ACME | Accreditation Commission for Midwifery Education

MIDWIFERY EDUCATION PROGRAMMATIC ACCREDITATION CRITERIA

Revised 2025

ACCREDITATION COMMISSION FOR MIDWIFERY EDUCATION

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Preface

The Accreditation Commission for Midwifery Education (ACME) is established to advance and promote excellence in midwifery education. The aim of ACME is to ensure that programs are performing at the highest level of quality and provide learning experiences that will lead to optimal outcomes for students. ACME is a reliable authority regarding midwifery education. Since 1982, ACME has been recognized by the U.S. Department of Education as a nationally recognized programmatic accrediting agency for nurse-midwifery and midwifery education programs.

What is Accreditation?
Accreditation is a voluntary quality assurance activity conducted by both a program and an accrediting agency or body. Accreditation combines self-assessment and peer review— where programs are evaluated against standards established in collaboration with its community of interests.

What is ACME Accreditation?
ACME accreditation is designed to ensure that midwifery education programs provide high quality educational experiences, embody effective administrative policies and procedures; and are committed to continuous improvement. ACME is recognized by the U.S. Department of Education to grant preaccreditation and accreditation for basic certificate, basic graduate nurse-midwifery, direct-entry midwifery, and pre-certification nurse-midwifery education programs, including those programs that offer distance education. To earn the "ACME Accredited" distinction, a program must demonstrated compliance with the ACME criteria and are performing at the highest level of quality.

What is a Self-Evaluation Report (SER)?
A self-evaluation report is a key element in the ACME accreditation process. The SER embodies a self-evaluation by the program where each criterion is examined, and compliance is demonstrated. It is used by ACME to better understand if a program is complying and how.

For more information about the standards for 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. **To learn more about ACME accreditation visit www.theacme.org, call (703) 835-4565 or send an email to support@theacme.org.**

Introduction

The Accreditation Commission for Midwifery Education (ACME) establishes the Criteria for Programmatic Accreditation of Midwifery Education Programs. These criteria are the basis for the programmatic accreditation process. The process is a joint activity involving both the midwifery education program and ACME. **The criteria in this document are used by programs seeking initial or continued accreditation and followed by programs that are in the initial accreditation or continued accreditation phase.** The criteria are divided into six categories: Organization & Administration, Faculty, Students, Curriculum, Resources, and Assessment & Outcomes. Together, they enable ACME to understand the program operations and outcomes.

The criteria are essential in that they:

- Provide structure for implementing peer evaluation in the assessment of the quality of midwifery education programs preparing midwives and nurse-midwives
- Assure all aspects of midwifery education programs lead to appropriate student outcomes and prepare competent midwives
- Serve as a guide to faculty in developing and improving their program and as a framework for self-evaluation

Currently, ACME accredits programs that culminate in a certificate, master's degree, doctoral degree or post-graduate certificate. ACME also accredits pre-certification programs. There may be multiple paths of entry into these programs. Such 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
- Post baccalaureate certificate
- A midwifery education program that leads to a master's degree in midwifery, nursing, public health or an allied health field
- Post graduate certificate
- A midwifery education program that leads to a doctoral degree

Instructions

SER Due Date

The SER must be submitted no later than **eight weeks** prior to the first day of the midwifery program's scheduled site visit.

SER Formatting & Submission

The SER must be clearly typed and have one-and-a-half spaced, 1-inch margins all around and typed in 12 fonts. Completed submissions must be in a PDF format. **A completed submission includes: 1 PDF copy of the SER and PDF copies of each applicable handbook.** The completed submission should be emailed to **support@theacme.org.** Do not include exhibits. No postal mail copies will be accepted.

SER Contents

The SER must include:

1. Title page and midwifery program/s table: See example in Appendix A.

2. Table of contents: Includes all sections and all appendices with page numbers.

3. The overview will include a narrative that is no longer than 2 pages that:
    - Explains when the institution was founded
    - A brief history of the program.
    - Provides 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.
    - If there is 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 SER. Incorporate the responses into one SER, not separate 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.

4. 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 SER stating which criterion. **All URLs must be active hyperlinks and lead to the exact location of the documented item.**

5. Abbreviations Page**:** Provide a list of any abbreviations and acronyms essential for reading the SER.
6. Numbered pages: Entire report is consecutively paginated, including all appendices.
7. Narrative section: Used to address each of the ACME criteria. Maximum number of pages for the narrative is 80, not including appendices**.** Note: Title Page, Overview, Abbreviations Page, and URL Page are not a part of the narrative and are not included in the 80-page limit. SER narrative that exceeds the 80-page limitation will be returned. Each criterion is addressed separately and typically in narrative form; responses do not address more than one criterion at a time.
8. **All tables must be in the appendix.**
9. 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 SER.
- Exhibits <u>are not</u> to be included with the SER.
- They must be submitted virtually at least 3 weeks prior to the first day of the site visit.
- Read the column in this document titled " Instructions for Documentation in the Exhibits" that will satisfy the criterion. Please read these carefully and seek assistance from ACME for any questions.
- Exhibits must be organized. The documents for each exhibit must be placed in a folder and must be 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.

ACME Criteria Categories (6)

Organization & Administration	Faculty	Students
Curriculum	Resources	Assessment & Outcomes

Criterion I: Organization & Administration

Purpose: Criterion I is designed to examine the organizational and administrative context of the midwifery program.

Criterion I: Organization & Administration	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
A. The SER is an in-depth self-study written by a member/s of the core faculty. Students, faculty, and administrators are provided with an opportunity to provide input.	A. Describe who wrote the SER. Describe the opportunity for input provided to: • students • faculty • administrators	A. Provide evidence of how the students, faculty, and administrators had an opportunity for input into writing the SER, e.g., emails, memoranda, meeting minutes, etc.
B. The midwifery program provides an opportunity for its relevant constituents to provide third party comment(s) at least two months prior to the first day of the scheduled site visit.	B. Describe the midwifery program's relevant constituents and the method(s) used to solicit third party comments. Provide the date(s) the notification(s) was provided and or sent.	B. Provide evidence of notification of constituencies, e.g., emails, URLs, ACNM, publications, etc.
C. The midwifery program resides within or is affiliated with an institution that is currently accredited by an agency recognized by the United States Department of Education, or it meets 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 and provide the date of the most recent accreditation. If the midwifery program resides within or is 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 an organizational chart or map that shows the program, academic unit and institution. Provide a copy of the recognition 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.

