Criteria for Programmatic Preaccreditation of Midwifery Education Programs
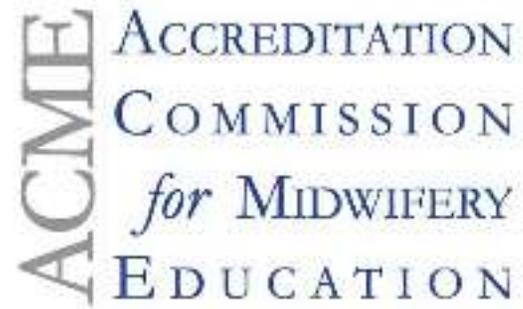
with Instructions for Elaboration and Documentation

ACCREDITATION
COMMISSION
for MIDWIFERY
EDUCATION

Contents

Preface

Accreditation Commission for Midwifery Education (ACME)

The mission of the Accreditation Commission for Midwifery Education (ACME) is to advance excellence in midwifery education. The U.S. Department of Education grants the following scope of recognition to ACME: "the accreditation and preaccreditation of basic certificate, basic graduate nurse-midwifery, direct entry midwifery, and pre-certification nurse-midwifery education midwifery programs, including those midwifery programs that offer distance education."

Midwifery programmatic pre/accreditation is a quality assurance process combining self-assessment and peer evaluation. Institutions offering midwifery education voluntarily participate in the midwifery programmatic accreditation process with ACME to assure that standards of midwifery education are maintained, competencies and skills are learned, and graduates are appropriately qualified. To be accredited, a midwifery program is expected to meet and maintain compliance with all of the criteria in this document. Every five years, the ACME Board of Commissioners (BOC) revises the criteria seeking input from a variety of stakeholders, including midwifery educators, clinicians, and others. The last review began in 2018 and the BOC finalized and published new criteria in May 2019. This document is the most current version of ACME's preaccreditation criteria.

ACME services are available to any education midwifery program that meets the eligibility requirements outlined in our Policies and Procedures Manual. For more information about the standards for midwifery programmatic accreditation agencies, visit the U.S. Department of Education website or address correspondence to Staff Assistant, Accreditation Office, USDE, 1990 K Street, NW, Washington, DC 20006, 202.219.7011 or 800.872.5327. ACME is administratively and financially autonomous from the American College of Nurse-Midwives. For more information visit www.midwife.org/acme or call 240.485.1803.

**Criteria for Midwifery Programmatic Preaccreditation of Midwifery Education Midwifery programs
with Instructions for Elaboration and Documentation**

Introduction

The Accreditation Commission for Midwifery Education (ACME) establishes the *Criteria for Programmatic Preaccreditation of Midwifery Education Programs with Instructions for Elaboration and Documentation*. These criteria are the basis for the midwifery programmatic preaccreditation process that is a joint activity involving both the midwifery education program and ACME.

The purposes of the criteria include to:
- A.   Provide structure for implementing peer evaluation in the assessment of the quality of midwifery education programs preparing midwives and nurse-midwives
- B.   Assure all aspects of midwifery education programs lead to appropriate student outcomes and prepare competent midwives
- C.   Serve as a guide to faculty in developing their midwifery program and as a framework for self-evaluation

For Board of Review (BOR) action on each programmatic preaccreditation report (PAR), all programmatic preaccreditation criteria are considered and must be met. Actions that may be taken by the BOR are listed in the section titled "Board of Review" in the *ACME Policies and Procedures Manual*. For more information, the glossary, and other accreditation documents, visit www.midwife.org/acme

Currently, ACME accredits midwifery programs that culminate in a certificate, master's degree, doctoral degree or post-graduate certificate. ACME also accredits pre-certification midwifery programs. There may be multiple paths of entry into these midwifery programs. Such midwifery programs include, but are not limited to, the following examples:

- Associate degree or baccalaureate degree to master's degree program in nurse-midwifery or midwifery
- Postbaccalaureate certificate
- A midwifery education program that leads to a master's degree in midwifery, nursing, public health or an allied health field
- Postgraduate certificate
- A midwifery education program that leads to a doctoral degree

Instructions

The *ACME Policies & Procedures Manual*, Appendix F, Instructions for Preparations for Reports (SER/PAR), provides requirements and instructions for writing, formatting, and submitting the reports. **The PAR/SER must be submitted no later than six weeks prior to the first day of the midwifery program's scheduled site visit.**

- □ **Clearly typed** (including one-and-a-half spaced, 1-inch margins all around, no less than 12 font): Submit only a PDF copy of the report and any necessary supporting documents. Exhibits are not to be included, they will be reviewed at the site visit. **Submission must be in a PDF format and emailed to acme@acnm.org.**
- □ **Title page and midwifery program/s table:** See example in Appendix A.
- □ **Table of contents:** Includes all sections and all appendices with page numbers.
- □ **Overview:** See *ACME Policies & Procedures Manual*, Appendix F, A. *Instructions for Preparation of PAR/SER.*
  The overview will include a one to two-page narrative description that:
  - □ Explains when the institution was founded and the projected semester when the midwifery program will begin (PAR) or for a SER a brief history of the program.
  - □ Presents the institution's corporate or organizational structure (e.g., part of a state system, independent not-for-profit, or for-profit corporation).
  - □ Describes the primary modalities for delivery of midwifery curriculum (e.g., face-to-face, hybrid or all distance education).
  - □ Describes the basis for credit proposed (e.g., semester hours or quarter credit hours)
  - □ Lists the type/s of midwifery program/s offered or to be offered.
  - N.B. If there is/will be more than one clearly distinguishable midwifery program in the institution and if the way each meets a criterion is different, clearly explain both in the PAR/SER. Incorporate the responses into one PAR/SER, not separate PARs/SERs for each midwifery program. Examples: a school that has a master's midwifery program and a DNP midwifery program or a school that has a nurse-midwifery and midwifery program.
  - □ Lists credential/s and degree level/s to be awarded.
- □ **URLS:** List of the URLs for the institution, the midwifery program, midwifery program catalogs, faculty and student handbooks available online, in addition, include the URL links within the text of the PAR/SER stating which criterion. All URLs must be active hyperlinks and lead to the exact location of the documented item.
- □ **Abbreviations Page:** Provide a list of any abbreviations and acronyms essential for reading the PAR/SER.
- □ **Page numbers:** Entire report is consecutively paginated, including all appendices. Maximum number of pages is 80, not including appendices. In addition, the Title Page, Overview, Abbreviations Page, and URL list **are not** included in the 80-page limit. PARs/SERs that exceed the 80-page limitation will be returned.
- □ **Criterion responses:** Each criterion is answered separately and typically in narrative form; responses do not address more than one criterion at a time.

- ☐ **Referencing sources:** The various sources of documentation referenced in the report include:
  - Name/title of the document or source
  - Date or version of the document or source
- ☐ **Exhibits:** Exhibits provide evidence to support the statements made in the PAR/SER. They may be presented in electronic or paper form.
  - Supply documentation that will satisfy the criterion. Please read these carefully and seek assistance from ACME for any questions.
  - Organize the documents for each exhibit in a folder (electronic or paper) labeled with the number of the criterion to which it pertains, e.g., Criterion I.G., Criterion II.H. Identify relevant sections of the documents, e.g., by highlighting or bookmarking.
  - Compile paper exhibits in one room for the site visit. With the exception of textbooks or other heavy items, paper exhibits should be stored in portable document boxes for easy transport to the site visitors' hotel in the evenings.

