor information, and update if necessary
- Enter information for student/preceptor in Access
- Print out student and/or Preceptor Access information sheet

Set up new file folders if needed for the preceptor.

Send an enrollment packet to student/preceptor

- Welcome letter
- Student record
- Disc
- Orientation pamphlet – teaching guide for preceptor
- Birth calculation card



Send an email to both student and preceptor to notify them of the enrollment date.

Log out in mail log.

### **EXTENSION OF PROGRAM:**

Students have 5 years to complete their program. At the end of the 5 years, a student can request an extension. Extensions are decided on a case to case basis, taking into consideration if the student has consistently submitted coursework and the amount of work that is needed to complete the program. Extensions are meant to be a way for a student who has only 2 births or 1 course to complete their program. Extensions are granted for up to 6 months to allow the student to finish up.

Students must request the extension in writing. Students must also submit a plan of completion that shows how the remaining work will be completed within the extension time period, signed by both student and preceptor.

The request for extension will be reviewed and a response will be sent to the student within 30 days.

If the request for extension is denied, the student can file a grievance, following our grievance process.

If the student does not complete the coursework according to the agreement, the student will be withdrawn. If withdrawn, the student can decide whether to re-enroll to complete their program. If the student decides to re-enroll, all current fees and program requirements will apply.

### **Procedure:**

Student must submit a request for the extension and the plan of completion in writing. The extension and plan of completion will be reviewed by the Registrar and/or the Admissions Representative. The Registrar and/or the Admissions Representative will make a recommendation to the President. The President will respond within 30 days.

### **STUDENT WITH DISABILITIES**

The Americans with Disabilities Act is designed to protect persons with disabilities from discrimination.

The NCM administrative office is ADA compliant.

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

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

## **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 College's goal is to help the student and/or preceptor an amicable solution, and to offer assistance in securing the desired result.

### **Termination of contract:**

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 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.

### **Complaint or Grievance against a student or a preceptor**

In the case of a conflict between a student and a preceptor, the College encourages both parties to make attempts to resolve their grievances informally and will offer mediation. If these attempts fail, the complaint must be made in writing.

The written complaint must include the following:

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

Once the complaint is received:

1. The College will respond within 30 days. The complaint is logged into the mail log, a Grievance tracking sheet is started. This will track the grievance to ensure timely response.
2. Each individual will be asked if they would like counseling and/or mediation. All communication will be kept confidential. 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.
3. 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.

4. 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 of NCM. The request to continue the process must be made in writing.
5. 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 request to continue must be made in writing. 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.

### **Complaints against the College or a staff member:**

In the case of a complaint against the College or staff member, a written complaint will be sent to the President of the College.

The written complaint must include the following:

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

Once the complaint is received:

1. The President of the College will respond within 30 days. The complaint is logged into the mail log, a Grievance tracking sheet is started. This will track the grievance to ensure timely response.
2. If the President's response is unsatisfactory, the complaint will be forwarded to the Board of Directors. This request must be made in writing. 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.
3. If the complaint is made against the President of the College, the complaint will go directly to the Board of Directors. The Board of Directors will 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**

If you are unable to resolve your complaints through the National College of Midwifery's internal complaint process, you can file a complaint through the New Mexico Higher Education Department complaint process.

*In accordance with the new Federal Program Integrity rules effective July 1, 2011, the New Mexico Higher Education Department (NMHED) will review complaints regarding public and private postsecondary institutions in New Mexico as well as New Mexico resident students attending out-of-state institutions.*

*NMHED will receive complaints that were unable to be resolved through the institution's internal complaint process. Generally, in order to file a complaint with NMHED, you must have already filed with and received a response from the institution which you are complaining against. If you have legitimate reasons preventing you from filing a complaint with the institution, you must provide supporting documentation to that regard.*

*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.

### **MEAC Complaint Policy**

If you are unable to resolve your complaints through the National College of Midwifery's internal complaint process and the New Mexico Higher Education Department complaint process, please follow the MEAC Complaint Policy below:

MEAC encourages parties to pursue informal grievance mediation attempts with each other, or with MEAC staff or Board members, to attempt to resolve grievances informally before commencing a formal written complaint process with MEAC. If those attempts fail, MEAC will review complaints received against an institution or program if it is in writing and complies with the guidelines set forth in the Accreditation Handbook:

[http://meacschools.org/wp-content/uploads/2014/07/2014-Section-G\\_Policies-and-Procedures\\_Accrediation-Handbook.pdf](http://meacschools.org/wp-content/uploads/2014/07/2014-Section-G_Policies-and-Procedures_Accrediation-Handbook.pdf)

### **Midwifery Education Accreditation Council**

1935 Pauline Blvd., Ste. 100B

Ann Arbor, MI 48103

Phone: (360) 466-2080

Fax: (480) 907-2936

[info@meacschools.org](mailto:info@meacschools.org)

### **Complaints regarding NCM's internships in SARA states::**

**SARA Policies and Standards, including those for consumer protection and the resolution of complaints, apply to interstate distance education offered by participating SARA institutions to students in other SARA states, including internships taking place in these states.**

Only those complaints resulting from distance education courses offered by participating institutions to students in other SARA states come under the terms of the agreement. Complaints about a SARA institution's in-state operations are to be resolved under the state's provisions, not those of SARA.

#### SARA Policies and Standards

SARA consumer protection provisions require the home state, through its SARA "portal" entity or agency, to investigate and resolve allegations of dishonest or fraudulent activity by a provider, including the provision of false or misleading information.

Consumer protection within SARA, in addition to dealing with alleged fraudulent activity, also provides for the investigation and resolution of complaints that an institution is operating a course or program contrary to practices set forth in the C-RAC Guidelines (see below) in such a way that a student is harmed.

Examples of issues that may arise in regard to alleged fraudulent activity or more general complaints include, but are not limited to:

- a. Veracity of recruitment and marketing materials;
- b. Accuracy of job placement data;
- c. Accuracy of information about tuition, fees and financial aid;
- d. Complete and accurate admission requirements for courses and programs;
- e. Accuracy of information about the institution's accreditation and/or any programmatic/specialized accreditation held by the institution's programs;
- f. Accuracy of information about whether course work meets any relevant professional licensing requirements or the requirements of specialized accrediting bodies;
- g. Accuracy of information about whether the institution's course work will transfer to other institutions; and
- h. Operation of distance education programs consistent with practices expected by institutional accreditors (and, if applicable, programmatic/specialized accreditors) and/or the C-RAC Guidelines for distance education.

1. Responsibilities for resolving complaints Initial responsibility for the investigation and resolution of complaints resides with the institution against which the complaint is made. Further consideration and resolution, if necessary, is the responsibility of the SARA portal agency, and other responsible agencies of the institution's home state (see the following section: Complaint Resolution Processes). The portal agency is responsible for staffing the investigation and resolution of complaints that are not resolved at the institutional level. (The portal agency may enlist the assistance of other responsible entities in the state in carrying out the work of complaint resolution.) Institutions operating under SARA shall make their and SARA's complaint resolution policies and procedures readily available to students taking courses under SARA provisions.