Criterion I: Organization & Administration	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
E. The midwifery program has sufficient fiscal resources to ensure that program objectives can be met**.**	E. Describe the financial resources for the program, including internal and external funding, such as grants. Explain any financial problems facing the midwifery program that would prohibit the program from meeting its stated objectives and intended outcomes. If external grants are a significant source of support for the program, explain how the midwifery program would meet its goals and objectives if the funding sources were discontinued.	E. Provide information that demonstrates that fiscal resources are adequate to meet program objectives. This should include financial statements, budgets, or other financial records that provide revenue and expenses. Support records such as grant award statements may be included in addition.
F. The midwifery program has input into the budget process and/or financial planning to ensure ongoing adequate program resources.	F. Describe how the midwifery program and program director provide input into the budget process and/or financial planning.	F. Provide documentation indicating input into the budgetary process, e.g., meeting minutes, email, sample budget.
G. The midwifery program is 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 resides within or is affiliated with an institution whose policies and/or initiatives support non-discrimination of faculty, staff, and students.	H. Describe institutional policies and/or initiatives that support non-discrimination as they relate to the student body, faculty, and staff.	H. Provide evidence of institutional initiatives, policies, email communications, or strategic planning that demonstrate support of non-discrimination for each group: students, faculty, and staff.

Criterion I: Organization & Administration	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
I. The midwifery program is a definable entity distinguishable from other education programs and services within the institution.	I. Describe where the midwifery program is identified specifically.	I. Identify references to the program in printed and online documents, e.g. catalogs, brochures/recruitment materials, or websites.
J. The midwifery program is directed by a midwife who is clearly identified by title and position, meets institutional qualifications for appointment to that position, and has both management and administration capacity.	J. Identify who has the responsibility for midwifery program direction. Describe the institution's requirements for the position and how the program director meets these qualifications. Describe both the management and administration capacity of the midwifery program director.	J. Provide evidence such as letter of appointment, job description or a letter from the academic unit administrator detailing these requirements. Provide the program director's current curriculum vitae (CV).
K. The midwifery program director has 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 reflect that authority.	K. Provide copies of any policies that document the authority of the midwifery program director. Provide concrete examples, if any, of changes made by the midwifery program director that were implemented.
L. The midwifery program displays its current ACME accreditation status and ACME's contact information accurately on the program's website.	L. Identify specifically what is displayed and where this information is located.	L. Provide the URL where this information can be accessed. Sample language of accreditation status: The (name of midwifery program) is (status of accreditation) by the Accreditation Commission for Midwifery Education 2000 Duke Street, Suite 300 Alexandria, VA 22314 www.theacme.org (703) 835-4565

Criterion I: Organization & Administration	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
M. The midwifery program identifies and describes the certificate and/or degree(s) that can be earned.	M. Provide the exact wording of the credential as it appears on the certificate or diploma.	M. Provide evidence of the credential, such as a copy of a diploma/certificate or other document that clearly states the degree or certificate awarded. Provide evidence of legal authority to grant the credential/s. Provide the URL(s) where this information is publicized.
N. The midwifery program has academic policies, admission, continuation, and graduation requirements, and possible patterns of progression through the program.	N. Identify specifically where the evidence for each item is found in printed and/or electronic documents.	N. Provide the materials cited. Provide the URL(s) where this information is publicized.
O. The midwifery program provides the public information about the midwifery program's tuition and fees, including the relevant refund policy, and related costs, such as required texts and technology, and clinical site expenses.	O. Identify specifically where the evidence is found in printed and/or electronic documents.	O. Provide the materials cited. Provide the URL(s) where this information is publicized.
P. The midwifery program has a transfer of credit policy that includes the criteria by which the midwifery program determines whether to accept credits from another program or institution.	P. Briefly describe. Identify specifically where the evidence is found in printed and/or electronic documents.	P. Provide the materials cited. Provide the URL where this information is publicized.

Criterion II: Faculty

Purpose: Criterion II is designed 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 SER	Instructions for Documentation in the Exhibits
A. All faculty are recruited, appointed and promoted according to the institution's non-discrimination policy.	A. Address: • Describe the process for recruitment of faculty. • Describe the process for appointment, promotion, and tenure of faculty. • Describe efforts to achieve non-discrimination within the faculty and the outcomes of these efforts. • Provide the URLs for each policy.	A. Provide evidence that the policy and process have been implemented. Possible sources of evidence could include: • Job advertising placements • Search committee orientation materials • Instructions to search committee • Provide documents/examples that illustrate that each policy was used in promotion and tenure process.
B. The program has a policy that addresses discrimination complaints related to recruitment, appointment, promotion and tenure.	B. Describe the policy and the number, frequency, type, and resolution of complaints pertaining to discrimination in the past five years. If there have been none, state that in the SER.	B. Provide documentation that illustrates that the policy was applied, if applicable. Provide a link to the policy.
C. Faculty carry out their responsibilities with respect for variations among students and colleagues.	C. Provide examples of faculty addressing students' or colleagues' individual variations, such as: • Previous professional experience • Ability • Family needs	C. Include any examples of how this is done. De-identified personal communications may be a source of documentation.

Criterion II: Faculty	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
	• Study or test-taking needs • Religious or cultural observances • Military activity • Appropriate accommodation Provide the related policies, and provide active URLs in the SER to the location of the policy.	
D. Core faculty are certified, as applicable, by the American Midwifery Certification Board (AMCB), or another appropriate certifying body for faculty who are not CNMs or CMs.	D. Provide a Core Faculty Table II-1 in the SER appendix that describes the core faculty (*see glossary: core faculty*) who taught in the SER time frame. A template and instructions for Table II-1 are in Appendix C*: Core Faculty Table*, of this document. List the CNMs/CMs on the core faculty first in this table, followed by the remainder of the faculty, in alphabetical order by last name. If there are core faculty who also provide clinical instruction, summarize their clinical teaching responsibilities in this table.	D. Provide a folder for each core faculty member who taught in the SER time frame, organized by faculty's last name. These folders must include: • A current CV or resume • Evidence of certification, as applicable For core faculty who are midwives, include evidence of AMCB certification. 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

Criterion II: Faculty	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
		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.
E. Core faculty have education credentials appropriate to the level at which they teach and meet the academic institution's requirements for faculty.	E. Describe the academic institution's requirements for faculty. Ensure that core faculty education credentials are included in Table II-1.	E. For all core faculty, include evidence of completion of the highest earned academic degree, as listed in the table, in each faculty folder. This may be a transcript or a copy of a diploma.