Criteria for Programmatic Preaccreditation of Midwifery Education Programs

with Instructions for Elaboration and Documentation

Criterion I:

Organization & Administration

Purpose: The purpose of Criterion I is to evaluate the organizational and administrative context of the midwifery program.

Criterion I: Organization & Administration	Instructions for Elaboration in the PAR	Instructions for Documentation in the Exhibits
A. This PAR is an in-depth self-study written by a member/s of the core faculty with opportunity for input provided to faculty and administrators.	A. Describe who wrote the PAR. Describe the opportunity for input provided to: ● faculty ● administrators	A. Provide evidence of how the faculty and administrators had input into writing the PAR, e.g., emails, memoranda, or meeting minutes.
B. The midwifery program will provide opportunity to its relevant constituents for third party comment at least two months prior to the scheduled preaccreditation site visit.	B. Describe the midwifery program's relevant constituents and methods of distribution of requests for third party comment.	B. Provide evidence of notification of constituencies. e.g. emails, URLs, ACNM publications, ACME website.
C. The midwifery program will reside within or will be affiliated with an institution that is currently accredited by an agency recognized by the United States Department of Education, or it will meet ACME's policy requirements for institutions based outside the United States (see Appendix B: *ACME Policy on International Accreditation for Degree-Granting Higher Education Institutions Based Abroad*).	C. Describe the relationship of the midwifery program to the accredited institution. Name the institutional accrediting body. If the program will reside within or will be affiliated with an institution based outside the United States, describe the relationship between the midwifery program and the international institution.	C. "Resides within" can be documented through evidence found in academic unit publications; "affiliated with" must be documented with a copy of the affiliation agreement. Provide a copy of the letter or certificate of current institutional accreditation.
D. There is evidence of commitment to the midwifery program from key administrators in the institution and academic unit.	D. Identify key administrators and their titles. Describe their support with concrete examples for both the institution and the academic unit (if different).	D. Provide documentation indicating support, e.g. meeting minutes, policies, and personal communications.
E. The midwifery program will have sufficient fiscal resources to ensure that program objectives can be met.	E. Describe how the midwifery program will obtain financial resources, including internal and external funding, such as grants. Explain any potential financial problems the program may face that would prohibit the midwifery program	E. Provide information that demonstrates that fiscal resources will be adequate to meet midwifery program objectives. This may include financial statements, grant award statements, midwifery program budgets and other financial records.

	from meeting its stated objectives and intended outcomes. If external grants will be a significant source of support for the midwifery program, explain how it would meet its objectives/ outcomes if that funding were discontinued.	
F. The midwifery program will have input into the budget process and/or financial planning to ensure ongoing adequate program resources.	F. Describe how the midwifery program and program director will provide input into the budget process and/or financial planning.	F. Provide documentation indicating input into the budgetary process. e.g., meeting minutes, emails, sample budget.
G. The midwifery program will be in an institutional environment that promotes and facilitates faculty scholarship and professional activities.	G. Provide the institution's and/or academic unit's policies. Describe relevant resources.	G. Provide evidence of institutional support/policies for faculty scholarship and professional activities. e.g. support for professional travel, set-aside time in the workload calculations for scholarship and/or professional activities, sabbatical leaves.
H. The midwifery program will reside within or will be affiliated with an institution whose policies and/or initiatives encourage and support diversity and inclusion of faculty, staff, and students.	H. Describe institutional policies that promote diversity and inclusion as they relate to the student body, faculty, staff and curriculum.	H. Provide evidence of institutional initiatives, policies, email communications, or strategic planning for implementing goals of promoting diversity and a climate of inclusivity.
I. The midwifery program will be a definable entity distinguishable from other education programs and services within the institution.	I. Describe where the midwifery program will be identified specifically.	I. Provide drafts of text for brochures/recruitment materials, catalogs and URL links to web pages.
J. The midwifery program will be directed by a certified nurse-midwife or certified midwife who will be clearly identified by title and position, meets institutional qualifications for appointment to that	J. Identify who will have the responsibility for midwifery program direction. Describe the institution's requirements for the position and how the identified program director will meet these qualifications.	J. Provide evidence such as letter of appointment, job description or a letter from the academic unit administrator detailing these requirements.

position and has management and administration capacity.	Describe the management and administration capacity of the identified program director.	Provide the identified midwifery program director's current curriculum vitae (CV).
K. The midwifery program director will have sufficient authority to ensure that the midwifery program meets all administrative and curricular requirements for accreditation by ACME.	K. Describe institutional policies that reflect the authority of the midwifery program director to ensure compliance with ACME criteria. Provide examples of administrative and curricular decisions that will reflect that authority.	K. Provide copies of any policies that document the authority of the midwifery program director.
L. The midwifery program will display its current ACME preaccreditation status accurately to the public.	L. Identify specifically where the accreditation status will be found.	L. Provide a draft.

Sample language for preaccreditation status: The (name of midwifery program) is preaccredited by the Accreditation Commission for Midwifery Education, 8403 Colesville Road, Suite 1550, Silver Spring, MD 20190, www.midwife.org/acme |
| M. The midwifery program will state and describe the certificate and/or degree/s that may be earned. | M. State the exact wording of each credential that the midwifery program will award, as it will appear on the diploma or certificate. | M. Provide a draft of the credential, such as a diploma/certificate or other document, which clearly states the degree or certificate to be awarded.

Provide evidence of legal authority to grant the credential/s.

State where this information will be publicized including the possible URL page. |
| N. The midwifery program will have academic policies, such as admission, continuation, and graduation requirements, and possible patterns of progression though the program. | N. Identify specifically where each of these items will be found. | N. Provide drafts of the documents cited. |
| O. The midwifery program will provide to the public information about the program's tuition and fees, including the | O. Identify specifically where this information will be found. | O. Provide drafts of the documents cited. |

relevant refund policy, and related costs, such as required texts and technology, and clinical site expenses.		
P. The midwifery program will have a transfer of credit policy.	P. Identify specifically where the policy will be found in printed and/or electronic documents. This policy must include the criteria by which the midwifery program determines whether to accept credits from another midwifery program or institution.	P. Provide drafts of the documents cited. Identify relevant sections of the documents, e.g., by highlighting.

Criteria for Programmatic Preaccreditation of Midwifery Education Programs

with Instructions for Elaboration and Documentation

Criterion II:

Faculty

Purpose: The purpose of Criterion II is to ensure that midwifery program faculty are academically prepared and qualified to teach, are fully responsible for the instruction and management of the midwifery program and have equity with other faculty in the institution.