#### 2. Complaint Resolution Processes

- a. Complaints against an institution operating under SARA go first through the institution's own procedures for resolution of grievances.
- b. Complaints regarding student grades or student conduct violations are governed entirely by institutional policy and the laws of the SARA institution's home state.
- c. If a person bringing a complaint is not satisfied with the outcome of the institutional process for handling complaints, the complaint (except for complaints about grades or

student conduct violations) may be appealed, within two years of the incident about which the complaint is made, to the SARA portal agency in the home state of the institution against which the complaint has been lodged. That agency shall notify the SARA portal agency for SARA Policies and Standards May 5, 2016 – Page 13 the state in which the student is located of receipt of that appealed complaint. The resolution of the complaint by the institution’s home state SARA portal agency, through its SARA complaint resolution process, will be final, except for complaints that fall under the provisions of (g), below.

d. While the final resolution of the complaint rests with the SARA portal agency in the home state of the institution against which the complaint has been lodged, nothing precludes the state in which the complaining person is located from also working to resolve the complaint, preferably through that state’s SARA portal agency. Indeed, it is expected that SARA states will facilitate the resolution of any complaints brought to their attention.

e. While final resolution of complaints (for purposes of adjudication of the complaint and enforcement of any resultant remedies or redress) resides in certain cases with institutions (complaints about grades or student conduct violations), or more generally with the relevant institution’s home state SARA portal agency (all other complaints), the regional compact(s) administering SARA may consider a disputed complaint as a “case file” if concerns are raised against a participating state with regard to whether that state is abiding by SARA Policies and Standards. The regional compact may review such complaints in determining whether a state under its purview is abiding by the SARA standards. Similarly, a complaint “case file” may also be reviewed by NC-SARA in considering whether a regional compact is ensuring that its member states are abiding by the SARA standards required for their participation in the agreement.

f. SARA shall develop policies and procedures for reporting the number and disposition of complaints that are not resolved at the institutional level. Such data will create transparency and can be used in determining whether a regional compact is ensuring that its SARA member states and those states’ institutions are abiding by the standards required for participation in the agreement.

g. Nothing in SARA Policies and Standards precludes a state from using its laws of general application to pursue action against an institution that violates those laws.

### 3. Oversight of complaint investigation

Investigation of a SARA-related complaint against an institution requires that a board or agency outside the institution’s immediate management be available to handle complaints that are not resolved within the institution. A system board responsible for more than one separately accredited institution may serve this role under SARA provisions. A board responsible for only one accredited institution, or which lacks enforcement authority over an institution, cannot serve as the SARA external oversight agency for such an institution. In such circumstances, the institution’s home-state SARA portal agency may serve that function.

## **NATIONAL COLLEGE OF MIDWIFERY POSITION STATEMENT ON INCIVILITY, BULLYING AND WORKPLACE VIOLENCE**

### **Purpose**

The National College of Midwifery is committed to creating and sustaining a culture of respect between students and preceptors. This document is meant to act as a guide for both students and

preceptors to increase awareness and clarify responsibilities as they relate to creating safe and healthy working relationships.

## Background

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

## Identifying Harmful Actions

The first step in taking actions to eliminate bullying is to define harmful actions. By distinguishing the various forms of harmful behavior, as a profession we can focus our collective wisdom and experience to create a culture of respect, safety, and effective communication.

Below are outlined various types of harmful actions.

**Incivility** can take the form of:

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

**Bullying** is repeated, unwanted harmful actions intended to:

- humiliate
- offend
- cause distress
- undermine
- degrade

Actions may include, but are not limited to:

- hostile remarks
  - verbal attacks
  - threats
  - taunts
  - intimidation
  - withholding of support
- (McNamara, 2012)

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

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

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

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

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

Examples of workplace violence include:

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

(Occupational Safety and Health Administration, 2015).

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

## **Potential Ramifications**

Potential ramifications of incivility, bullying and workplace violence include:

- decreased job satisfaction



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

## Solutions

NCM endorses the Nonviolent Communication (NVC) model and encourages students and preceptors who are finding it difficult to maintain civil relationship to engage in study and implementation of the model to the best of their ability. The NVC model relies on both empathic listening and honest expression of observations, feelings, needs and requests.

The following text is taken from the NVC website, which also can be used by students and preceptors who are interested in accessing more useful resources about this helpful method of communication:

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

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

NVC involves both communication skills that foster compassionate relating and consciousness of the interdependence of our well being and using power with others to work together to meet the needs of all concerned.

This approach to communication emphasizes compassion as the motivation for action rather than fear, guilt, shame, blame, coercion, threat or justification for punishment. In other words, it is about getting what you want for reasons you will not regret later. NVC is NOT about getting people to do what we want. It is about creating a quality of connection that gets everyone's needs met through compassionate giving.

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

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

## **Nonviolent Communication Skills**

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

1. Differentiating observation from evaluation, being able to carefully observe what is happening free of evaluation, and to specify behaviors and conditions that are affecting us;
2. Differentiating feeling from thinking, being able to identify and express internal feeling states in a way that does not imply judgment, criticism, or blame/punishment;
3. Connecting with the universal human needs/values (e.g. sustenance, trust, understanding) in us that are being met or not met in relation to what is happening and how we are feeling; and
4. Requesting what we would like in a way that clearly and specifically states what we do want (rather than what we don't want), and that is truly a request and not a demand (i.e. attempting to motivate, however subtly, out of fear, guilt, shame, obligation, etc. rather than out of willingness and compassionate giving).

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

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

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

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

NVC is a clear and effective [model](#) for communicating in a way that is cooperative conscious, and compassionate.

(c) 2005 by Center for Nonviolent Communication

Website: [www.cnvc.org](http://www.cnvc.org) Email: [cnvc@cnvc.org](mailto:cnvc@cnvc.org)

Phone: +1.505.244.4041

## **How the National College of Midwifery Can Help**

While NCM encourages students and preceptors to practice nonviolent communication and to explore their own methods of resolution in the case of personal conflicts that arise out of harmful actions, it is also important to NCM that all students and preceptors feel confident they will have

access to guidance and support if needed. For this reason, NCM staff offers mediation and maintains a formal grievance policy which can be found on page 60 of the NCM Handbook ([www.midwiferycollege.org/AcademicProgram/Downloads/NCMHandbook&Catalog.pdf#page=63](http://www.midwiferycollege.org/AcademicProgram/Downloads/NCMHandbook&Catalog.pdf#page=63)). All communications are kept confidential and individuals will not be discriminated against as a consequence of making a complaint.

If you have any questions about this position statement or about NCM's grievance policy, please contact NCM directly.

This document is based on the 2015 American Nurses Association Position Statement on Incivility, Bullying and Workplace Violence

## **ACADEMIC INTEGRITY CODE**

### **PRINCIPLES:**

Academic integrity is a commitment, even in the face of adversity, to five fundamental values:

- honesty
- trust
- fairness
- respect
- responsibility

(The Center for Academic Integrity (CAI)

<http://www.academicintegrity.org/icai/assets/FVProject.pdf>)

### **SCOPE:**

- All work for any class, academic activity, or clinical encounter or skill completed as part of an NCM program.
- Academic activities such as enrollment, withdrawal from classes and similar.

### **Academic dishonesty, academic misconduct or academic fraud**

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

- **Plagiarism:** The adoption or reproduction of original creations of another author (person, collective, organization, community or other type of author, including anonymous authors) without due acknowledgment.
- **Fabrication:** The falsification of data, information, or citations in any formal academic exercise.
- **Deception:** Providing false information to an instructor concerning a formal academic exercise—e.g., giving a false excuse for missing a deadline or falsely claiming to have submitted work.
- **Cheating:** Any attempt to obtain assistance in a formal academic exercise or test without due acknowledgment.
- **Bribery** or paid services: Giving assignment answers or test answers for money.
- **Sabotage:** Acting to prevent others from completing their work. This includes cutting pages out of library books or willfully disrupting the experiments of others.
- **Professorial misconduct:** includes improper grading of students' papers and oral exams, grade fraud, deliberate negligence towards cheating or assistance in cheating.
- **Impersonation:** assuming a student's identity with intent to provide an advantage for the student.

## ACADEMIC INTEGRITY RESOURCES

- <https://static.lib.ou.edu/academicintegrity/player.html>
- [http://integrity.ou.edu/files/nine\\_things\\_you\\_should\\_know.pdf](http://integrity.ou.edu/files/nine_things_you_should_know.pdf)

### INTEGRITY COUNCIL

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

### REPORTING ACADEMIC MISCONDUCT

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

### INFORMAL RESOLUTION:

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

### FORMAL RESOLUTION:

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

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

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

### HEARINGS

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

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

### REMIEDIATION FOR MISCONDUCT

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

### **APPEALS AND RECONSIDERATION**

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

## **NCM DISCUSSION GROUP POLICY**

### **Introduction**

The purpose of this discussion group is to provide a safe, accessible mode of communication to discuss the topics covered in this course.

