Recommendation Page

1. **Agency:** Accreditation Commission for Midwifery Education
2. **Action Item:** Renewal Petition
3. **Current Scope of Recognition:** The accreditation and pre-accreditation of basic certificate, basic graduate nurse-midwifery, direct entry midwifery, and pre-certification nurse-midwifery education programs, including those programs that offer distance education.
4. **Requested Scope of Recognition:** Same as above.
5. **Date of Advisory Committee Meeting:** February 07, 2018
6. **Staff Recommendation:** Continue the agency’s current recognition and require the agency to come into compliance within 12 months, and submit a compliance report 30 days after the 12 month period that demonstrates the agency’s compliance with the issues identified below.
7. **Issues or Problems:** It does not appear that the agency meets the following sections of the Secretary’s Criteria for Recognition. These issues are summarized below and discussed in detail under the Summary of Findings section. -- The staff has determined that, in order for the agency to meet this criterion, the agency must provide documentation and implementation of a standard defining terms of good cause and systematic procedures for monitoring a program’s progress towards compliance. [§602.20(b)]

Executive Summary

**Part I: General Information About The Agency**

ACME serves as an autonomous body within the American College of Nurse Midwives (ACNM) with respect to the development, review, evaluation, and administration of all policies and procedures related to the accreditation of programs offering midwifery education. The ACNM is the professional association for certified nurse midwives in the United States and its territories. ACME conducts ACNM’s accrediting activities and currently accredits 39 programs located in 25 states, the District of Columbia, and Puerto Rico.

Accreditation by ACME provides eligibility for participation in various funding programs offered by the the U.S. Department of Health and Human Services, including its Advanced Education Nursing Traineeship Program and its National Health Service Corps Scholarship Program.

**Recognition History**

The agency, through its predecessor, ACNM’s Division of Accreditation (DOA), was first recognized by the U.S. Secretary of Education in 1982 and has received periodic renewal of recognition since that time. The agency was last reviewed for continued recognition at the Spring 2012 Advisory Committee meeting. At that time the agency’s recognition was continued, and it was requested to come into compliance with certain issues within 12 months and to submit a compliance report related to those issues. The NACIQI reviewed and accepted the compliance report at its June 2014 meeting and recognition was continued for a period of three years.

As part of its evaluation of the agency’s current petition for continued recognition, Department staff reviewed the agency’s narrative and supporting documentation. In addition, Department staff attended an agency decision-making meeting conducted via conference call, with corresponding documentation made available, on March 29, 2017.
The Department has not received written complaints regarding ACME during this review period. Also, there were no third-party comments regarding the agency's petition for continued recognition.

**Part II: Summary Of Findings**

**602.15(a)(1) Staffing/Financial Resources**

The agency must have the administrative and fiscal capability to carry out its accreditation activities in light of its requested scope of recognition. The agency meets this requirement if the agency demonstrates that--

(a) The agency has--

(1) Adequate administrative staff and financial resources to carry out its accrediting responsibilities;

The agency has qualified administrative staff with documented credentials to fulfill the agency's responsibility for its 39 programs. Administrative staff consists of a full-time Executive Director who manages the administrative, research, and technological operations to meet the mission of the agency. Staff also consists of a part-time Administrative Assistant. As described in the narrative, staff meet regularly with the Chair of the Board of Commission (BOC) and consistently receive training and support from members of the BOC and Board of Reviewers (BOR) who are credentialed professionals in the field. Although the Executive Director and was hired in 2013, the agency has provided training opportunities with the BOC and Association of Specialized and Professional Accreditors, (ASPA). The Executive Director's credentials and previous work experience have been reviewed and are appropriate for the agency's accrediting responsibilities.

ACME had provided current financial documents and a three-year strategic plan to demonstrative adequate financial resources. The agency confirms improvement in financial responsibilities and an increase in financial support with unrestricted grants from the American College of Nurse Midwives (ACNM) (Ex. 16) and the American Midwifery Certification Board (AMCB) (Ex. 18). Although ACME is a programmatic accrediting agency and is not required to meet the separate and independent regulation as required by 34 CFR §602.14, the agency notes, in addition to accreditation fees, additional financial resources and revenue are generated from paid educational workshops and consultative services. ACME has created a three year strategic plan (Ex 19) to address five goals to continue to improve its fiscal responsibilities and to meet the mission of the agency.

As discussed, ACME receives a significant amount of financial and human resources from ACNM to support its accreditation activities and provided evidence (audited fiscal reports and budget statements from 2014-2016) to demonstrate support from the ACNM and the AMCB. ACME also provided an MOU between it and the ACNM, however no documentation was provided that would support the educational workshops and consultation fees or the AMCB’s continued financial support to ACME. In addition, the ACME has not provided current financial documentation for 2017 to demonstrate its current level of financial support from the ACNM and AMCB.

In order to meet this requirement, ACME needs to provide information about the workshops and consultant and provide a current budget with the line item which discusses the financial resources and responsibilities for these activities and additional information and documentation that would demonstrate the AMCB’s commitment to provide continued financial support to the ACME.