Criterion II: Faculty	Instructions for Elaboration in the PAR	Instructions for Documentation in the Exhibits
A. All faculty will be recruited, appointed and promoted according to the institution's non-discrimination policy in a process that actively fosters diversity and inclusiveness in the faculty.	A. Identify the location of the non-discrimination policy in the institution's policies and provide an active link to the policy. Describe efforts to achieve diversity and inclusiveness in the faculty.	A. Provide evidence of how this policy and process will be implemented. Possible sources of evidence could include: ● job advertising placements ● search committee orientation materials ● instructions to search committee
B. All faculty will carry out their responsibilities with respect for diversity and variations among students and colleagues.	B. Provide examples of how faculty will address students' or colleagues' individual variations, such as: ● previous professional experience ● levels of ability ● family needs ● study or test-taking needs ● religious or cultural observances If there is a specific written policy, provide the information and indicate where it will be published on the midwifery program's website.	B. If possible, include examples of how this is currently being addressed by the institution and will be addressed by the midwifery program. Cite examples from existing programs in the academic unit. De-identified personal communications may be a source of documentation.
C. Core faculty will be certified, as applicable, by the American Midwifery Certification Board (AMCB), or another appropriate certifying body for faculty who are not CNMs or CMs.	C. Provide a Core Faculty Table II-1 in the appendix to the PAR that describes the core faculty (see Glossary in the *ACME Policies & Procedures Manual*) who will teach the midwifery students. A template and instructions for Table II-1 are in Appendix C: Core Faculty Table.	C. Provide a folder for each core faculty member, organized by faculty's last name. Each folder must include: 1) a current CV or resume 2) evidence of certification, as applicable For core faculty who are midwives, include evidence of AMCB certification.

| | List the CNMs/CMs on the core faculty first in this table, followed by the remainder of the core faculty, in alphabetical order by last name.

If there are core faculty who will also provide clinical instruction, summarize their clinical teaching responsibilities in this table. | This can be a copy of the certificate or of the individual's AMCB certification information from the AMCB website. Include other certification if appropriate to the individual's teaching role, e.g. WHNP or FNP.

For core faculty who are not midwives, provide evidence of specialty certification as applicable. Some core faculty roles may not require certification.

Evidence of current licensure is acceptable as evidence of certification *if AMCB or specialty certification is the only route to licensure in that legal jurisdiction*.

If the individual's licensure is used to document certification, place a copy of the license or website verification of licensure for each licensee in their folder. In addition, place one copy of the portion of the licensing law that requires AMCB or specialty certification for licensure in a location easily accessible to the site visitors.

100% of these faculty folders must be present and complete in the exhibits for site visitors to review. |
| D. Core faculty will have education credentials appropriate to the level at which they will teach and meet the | D. Describe the academic institution's requirements for faculty. | D. For all core faculty, include evidence of completion of the highest earned academic degree, as listed in the table, in each faculty folder. |

academic institution's requirements for faculty.	Ensure that the core faculty education credentials are included in Table II-1.	This may be a transcript or a copy of a diploma.
E. Core faculty will have preparation for teaching commensurate with the teaching assignment, e.g. face-to-face, hybrid, and distance delivery.	E. Describe the midwifery program's process for determining that core faculty have appropriate preparation. Appropriate preparation may differ according to teaching assignments. Describe how new core faculty will be mentored into their teaching roles. Elaborate on the preparation and supervision to be afforded to faculty who do not meet all the midwifery program's requirements for teacher preparation. Ensure that core faculty teaching preparation is summarized in Table II-1, table Appendix C.	E. For all core faculty, include evidence of teacher preparation in each faculty folder. Possible sources of evidence for teaching preparation: ● transcript showing education course(s) ● copy of certificate from continuing education course or workshop ● experiential, from CVs
F. Instruction, supervision, and evaluation of students in didactic courses containing ACNM *Core Competencies for Basic Midwifery Practice* will be the responsibility primarily of core faculty.	F. Describe core faculty responsibility for the instruction, supervision, and evaluation of students. Ensure that Table II-1, table Appendix C, describing core faculty includes faculty responsibilities for courses containing ACNM Core Competency content, with course names and numbers.	F. Possible sources of evidence for this criterion: ● syllabi ● committee minutes ● emails or other communication This criterion is about didactic learning. Include in the PAR narrative and in the exhibits those who will teach the classroom/online portions of all courses with core competency content. They may be CNMs/CMs, nurse practitioners, or other school faculty.
G. Core faculty will be responsible for development and/or implementation and evaluation of the curriculum.	G. Describe how the core faculty will be involved in the development, implementation, and evaluation of the curriculum. Include CNM/CM faculty. Do not present the entire curriculum evaluation plan here, just state how	G. Provide any materials cited. Some possible sources that confirm faculty responsibility: ● position descriptions

	faculty will participate in the development, implementation, and evaluation of the curriculum. Cite the specific source/location of documentation.	● faculty handbook ● curriculum committee minutes ● graduate faculty meeting minutes
H. Core faculty will participate in selection, advisement, evaluation, and advancement of students.	H. Describe how the core faculty will be involved in selection, advisement, evaluation, and advancement of students. Include CNM/CM faculty. Cite the specific source/location of documentation.	H. Provide any materials cited.
I. Core faculty will participate in recruitment, selection, and promotion of faculty.	I. Describe how the core faculty will be involved in recruitment, selection, and promotion of faculty. Include CNM/CM faculty. Cite the specific source/location of documentation.	I. Provide the materials cited. Sources may include those listed in II.G. plus: ● search committee meeting minutes (candidate de-identified) ● promotion & tenure committee minutes (candidate/s de-identified) ● de-identified interview rating forms
J. Core faculty will participate in orientation of core and clinical faculty.	J. Describe how the core faculty will be involved in orientation of core and clinical faculty. Describe the method(s) that will be used to orient new core and clinical faculty.	J. Provide the materials cited. Possible sources of evidence: ● agenda or schedule for new core faculty orientation ● reports of clinical site visits ● preceptor orientation agenda handouts ● letters/emails to clinical faculty regarding student expectations and curriculum details
K. Core faculty will participate in development and/or implementation of a mechanism for student evaluation of faculty, courses, and midwifery program effectiveness.	K. Describe how the core faculty will be involved in the development and/or implementation of a mechanism for student evaluation of faculty, courses, and midwifery program effectiveness. In other words, give a description of how faculty will participate in	K. Provide any materials. Sources of evidence may include those listed in II.G. plus: ● minutes of faculty retreats

	developing/implementing the process for students to evaluate faculty, courses, and midwifery program effectiveness. If core faculty will not be directly involved in the development of the mechanism, indicate who will be responsible for its development, and how core faculty will implement student evaluation of faculty, courses, and midwifery program effectiveness. Cite the specific source/location of documentation.	
L. Core faculty will participate in ongoing development and annual evaluation of the midwifery program's resources, facilities, and services.	L. Describe how the faculty will be involved in the development and annual evaluation of each of these areas. Address each component: resources, facilities, and services. There is no need to describe the specific resources, facilities, and services in this criterion; simply show how core faculty will be involved in developing or evaluating them. Examples of resources and facilities are faculty and staff, clinical sites, library holdings, classroom and other learning spaces, computing facilities, office space, break spaces for students and faculty, bookstore. Examples of services are a writing center, test-taking help, counseling, grants office, faculty research center, database searching. Cite the specific source/location of documentation.	L. Provide any materials cited. Possible examples for exhibits: ● clinical site visit reports ● minutes of faculty retreats
M. Core faculty will participate in or will have input into councils and committees of the academic unit. Clinical faculty will participate or have input as appropriate.	M. Describe the academic unit's expectation for faculty participation in councils and committees. Provide an active link to the relevant portion of the faculty handbook. Include any pertinent definitions.	M. Include examples of how faculty will meet these expectations, such as possible activities/schedules/workload.