Only the preceptor, her peer reviewer and the students currently enrolled in this course will be participating in this discussion. Messages may not be distributed to anyone outside of the discussion group. Nevertheless, keep in mind that there is no way for NCM to guarantee that messages will be kept confidential.

Please familiarize yourself with the following rules governing behavior on the discussion group.

### **Guidelines for NCM Discussion Group**

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

- Maintain confidentiality. As we all know, the world of midwifery is small and intimate. Please refrain from sharing information about others (e.g. other students, clients or midwives) that should be kept confidential, even if names are not being used.
- It's okay to share your own personal stories, but when it comes to others' stories, keep discussions focused on concepts rather than on personal information.

- Consider cultural appropriateness. NCM has students from all walks of life in diverse geographic settings. Please consider whether your words might be offensive to someone of a culture different than your own.
- Practice wise speech. Be kind, honest, respectful, helpful and thoughtful.
- Come to the discussion with openness to varying perspectives and enough humility to listen deeply. Come with trust that everyone in the group is seeking to listen and to be heard.
- Consider that it is extremely difficult to interpret tone through electronic communication so avoid implying tone when reading posts as this can lead to misinterpretation.
- All defamatory, abusive, profane, threatening, offensive, or illegal materials are strictly prohibited as are hateful, negative or discriminatory comments regarding race, ethnicity, religion, gender, disability, sexual orientation, education, or political beliefs.
- Do not post commercial solicitations.
- Consider that comments are subject to libel, slander, and antitrust laws.
- Do not post any material protected by copyright or intellectual property rights without the permission of the owner.
- Remember that while users are prohibited by this policy from reproducing and distributing posts to non-members and, while NCM believes its members will follow this Discussion Group Policy, NCM has no technical means to prevent a user from reproducing or distributing a post.
- If you have any questions about the guidelines, please contact the preceptor of the course.

## **Compliance**

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

Anyone consistently posting out of compliance with the guidelines may be removed from a course.

If a you find a post to be inappropriate:

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

## **Disclaimer**

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

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

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

By joining and using a discussion group, you are acknowledging that you've read this disclaimer, understand it, and are waiving any cause of action you may have against NCM.

## **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.

## **PHYSICAL ATTRIBUTES THAT ALL STUDENTS MUST HAVE**

In order to be able to effectively perform the functions of a midwife include, but are not limited to, the ability to:

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

8. Communicate in such a way as to be understood by others
9. Write legibly or type
10. Read and comprehend technical materials written at college and professional levels of comprehension.

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

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

### **COPYRIGHT POLICY:**

All NCM materials are copyrighted by NCM unless they display a Creative Commons, or other license. [Copyright Act of 1976](#)

Students and Faculty are responsible for any contributions they make to an NCM course, including but not limited to any feedback, blogs, discussions, assignments, comments or questions.

Contributions must not:-

1. contain any material which is defamatory of any person;
  2. contain any material which is obscene, offensive, hateful or inflammatory;
  3. promote sexually explicit material;
  4. promote violence;
  5. promote discrimination based on race, sex, religion, nationality, disability, sexual orientation or age;
  6. infringe any copyright, database right or trade mark of any other person;
  7. be likely to deceive any person;
  8. be made in breach of any legal duty owed to a third party, such as a contractual duty
  9. or a duty of confidence;
  10. promote any illegal activity;
  11. be threatening, abusive or invade another's privacy, or cause annoyance, inconvenience or needless anxiety;
  12. be likely to harass, upset, embarrass, alarm or annoy any other person;
  13. be used to impersonate any person, or to misrepresent your identity or affiliation with any person;
  14. Give the impression that they emanate from NCM, if this is not the case; or advocate, promote or assist any unlawful act such as (by way of example only) copyright infringement or computer misuse.
- By posting your contributions you confirm that all intellectual property rights in any content posted is yours and you grant to NCM a non exclusive worldwide perpetual royalty free license to use, reproduce, modify, publish, translate and distribute the content.



- Students and Faculty agree to indemnify NCM for any cost, expenses damages or liabilities NCM may incur relating to your contributions. NCM reserves the right to remove or edit any contributions as we deem appropriate without notice.

**This is pending approval by MEAC:**

- Prior to publishing and offering an online course, the course instructor must review it to ensure that all materials are public domain, the instructor has permission from the owner to use them, the items have a Creative Commons or other usage license, with which the instructor is abiding, or the item is “Fair Use” (see description below).
- If accusations of an infringement of copyright is made, NCM will take immediate action in the form of:
  1. Immediately removing the questioned item from the course
  2. Investigating the reported infringement.
  3. Repeated infringements may lead to the person making the infringements being fired or withdrawn by NCM.
- NCM is prepared to stand up for staff or students if false accusations are made.

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

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

- A maximum of 2 copies may be made-1 for the creator, one for the school's library.
- Permission from the owners of the copyrighted materials must be obtained before any copies are made or the project is distributed.
- Instructional materials must be held in a secure network.

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## **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.

## **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 Chief Academic Officer can always be consulted for ideas for accessing locally available resources. The College is committed to helping students and preceptors obtain needed resources.
- The Chief Academic Officer and Education Committee update the library resources each year.
- Higher degree students now have access to the ScienceDirect database through NCM's articlechoice subscription. Students can query this academic database of millions of scholarly articles, journals and book titles dating back to 1823.
- Resources for Advanced scholarship:
- NCM has compiled an extensive set of resource links page with access to numerous free journal articles. <http://midwiferycollege.org/Resource.html>
- Textbook requirements for NCM student and preceptors: NCM has all the required textbooks in NCM's library, however:

NCM requires that Students buy or rent the textbooks. NCM does not provide them. NCM lists the cost of the complete set of required textbooks in new or used form on the NCM Fees Page:

<http://midwiferycollege.org/Pay.html>

- NCM has additionally set up a WorldCat library linked to the NCM website under “resources” and “Library” booklist to show where the text can be bought online in new, used, or electronic format. It additionally shows the closest public library where the book can be found. <http://www.worldcat.org/profiles/midwiferycollege/lists/3547316>
- Access these links and resources are explained in the NCM Orientation video series, which all prospective and new students and preceptors take. It was also in the NCM Student update video for 2015, and will appear in all new student and preceptor updates: <http://midwiferycollege.org/index.html>

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### **BOOK LENDING POLICY AND PROCEDURE**

Students can borrow up to 3 books at a time for a 2 month period. The student completes a check out form and returns it to the Office. The College sends the library materials via UPS with proper insurance to cover replacement value. The College charges the student via a PayPal invoice for the price of shipping and insurance. An email is sent to the student with the the UPS tracking number and delivery date. Student must pay shipping costs to return the items via UPS, or FedEx and must insure the package for at least the replacement value of the items.

### **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.

### **STUDENT ORIENTATION & HANDBOOK**

Students must view the NCM Orientation videos and review the orientation page of the website. The NCM Handbook/Catalog is posted on the NCM website in its most updated version. Students must download this for their review prior to enrollment.

Students and preceptors are welcome to call the College for additional assistance with orientation to the College’s materials and their implementation.

### **JOB PLACEMENT**

The National College of Midwifery does not offer job placement. Students can 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 / DIPLOMA REQUESTS / ACCESS TO EDUCATIONAL RECORDS**

All transcript/ diploma requests are submitted with a completed transcript request form which includes the student's signature along with payment to the office. Requests are processed within 45 days. An email confirmation is sent to the student when the transcript has been processed. NCM Transcript request forms are available for download on the NCM website.

NCM is not a title IV institution; However NCM adheres to FERPA law on confidentiality and access to educational records

All student transcripts are protected from damage or loss by being backed up and securely stored on an external hard drive stored in a fire proof locked filing cabinet and also off site in a secured "cloud" site.