Criterion II: Faculty	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
F. Core faculty have preparation for teaching commensurate with the teaching assignment, e.g. face-to-face, hybrid, and distance delivery.	F. Describe the midwifery program's process for determining that core faculty have appropriate preparation. Appropriate preparation may differ for different teaching assignments. Describe how new core faculty members are mentored into their teaching roles. Elaborate on the preparation and supervision afforded to core faculty who do not meet all the program's requirements for teacher preparation. Ensure that core faculty teaching preparation is summarized in Table II-1.	F. 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
G. Instruction, supervision, and evaluation of students in didactic courses containing *ACNM Core Competencies for Basic Midwifery Practice* are the responsibility primarily of core faculty.	G. Describe core faculty responsibility for instruction, supervision, and evaluation of students. Ensure that Table II-1 describing core faculty during the SER time frame includes faculty responsibilities for courses containing ACNM Core Competency content, with course names and numbers.	G. Possible sources of evidence for this criterion: ● Syllabi ● Committee minutes ● Emails or other communication ● Faculty calendars **Special Instructions: This criterion is about didactic learning. Include in narrative and exhibits those who taught the classroom/online portions of all courses with Core Competency content in the SER time frame. They may be CNMs/CMs or nurse practitioners, or other school faculty.**

Criterion II: Faculty	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
H. Core faculty are responsible for development and/or implementation and evaluation of the curriculum.	H. Describe the core faculty's involvement 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 faculty participate. Cite the specific source/location of documentation.	H. Provide the materials cited. Some possible sources that confirm faculty responsibility: ● Position descriptions ● Faculty handbook ● Curriculum committee minutes ● Midwifery faculty meeting minutes ● Graduate faculty meeting minutes
I. Core faculty participate in selection, advisement or mentoring, evaluation, and advancement of students.	I. Describe the core faculty's involvement in selection, advisement or mentoring, evaluation, and advancement of students. Include CNM/CM faculty. Cite specific source/location of documentation.	I. Provide the materials cited. Possible sources of evidence: ● Admissions committee meeting minutes ● Graded exams and feedback on papers/presentations ● Notes from student advisory or mentoring sessions All applicant/student materials must be de-identified.
J. Core faculty participate in the process of recruitment, selection, and promotion of faculty.	J. Describe the core faculty's involvement in recruitment, selection, and promotion of faculty. Include CNM/CM faculty. Cite the specific source/location of documentation.	J. Provide the materials cited. Sources may include items like: • Search committee meeting

Criterion II: Faculty	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
		minutes (candidate de-identified) ● Promotion & tenure committee minutes (candidate/s de- identified) ● De-identified interview rating forms
K. Core faculty participate in orientation of core and clinical faculty.	K. Describe the core faculty's involvement in orientation of core and clinical faculty. Describe the method(s) used to orient new core faculty and clinical faculty.	K. 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
L. Core faculty participate in development and/or implementation of a mechanism used by students to evaluate faculty, courses, and the midwifery program's effectiveness.	L. Describe the core faculty's involvement in the development and/or implementation of a mechanism for student evaluation of faculty, courses, and midwifery program effectiveness. If core faculty are not directly involved in development of the mechanism, indicate who does the development and how core faculty implement these evaluations.	L. Provide the materials cited. Sources for exhibits may include: ● Minutes of faculty retreats ● Minutes from mechanism development meetings Do not include core faculty's evaluations by students, or evidence of the entire process for student evaluation.

Criterion II: Faculty	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
	Cite the specific source/location of documentation.	
M. Core faculty participate in ongoing development and annual evaluation of the midwifery program's resources, facilities, and services.	M. Describe the faculty's involvement in each of these activities. Address each component: resources, facilities, and services. There is no need to describe the resources, facilities, and services in this criterion; simply show how core faculty are 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.	M. Provide the materials cited. Possible examples for exhibits: ● Clinical site visit reports ● Meeting minutes from the evaluation planning meetings ● Tools used in the evaluation process ● Minutes of faculty retreats ● Faculty notes from formal or informal interviews with stakeholders.
N. Core faculty participate on or have input into councils and committees of the academic unit. Clinical faculty participate or have input as appropriate.	N. Describe the academic unit's expectation for core faculty participation in councils and committees. Describe the academic unit's expectation for clinical faculty participation in councils and	N. Include examples of how faculty meet these expectations, such as activities/ schedules/workload. Provide committee meeting minutes that

Criterion II: Faculty	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
	committees. Provide an active URL to the relevant portion of the faculty handbook. Include any pertinent definitions. Show how faculty meet these expectations by describing core faculty, in particular CNM/CM faculty, committee participation during the SER time frame or within the previous 3 years.	document the presence of the faculty member/s cited in the SER elaboration.
O. Core faculty continue professional development and participate in scholarly activities.	O. 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. Show how faculty meet these expectations by describing some of the significant professional development achievements and scholarly activities of core faculty, including CNM/CM faculty, during the SER time frame or within the previous 3 years. Indicate how faculty workload is managed to allow time for these activities. If relevant, include expectations and achievements for both tenured/tenure track and non- tenure track faculty.	O. Include examples of how faculty meet these expectations, such as 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 & textbooks ● Conference abstracts ● Posters ● Software ● Blogs

Criterion II: Faculty	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
P. Core faculty maintain clinical expertise as required.	P. 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 meet these expectations by describing their clinical practice activities, including those of CNM/CM faculty, during the SER time frame or within the previous 3 years. Indicate how faculty workload is managed to allow time for these activities.	P. Include examples of how faculty meet these expectations, such as activities/schedules/workload. Provide evidence of how faculty maintain clinical expertise as cited in the SER. Examples of ways to document faculty clinical practice activities: ● Letter confirming clinical privileges from facility/practice ● Peer evaluations from practice ● URL for practice website listing faculty name
Q. Core faculty participate in professional service.	Q. Describe the academic unit's requirement for professional service. Provide an active link to the relevant portion of the faculty handbook. Include any pertinent definitions. Show how faculty meet these expectations by describing their professional service activities, including those of CNM/CM faculty, in the past 3 years.	Q. Include examples of how faculty meet these expectations, such as activities/ schedules/workload. Provide specific evidence of faculty professional service cited in the SER, if available, especially CNM/CM faculty. Examples of ways to document professional service: ● Letters of thanks ● Programs or agendas for events ● Photos or social media posts

Criterion II: Faculty	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
R. Academic freedom is a faculty right clearly defined, made available in policy, and applied consistently to all core faculty.	R. Describe the policy and its location. Provide an active link to this location.	R. Provide access to source document/s. Possible sources of documentation may include: faculty handbooks; union contracts.
S. The academic unit publishes and employs defined criteria for periodic evaluation that are applied consistently to all core faculty.	S. Describe the criteria and state where they are located. Provide an active link to this location.	S. Provide access to source document/s.
T. The academic unit publishes and employs processes for promotion, tenure, termination, and merit recognition that are applied consistently to all core faculty.	T. Describe each of these four policies: promotion, tenure, merit recognition and termination and state where they are located. If there is no practice of merit recognition, please state. Provide an active link to this location.	T. Provide access to source document/s.
U. Core faculty have channels within the institution for receipt and consideration of grievances related to their employment.	U. Describe the grievance policies and state where they are located. Provide an active link to this location.	U. Provide access to source document/s.
V. Clinical faculty have qualifications that meet the academic institution's requirements for clinical faculty. They are selected, oriented, mentored, and evaluated by core faculty. Clinical faculty who serve as preceptors are qualified to do so according to the *ACME Guidelines for Interprofessional Clinical Supervision of Midwifery Students,* Appendix E of this document.	V. Describe the institution's requirements for clinical faculty. Describe the process for selection, orientation, mentoring, and evaluation of clinical faculty. Provide a Clinical Faculty Table II-2 in the SER appendix that describes the clinical faculty who taught in the SER time frame. A template and instructions for Table II-2 are in Appendix D: *Clinical Faculty Table* of this document.	V. Provide an electronic folder for each clinical faculty who precepted students in the SER time frame. These folders must contain: • A current CV or resume • Evidence of certification, as applicable For clinical faculty who are midwives, provide evidence of AMCB or NARM

Criterion II: Faculty	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
	If there are core faculty who also provide clinical instruction, include their information in Table II-1, the Core Faculty Table, and do not repeat it here.	certification. This can be a copy of the certificate or of the individual's 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. 100% of these faculty folders must be complete and included in the exhibits for site visitors to review.