N. Core faculty will continue professional development and participate in scholarly activities.	N. Describe the academic unit's expectation for continued professional development and scholarly activities. Provide an active link to the relevant portions of the faculty handbook. Include any pertinent definitions. Indicate how faculty workload will be managed to allow time for these activities. If relevant, include expectations and achievements for both tenured/tenure-track and non-tenure-track faculty.	N. Include examples of how faculty will meet these expectations, such as possible activities/ schedules/workload. Examples of professional development could include: ● completion of degrees, certificates, or courses ● academic promotion ● teaching or other awards ● grant proposals Examples of faculty scholarly activities could include: ● publications – articles or textbooks ● conference abstracts ● posters ● software ● blogs
O. Core faculty will maintain clinical expertise as required.	O. Describe the academic unit's expectation for maintenance of clinical expertise. Provide an active link to the relevant portion of the faculty handbook. Include any pertinent definitions. Show how faculty will meet these expectations by describing their expected clinical practice activities, including those of CNM/CM faculty. Indicate how faculty workload will be managed to allow time for these activities.	O. Provide evidence of how faculty will maintain clinical expertise as cited in the PAR narrative. Examples of ways to document faculty clinical practice activities: ● letter confirming clinical privileges from facility/practice ● peer evaluations from practice ● practice website listing faculty name
P. Core faculty will participate in professional service.	P. Describe the academic unit's expectation for professional service.	P. Provide specific evidence of faculty professional service cited in the PAR, if available, especially CNM/CM faculty.

	Provide an active link to the relevant portion of the faculty handbook. Include any pertinent definitions. Show how faculty will meet these expectations by describing their expected professional service activities, including those of CNM/CM faculty.	
Q. Academic freedom is a faculty right clearly defined, made available in drafted or published policy, and will be applied consistently to all core faculty.	Q. Describe the academic freedom policy and its location. Provide an active link to this location.	Q. Provide access to source document(s). Possible sources of documentation may include: ● faculty handbooks ● union contracts
R. The academic unit will publish and will employ defined criteria for periodic evaluation that will be applied consistently to all core faculty.	R. Describe the drafted or published criteria and state where they are located. Provide an active link to this location.	R. Provide access to source document(s).
S. The academic unit will publish and will employ processes for promotion, tenure, merit recognition and termination that will be applied consistently to all core faculty.	S. Describe each of these processes, in draft or published, and state where they are located. Provide an active link to this location.	S. Provide access to source document(s).
T. Core faculty will have channels within the institution for receipt and consideration of grievances related to their employment.	T. Describe the drafted or published grievance policies and state where they are located. Provide an active link to this location.	T. Provide access to source document(s).
U. Clinical faculty will have qualifications that meet the academic institution's requirements for clinical faculty. They will be selected, oriented, mentored, and evaluated by core faculty. Fifty (50) percent or more of the clinical faculty will be CNMs/CMs. Other professionals who will serve as preceptors will be qualified to do so according to the *ACME Guidelines for*	U. Describe the institution's requirements for prospective clinical faculty (see Glossary in the *ACME Policies & Procedures Manual*). Describe the process to be used for selection, orientation, mentoring, and evaluation of clinical faculty. Provide a Clinical Faculty Table II-2 in the appendix to the PAR that describes the clinical faculty who will provide the clinical teaching. A template and instructions for Table II-2 are in Appendix D: *Clinical Faculty Table* of this document.	U. Provide a folder for each clinical faculty who will precept students. Each folder must contain: 1) a current CV or resume 2) evidence of certification, as applicable For clinical faculty who are midwives, provide evidence of AMCB or NARM certification. This can be a copy of the certificate or of the individual's

Interprofessional Clinical Supervision of Midwifery Students, Appendix E.	If there are core faculty who will also provide clinical instruction, include their information in Table II-1, the Core Faculty Table, and do not repeat it in Table II-2.	certification information from the relevant website. Include other certification if appropriate to the individual's teaching role, e.g., WHNP or FNP. For clinical faculty who are not midwives, provide evidence of specialty certification as applicable. Evidence of current licensure is acceptable as evidence of certification if AMCB or specialty certification is the only route to licensure in that legal jurisdiction. If the individual's licensure is used to document certification, place a copy of the license or website verification of licensure for each licensee in their folder. In addition, place one copy of the portion of the licensing law that requires AMCB or specialty certification for licensure in a location easily accessible to the site visitors.
V. Clinical faculty will be responsible for the instruction, supervision, and evaluation of students in clinical learning.	V. Describe the clinical faculty's expected responsibilities for instruction, supervision, and evaluation of students' clinical experiences.	V. Provide copies of proposed student clinical evaluation forms.

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Criterion III:

Students

Purpose: The purpose of Criterion III is to ensure that midwifery programs have well-designed, equitable, transparent, and consistently applied student-related policies.

Criterion III: Students	Instructions for Elaboration in the PAR	Instructions for Documentation in the Exhibits
A. The institution will have admission criteria and policies that meet federal guidelines for nondiscrimination (www.eeoc.gov).	A. State the **admission** criteria and policies, including a nondiscrimination policy.	A. Provide the current or proposed document/s in which the criteria and policies appear.
B. The institution's admission criteria and policies will be aligned with the *ACNM Core Values* of inclusiveness, woman centered care and respect for physiologic processes, partnership, and advocacy.	B. State how the admission criteria and policies will be aligned with the *ACNM Core Values of inclusiveness, women centered care and respect for physiologic processes, partnership and advocacy*. This may be done with a table comparing admission policies to these values.	B. No exhibit required.
C. The institution's admission criteria and policies will be publicly available.	C. State where the criteria and policies will be available to the public.	C. Provide a draft copy for the web page/s where the criteria and policies will appear publicly. If admissions criteria and policies exist for other programs, provide URLs.
D. Student recruitment materials and processes will accurately represent the program practices and policies and demonstrate a commitment to diversity and inclusion.	D. Describe how student recruitment materials and processes will accurately represent midwifery program practices and policies. Include information for applicants about range, diversity, and acquisition of clinical sites.	D. Provide current or proposed samples of recruitment materials.
E. The institution will have student policies that will be publicly available and identified to students at or before orientation related to: student evaluation, progression, retention, dismissal and graduation; review of personal records and equitable tuition refund; evaluation of their education;	E. Describe how these policies will be identified to students at or before orientation. Identify where the policies will be publicly available. Describe how students will be notified of changes in these policies.	E. Provide drafts of the policies. Provide URLs to webpages for university/college catalogs and academic calendars.