Should the College every close, the student transcripts will be uploaded onto an online transcript service.

### **CONFIDENTIALITY**

#### **Student and Preceptor files are confidential.**

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

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

NCM is not a title IV institution; However NCM adheres to FERPA law on confidentiality and access to educational records:

<http://www2.ed.gov/policy/gen/guid/fpco/ferpa/students.html>

Family Policy Compliance Office  
U.S. Department of Education  
400 Maryland Avenue, SW  
Washington, DC 20202-8520

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## **COLLEGE GOVERNANCE**

### **STUDENT AND PRECEPTOR PARTICIPATION IN COLLEGE GOVERNANCE**

Students and their preceptors are invited to attend the College's board meetings, which takes place in New Mexico, to provide feedback to the College and directly participate in directing the program. Agendas for the Board Meetings 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 Office. 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 Faculty Advisory Board which is composed of current and former NCM midwifery preceptors.

#### **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.

#### **Procedure:**

All preceptors participate in the Faculty Advisory Board at the end of each trimester when they submit an evaluation. The evaluation gives the preceptor the opportunity to 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.

NCM reviews all the comments and suggestions and appreciates all feedback to improve our program. Preceptors are thanked when their suggestions are incorporated into NCM's programs.

### **BOARD OF DIRECTORS**

The Board of Directors is made up of 5 members and consists of President, Vice President, Secretary and Treasurer.

#### **Current members**

Ezra Depperman - President  
Martha Andrew - Vice President  
Mary Ann Baul – Treasurer  
Jonathan Hill- Secretary  
Carolina Nkouaga - Member

- The Board of Directors meets annually in person, to elect officers, approve the previous meeting's minutes, approve the budget, set policy, engage in strategic planning, and address issues of concern, especially concerns or complaints raised by students, faculty and graduates. Quarterly meetings can be held via phone or video conference calls if needed.

During the year, a file is kept of all the suggestions and complaints from the Trimesterly Student Preceptor Evaluations, email and phone communications, and Graduate Surveys. The Board will address each of these at the meeting.

Draft agendas and materials are distributed to Board members prior to the meeting. Minutes are kept by the Secretary of the Board. A copy of the minutes are distributed to Board members and filed in the binder.

The NCM Board of Directors reviews the enrollment and graduation numbers at the Annual Meeting that is held in a physical location. During this meeting, recruitment and marketing is discussed in conjunction with enrollment projections and if necessary a separate committee is convened.

Each staff member gives a report about his/her individual administrative functions, including any proposed changes or issues. These reports include Student Admissions, Financial Aid, Personnel/human resource management, Financial Management, Regulatory Compliance Oversight, facilities and equipment needs, Learning Resources, and etc. If necessary, a separate committee is convened.

### **FINANCIAL RESPONSIBILITIES**

A copy of the month end reports are forwarded by email to the President of the College and the Treasurer of the Board of Directors, and the President of the College.

These reports are reviewed and compared to the operational budget and expenses. If there are any discrepancies or problems, the President will call a Board meeting to discuss this. The Board will decide if any action is needed. In the event of a cash flow problem, the Office Administrator will call the Treasurer immediately so that the Board can decide on spending priorities.

### **EMERGENCY PLAN**

In the event, the President is not able to work at the College; the Board would conduct a search to locate a midwifery educator and administrator of equivalent caliber to replace her. This search would likely take several months. In the meantime, the staff would conduct the essential business of the College with the advice and supervision of the Board of Directors. Any revision of the curriculum and education materials, as well as any other changes and improvements to the

College administration and/or its institutional relationships, would be put on hold until a new President was hired.

In the unlikely event that the entire staff of the National College of Midwifery were incapable of working, due to illness or death, the Board of Directors would temporarily take over running the College.

Staff positions would be advertised in the local newspaper and applicants would be interviewed. The current external bookkeeper for the College could be contracted to fill in until an Office Administrator could be hired. All new staff members should be cross trained and willing to cover while training replacements.

### **REVIEWS OF NCM CURRICULUM, SERVICES, POLICY, AND PROCEDURES:**

Every five years the Board of Directors will review the college objectives

Curriculum Review includes Student Admissions, Learning Objectives, Learning Resources, Learning Activities, Evaluation Methods, and Course Content.

### **EDUCATION COMMITTEE**

The Board of Directors will appoint an Education Committee To perform annual reviews and will do a systematic and comprehensive evaluation of the curriculum every 5 years. The Education Committee will insure that the learning resources are current within the last 5 years, or the latest editions listed on the NARM recommended reading list. The Education Committee will include at least one NCM Board member.

### **Annual Review**

In order to maintain the integrity of the recommended resources for each course, a yearly review of sources will be conducted to insure that the most recent editions and publications are cited for student reference. Our annual review will include the following components:

1. Review of sources cited in each course and updating of any sources that have released a new edition.
2. Review comments, questions and suggestions submitted by students and preceptors, via evaluation forms, emails or phone calls.
3. Review Adjustment reports of credit value / time incongruence from students and preceptors of credit value based on 5 (4%) or more.
4. Adjustment of minor changes i.e. spelling or grammar errors
5. Adjustment of tools or methods section in accordance with Policy and Procedure updates

When revisions are made, they are listed in the NCM Disc Revision Table. The preceptor or student who suggested a change is notified of their part in the development of the curriculum.

### **Five-Year Review:**

In addition to an annual review, the NCM Education Committee will perform a comprehensive review of the entire curriculum every five years to determine if new sources should replace existing ones as they become available and what changes should take place in the structure of each course, if any, to insure that our courses are reflective of current standards of midwifery practice and new developments in midwifery. Our 5-year curriculum review will include the following components:

1. Review of each course for currency in resources and course content based on new developments in midwifery care
2. Adjustment of NARM Skills, MEAC Essential Competencies, ICM Core Competencies, Lumina degree-level competencies, state and or federal requirements addressed in each course in accordance with changes made to the course content.
3. Review of evaluation tools and methods based on SER requirements and student/preceptor feedback regarding clarity and ability to facilitate student learning reported on trimester evaluations.
4. Review of NCM student handbook to reflect any change in curriculum content and learning methods.

### **Notification of Change**

When the student/preceptor disc is updated, the new material is made available on the website. Anything requiring immediate attention by the students/preceptors is also announced in a mass email.

Every 5 years, after the Board of Directors has approved the changes and updates made by the Education Committee, NCM will distribute the new information to all current students and preceptors.

### **On-Going Review**

**Evaluation Process:** NCM curriculum, Services, Policies, Procedures, & etc are reviewed in a continuous and ongoing manner. NCM has rolling enrollment and graduation, so at any time, each student is at a different point in her/his studies within the NCM curriculum. This ensures that most, if not all NCM components are being utilized and reviewed at any one time. All students' suggestions are also taken into account.

NCM collects suggestions for changes and reviews of curriculum in the following way:

1. All students and preceptors who are active during a trimester complete a survey (included on the Student-Preceptor Evaluation Form) of the parts of the curriculum that they have completed during the trimester.
2. All students and preceptors are welcome at any time to submit suggestions through phone, email or mail to NCM.



3. Once the new curriculum is in place, students/preceptors will be asked to evaluate if the time listed on the syllabus matched the time it took them to complete the course.

### **Students & Preceptor Suggestions and Complaints by Email or Mail or Phone –**

The student's or preceptor's suggestions are acknowledged and complaints are resolved immediately if possible. Solutions are looked for within current NCM policy and procedures. At the Board of Directors' meeting these will be reviewed and any necessary changes to the programs, policy, or student services will be made.