Criterion II: Faculty	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
W. Clinical faculty are responsible for the instruction, supervision, and evaluation of students in clinical learning.	W. Describe the clinical faculty's responsibilities for instruction, supervision, and evaluation of students' clinical experiences.	W. Possible sources of evidence for this criterion: ● Student clinical schedules ● De-identified student evaluations

Criterion III: Students

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

Criterion III: Students	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
A. The institution has admission criteria and policies that meet federal guidelines for non-discrimination (www.eeoc.gov).	A. State the criteria and policies, including a non-discrimination policy.	A. Provide the document/s in which the criteria and policies appear.
B. The institution's and program's admission criteria and policies are publicly available.	B. Address: • Provide where the criteria and policies are available to the public. • Provide active URL/s where the criteria and policies appear publicly.	B. No exhibit required.
C. Student recruitment materials and processes accurately communicate the program practices and policies.	C. Describe student recruitment materials and processes. In addition, describe information given to applicants about clinical sites.	C. Provide samples of student recruitment materials.
D. Student recruitment materials and processes demonstrate a commitment to non-discrimination.	D. Describe how student recruitment materials and processes demonstrate a commitment to non-discrimination.	D. Provide samples of student recruitment materials that demonstrate a commitment to non-discrimination.
E. The institution has student policies that are 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; access to	E. Address: • Describe each of these student policies and where it is located • Describe how these policies are identified to students at or before orientation.	E. No exhibit required.

Criterion III: Students	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
university/college catalogs; access to academic calendars; and adequate grading.	• Describe how students are notified of changes in these policies. • Provide active URLs to the policies and to university/college catalogs and academic calendars.	
F. Student academic support services are available and are designed to promote student success.	F. Identify academic support services available to meet the needs of students to promote their retention in and progression through the program.	F. No exhibit required.
G. All students have access to ongoing and equitable support services.	G. Describe how students access support services regardless of modality, location, or clinical placement.	G. No exhibit required.
H. Students are informed of support services at or before orientation.	H. Identify how students are informed of support services.	H. No exhibit required.
I. Students are formally informed of course objectives/outcomes and methods of evaluation at the beginning of each course.	I. Address: • Describe the process by which students are informed. • Identify the location, including active URL/s, 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 are apprised of their progress on an ongoing basis.	J. Describe the process by which students are apprised of their progress.	J. Provide examples of this process, de-identified as required.

Criterion III: Students	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
K. Students are evaluated formatively and summatively.	K. Provide an overview of formative and summative evaluation processes in didactic and clinical portions of the program.	K. Provide examples of these processes, de-identified as required.
L. Students are informed of remediation policies and processes.	L. Describe remediation policies and processes for students who do not meet course or program requirements.	L. Provide examples of remediation/improvement plans, de-identified as required.
M. Students have opportunities for involvement in development and implementation of midwifery program policies.	M. Address: • Describe the relevant opportunities that students are provided to contribute to the development and implementation of midwifery program policies . • Describe how students are recruited and supported in their involvement.	M. Provide evidence of student participation in developing and implementing midwifery program policies.
N. Students have opportunities to participate or have input into the representation on councils or committees of the institution or academic unit.	N. Describe the relevant opportunities and describe how students are informed about the opportunities.	N. Provide documentation that demonstrates students' participation or input into representation on councils or committees. Provide documentation that illustrates how students are informed about the opportunities.
O. The midwifery program has clearly defined and transparent mechanisms for consideration of grievances, complaints or appeals.	O. Address: • Describe the mechanism for addressing grievances, complaints or appeals and how	O. As applicable, provide a de-identified summary of each grievance, complaint or appeal that occurred in the midwifery program during the past three years.

Criterion III: Students	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
	students are apprised of these mechanisms. • Provide active URL/s for each of these mechanisms in formal documents.	
P. Access to resources, events, and other opportunities that support learning and development is available regardless of student location.	P. Address: • Describe how access to resources, events, and these other opportunities is available for all students regardless of their location, e.g., on campus or at a distance. • Describe how students are informed of such access.	P. No exhibit required.
Q. The midwifery program has a policy that attends to students' well-being through the mitigation of fatigue related to clinical learning.	Q. Address: • Describe the mechanism and/or policy that ensures that students' clinical learning schedules are safe and optimize students' well-being. • Describe the mechanism by which clinical faculty are educated/trained to recognize the signs of learner fatigue and about the negative effects of provider fatigue on patient care and learning.	Q. Provide examples of these mechanisms and/or policies.

Criterion III: Students	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
	• Provide URL for each related policy.	
R. Services are available to support student health and well-being.	R. Address: • Describe the process and or policy the program carries out or services the program provides to promote student health and well-being. This could include, but is not limited to, referrals to student health services, safety training, training or procedures to address building supportive communication, reducing implicit bias, supporting study groups, recognizing and resisting bullying, and building mutual support groups. • Provide the relevant URLs.	R. Provide examples of any such processes or services.
S. The midwifery program has a policy or process to address substance use, suicide prevention, and other crisis situations.	S. Address: • Describe the policy the program carries out or services the program provides to address substance use, suicide, and other crisis situations. • Provide the relevant URLs.	S. Provide a sample of materials or resources made available to students.

Criterion IV: Curriculum

Purpose: Criterion IV is designed to ensure that the program implements a curriculum that is congruent with the midwifery program's mission and goals, is evidence-based, is consistent with the ACNM's 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 program has a philosophy, purpose/mission, and objectives/ outcomes that embody midwifery by which the curriculum is based.	A. Provide a statement of program philosophy, purpose/mission, and objectives/outcomes	A. No exhibit required.
B. The midwifery program philosophy is in alignment with the philosophy of the ACNM.	B. In the form of a table, provide the philosophy for both entities and show the consistency across each philosophy. Include table in the appendices.	B. No exhibit required.
C. The midwifery program's purpose or mission is in alignment with: • ACNM • Institution • Academic unit	C. In the form of a table, provide the purpose or mission of each entity and show the consistency across each purpose or mission. Include table in the appendices.	C. No exhibit required.
D. The midwifery program's purpose or mission and objectives are consistent with the midwifery program's philosophy.	D. In the form of a table, provide the purpose or mission, objectives, and philosophy and show how they are consistent. Include table in the appendices.	D. No exhibit required.
E. The curriculum is designed to achieve the stated objectives of the midwifery program.	E. In the form of a table, provide specific courses and map the alignment between the program objectives and specific courses that meet program objectives. See Appendix F: Program Objectives or Outcomes	E. No exhibit required.
F. Curriculum development is a continuing process.	F. Describe the continuing process of curriculum development.	F. Provide evidence from faculty or curriculum committee meeting