access to university/college catalogs; and access to academic calendars.		
F. Student support services will be available and are designed to promote student success.	F. Identify services available to meet the needs of students to promote their retention in and progression through the midwifery program. Describe how this information will be distributed to students. Such services might include but are not limited to counseling, learning assistance or intervention strategies.	F. Provide a draft of the document describing these services. Provide URLs to the web page/s that describe these services.
G. Students will be informed of support services at or before orientation.	G. Identify how and when students will be informed of support services.	G. No exhibit required.
H. All students will have access to ongoing and equitable support services.	H. Describe how students will access support services regardless of instruction modality, their location, or clinical placement.	H. No exhibit required.
I. Students will be formally informed of course objectives/outcomes and methods of evaluation at the beginning of each course.	I. Describe the process by which students will be informed. Identify the location of objectives/outcomes and methods of evaluation in policy manuals, module materials, and/or course syllabi.	I. Provide the materials cited in electronic or printed form.
J. Students will be apprised of their progress on an ongoing basis.	J. Describe the process by which students will be apprised of their progress.	J. No exhibit required.
K. Students will be evaluated formatively and summatively.	K. Provide an overview of formative and summative evaluation processes that will be used in didactic and clinical portions of the midwifery program.	K. Provide drafts of formative and summative evaluation forms.
L. Students will be informed of remediation policies and processes.	L. Describe how students will be informed of these processes. Describe how they will be implemented for students who do not meet course or midwifery program requirements.	L. No exhibit required.
M. Students will have opportunities for involvement in development and implementation of midwifery program policies.	M. Describe the relevant opportunities, how students will be informed of them, and how they will be recruited and supported in their involvement.	M. Provide a draft of the document that describes to students their opportunities to be involved in the development and implementation of midwifery program policies.
N. Students will have opportunities to participate or have input into the	N. Describe the relevant opportunities and how students will be informed.	N. Provide a draft of the document that describes these opportunities to students.

representation on councils or committees of the institution or academic unit.		
O. The midwifery program will have clearly defined and transparent mechanisms for consideration of grievances, complaints or appeals.	O. Describe the mechanism for addressing grievances, complaints or appeals and how students will be apprised of these mechanisms. Identify the location where each of these mechanisms will be in electronic or printed documents.	O. Provide a draft of the document that describes these mechanisms to students. As applicable, provide examples of grievances, complaints, or appeals in the academic unit within the past three years.
P. Access to resources and opportunities will be available regardless of student location.	P. Describe how access to resources and opportunities will be available for all student locations e.g., on campus or at a distance. \n\n Describe how students will be informed of such access.	P. No exhibit required.
Q. The midwifery program will attend to students' well-being through the mitigation of fatigue related to clinical learning.	Q. Describe the mechanism and/or policy that ensures that students' clinical learning schedules will be safe and optimize students' well-being. Describe the mechanism by which clinical faculty will be educated to recognize the signs of learner fatigue and about the negative effects of provider fatigue on patient care and learning.	Q. Provide a draft of the document that describes these mechanisms and/or policies to students and clinical faculty.
R. The midwifery program will have processes to support student health and well-being.	R. Describe and provide URLs for any process/es the midwifery program will carry out or services the midwifery program will provide to promote student health and well-being. This could include but is not limited to referrals to student health services, training or procedures to build supportive communication, reduce implicit bias, support study groups, recognize and resist bullying, enhance resilience, and create mutual support groups.	R. Provide a draft of the document that describes the processes or services that support student health and well-being.

Criteria for Programmatic Preaccreditation of Midwifery Education Programs

with Instructions for Elaboration and Documentation

Criterion IV:

Curriculum

Purpose: The purpose of Criterion IV is to determine that the midwifery program implements a curriculum that is congruent with the midwifery program's mission and goals, is evidence-based, is consistent with the *ACNM Core Competencies for Basic Midwifery Practice* and has a process to assure midwifery students meet the stated midwifery program objectives/outcomes.

Criterion IV: Curriculum	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
A. The curriculum will be based on a statement of midwifery program philosophy, purpose/mission and objectives/ outcomes.	A. Provide a statement of midwifery program philosophy, purpose/mission, and objectives/outcomes. Identify the key concepts of the midwifery program philosophy.	A. No exhibit required.
B. The midwifery program philosophy will be consistent with: ● the philosophy of the ACNM ● the philosophy or purpose/ mission of the institution within which the midwifery program resides or with which it is affiliated, and ● the philosophy of the academic unit wherein the midwifery program resides.	B. Provide a succinct description explaining the consistency among the philosophies or purpose/ mission. This may be done in the form of a table. In the appendices to the PAR, provide the philosophy or purpose/mission of each entity in full.	B. No exhibit required.
C. The midwifery program's purpose/ mission and objectives/outcomes will be consistent with the midwifery program philosophy.	C. Explain the consistency among the midwifery program's purpose/mission, objectives/outcomes, and philosophy. This may be done in the form of a table.	C. No exhibit required.
D. The curriculum will be designed to achieve the stated objectives/outcomes of the midwifery program.	D. Briefly describe how the curriculum will help students achieve the midwifery program's objectives/outcomes. In the PAR appendices, provide a table that shows where midwifery program objectives/outcomes will be met in specific courses.	D. No exhibit required.

	See Appendix F: *Midwifery Program Objectives or Outcomes* in this document for a sample table.	
E. Curriculum development will be a continuing process.	E. Describe the plan for continuing curriculum development.	E. Provide meeting minutes or other documents that demonstrate the initial development of the curriculum and plans for ongoing curricular development.
F. The midwifery program will establish criteria and a process for awarding transfer credit for didactic coursework.	F. Identify the criteria with rationale and explain the process.	F. Provide a draft of the criteria that will be given to applicants.
G. The midwifery program will establish criteria and a process for awarding transfer credit for clinical coursework and clinical experience.	G. Identify the criteria with rationale and explain the process.	G. Provide examples of course challenge mechanisms, transcript assessments, or other procedures that will be used to assess whether a student has met the criteria.
H. The midwifery program will establish criteria and a process for granting exemption from didactic coursework.	H. Identify the criteria with rationale and explain the process.	H. Provide a draft of the criteria and the proposed process.
I. The midwifery program will establish criteria and a process for granting exemption from clinical coursework and clinical experience.	I. Identify the criteria with rationale and explain the process.	I. Provide a draft of the criteria and the proposed process.
J. The curriculum will be consistent with the ACNM *Core Competencies for Basic Midwifery Practice.*	J. Describe the process planned for ensuring that the *ACNM Core Competencies for Basic Midwifery Practice* will be taught. Describe the process planned to correct any deficiencies. In the PAR appendix, provide a table that shows the location of the ACNM *Core Competencies for Basic Midwifery Practice* in the curriculum. Give one to three examples for each hallmark and competency. See Appendix G: *Courses with Core Competencies Content Table,* in this document for a sample table.	J. The table should also appear in the exhibits with the referenced curriculum. Each "Hallmark of Midwifery" should be addressed with examples (objectives/outcomes, seminars, classes, learning activities) that demonstrate how each will be integrated throughout the curriculum. For each competency listed under "Components of Midwifery Care," give examples of its location in the curriculum