### **Graduate Survey Forms**

Graduate Survey Forms are sent to all graduates and asks for suggestions and comments regarding all aspects of NCM including program planning and evaluation, policy-making, preceptor evaluation, and student services. These are saved in a file for the board of directors. At the Board of Directors meeting, these are reviewed and any necessary changes are made to the programs, policy, or student service

In the case that a suggested change would represent a "Substantive Change," the issue is saved for the Board of Directors and presented at their annual meeting for a final decision. The revisions made, are listed in the NCM Disc Revision Table. The preceptor or student who suggested a change is notified of their part in the development of the curriculum.

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## **FINANCIAL**

The National College of Midwifery follows these financial accounting policies and procedures in its commitment to make the College's finances as stable, secure and transparent as possible.

### **Accounts Receivable**

The office administrator logs in checks and payments coming into the College by mail. Copies of checks are attached to applications or transcript requests and checks are filed in the deposit envelope. A receipt is included in the enrollment letter sent to the student. A copy of the check and receipt is placed in the student file.

The office administrator then deposits these checks.

Payments from other sources are copied and placed in appropriate files.

Paypal payments are entered into the check registry.

### **Deposits**

All checks are stamped for deposit.

Checks and payments are logged onto the excel DEPOSIT spreadsheet for the appropriate year found under “Accounting” by the Office Administrator. This spreadsheet also notes the appropriate category for the income.

A copy is made of the deposit slip and checks along with the receipt. These are filed under “Deposits” in the filing cabinet.

### **Accounts Payable**

Payroll and payables are done on the 15<sup>th</sup> and 30<sup>th</sup> day of each month by the Office Administrator.

Invoices and Bills are logged in, date stamped and filed in the payables folder by the Office Administrator. Payments are logged into the “Check register” excel spreadsheet and payment is marked on the invoice and then filed in the filing cabinet.

### **Monthly Accounting**

At the end of each month the Office Administrator makes a copy of the check register and deposit spreadsheets and gives them to our Accounting firm, currently Swinehart CPA. Swinehart CPA assigns a bookkeeper to do the month end reports.

When the Centinel Bank statement comes in, it is NOT opened. It must be given to the Swinehart CPA bookkeeper unopened. This will prevent anyone from changing the check register and/or deposit log to match the bank statement and cover up potential embezzlement. Any tax forms are also given to the CPA Southwest bookkeeper. The Swinehart CPA bookkeeper reviews the month end numbers and checks for any discrepancies.

Once the month end reporting is complete, the Swinehart CPA bookkeeper emails a copy of the report to NCM. The Swinehart CPA bookkeeper also notifies the Office Administrator of the payroll tax amount for the upcoming month and any adjustments needed. This amount is logged onto the Check Register Spreadsheet.

A copy of the month end reports are forwarded by email to the President of the College, President and the Treasurer of the Board of Directors for review.

### **Quarterly Reports**

Quarterly reports are prepared by the Swinehart CPA bookkeeper. NCM is notified when the tax reports are completed. The Office Administrator is responsible for filing these reports in a timely manner.

### **Year End Reports**

Year end reports are prepared by a professional accounting firm.

### **Financial Audit**

NCM pays a CPA firm to conduct an annual fiscal audit as required by MEAC.

### **FINANCIAL AID**

Currently, there is no financial available.

## **Budget Oversight**

The College's budget is checked on a monthly basis comparing projected income estimates to actual income, and projected expenses to actual expenses. A copy of the month end report is emailed to the President of the Board, the Treasurer of the Board, and the President of the College. For smaller disparities, adjustments in the budget are made by administrative decision. For larger disparities, a decision is brought before the Board, to bring the budget back into balance.

Budget projections for the upcoming year are prepared at least one month prior to the end of the fiscal year and submitted to the Board of Directors for approval. Budget projections are made conservatively, based on the experience of prior years' enrollments.

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## **BACKUP**

Each computer has an automatic system backup on an external hard drive.

All files are backed up on a weekly basis to an external hard drive and to an offsite Cloud server.

File back ups are kept in the locked fire proof filing cabinet.

## **Computer and Website Maintenance**

Each computer has an automatic system backup on an external hard drive.

All files are backed up on a weekly basis to an external hard drive and to an off site Cloud server.

File back ups are kept in the locked fire proof filing cabinet.

The website is updated through Macromedia Dreamweaver on the "Administrator" Computer. The "local" copy of the website is stored in: <C:\Program Files\Macromedia\Dreamweaver MX 2004\Midwifery College 1>

## **NCM POLICY ON USE OF PROMOTIONAL MATERIALS AND WEB CONTENT**

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

and content that extends beyond the use of a hyperlink is in violation of this policy and thus our policy and procedures. Preceptors or students in violation of NCM policy and procedures are subject to disciplinary action.

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## **PERSONNEL**

### **STAFF HIRING**

All staff members are given the opportunity to meet and interview all job applicants. All new employees are hired on a consensus basis.

All new hires receive a three-month probationary period to make sure a good match exists. There is a review at the end of each month.

After 3 months the new employee will be given a final evaluation by the president. She/he will also ask for feedback from the other staff members. If the review is below expectations, the National College of Midwifery or the employee can decide to part ways at this time.

### **STAFF FIRING**

Employees who are fired will be issued a final paycheck to reflect time worked. An employee will be fired for, but not limited to the following reasons:

- **Unethical Conduct**

Unethical conduct covers a wide range of specific behaviors, including dishonesty, theft, fraud, industrial espionage and slander.

In cases of criminal misconduct, the College reserves the right to fire an employee without prior warning or severance pay.

- **Job Duties**

Employee fails to perform job duties to satisfactory standards.

Missing too many days of work causes individual employees' output levels to fall behind other employees

Unsatisfactory employee evaluations

- **Non-Compliance**

Employee fails to follow all company policies and procedures,. Common areas of non-compliance include workplace harassment, workplace conduct, dress code and the performance of duties not specifically listed in job descriptions.

- **Personality Issues**

The employee has difficulty getting along with others in the College or with students and preceptors. The College requires working in collaboration, and if the employee is causing multiple confrontations or dampening productivity with a lack of communication or conflict-management skills, the College may have no choice but to ask the employee to leave.

### **EMPLOYEE EVALUATIONS:**

All employees are given a performance evaluation annually. Employee evaluations are not designed to be punishing, but rather as tools for self improvement Evaluations will include a review of personnel files to see if there are any commendations or complaints.

Each Employee/Staff member completes a self-evaluation, and then is evaluated by their direct supervisor. The Chief Academic Officer (CAO) and Chief Operating Officer (COO) are evaluated by the President (CEO). The Office Administrator Admissions Representative (OAAR) is evaluated by the COO, in close consult with the CEO and CAO.

The President is evaluated by each staff member, with the final evaluation completed by the Board of Directors.

As normal staff evaluates each other and sends these evaluations out. The president then has a mentoring session with each staff member identifying one area of improvement the staff person wishes to work on. Together they identify the activity(ies) they will complete to help improve their skills in this area. Six months after the original evaluation the president will again have a mentoring session with the staff person and discuss how the chosen activities are progressing and help the staff person make an on-going plan to ensure that they are on a path toward success. The president will follow the same procedure under the guidance of the President of the Board. If the employee has an outstanding evaluation, and if the budget allows, it will be recommended that the employee receive a raise or receive a bonus.

Job descriptions will be reviewed and updated during the evaluation process. If the job description needs to be adjusted, it is dated and put in the employee's file along with the performance evaluation.

### **VACATION, SICK LEAVE AND FAMILY LEAVE**

The College believes that our families and our health are of paramount importance. Employees are encouraged to take care of themselves and their families.

The College offers 2 weeks paid vacation after completion of the first year of employment.

After 2 years of employment, the employee will receive 3 weeks paid vacation to a maximum of 4 weeks of paid vacation leave after the completion of 3 years employment. Vacation time does not accrue.

Additional unpaid vacation leave can be negotiated on a case-by-case basis.

The College does not measure sick leave. If the employee is sick, s/he should stay home and take care of her/himself.

In cases of extended illness, the College will assess its budgetary constraints, and will offer to hold the employee's position on an unpaid basis for a set period. NCM abides by the Family and Medical Leave Act (FMLA).