Criterion IV: Curriculum	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
		minutes or other documents that demonstrate curriculum development.
G. The midwifery program has established criteria and a process for **awarding transfer credit** for didactic coursework.	G. Identify the criteria and explain the process.	G. Provide access to the criteria given to applicants and students.
H. The midwifery program has established criteria and a process for **awarding transfer credit** for clinical coursework and clinical experience.	H. Identify the criteria and explain the process.	H. Provide examples of course challenge mechanisms, transcript assessments, or other procedures used to assess whether a student has met the criteria.
I. The midwifery program has established criteria and a process for granting **exemption** from didactic coursework.	I. Identify the criteria and explain the process.	I. Provide access to the criteria given to applicants and students.
J. The midwifery program has established criteria and a process for granting **exemption** from clinical coursework and clinical experience.	J. Identify the criteria and explain the process.	J. Provide examples of course challenge mechanisms, transcript assessments, or other procedures used to assess whether a student has met the criteria.
K. The curriculum is consistent with the *ACNM Core Competencies for Basic Midwifery Practice*. *Use the most current.*	K. Describe the process for ensuring that the ACNM *Core Competencies* are taught. Describe the process used to correct any deficiencies. In the SER appendix, provide a table that shows the location of the ACNM *Core Competencies for Basic Midwifery Practice* in the curriculum. Provide one to three examples of each hallmark and competency. See Appendix G: *Courses with*	K. Include the table in the exhibits with the referenced curriculum. Address each "Hallmark of Midwifery" with examples (objectives or outcomes, seminars, classes, learning activities) that demonstrate how each is integrated throughout the curriculum. For each competency listed under

Criterion IV: Curriculum	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
	Core Competencies in this document for a sample table.	"Components of Midwifery Care," give examples of its location in the curriculum with course number, specific outcome(s) (course objectives), 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.
L. The curriculum includes 3 separate courses in advanced pharmacology/pharmacotherapeutics, advanced physical assessment, and advanced physiology/pathophysiology and occur prior to or concurrent with first clinical practicum.	L. Provide the course names and formal descriptions for these 3 courses and identify where courses are taught in the program's curriculum.	L. Provide access to the syllabi for these courses. Include course content information provided to students.
M. The curricular content is regularly updated to include current evidence for midwifery practice and is congruent with ACNM Position Statements.	M. Describe how the ACNM Position Statements that were released in the past 5 years were incorporated during the curricular content update process.	M. Provide access to course materials, e.g., syllabi or URL/s.
N. The midwifery program provides content throughout the curriculum about implicit bias and health disparities related to race, gender, age, sexual orientation, disability, nationality, and religion.	N. Describe how the midwifery program includes content throughout the curriculum about implicit bias and health disparities related to race, gender, age, sexual orientation, disability, nationality, and religion.	N. Provide access to course materials.

Criterion IV: Curriculum	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
O. The midwifery program incorporates interprofessional education (IPE) to prepare students for team-based collaborative practice that includes outcomes of student learning.	O. Briefly describe how the midwifery program incorporates 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." *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. Provide access to supporting materials, e.g. class schedules, pertinent emails or other communications, students' assignments
P. The curriculum has a logical sequence of progression.	P. Describe the foundation on which the midwifery curriculum is built. If there are multiple pathways (*see glossary: pathway*) to midwifery education, describe the	P. No exhibit required.

Criterion IV: Curriculum	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
	foundation for each pathway. A table is provided in the Appendix H. Describe the rationale for the sequence of the midwifery curriculum as the student progresses throughout the program. In the SER appendix, provide tables showing the course sequence (or degree plan) with midwifery core curriculum highlighted for full-time and, if applicable, part-time students. If there is more than one pathway, provide a table for each pathway including full-time and, if applicable, part-time students. The midwifery curriculum should be consistent between pathways; students complete the same midwifery coursework. Explain differences between the sequencing, if applicable.	
Q. The didactic and clinical components of the curriculum are implemented by a variety of evidence-based methods to achieve the program objectives/ outcomes and ensure student learning.	Q. Describe the various methods used to achieve the objectives or outcomes and ensure student learning, such as teaching strategies, education technology, and simulation.	Q. Provide examples of various teaching methods that support student learning.

Criterion IV: Curriculum	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
R. The midwifery program ensures that graduates have achieved competence in clinical midwifery practice.	R. Address: • Explain how the midwifery program assesses competence. • Explain how the midwifery program intervenes to help students who are having difficulty reaching academic or clinical competence. • Explain how competence is assured if student experience numbers fall below those listed in this criterion. • In the SER appendix, provide a table that details the number of clinical experiences each student had in the specified clinical areas for the past two completed classes or cohorts as defined by the midwifery program (one completed class/cohort for initial accreditation). Some clinical encounters may count in more than one category. **Do not disclose the identity of students or the recipients of care.** While an absolute number of clinical experiences is not required for program	R. Provide access to instruments used to assess competence. Provide examples of interventions used to assist students who have had difficulty reaching academic or clinical competence.

Criterion IV: Curriculum	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
	accreditation, these recommendations guide programs in selecting clinical sites and assuring adequate experience for competence across the full scope of midwifery practice. See Appendix I: *Clinical Experiences* Template for Criterion IV.R. in this document for a sample table. ***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**	

Criterion IV: Curriculum	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
	Includes newborn assessment and anticipatory guidance.	
S. The midwifery program provides students with the necessary clinical experiences to achieve the objectives/outcomes of the program.	S. Address: • Explain the breadth and depth of clinical experiences used by the midwifery program to achieve program objectives/outcomes. • Clinical experiences are direct patient contacts. These may be supplemented by such strategies as simulation, role play, standardized patients, and emerging technologies. • If the program determines that the clinical facilities are inadequate to provide the necessary experiences, describe plans to address this problem.	S. No exhibit required.
T. The midwifery program maintains final responsibility for assessing and approving clinical sites.	T. Describe the process for identification, selection, and approval of clinical sites.	T. No exhibit required.
U. The midwifery program implements policies and procedures for academic	U. Identify the policies and procedures; and describe how they are implemented to verify	U. Provide evidence of the processes.

Criterion IV: Curriculum	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
integrity and verification of student identity for academic work, including authorship of work and work done through electronic technologies.	student identity for work, including that conducted by electronic technologies.	
V. Regular communication occurs among and between faculty and students during implementation of the curriculum.	V. Describe how regular communication occurs across all settings and phases of the program.	V. Provide examples of regular communications occurring throughout the program.
W. The curriculum conforms to state or nationally recognized guidelines for the educational level/s offered by the program: certificate, master's, or doctoral degree.	W. Address: • Identify the guidelines used, such as those established by state law or a professional organization and provide the URL if available. • Explain how the curriculum conforms 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 it conforms to the competencies identified in the ACNM document *The Practice Doctorate in Midwifery*.	W. No exhibit required.