		with course number, specific outcome/s or objective/s, and page number or other device for locating where each competency can be found. Provide evidence of a process to ensure appropriate inclusion of core competency content.
K. The curriculum will include courses in pharmacology/pharmacotherapeutics, physical assessment and physiology/pathophysiology.	K. Provide the course names and formal descriptions for these courses or identify where content will be taught in the curriculum. If these are not specific separate courses, state how information identifying this program content will be provided to students at or before program completion to meet requirements for state licensure or other credentialing process.	K. Provide access to the syllabi for these courses. Include course content information provided to students.
L. The curricular content will be regularly updated to include current evidence for midwifery practice and will be congruent with ACNM *Standards for the Practice of Midwifery*; *ACNM Position Statement on Racism and Racial Bias*; *ACNM Code of Ethics*; *ACNM Transgender/Transsexual/Gender Variant Healthcare,* and other ACNM documents.	L. Provide a succinct description of how this criterion will be met.	L. No exhibit required.
M. The midwifery program will provide content throughout the curriculum about implicit bias and health disparities related to race, gender, age, sexual orientation, disability, nationality, and religion.	M. Describe how the midwifery program will include content throughout the curriculum about implicit bias and health disparities related to race, gender, age, sexual orientation, disability, nationality, and religion.	M. Provide drafts of document/s. Identify relevant sections, e.g., by highlighting.
N. The midwifery program will have a plan for interprofessional education (IPE) to prepare students for team-based collaborative practice that includes outcomes of student learning.	N. Briefly describe the midwifery program's plan for interprofessional education. The definition of IPE used nationally and internationally is as follows: "When students from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes."	N. Provide a draft of the plan.

	Interprofessional Education (World Health Organization, Interprofessional Education Collaborative). ACME is a member of The Health Professions Accreditors Collaborative (HPAC). The following guideline was created jointly by HPAC and the National Center for Interprofessional Practice and Education (NCIPE) and is provided as a resource. https://healthprofessionsaccreditors.org/wp-content/uploads/2019/02/HPACGuidance02-01-19.pdf The document seeks to encourage increased communication and collaboration and to provide guidance on expectations related to quality IPE.	
O. The curriculum will have a logical sequence of progression.	O. Describe the rationale for the sequence of the midwifery curriculum as the student progresses through the program. In the PAR appendix, provide tables showing the course sequence for full-time students and, if applicable, part-time students.	O. No exhibit required.
P. The didactic and clinical components of the curriculum will be implemented by a variety of evidence-based methods to achieve the midwifery program objectives/outcomes and ensure student learning.	P. Describe the various methods used to achieve the objectives/outcomes and ensure student learning. Methods may include, but are not limited to, teaching strategies, education technology and simulation.	P. Provide selected examples of various teaching methods that will be used to support student learning.
Q. The midwifery program will ensure that graduates will have achieved competence in clinical practice.	Q. Explain how the midwifery program will assess competence. Explain how the program will intervene to help students who are having difficulty reaching academic or clinical competence.	Q. Provide draft/s of instrument/s to be used to assess competence.
R. The midwifery program will provide students with the necessary clinical experiences to achieve the objectives/outcomes of the program.	R. Explain the breadth and depth of clinical experiences that will be used by the midwifery program to achieve program objectives or outcomes. Clinical experiences must be primarily direct patient contacts. These experiences may be supplemented by	R. No exhibit required.

	such strategies as simulation, role play, standardized patients and emerging technologies. If the midwifery program determines that the clinical facilities will be inadequate to provide the necessary experiences, describe plans to address this problem.	
S. The midwifery program will maintain final responsibility for assessing and approving clinical sites.	S. Describe the process for identification, selection and approval of clinical sites.	S. No exhibit required.
T. The midwifery program will implement policies and procedures for academic integrity and verification of student identity for academic work, including authorship of work and work done through electronic technologies.	T. Identify the policies and procedures and describe how they will be implemented to verify student identity for work, including that conducted by electronic technologies.	T. Provide draft/s of policy/ies that describe the process.
U. Regular communication will occur among and between faculty and students during implementation of the curriculum.	U. Describe how regular communication will occur in both academic and clinical settings.	U. No exhibit required.
V. The curriculum will conform to state or nationally recognized guidelines for the educational levels offered by the midwifery program: certificate, master's, or doctoral degree.	V. Identify the guidelines to be used, such as those established by state law or a professional organization and provide the URL/s to website pages if available. Explain how the curriculum will conform to guidelines for the midwifery program's educational level/s. This may be done in the form of a table. If the midwifery program culminates in a professional or practice-focused doctoral degree for midwives, describe how the program will conform to the competencies identified in the ACNM document _The Practice Doctorate in Midwifery_ .	V. No exhibit required.

Criteria for Programmatic Preaccreditation of Midwifery Education Programs

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Criterion V:

Resources

Criterion V: Resources	Instructions for Elaboration in the PAR	Instructions for Documentation in the Exhibits
A. The midwifery program will have an adequate number of qualified core faculty to meet the program objectives/outcomes.	A. Describe how the midwifery program will determine the adequacy of the number of qualified faculty. Describe plans to provide an adequate number of faculty if the program determines that the number of faculty is inadequate.	A. No exhibit required.
B. The midwifery program will have adequate number of staff for administrative, technical, and student support to meet program objectives/outcomes.	B. Describe how the midwifery program will determine adequacy for administrative, technical, and student support. Describe plans to provide adequate number of staff if the program determines that the number of staff is inadequate.	B. Provide a list of proposed staff by titles and indicate their responsibilities: administrative, technical, student support, etc.
C. The midwifery program's physical facilities on campus and at clinical sites will be adequate to meet student needs and program objectives/outcomes.	C. Describe how the midwifery program will determine adequacy of physical facilities on campus and at clinical sites to meet student needs. These may include office space, classrooms, conference rooms, library, lactation room, gender-neutral facilities, internet access, rest space, and laboratories. Describe plans to address deficiencies to the extent possible if the program determines that the physical facilities are deficient.	C. Provide the site visitors with a tour of proposed physical facilities.
D. The midwifery program's learning resources will be accessible and adequate to meet student needs and program objectives/outcomes.	D. Describe how the midwifery program will determine the adequacy of resources, e.g., laboratory, clinical simulation, instructional technology, and library resources.	D. Provide the site visitors with a tour of learning resources, either physically or virtually.

| | Explain how all students and faculty, including those at a distance, and individuals with disabilities and special learning needs can access learning resources.

When any learning resources are determined to be deficient, describe plans to address the deficiencies. | |
|---|---|---|
| E. The midwifery program will have resources for students, faculty, and staff to support diversity and inclusion. This includes resources to address implicit bias and disparities related to race, gender, age, sexual orientation, disability, nationality and religion. | E. Describe how the midwifery program will provide dedicated resources for support and training for students, faculty, and staff. Describe how the midwifery program will disseminate this information to students, faculty and staff. Examples of these dedicated resources: a specific department program or person (e.g., Office of Diversity & Inclusion/Diversity Officer), trainings, workshops, lectures, or online educational platforms.

Describe plans to address the deficiencies if the program determines that the resources are deficient. | E. No exhibit required. |
| F. The midwifery program will secure clinical sites for students. These sites will provide access to clinical experiences to ensure that each student has the opportunity to attain competence in the midwifery practice areas of primary care, gynecologic, antepartum, intrapartum, postpartum, and newborn care. | F. Describe how clinical sites will be secured and how student clinical experiences will be monitored.

Explain how competence will be assured if student experience numbers fall below those listed in this criterion.

Some clinical encounters may count in more than one category.