The College does not offer paid maternity leave. The employee's position will be held for her for a 2 month period, and temporary staff will be hired in the interim.

### **SALARY**

Employees are paid an annual salary. Pay checks are issued on the 15<sup>th</sup> and 30<sup>th</sup> of each month. When the budget allows, employees will be eligible for a raise or a bonus based on their annual evaluation.

### **BENEFITS**

The College provides a Simple IRA retirement plan for all employees who have completed one year of employment. The College annually matches salary deductions, up to 3% of the employee's annual gross salary.

### **EMPLOYEE PROTECTION (WHISTLEBLOWER) POLICY**

If any employee reasonably believes that some policy, practice, or activity of The National College of Midwifery is in violation of law, a written complaint must be filed by that employee with the Executive Director or the Board President.

It is the intent of The National College of Midwifery to adhere to all laws and regulations that apply to the organization and the underlying purpose of this policy is to support the organization's goal of legal compliance. The support of all employees is necessary to achieving compliance with various laws and regulations. An employee is protected from retaliation only if the employee brings the alleged unlawful activity, policy, or practice to the attention of The National College of Midwifery and provides the National College of Midwifery with a reasonable opportunity to investigate and correct the alleged unlawful activity. The protection described below is only available to employees that comply with this requirement.

The National College of Midwifery will not retaliate against an employee who in good faith, has made a protest or raised a complaint against some practice of the National College of Midwifery, or of another individual or entity with whom the National College of Midwifery has a business relationship, on the basis of a reasonable belief that the practice is in violation of law, or a clear mandate of public policy.

The National College of Midwifery will not retaliate against employees who disclose or threaten to disclose to a supervisor or a public body, any activity, policy, or practice of the National College of Midwifery that the employee reasonably believes is in violation of a law, or a rule, or regulation

mandated pursuant to law or is in violation of a clear mandate of public policy concerning the health, safety, welfare, or protection of the environment.

## **RECORD RETENTION AND DOCUMENT DESTRUCTION POLICY**

(Based on National Center for Nonprofit Associations policy-These guidelines are checked annually and changes are updated when appropriate.)

The National College of Midwifery shall retain records for the period of their immediate or current use, unless longer retention is necessary for historical reference or to comply with contractual or legal requirements. Records and documents outlined in this policy include paper, electronic files (including email) of where the document is stored, including network servers, desktop or laptop computers and handheld computers and other wireless devices with text messaging capabilities.

A National College of Midwifery employee shall not knowingly destroy a document with the intent to obstruct or influence an "investigation or proper administration of any matter within the jurisdiction of any department agency of the United States ... or in relation to or contemplation of such matter or case." If an official investigation is underway or even suspected, document purging must stop in order to avoid criminal obstruction.

In order to eliminate accidental or innocent destruction, The National College of Midwifery has the following document retention requirements:

<b>Type of Document</b>	<b>Minimum Best Practice Requirement</b>
'Accounts receivable & payable ledgers & schedules	7 years
'j Affirmative Action Plan* after expiration of plan . (ED 11246, Vietnam Era Veterans Readjustment Act and the Rehabilitation Act of 1973)	Updated annually then 1 year
Articles of Incorporation, charter, bylaws, Minutes and other incorporation records	Permanently
Audit reports, Financial Statements (year end): general/private ledgers, trial balance, journals	Permanently
Bank Reconciliation	3 years
Bank Statements, deposit records, electronic fund transfer documents, & cancelled checks	3 years
Chart of accounts	Permanently
Checks (for important payments & purchases	Permanently
Contracts, mortgages, notes and leases (expired)	7 years

Contracts (still in effect)	Permanently
Correspondence (general)	3 years
Correspondence (legal and important matters)	Permanently
Correspondence (with students and preceptors)	2 years
Deeds, mortgages, and bills of sale	Permanently
Depreciation schedules	Permanently
Donations	7 years
EEOC reports	Permanently
Employment Applications* (depending on taking the personnel action the # of employees, employers must remain applications & other personnel records relating to hires, rehires, tests, promotions, transfers, demotions, selection for training, layoff, recall, termination or discharge)(Civil Rights Act of 1964, Title VII, ADA, ADEA)	3 years from making the record or
Expense Analyses/ expense distribution schedules	7 years
Garnishments	7 years
Grants (un-funded)	1 year
Grants (funded)	7 years after closure
I-9's* after termination	3 years after date of hire or 1 year
Insurance records, current accident reports, claims, policies, etc.	Permanently
Internal audit reports	7 years
Inventory records	7 years
Loan documents and notes	Permanently



Patents and related papers	Permanently
Payroll records & summaries including records related to employee's leave* (Equal Pay Act, FLSA)	7 years
Personnel files (terminated employees) (Title VII, ADA, ADEA)	7 years after termination
Polygraph test results and records* (Employees Polygraph Protection Act)	3 years
Purchase orders	7 years
Retirement and pension records including Summary Plan Descriptions* (ERISA)	Permanently
Tax returns and worksheets including W-2's	Permanently
Timesheets	7 years
Trademark registrations and copyrights	Permanently
Student Academic Transcripts	Permanently
Student Financial Aid Transcripts	5 years
Withholding tax statements* (FICA, FUTA, Federal Income)	7 years
Workers compensation documentation	10 years after 1 <sup>st</sup> closure

\* Federal requirements for organization with government contracts or subcontracts.

## **POLICIES AND PROCEDURES FOR SCHOLARSHIP FUNDS**

### **Purpose**

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

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

### **Scope and Intent of the Policy**

The National College of Midwifery from time to time holds and administers funds that provide scholarships to individuals. These scholarships enable the recipients to complete an undergraduate or graduate education in the field of midwifery.

NCM has established the following procedures for awarding scholarships. These procedures ensure NCM's compliance with all applicable requirements of the Internal Revenue Code, including situations where donor/advisors have participation in the selection of recipients.

These procedures may be amended from time to time.

### **Application and Selection Process**

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

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

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

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

Criteria for scholarships may include, but are not limited to, the following:

- Knowledge and prior life experience of health disparities as they relate to maternity care;
- Ambitions and qualifications for midwifery work in underserved communities and personal connection within those communities;
- Secure plan for completion of the program, including relationships with willing and capable preceptors
- Pre-Enrollment Interview/Assessment

- Letters of recommendation from individuals who have knowledge of the applicant's capabilities;
- Financial need based on applicant's description of her financial plan and comparison of applicant's family income to federal poverty guidelines <https://aspe.hhs.gov/poverty-guidelines>
- Additional biographical information regarding applicant's career, academic and other relevant experiences, ethnic and cultural identity; and
- The scholarship selection committee's conclusions as to the applicant's motivation, character, ability, or potential.

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

- COURSE-RELATED EXPENSES – FEES, BOOKS, SUPPLIES, AND EQUIPMENT REQUIRED OF ALL STUDENTS FOR COURSES OF INSTRUCTION.
- ROOM AND BOARD, TRAVEL, RESEARCH, CLERICAL ASSISTANCE. PAYMENTS FOR EXPENSES IN THIS group ARE NOT EXEMPT FROM INCOME TAX.

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

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

The selection committee will take into account federal law regarding affirmative action (summarized below) when selecting recipients.

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

### **Scholarship Selection Committee**

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

The fund's donors may not control the selection committee. This means that no combination of donors, persons appointed or designated by donors, and persons (a term that includes partnerships, corporations and trusts as well as individuals) related to them may constitute a majority of the committee, be given a veto power, be allowed to chair the committee or otherwise be permitted to control the committee's decisions. If a donor/advisor recommends a person for appointment to a selection committee based on objective criteria related to the expertise of that person, that person will not be deemed to be appointed or designated by the donor/advisor.