	If the midwifery program culminates in a professional or practice focused master's degree for midwives, describe how it conforms to the competencies identified in the ACNM document Master's Education in Midwifery.	

Criterion V: Resources

Purpose: Criterion V is designed to ensure that there are adequate resources to promote student and faculty success in meeting midwifery program objectives.

Criterion V: Resources	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
A. The midwifery program has an adequate number of qualified core faculty to meet the program objectives/outcomes.	A . Address: • Describe how the midwifery program determines adequacy of the number of qualified faculty. • Describe the plan that will be used to provide an adequate number of faculty if the number of core faculty is determined to be inadequate <u>or</u> describe the plan that was used to provide an adequate number of faculty when the number of core faculty was determined to be inadequate.	A. No exhibit required.
B. The midwifery program has adequate staff for administrative, technical, and student support to meet the program objectives/outcomes.	B. Address: • Describe how the midwifery program determines adequacy for administrative, technical, and student support. • Describe the plan that will be used to provide an adequate number of staff if the number of staff is determined to be inadequate <u>or</u> describe the plan that was used to provide an adequate number of	B. Provide a list of staff and their titles and indicate if their responsibilities are administrative, technical, or student support.

Criterion V: Resources	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
	staff when the number of staff was determined to be inadequate.	
C. The midwifery program's physical facilities on campus and at clinical sites are adequate to meet student needs and program objectives/outcomes.	C. Address: • Describe how the midwifery program determines 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 the plan that will be used if the physical facilities are determined to be inadequate <u>or</u> describe the plan, to the extent possible, that was used to address the deficiencies when the physical facilities were determined to be inadequate.	C. No exhibit required.
D. The midwifery program's learning resources are accessible and adequate to meet student needs and midwifery program objectives/outcomes.	D. Address: • Describe how the midwifery program determines resources are adequate and accessible to all students, e.g., laboratory, clinical simulation, instructional technology, and library resources.	D. No exhibit required.

Criterion V: Resources	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
	• Explain how all students and faculty, including those at a distance, and individuals with disabilities and special learning needs can access learning resources. • Describe plan that will be used if the midwifery program determines that learning resources are (1) not adequate (2) not accessible <u>or</u> describe the plan that was used when the midwifery program determined that learning resources were (1) not adequate (2) not accessible.	
E. The midwifery program has resources for students, faculty, and staff to support individual variations and non-discrimination.	E. Address: • Describe how the midwifery program provides dedicated resources for support and training for students, faculty, and staff. • Describe how the program disseminates this information to students, faculty and staff. Examples of these dedicated resources: a specific department/program or person,	E. No exhibit required.

Criterion V: Resources	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
	trainings, workshops, lectures, or online educational platforms. • Provide URL/s to these resources. • Describe the plan that will be used to address the deficiencies if the midwifery program determines inadequacies in these resources or describe the plan that was used to address the deficiencies when the midwifery program determined inadequacies in these resources.	
F. The midwifery program secures clinical sites for students.	F. Address: • Describe how clinical sites are obtained and assigned. • Describe how difficult placement issues are resolved. • Describe how student clinical sites are monitored and evaluated.	F. No exhibit required.

Criterion VI: Assessment & Outcomes

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

Criterion VI: Assessment and Outcomes	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
A. The midwifery program has a comprehensive plan for ongoing assessment to achieve continuous quality improvement.	A. Address: • Explain the process for developing and implementing the plan, including who is responsible and the time frame for the review. • Identify key components of plans and evaluation goals. • Identify action taken and results, or action planned for the immediate future, when the assessment shows there are areas for improvement.	A. Provide program's current assessment plan, assessment reports for the past 3 years and meeting minutes as applicable.
B. The midwifery program's assessment process includes a program evaluation for use by students and recent graduates.	B. Address: • State the midwifery program's evaluation goals and variables measured for its students' and graduates' evaluations of the program. • Describe how the data are used for continuous quality improvement. • Provide examples of actions taken if goals were not met.	B. Provide program evaluation reports compiled from evaluations completed by students. Provide documentation of action taken as a result of the assessment, as applicable.

Criterion VI: Assessment and Outcomes	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
C. The midwifery program assessment process includes an overall evaluation of enrollment, graduation, and attrition goals for the past three years (or for the SER year for programs seeking initial accreditation).	C. Explain the categorization of the students, e.g., part- time, full-time, leave of absence, etc., and the calculation of the percentage of students in each category. Explain how the midwifery program defines 'on-time' graduation. If goals have not been met, explain action taken and results, or action planned for the immediate future, to achieve goals. In the SER appendix, provide a table. See Appendix J: Enrollment, Graduation, and Attrition, showing enrollment, graduation, and attrition goals and outcomes for the time period indicated.	C. Provide documentation of action taken as a result of the assessment, as applicable.
D. The midwifery program has an annual AMCB first-time candidates pass rate of eighty percent or higher. .	D. Address: Provide the annual AMCB first-time candidates pass rate for your program for the past 3 years. Midwifery program with less than an 80% AMCB first-time candidates pass rate must provide an explanation. If the 80% has not been met, provide the improvement plan developed to achieve an eighty percent or higher AMCB first-	D. Provide the AMCB first-time pass rate reports for the past 3 years.

Criterion VI: Assessment and Outcomes	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
	time pass rate. Give examples of action taken.	
E. The midwifery program assessment process includes evaluations for the past three years (or the SER year, for programs seeking initial accreditation), of the program's aggregated annual certification rates. Using the AMCB document (American Midwifery Certification Board (AMCB)) calculate the certification rate. American Midwifery Certification Board (AMCB) certification rates* within one year of graduation, as available, for **all** graduates. *This is not the first-time pass rate.	E. Provide the URL where AMCB certification rate goals and results are publicized. List the rates of AMCB certification within one year of graduation for all students in each cohort graduating from the program in the past three years, or the SER year, as applicable. In the SER appendix, provide a table showing AMCB certification rate goals and outcomes for the time period indicated. Use the template in Appendix K: *AMCB Certification*.	E. Provide documentation.
F. The midwifery program reviews and updates its philosophy, purpose/mission, and objectives/outcomes to align with current ACNM documents	F. Indicate when the they were last reviewed and updated. Describe the process for the program's assessment of its philosophy, purpose/mission, and objectives/outcomes using current ACNM documents.	F. Provide documentation of the process, e.g., in meeting minutes.