While an absolute number of clinical experiences is not required for midwifery program accreditation, these recommendations guide midwifery programs in selecting clinical sites and ensuring adequate experience for competence across the full scope of midwifery practice. | F. No exhibit required. |

	Clinical Experiences:	
	Primary care 40	
	Includes common acute and stable chronic health conditions.	
	Gynecologic care 80	
	Includes preconception, contraception, adolescent, perimenopausal, and postmenopausal.	
	Antepartum care 100	
	Includes new and return prenatal care across gestational ages.	
	Intrapartum care 60*	
	Includes labor assessment, labor management, and births.	
	***Includes access to or opportunity to attend at least 35 births.**	
	Postpartum care 50	
	Includes postpartum visits (0-7 days), up to 8 weeks postpartum, and breastfeeding support.	
	Newborn Care 30	
	Includes newborn assessment and anticipatory guidance.	

Criteria for Programmatic Preaccreditation of Midwifery Education Programs

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Criterion VI:

Assessment & Outcomes

Purpose: The purpose of Criterion VI is to ensure each midwifery program has a comprehensive assessment plan and publicly-available outcomes data to show midwifery program quality, including evaluation of clinical education and teaching faculty.

Criterion VI: Assessment and Outcomes	Instructions for Elaboration in the PAR	Instructions for Documentation in the Exhibits
A. The midwifery program will have a comprehensive plan for ongoing assessment of the program philosophy, mission/purpose, and objectives/outcomes to achieve continuous quality improvement.	A. Explain the process for developing and implementing the plan, including who will be responsible and the time frame for the review. Identify the actions that will be taken if the assessment shows that any midwifery program objectives/outcomes are not being met.	A. No exhibit required.
B. The midwifery program assessment process will include evaluations of the program by students and recent graduates.	B. State the midwifery program's goals for midwifery students' and graduates' evaluations of the midwifery program. Describe action planned to address students' or graduates' evaluations that fall short of the midwifery program's goals.	B. Provide a draft of the instrument/s that will be used for students' and graduates' evaluations of the midwifery program.
C. The midwifery program assessment process will include evaluations for enrollment, graduation, and attrition goals.	C. Describe enrollment, graduation, and attrition goals. Explain how the midwifery program will categorize the students, e.g., part-time, full-time, leave of absence, etc., and how the midwifery program will calculate the percentage of students in each category. Explain actions that will be taken or planned if goals are not met.	Provide the URL to the webpage where enrollment and graduation and attrition data will be publicized.
D. The midwifery program will set its own AMCB certification rate goal in accordance with the program's mission. Failing to meet the goal requires the development of an improvement plan to bring the certification rate to the goal.	D. Describe the rationale that will be used to establish the midwifery program's AMCB certification goal.	Provide the URL to the webpage where certification data will be publicized.

E. The midwifery program will have a plan for reviews and updates of its philosophy, purpose/mission, and objectives/ outcomes that include current ACNM philosophy and standards.	E. Describe the process the midwifery program will use to assess its philosophy, purpose or mission, and objectives or outcomes using current ACNM documents. Identify the ACNM documents that will be considered in this process.	E. No exhibit required.
F. The midwifery program's reviews and updates of its philosophy, purpose/mission, and objectives/outcomes will include national (and state as applicable) standards and educational requirements.	F. Describe the process the midwifery program will use to determine currency and applicability of national and state standards and educational requirements in these reviews and updates.	F. Provide the national or state requirements and standards that are applicable to the midwifery program.
G. The midwifery program's reviews and updates of its philosophy, purpose/mission, and objectives/outcomes will include significant changes within the program's institution that are relevant to the program.	G. Describe the process the midwifery program will use to identify and address significant changes in its institution in these reviews and updates.	G. No exhibit required.
H. The midwifery program's assessment process will include evaluation of the effectiveness of clinical sites to meet student learning needs and monitor and promote their achievement of clinical competence.	H. Describe the process the midwifery program will use to evaluate the effectiveness of clinical sites to meet student learning needs and monitor and promote their achievement of clinical competence.	H. No exhibit required.
I. The midwifery program's assessment process will ensure the presence of current contracts for each clinical site.	I. Describe the process the midwifery program will use to ensure that students are assigned to clinical sites with current contracts.	I. Provide a table listing the name of each clinical site already identified and the status of its contracts. Provide access at the site visit to all contracts already completed.
J. The midwifery program's assessment process will include a plan for annual evaluation of core faculty competence as	J. Describe the process for annual evaluation of core faculty. Identify possible actions the program will take if a core faculty member fails to meet evaluative standards.	J. No exhibit required.

applicable and as defined by the program.		
K. The midwifery program's assessment process will include a plan for annual evaluation of clinical faculty competence as applicable and as defined by the program.	K. Define clinical faculty competence. Describe the process the midwifery program will use for annual evaluation of clinical faculty. Identify possible actions the midwifery program will take if a clinical faculty member fails to meet evaluative standards.	K. No exhibit required.
L. The midwifery program's assessment process will include a plan to assess the non-discriminatory, equitable, and respectful interaction of core faculty and clinical faculty with students, colleagues, and patients.	L. Define non-discriminatory, equitable, and respectful interaction using current ACNM documents, such as the *ACNM Code of Ethics.* Describe the process the midwifery program will use for annual evaluation of core and clinical faculty interaction with students, colleagues, and patients. Identify possible actions the program will take if a core or clinical faculty member fails to meet evaluative standards.	L. No exhibit required.

Appendix A: PAR Title Page

Name of Institution:

Midwifery Program(s):

Names, Credentials, Titles of Institutional Officers, and Email Addresses:

Name, Credentials, Title of Midwifery Program Director, Contact Phone and Email Addresses:

(Appendix A continues next page)

Appendix A (cont'd). **Table of Midwifery Program/s**

Type	Yes/No	If yes, type of degree or certificate awarded	Anticipated student enrollment per cohort
Midwifery education midwifery program that leads to a master's degree in midwifery, nursing, public health or an allied health field			
• Associate degree in nursing entry			
• Bachelor of Science in nursing entry			
• Other baccalaureate degree entry			
• Other, please describe			
Midwifery education midwifery program that leads to a doctoral degree in midwifery, nursing, public health or an allied health field			
• Associate degree in nursing entry			
• Bachelor of Science in nursing entry			
• Other baccalaureate degree entry			
• Other, please describe			
Post-baccalaureate certificate			
Post-graduate certificate			
Total Numbers			

Include estimated numbers if appropriate.

Appendix B: ACME Policy on International Accreditation for Degree-Granting Higher Education Institutions Based Abroad

The Accreditation Commission for Midwifery Education (ACME) has set a criterion that requires all midwifery programs to reside within or be affiliated with an accredited degree-granting institution. While that may be clear for institutions based in the United States (US), this policy addresses compliance with that criterion for midwifery programs at higher education degree-granting institutions that are based outside of the US and that do not participate in accreditation via an agency recognized by the U.S. Department of Education. The decision on whether the midwifery program meets this criterion will be determined by the ACME Board of Review via the midwifery program accreditation process.