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

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

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

### Scholarship Renewals

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

## Supervision of Grants

### Scholarships Paid Directly to NCM

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

### Scholarship Grants Paid Directly to the Recipient

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

Unless otherwise provided in the **fund agreement** establishing a scholarship, a condition of each scholarship is that it will be used only for qualified educational expenses. An additional condition is

that no part of the scholarship shall be used as payment for teaching, research, or other services by the scholarship recipient required as a condition for receiving the scholarship.

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

NCM has a duty to investigate possible diversions of scholarship funds paid directly to the recipient.

Where the reports submitted or other information (including the failure to submit reports), indicate that such funds are not being used for their intended purpose, NCM is under a duty to investigate. While conducting its investigation, NCM will withhold further payments to the extent possible until any delinquent reports required under these procedures have been submitted. NCM also will take reasonable and appropriate steps to recover the funds and/or ensure restoration of the diverted funds to the purposes of the grant.

The phrase "all reasonable and appropriate steps," includes legal action where appropriate, but may not include legal action if such action would in all probability not result in the satisfaction of execution on a judgment.

#### Disbursement of Funds

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

#### Recordkeeping Requirements

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

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

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

These Policies and Procedures for Scholarship Funds were approved by NCM's board of directors on:

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Date

### **Definitions**

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

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

**Qualified Expenses** – Certain expenses incurred in attending an educational institution. They are:

- TUITION AND FEES FOR ENROLLMENT AND ATTENDANCE.
- COURSE-RELATED EXPENSES – FEES, BOOKS, SUPPLIES, AND EQUIPMENT REQUIRED OF ALL STUDENTS FOR COURSES OF INSTRUCTION.
- ROOM AND BOARD, TRAVEL, RESEARCH, CLERICAL ASSISTANCE. PAYMENTS FOR EXPENSES IN THIS GROUP ARE NOT EXEMPT FROM INCOME TAX.

**Related Persons** – The term includes both a donor or advisor’s family members and businesses they control:

**FAMILY MEMBERS** – AN INDIVIDUAL’S PARENTS, GRANDPARENTS, GREAT GRANDPARENTS, SPOUSE, SIBLINGS, CHILDREN, GRANDCHILDREN, GREAT GRANDCHILDREN AND THE SPOUSES OF ALL OF THE ABOVE.

**CONTROLLED BUSINESSES** – CORPORATIONS, PARTNERSHIPS, AND TRUSTS OR ESTATES IF THE DONOR OR ADVISOR AND FAMILY MEMBERS OWN MORE THAN 35 PERCENT OF THE TOTAL COMBINED VOTING POWER (CORPORATIONS), 35 PERCENT OF THE PROFITS INTEREST (PARTNERSHIPS), OR 35 PERCENT OF THE BENEFICIAL INTEREST (TRUSTS OR ESTATES).

### **DONATIONS**

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

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

We do not have any scholarship programs available at this time. In order to accept monetary donations for scholarships, we would need to set a scholarship account and as well as guidelines for awarding it, the qualifications of the candidates, application procedures, award deadlines, etc.

## **GIFT POLICY AND DISCLOSURE**

As part of its conflict of interest policy, The National College of Midwifery requires that directors, officers and employees decline to accept certain gifts, consideration or remuneration from individuals or companies that seek to do business with the National College of Midwifery or are a competitor of it.

This policy and disclosure is intended to implement that prohibition on gifts.

**Section 1.** "Responsible Person" is any person serving as an officer, employee or a member of the board of directors of the National College of Midwifery.

**Section 2.** "Family Member" is a spouse, domestic partner, parent, child or spouse of a child, or a brother, sister, or spouse of a brother or sister, of a Responsible Person.

**Section 3.** "Contract or Transaction" is any agreement or relationship involving the sale or purchase of goods, services or rights of any kind, receipt of a loan or grant, or the establishment of any other pecuniary relationship. The making of a gift to the National College of Midwifery is not a "contract" or "transaction."

**Section 4.** Prohibited gifts, gratuities and entertainment. Except as approved by the President of the Board or his designee or for gifts of a value less than \$25 which could not be refused without discourtesy, no Responsible Person or Family Member shall accept gifts, entertainment or other favors from any person or entity which:

1. Does or seeks to do business with the National College of Midwifery or,
2. Does or seeks to compete with the National College of Midwifery or,
3. Has received, is receiving, or is seeking to receive a Contract or Transaction with the National College of Midwifery.

## **Reimbursement Policy and Procedure**

Staff members are allowed to purchase authorized office supplies and other goods and services using personal funds. Reimbursement requests are submitted to the Office Administrator using the reimbursement form with receipts attached. Payments are made at the end of each calendar month.

Board of Director Members can be reimbursed for expenses relating to the annual meeting. The National College of Midwifery will pay the current Federal non-profit rate for mileage. The National

College of Midwifery will reimburse the cost of the hotel bill, if accommodations are necessary, however, all efforts must be made to secure an economical option. Reimbursement for mileage and accommodations are submitted to the Office Administrator using the reimbursement form with receipts attached. Payments are made at the end of each calendar month.

Staff members may apply to have the cost of continuing education or training reimbursed by the College. NCM considers continuing education to be especially important for its staff as it fills gaps in training, gains new knowledge or skills, and can provide benefit to the College. Applications for reimbursement are made using the reimbursement form with receipts attached. Payments are made at the end of each calendar month. Limit of \$1000 per staff member per year.

All Reimbursement forms and receipts must be kept on file for review on-demand by NCM Board or outside financial auditor/reviewer

## **FRAUD**

In case of the suspicion of fraud, the CEO/President, or next highest Officer, in cooperation with the president and treasurer of the board will convene a workgroup to investigate. If the incident cannot be resolved and there is evidence of fraud, the case will be turned over to the Atty. General of the state of NM.

The policy gives guidance to all staff and members in the carrying out of their duties with regard to the issues of fraud and corruption if they arise. This policy document comprises of:

- Policy Statement
- Definitions
- Fraud & Corruption Prevention Plan
- Fraud & Corruption Contingency Plan

1. It is imperative that all members and staff are aware of the threat of fraud and corruption in their daily duties and aware of their personal obligations as laid down in this policy document.

2. Policy Statement:

NCM endeavors to achieve openness, transparency and accountability by establishing best practice by carrying out reviews and regular monitoring of activities and functions thus creating an environment that deters fraud. Suspected fraud and/or corruption will be investigated and appropriate action taken. Recovery of losses arising from fraud and/or corruption will be pursued. Disciplinary action will be taken against employees involved in fraud and action may also be taken against employees whose negligence through lack of supervision and control may have facilitated the event. Prosecutions will be pursued, as appropriate.

3. Definitions:

3.1. Definition of Fraud: Fraud is defined as “the intentional distortion of financial statements or other records by persons internal or external to the organization which is carried out to conceal the misappropriation of assets or otherwise for gain”. Internal fraud could include the following:

- False accounting
- Falsification of expenses
- Theft of cash and alteration of records to conceal deficiency
- Payment of false invoices
- Failure to account for monies collected



- Dealing inappropriately with claims Examples of external fraud include:
- Fraudulent compensation claims
- False statements in grant applications

3.2. Definition of Corruption: Corruption may be defined as a payment, favors or gift given to an employee or member of the NCM board or staff as reward, or incentive for actions, or inactions, contrary to the proper conduct of one's duties. Corruption happens when public office is used for private gain. Examples of corrupt practices include:

- Acceptance of a bribe e.g. cash payment, inducement, job offer, holiday, political favors etc. to circumvent the policies of NCM
- Collusion to steal school resources
- Performing duties in a partial manner

Some of the more common activities prone to corruption are:

- Disposal of assets
- Grant of planning permission
- Administration of contracts and consultancies
- Procurement of goods and services
- Staff appointments and staff promotions

#### 4. Fraud & Corruption Prevention Plan

The most efficient method of preventing the threat of fraud and corruption is to have a culture of awareness and responsibility within the organization. This begins with the council members and continues with every staff member individually and collectively.