Criterion VI: Assessment and Outcomes	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
G. The midwifery program reviews and updates its philosophy, purpose/mission, and objectives/outcomes to include national (and state as applicable) standards and educational requirements.	G. Identify the national or state requirements and standards that are applicable to the program and how the program uses them in its reviews and updates. Describe the process for determining currency of national and state standards and educational requirements.	G. Provide documentation of the process, e.g., in meeting minutes.
H. The midwifery program reviews and updates of its philosophy, purpose/mission, and objectives/outcomes to include significant changes within the program's institution and academic unit that are relevant to the program.	H. Describe how the program identifies and addresses significant changes in its institution and academic unit as reflected in the program assessment process. Cite and describe recent examples, if any.	H. Provide documentation of the process, e.g., in meeting minutes.
I. The midwifery program's assessment process includes evaluation of the effectiveness of clinical sites to meet student learning needs and monitor and promote their achievement of clinical competence.	I. Describe the process the program uses to evaluate the effectiveness of clinical sites to meet student learning needs and monitor and promote their achievement of clinical competence.	I. Provide evidence of evaluation of all clinical sites used during the SER year. Identify action taken if clinical experiences do not lead to students' achievement of clinical competence.
J. The midwifery program's assessment process ensures the presence of <u>current</u> contracts for each clinical site.	J. Describe the process for ensuring that students are assigned to clinical sites with current contracts.	J. Provide a table listing the name of each clinical site that was used in the SER year and the expiration date of the site contract. Provide access to the contract for each site listed in the table.

Criterion VI: Assessment and Outcomes	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
K. The midwifery program's assessment process includes a plan for annual evaluation of core faculty.	K. Describe the process for annual evaluation of core faculty. Identify the action taken if a core faculty member fails to meet evaluative standards.	K. No exhibit required.
L. The midwifery program's assessment process includes a plan for annual evaluation of clinical faculty.	L. Describe the process for annual evaluation of clinical faculty. Identify the action taken if a clinical faculty member fails to meet evaluative standards.	L. No exhibit required.
M. The midwifery program's assessment process includes a plan to assess the non- discriminatory, equitable, and respectful interaction of core faculty with students, colleagues, staff, and patients.	M. Provide examples of non-discriminatory, equitable, and respectful interaction using current ACNM documents, such as the *ACNM Code of Ethics*. Describe the process for annual evaluation of core faculty interaction with students, colleagues, staff, and patients. Identify the action taken if a core faculty member fails to meet evaluative standards.	M. No exhibit required.
N. The midwifery program's assessment process includes a plan to assess the non- discriminatory, equitable, and respectful interaction of clinical faculty with students, colleagues, staff, and patients.	N. Provide examples of non-discriminatory, equitable, and respectful interaction using current ACNM documents, such as the *ACNM Code of Ethics*. Describe the process for annual evaluation of clinical faculty interaction	N. No exhibit required.

Criterion VI: Assessment and Outcomes	Instructions for Elaboration in the SER	Instructions for Documentation in the Exhibits
	with students, colleagues, staff, and patients. Identify the action taken if a clinical faculty member fails to meet evaluative standards.	

Appendix A: SER 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	*Total Student Enrollment
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			
● Non-nursing 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			
● Non-nursing baccalaureate degree entry			
● Other, please describe			
Post-graduate certificate			
Total Enrollment Number			

***Total enrollment for the SER Year.**

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 II-1 (Template for Criterion II.D - II.F)

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 during the SER time frame
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 during the SER time frame, with course name and number

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 in SER year	Preparation for teaching	Course(s) taught in SER year

Appendix D: Clinical Faculty Table II-2 (Template for Criterion II.V)

The clinical faculty table should contain the following:

1. Name and credential (e.g. CNM, CM, CPM, NP, PA, MD). Please ensure that the names as listed in the Table and on the faculty, 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 that 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. ***Please do NOT include those who did not precept in the SER time frame, even if they are current preceptors.***

Last name, First name	Credential (CM, CNM, MD, NP etc.) Certificate # License #	Highest degree earned	Clinical site in the SER year	Clinical areas in which students were 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 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 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 (MD or DO), and Physician Assistants (PA).

This document provides a description of qualifications for preceptors to teach and supervise CNM/CM students in clinical experiences. Note that students enrolled in ACME accredited 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 program, a preceptor must meet all of the following criteria:

- Attended and graduated from a 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.

The ACME accredited 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 the greater number 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 Accreditation of Midwifery Education Programs* on the ACME web page, www.theacme.org.

Appendix F: Program Objectives or Outcomes (Template for Criterion IV.E)

Sample/Template that shows where program objectives or outcomes are met in specific courses.

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.K)

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 **Competency**	**Course number**	**Course name, objective, subobjective, class/seminar topic, or activity, or URL link to same, that satisfies the hallmark/competency**

Appendix H: Prerequisite Coursework for Each Midwifery Education Plan (Template for Criterion IV.P)

Education Plan	Required Prerequisites (e.g., education, experience)
Masters	
Certificate	
Doctorate	

Appendix I: Clinical Experiences (Template for Criterion IV.R)

Student (Use Confidential Identifier)	Primary care (40)*	Gynecologic care (80)*	Antepartum care (100)*	Intrapartum care (60)*	Births (35)*	Postpartum care (50)*	Newborn care (30)*

**Note that these are suggested numbers of experiences recommended by ACME for attaining competency in each area. Competency may be achieved with different experience numbers than those suggested by ACME. See Criteria V.F. for explanation of experiences included in each defined practice area.*

Appendix J: Enrollment, Graduation, and Attrition (Template for Criterion VI.C)

Full-time Students - Length of Program in Months _____

Matriculation Year	Number of full- time students matriculating in this cohort (A)	Goal for On-time Graduation (%)	Number who left program or were dismissed	Number who graduated on- time (B)	Number who graduated, but not on-time (C)	On-time Graduation Rate B / A	Final Graduation Rate (B + C) / A
Example: 2018	*24*	*90%*	*3*	*17*	*4*	*71%*	*88%*

Part-time Students - Length of Program in Months _____

Matriculation Year	Number of part-time students matriculating in this cohort (A)	Goal for On-time Graduation (%)	Number who left program or were dismissed	Number who graduated on- time (B)	Number who graduated, but not on-time (C)	On-time Graduation Rate B / A	Final Graduation Rate (B + C) / A
Example: 2018	*6*	*90%*	*0*	*5*	*1*	*83%*	*100%*

Appendix K: AMCB Certification (Template for Criterion VI.E)

Full-time Students - Length of Program in Months _____

Matriculation Year	Number of full-time students matriculating in this cohort (A)	Goal for AMCB Certification within one year of graduation (%)	Number who left program or were dismissed (B)	Graduates with AMCB Certification within one year of graduation (C)	AMCB Certification Rate C / (A-B)
Example: 2018	*24*	*90%*	*3*	*20*	*95%*

Part-time Students - Length of Program in Months _____

Matriculation Year	Number of part-time students matriculating in this cohort (A)	Goal for AMCB Certification within one year of graduation (%)	Number who left program or were dismissed (B)	Graduates with AMCB Certification within one year of graduation (C)	AMCB Certification Rate C / (A-B)
Example: 2018	*6*	*100%*	*0*	*6*	*100%*

Glossary

Academic Institution	Based on the definition by the US Department of Education, "an institution of higher education that is a public or private… institution… legally authorized to provide educational programs beyond secondary education…. for which it awards a…degree… for credit…" and is "accredited or preaccredited" by an agency recognized by the US Department of Education. [34 CFR Part 600 § 600.4]
Academic Unit	College/School, Institute, Department (e.g. nursing, public health, college of health-related professions) within or affiliated with an academic institution.
Administration	Administering the program to include but not limited ensuring that policies and procedures are in developed and followed and developing goals and objectives.
Administrative Unit	The person, group or area responsible for the midwifery program budget.
Adverse Accrediting Action or Adverse Action	As defined by the US Department of Education, "the denial, withdrawal, suspension, revocation, or termination of accreditation or preaccreditation, or any comparable accrediting action an agency may take against an institution or program." [34 CFR § 602.3 Definitions]
Affiliation	A written agreement between an organization, school, or midwifery program, and an institution to offer education cooperatively.
All Faculty	Faculty who teach midwifery students in any setting.