ACME understands the accreditation process to include the implementation of periodic assessment for quality assurance (QA). Institutional participation in the quality assurance process should maintain minimum standards of quality for the higher education degree-granting institution and for its academic midwifery programs by periodic assessments. Therefore, for ACME to accept a degree-granting institution based outside the U.S. as accredited, the higher education institution must:

1) Participate in an accreditation or quality assurance process that complies with the institution's national regulations for accreditation or quality assurance. a) Comply with the institution's national regulations for institutional accreditation or quality assurance. b) Conduct periodic assessment for accreditation or quality assurance purposes in conformity with the broader regional quality assurance processes or with the non-governmental agencies within the region. **2)** The national regulations should be consistent with internationally recognized criteria for implementing QA, i.e., UNESCO *Guidelines for Quality Provision in Cross-Border Education*, the International Network for Quality Assurance Agencies in Higher Education (INQAAHE) document *Principles of Good Practice*, the criteria established by the European Association for Quality Assurance for Higher Education (ENQA) or other similarly regarded international document. **3)** Undergo external assessment of quality on a periodic basis to maintain quality. Documentation of the quality assurance review and the relevant agency's formal determination must be submitted to ACME. Documentation should be current for the time at which application is made to ACME for accreditation. Explanation of the time frame for periodic review and the specific length of time of validity for the current assessment determination should be provided to ACME. **4)** The international institution must include the midwifery program in its periodic assessment and ongoing QA. National accreditation must be maintained by the institution while accredited by ACME. **5)** If the institution that houses the midwifery education is dedicated to a special academic midwifery program, such as nursing, the midwifery program must also meet relevant professional field, licensing and regulatory requirements. **6)** ACME has the right of final determination whether the quality assurance process practiced by the institution based abroad meets ACME criteria.

Appendix C: Core Faculty Table (Template for Criterion II C. - II.E.)

The core faculty table should contain the following:

1. Name of faculty member. Please ensure that names in the table are consistent with individuals' credentialing documents.
2. Specialty certification with certification number, or specific expertise if the individual is not specialty certified
3. License number if applicable
4. Highest degree earned
5. Category/rank of faculty appointment
6. Type of preparation for teaching (Include only a brief description here, e.g. "Faculty mentoring", "Graduate course".)
7. Teaching role in courses with Core Competency content, with course name and number, including any clinical teaching.

Core faculty table template: Table II-1. List core faculty in alphabetical order by last name. Please list the CNM/CM core faculty first.

Last name, First name	Type of specialty certification or specific expertise	Certificate # License #	Highest degree earned	Faculty rank	Preparation for teaching	Course(s) to be taught

Appendix D: Clinical Faculty Table (Template for Criterion II.U.)

The clinical faculty table should contain the following:

1. Name and credential (e.g. CNM, CM, CPM, NP, PA, MD, DO). Please ensure that the names as listed in the table and on the individual faculty's folder correspond to the names on the faculty's credential documents.
2. Certification number
3. License number if applicable
4. Highest earned degree
5. Clinical/practice site. Please ensure names of clinical sites in this table are consistent with the names on the contracts for those sites.
6. Clinical area(s) (e.g., AP, IP, primary care)

Clinical faculty table template: Table II-2. List clinical faculty in alphabetical order by last name.

Last name, First name	Credential (CM, CNM, MD, NP etc.) Certificate # License #	Highest degree earned	Clinical site	Clinical areas in which students will be precepted at this site

Appendix E: ACME Guidelines for Interprofessional Clinical Supervision of Midwifery Students

ACME values and recognizes the need to encourage interprofessional practice and collaboration. In response to questions from Midwifery program Directors and to ensure the quality of nurse-midwifery/midwifery students' education, the Accreditation Commission for Midwifery Education (ACME) has created guidelines to clarify the requirements for a variety of clinicians who may serve on a midwifery program's clinical faculty as preceptors for students preparing to become Certified Nurse-Midwives (CNM)/Certified Midwives (CM). These individuals include, but are not limited to, Nurse Practitioners (NP), Certified Professional Midwives (CPM), Medical Doctors or Doctor of Osteopathic Medicine (MD or DO), and Physician Assistants (PA).

The qualifications for preceptors to teach and supervise CNM/CM students in clinical experiences are detailed below. Note that students enrolled in ACME accredited midwifery programs must be supervised 50% or more of the time by a CNM/CM prepared clinician.

In order to serve as a preceptor for a CNM/CM student in an ACME accredited education midwifery program, a preceptor must meet all of the following criteria:

● Attended and graduated from a midwifery program/institution that is accredited by an accrediting agency that is recognized by the U.S. Department of Education (USDE);
● Passed a national certification exam offered to that profession; e.g. certification examinations offered by the American Nurses Credentialing Center, Accreditation Board for Specialty Nursing Certification, North American Registry of Midwives, or The American Board of Obstetrics and Gynecology;
● Possess current professional certification;
● Possess a current license in the state where practicing;
● Possess education credentials appropriate to the level at which they teach and meet the academic institution's requirements for clinical faculty; and
● Have preparation for teaching and have competence commensurate with the teaching assignment.

(Appendix E continued on next page)

Appendix E: ACME Guidelines for Interprofessional Clinical Supervision of Midwifery Students (cont'd).

The ACME accredited midwifery program must be able to demonstrate:
- Evidence the preceptor meets the academic institution's requirements for clinical faculty;
- Evidence the preceptor has passed the appropriate professional national certification exam;
- Evidence of current state licensure;
- Evidence of current professional certification;
- Evidence the preceptor has preparation for teaching and competence commensurate with the teaching assignment; and
- Evidence that 50% or greater of the clinical experiences of each student are supervised by CNMs/CMs.

For additional information see *ACME's Policies and Procedures Manual* and *Criteria for Programmatic Pre/accreditation of Midwifery Education Programs with Instructions for Elaboration and Documentation on* the ACME web page, www.midwife.org/acme.
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Appendix F: Midwifery Program Objectives or Outcomes (Template for Criterion IV.D.)

Sample template of table that shows where midwifery program objectives or outcomes are met in specific courses.

Midwifery program Objectives	Course Number	Course Number	Course Number	Course Number	Course Number	Course Number	Course Number	Course Number	Course Number
Objective #1		x		x					
Objective #2	x								
Objective #3		x	x	x					
Objective #4				x	x				
Objective #5						x	x		
Objective #6								x	x
Objective #7							X	x	

Appendix G: Courses with Core Competency Content Table (Template for Criterion IV.J.)

List each Hallmark, followed by each Component of Midwifery Care. Ensure that you have included all Hallmarks and Components of Midwifery Care. Refer to the ACNM document, *Core Competencies for Basic Midwifery Practice*.

Hallmark or Component of Midwifery Care Competency	Course number	Course objective, subobjective, class/seminar topic, or activity, or URL link to same, that satisfies the hallmark/competency

Acknowledgements Page

Every five years, ACME conducts a full review of its preaccreditation and accreditation criteria. Between May 2018 and May 2019, a group of dedicated, committed, and passionate volunteers who support and believe in ACME's mission to advance excellence in midwifery education, led this work. On May 14, 2019 the ACME Board of Commissioners unanimously voted to adopt the new *Criteria for Programmatic Accreditation of Midwifery Education Programs with Instructions for Elaboration and Documentation* and on August 5, 2019 to adopt the new *Criteria for Programmatic Preaccreditation of Midwifery Education Programs with Instructions for Elaboration and Documentation.* We would like to acknowledge these volunteers and thank them for their time and contributions to this final document.

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