**Analyst Remarks to Response:**

In response to the draft Staff Report, the agency's exhibits now include the ACME 2017 Budget, funding requests for 2017, and an MOU with ACNM to verify consistent funding streams for the agency. The agency's exhibits also include a letter of response from AMCB with regrets that they will not financially support ACME and this was also verified in the 2017 budget spreadsheet.

**602.16(a)(1)(i) Student Achievement**

(a) The agency must demonstrate that it has standards for accreditation, and preaccreditation, if offered, that are sufficiently rigorous to ensure that the agency is a reliable authority regarding the quality of the education or training provided by the institutions or programs it accredits. The agency meets this requirement if -

(1) The agency's accreditation standards effectively address the quality of the institution or program in the following areas:

   (i) Success with respect to student achievement in relation to the institution's mission, which may include different standards for different institutions or programs, as established by the institution, including, as appropriate, consideration of course completion, State licensing examination, and job placement rates.
The agency has provided documentation which describes criteria for program assessment, evaluation, and student achievement requirements for ACME pre- and accreditation (Ex. 41 and Ex. 42) based on the policies and procedures manual (Ex. 22). The Criteria notes what Self-Evaluation Reports should include with detailed instructions for what documentation is needed to demonstrate compliance. The Criteria IV documents provide clarity on assessing curriculum standards and clinical experiences (p. 29), student and graduate competencies (p. 30).

Criteria VI describes program and student assessment and outcomes measures. Along with the Policies and Procedures Manual (Ex. 200), the Criteria document (Ex. 41 and Ex. 42) requires programs to submit assessment reports, students' and graduates' evaluations of the program, and actions taken as a result of the assessment. Documents the required benchmark of an 85% pass rate on the American Midwifery Certification Board exam.

In addition, the agency conducts an annual workshop, "Maximizing Educational Quality," as guidance and standards for programs to understanding ACME pre/accreditation criteria and self-evaluation reporting processes. The agency also provided sample documentation on site visit expectations (Ex 122) and assessment guidelines for clinical experiences (ACME Guidelines for Interprofessional Clinical Supervision of Midwifery Students, Ex. 199).

However, the agency must provide sufficient documentation of ACME programs goals and objectives, the agency's quantitative and qualitative methodologies used to review outcomes and benchmarks required for institutions to be approved for and in compliance with pre/accreditation standards.

Analyst Remarks to Response:

In response to the draft Staff Report, the agency's exhibits now include documentation of standards for quantitative and qualitative methodologies used as benchmarks for student achievement. These standards include student success as 85% pass rate for first time test takers of the American Midwifery Certification Board exam.

In addition, staff has observed agency site evaluators enforcing this standard during an interview and review of student records during a site visit.

602.16(a)(1)(ix) Program Length

(a)(1)(ix) Record of student complaints received by, or available to, the agency.

The agency standards require program faculty and administrators to document any grievances initiated by students and the outcome of those grievances. The standard also requires site visitors to receive third-party comments prior to a site visit if submitted as documented in Ex 41: ACME Criteria for Programmatic Accreditation, Criterion I, Organization and Administration. During site visit reviews, students and faculty are asked whether they have been informed about the grievance procedure available to them, whether they have used the process, and whether they were satisfied with the outcome.

The agency provides sufficient documentation regarding the governing body's policy and procedures regarding student complaints and discusses the requirements for programs to provide documented complaints to site visit reviewers and during reviews and annual monitoring reports. Although the agency notes no formal complaints received in the narrative, there's no documentation about agency standards for formal student complaints including investigation, resolutions, and record keeping.

Analyst Remarks to Response:

In response to the draft Staff Report, the agency's exhibits now includes the Case Western Reserve self-evaluation report to demonstrate a full cycle of review of the agency standard for enforcing student complaints. In addition, staff has observed the agency's enforcement of the standard during a site evaluation.

602.20(b) Enforcement Action

(b) If the institution or program does not bring itself into compliance within the specified period, the agency must take immediate adverse action unless the agency, for good cause, extends the period for achieving compliance.

As noted in the narrative, the agency has had to take immediate adverse action against a program however no program to date has
received or requested an extension.

However, the agency has a published policy that it may extend the period for achieving compliance for reasonable cause. Ex 22 ACME Policy and Procedure Manual (PPM) notes that a program that has not come into compliance within the designated time period may 1) withdraw accreditation or 2) grant an extension if reasonable cause is provided (p.54). The agency grants extensions on a one-time basis and for no more than six months to protect the integrity of the program and for the protection of services and academic quality for currently enrolled students.

As discussed in the staff determination, the agency must provide documentation of plans or the standard that addresses the continuous monitoring to ensure that a program is making sufficient progress towards compliance.

**Analyst Remarks to Response:**

In response to the draft Staff Report, the agency does not currently have or implement standards for defining actions for good cause or for monitoring programs found in noncompliance. Although the agency has cited that the BOR sets a reasonable timetable and the required reports as evidence of compliance there is no standard or documentation in the policy manual that discusses the reasonable examples of “good cause” or the specific monitoring actions the agency will implement to ensure a program is making progress towards compliance.

The staff has determined that the agency must provide documentation and implementation of a standard defining terms of good cause and systematic procedures for monitoring a program’s progress towards compliance.

**Part III: Third Party Comments**

The Department did not receive any written third-party comments regarding this agency.