American Midwifery Certification Board (AMCB)	Formerly known as ACNM Certification Council, Inc.; the national certifying body for certified nurse-midwives and certified midwives.
Board of Review (BOR)	Board of Review of the Accreditation Commission for Midwifery Education; the body that reviews education programs in relation to ACME criteria and determines program preaccreditation or accreditation status.
Certificate	A graduate level credential awarded for successful completion of an ACME pre/accredited education program that includes all aspects of the ACNM 'Core Competencies for Basic Midwifery Practice'. An ACME pre/accredited program may award a certificate or a post graduate certificate. A post-graduate certificate may be awarded for those who already possess a graduate degree recognized by the program. Note that in accordance with the ACNM Position Statement 'Mandatory Degree Requirements for Entry into Midwifery Practice', "completion of a graduate degree shall be required for entry into clinical practice."
Certified Midwife (CM)	Individual who has met the requirements and passed the certification exam administered by the American Midwifery Certification Board.
Certified Nurse-Midwife (CNM)	Individual who is a registered nurse and has met the requirements and passed the certification exam administered by the American Midwifery Certification Board (AMCB) (formerly administered by the American College of Nurse-Midwives).

Clinical Faculty	Midwives and others who provide direct care and precept or conduct clinical teaching of students at their clinical sites, who are employed by the clinical site, who generally do not hold academic appointments, and who may participate in evaluation of students for whom they have served as preceptors.
Companion Program	A program leading to a different credential than the one currently offered within an academic unit that is designed to augment the midwifery education options for students and mesh with the existing ACME accredited program. Some of the elements may be similar for the existing and companion programs, such as institutional administration, academic facilities, and the like. Students may share a number of the same classes. However, the companion program leading to its separate credential will have its own objectives, completion requirements and its own curricular path. Faculty, clinical sites, library resources, evaluation and other aspects of the companion program may be added or changed as needed from the existing ACME accredited program.
Core Faculty	Midwives and others who are employed directly by the institution offering the program, hold academic appointments in the institution, who participate in didactic instruction, and/or whose position descriptions include the responsibility to regularly develop, implement, evaluate, and revise the program's curriculum.

Correspondence Education	As defined by the US Department of Education, "Correspondence education means: (1) Education provided through one or more courses by an institution under which the institution provides instructional materials, by mail or electronic transmission, including examinations on the materials, to students who are separated from the instructor. (2) Interaction between the instructor and the student is limited, is not regular and substantive, and is primarily initiated by the student. (3) Correspondence courses are typically self- paced. (4) Correspondence education is not distance education."
Distance Education	As defined by the Higher Education Opportunity Act (HEOA) of 2008, "Distance education means education that uses one or more of the technologies listed in paragraphs (1) through (4) to deliver instruction to students who are separated

Distance Education (con't.)	from the instructor and to support regular and substantive interaction between the students and the instructor, either synchronously or asynchronously. The technologies include: (1) The internet (2) One-way and two-way transmissions through open broadcast, closed circuit, cable, microwave, broadband lines, fiber optics, satellite, or wireless communication devices (3) Audio conferencing; or (4) Video cassettes, DVDs, and CD-ROMs, if the cassettes, DVDs, or CD-ROMs are used in a course in conjunction with any of the technologies listed in paragraphs (1) through (3)."
Institution	An academic degree-granting organization that 1) offers a midwifery education program, 2) holds legal authority from the appropriate government agency to operate a higher education institution, and 3) is accredited by an institutional accrediting agency recognized by the US Department of Education or meets the ACME policy for international accreditation.
Institutional Accrediting Agency	As defined by the US Department of Education, "an agency that accredits institutions of higher education."

Management	Includes but not limited to planning, organizing, leading, motivating, controlling, and or coordinating program resources and operations, management of staff, and implementing the goals and objectives.
Midwifery Core Curriculum	Those courses that contain content that fulfill the ACNM Core Competencies for Basic Midwifery Practice.
Midwifery Education Program or Midwifery Program	The administrative/academic unit that offers the education content and oversees completion of the midwifery core curriculum in conjunction with the other requirements set by the institution and/or required by ACME for earning a certificate or a degree.
Midwifery Program Director	One person who is a CNM or CM with faculty status, clearly identified by title and position to direct the midwifery education program.
Midwifery Program Faculty	All certified midwives and faculty of other disciplines who teach and evaluate midwifery students. This includes faculty members with primarily or exclusively clinical teaching responsibilities.
Pathway	A pathway for midwifery education represents nurse-midwifery or midwifery and is not specific to any one academic degree or qualification. All graduates of either pathway meet the ACNM Core Competencies for Basic Midwifery Practice and meet the education requirements to take the American Midwifery Certification Board examination.

Preaccreditation	As defined by the US Department of Education, "the status of public recognition that an accrediting agency grants to an educational institution or program for a limited period of time that signifies the agency has determined that the institution or program is progressing towards accreditation and is likely to attain accreditation before the expiration of that limited period of time."
Preaccreditation Report (PAR)	Report submitted for programmatic preaccreditation by institutions wishing to start an education program that addresses the *Criteria for Programmatic Preaccreditation of Midwifery Education Programs with Instructions for Elaboration and Documentation.*
Probation	Status applied by the BOR to a program that fails to meet expectations when officially warned or that fails to follow ACME criteria.
Program	As defined by the US Department of Education, "a postsecondary educational program offered by an institution of higher education that leads to an academic or professional degree, certificate, or other recognized educational credential."

Self-Evaluation Report (SER)	Report prepared by faculty of the education program seeking initial or continuing accreditation that addresses the *Criteria for Programmatic Accreditation of Midwifery Education Programs with Instructions for Elaboration and Documentation.*

SER Questions & ACME Contact Information

Should you have any questions, send an email to **support@theacme.org**.

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Acknowledgement

The ACME 2025 criteria revisions represent a joint effort by representatives throughout the midwifery community. The ACME Board of Commissioners thanks all who contributed their knowledge, experiences, time, and efforts to help revised the ACME criteria.