##### 4.1. Risk Assessment and Management

Risk is the threat that an event, action or failure to act will adversely affect an organization's ability to achieve its objectives or successfully execute its strategies. Risk Management is the process by which risks are identified, evaluated and controlled. Systematic risk assessment and management is becoming an increasingly important part of internal control as its identification and management is seen as necessary to maximize the likelihood of achieving desired outcomes. The risks to be addressed as part of a risk management program are wide ranging and include strategic, operational, financial and reputational risk. A risk strategy does not mean that sensible risks should not be taken but that they should be properly assessed and managed. There are three broad categories of risk which need to be examined in developing a fraud and corruption prevention strategy:

Personnel In common: staff is selected based on merit and candidates are assessed by interview boards. However, once staff is part of the organization the traits and behavior of personnel that lead to or indicate the possibility of fraud and/or corruption are the same:

- Employees who do not take holidays
- Employees who have extravagant lifestyles
- Employees who have a grievance against their employer
- Employees who keep responsibility for functions they could easily delegate
- Employees who obtain full control of an area of work. It is important to remember that a staff member to whom all or any of the above applies should not be considered a suspect on that account. Nevertheless these are all aspects of staff behavior that should be regularly reviewed by line and senior managers. It is the responsibility of staff, no matter what part of the College they work in to be aware of the possibilities of fraud and corruption and to implement the controls designed to prevent it. As part of fraud and corruption prevention and awareness, physical access controls must be reviewed regularly. Restricting access to cash, goods, stores, computers,

documents including official certificates and stamps and premises are a critical element in reducing the risk of fraud and corruption.

#### Operational/Financial

The scale of risk to any of NCM's operations is likely to be related to:

- The amount of money involved
- The complexity of the operation
- The frequency and effectiveness of the NCM's controls

Risks can be reduced by:

- Assessing the quality of certification issued by other bodies e.g. invoices, delivery dockets etc.
- Good file maintenance and clear audit trails
- Ensuring segregation of duties between authorization, payment and reporting functions and within these functions
- Rotation of staff
- Supervisory checks

4.2. Internal Controls Internal Controls are embedded within the management systems in NCM. Their purpose is to provide a secure framework and reduce the risk of fraud occurring. The methods of control, common to all areas that should be reviewed regularly by management are: Organization NCM has a clear plan of the organization that defines and allocates roles, responsibilities, reporting lines and delegation of authority. Segregation of Duties No one person should have responsibility for the recording and processing of a complete transaction; several people involved reduces the risk and increases the element of checking. Key areas of segregation include authorization, execution, custody and recording. Bank statements are sent unopened to the outside accountant. Where segregation is not feasible it will be managed by close supervision. Physical Controls Procedures and security measures concerning access to facilities and physical and intellectual assets of the College must be adhered to and reviewed regularly. Breaches must be reported to the CEO and Treasurer of the Board immediately.

#### Authorization and Approval

All transactions require authorization and approval by a specified person within approved limits. Authorizations can be physical or electronic. Arithmetic and Accounting All transactions must be checked for accuracy and authorization, completeness of documentation and must be correctly processed and recorded.

#### Personnel Controls

Controls are in place relating to the selection of staff, training and evaluation of competencies for roles.

#### Supervision

All areas are subject to checking by supervisory personnel. The level of supervision is determined by the level of residual risk in the activity.

#### Management

All line managers are required to ensure that all internal controls for their area of responsibility are documented, communicated and adhered to. Management are also required to adhere to controls in relation to management accounts, budgets, internal audit and any other documented special review procedures.

### 4.3. Roles and Responsibility

#### 4.3.1. Management's Responsibility

Management is committed to the highest standards of openness and accountability in all processes. The role of management in developing and monitoring a risk managed framework in the organization which would reduce the likelihood of fraud is crucial to the effectiveness of the framework that will be put in place. The potential for fraud and corruption can be reduced and curtailed where the CEO cultivates within the authority a climate where:

Senior officers and members provide leadership and good example

A strong operational control environment has been developed and is maintained

A high level of transparency and accountability exists

Probity and propriety are manifest in procedures

Physical security and visitor control are constantly reviewed

Systems security to prevent improper usage of computer systems and monitoring of their use.

In addition, the CEO should:

Ensure there is a pervasive awareness within the authority of the procedures in relation to the control and prevention of fraud and corruption

Make it clear that there is a clear commitment to the prevention of fraud and corruption and that it will be dealt with thoroughly, if uncovered

Guarantee that reporting employees or members will be supported and that reprisals will be treated seriously and could be subject to disciplinary measures

#### 4.3.2. Responsibility of the Human Resources Function

A key preventative measure to deter fraud and corruption is to take effective steps at the recruitment stage to establish, as far as possible, the previous record of potential employees in terms of their propriety and integrity.

The responsibilities of the Human Resources Function in relation to fraud and corruption prevention are as follows:

Security vetting of staff

Ensuring detailed appraisal of staff during probationary periods are submitted by line managers

Issuing of rules of conduct on appointment and following up with induction training

Maintaining documented disciplinary procedures.

Ensuring fraud and corruption awareness training is included in training programs for staff at all levels

Monitoring areas of high turnover of staff and areas of high levels of sick leave and monitoring annual leave patterns

#### 4.3.3. Responsibility of the Finance Section

The Finance Section has a responsibility to ensure the financial resources of the organization are used correctly and to ensure systems and processes are in place to minimize the possibility of fraud.

To help with this aim the Finance Section should:

Working with Internal and External Audit to demonstrate NCM used resources appropriately

Ensure the Financial Management System has security measures in place

Work with the rest of the organization so that there are clear separation of duties in regard to cash collection and the purchasing of goods

Issue guidelines and ensure compliance to Accounting Standards and national guidelines

Work with Budget Managers, so that budgets are adhered to and value for money is obtained at all times

#### 4.3.4. Line Manager's Responsibility

Line managers are expected to set example by complying fully with procedures and controls. Line managers should:

- Ensure that financial controls and procedures are understood by their staff
- Check on the application of these controls regularly
- Regularly review control procedures and update them where necessary
- Ensure the rotation of staff, within departments, where possible.

#### 4.3.5. Staff Responsibility

Every member of staff has a responsibility to:

- Ensure that funds/assets that are entrusted to them are safeguarded
- Comply fully with the Code of Conduct
- Inform line manager/supervisor of any gifts/hospitality offered
- Inform line manager of any outside interests that may conflict with their official duties
- Alert line manager to any weaknesses in the control system
- Alert line manager and/or the Internal Auditor to any case of fraud or corruption or suspected fraud or corruption
- Assist in any investigation which may arise in respect of fraud or corruption or suspected fraud or corruption.
- Be aware of NCM's policy on fraud and corruption

4.3.6. Officer Responsibility The general conduct and behavior of Officers of NCM in carrying out their role is an important yardstick by which the honesty, integrity, impartiality and performance of NCM is judged and public trust maintained. It is therefore important that the Code of Conduct is referred to in maintaining the highest possible ethical standards.

To help ensure that risks are minimized, Members should:

- Avoid conflicts of interest and never seek to use improper influence
- Make decisions based solely on the consideration of the business and student interest and common good
- Serve NCM and its students conscientiously
- Promote equality and avoid bias
- Perform their functions in a responsible and diligent manner
- Have regard for NCM resources

#### 4.3.7. External Auditor's Responsibility

External Audit is governed by standard, which set out the terms of reference under which it operates. It is a function designed to provide reasonable assurance to management that the organization's significant risks are being appropriately managed with an emphasis on internal controls and governance processes by:

- Promoting procedure manuals which identify risks and controls in place
- Evaluating risk identification and risk managed processes
- Providing clear recommendations where control weaknesses have been identified
- Providing a consultancy and quality assurance role in relation to internal controls and procedures
- Ensuring risk management and systems of controls are being monitored in response to the changing environment
- Undertaking a planned program of work, prioritized in accordance with the relative risk level.
- Ensuring audit work takes account of the possibility of fraud and corruption