

The Nizhoni Institute of Midwifery 2011 Student Catalog and Student Handbook

Welcome to the Nizhoni Institute of Midwifery! We are excited to facilitate your entrance into a profession committed to providing the highest quality of care to mothers and newborns through the Midwives' Model of Care. This Student Handbook and Course Catalog provides information about the Diploma in Holistic Midwifery Studies program for students who intend to enroll in 2011, with completion planned for 2012.

Our Mission Statement

Nizhoni is a Navajo word which conveys the spirit and practice of "the beauty way" as experienced and expressed through living in balance and harmony with the world. As midwives and students we seek that balance as we honor both our valued birth traditions and contemporary midwifery and medical knowledge. Graduates of the Nizhoni Institute of Midwifery are prepared to function as primary care providers for women throughout the childbearing cycle. As midwives, we bring harmony and balance to the work of labor and assist each woman to discover the transformative nature and experience of giving birth. As an institution providing midwifery education, we create and foster a strong commitment to excellence in midwifery practice in any given place or circumstance, honoring the practice of *nizhoni*.

The Midwives Model of Care

The Midwives' Model of Care asserts that pregnancy and birth are normal life events. It includes

- Monitoring the physical, psychological and social well-being of the mother throughout the childbearing cycle

- Providing the mother with individualized education, counseling and prenatal care
- continuous hands-on assistance during labor and birth, and postpartum support

- Minimizing technological interventions; and

- Identifying and referring women who require obstetrical attention

The application of this model has been proven to reduce the incidence of birth injury, trauma and cesarean section.

Midwifery Education Options in the United States

In the United States there are multiple routes of entry into the profession of midwifery.

Certified Nurse-Midwife or Certified Midwife

A student who is a registered nurse may enter a program approved by the American Midwifery Certification Board (AMCB) of the American College of Nurse-Midwives to become a certified nurse-midwife or CNM. These programs are university-affiliated and

require a baccalaureate degree as a prerequisite to application. A few programs allow non-nurses with a baccalaureate in another field to enter a three-year Master of Science program. During this time they study basic nursing, obtain a nursing degree and then complete a Master of Science in Nursing or a Master of Science in Midwifery. They are then allowed to take the examination for certification as a nurse-midwife. The majority of CNMs in the United States practice in hospitals or birthing centers, although about 3% attend homebirths. A few AMCB-approved programs in the United States offer a direct-entry, Certified Midwife credential to non-nurses. At present only three states in the U.S. recognize the CMC credential.

Physician Assistant-Midwife

Another route to midwifery involves becoming a Certified Physician Assistant (PA-C). Physician Assistants must have a supervising physician and are allowed to practice to the full extent of their training, although in most states they have less practice autonomy in comparison to advanced practice nurses. PA programs are university-based but prerequisites, length of training and the degree earned varies. Physician Assistants may be required to take additional training in order to be able to attend birth.

Naturopathic Doctor-Licensed Midwife

Students who complete an accredited course of study in naturopathic medicine may choose to fulfill requirements for licensure as a naturopathic physician-midwife as well. The naturopathic medical school must be *residential* and *accredited specifically by the Council on Naturopathic Medical Education*, the only accrediting body for naturopathic medical schools recognized by the U.S. Department of Education. At this time, fifteen states, the District of Columbia, Puerto Rico and the U.S. Virgin Islands allow licensure of naturopathic physicians. Four Canadian provinces also have laws pertaining to the practice of naturopathic medicine.

Direct-Entry Midwife

Apprenticeship is a time-honored method of midwifery training but does have two significant weaknesses. First, many midwives do not actually teach needed didactic information to their apprentices. Second, apprentices tend to inherit and perpetuate a preceptor's areas of knowledge deficit and may not have sufficient knowledge or experience to recognize their problem area.

Licensed Midwife

In some states, such as California, Florida and Washington, direct-entry midwives are licensed by the state with strict requirements for state-approved formal education or approved equivalency options. (These three states presently enjoy a level of reciprocity of licensure.) In several other states, direct-entry midwifery is licensed or otherwise regulated but educational requirements involve alternate routes and/or the demonstration of didactic and clinical competency. And in other states midwifery practice is either legal but unregulated or illegal. In these situations, midwifery training is typically obtained by a combination of preceptorship and independent or group study. The Nizhoni Institute of Midwifery combines the best of didactic education with preceptorship and is designed to meet the most stringent requirements for state midwifery licensure.

Section One The Course o Stud

izhon Institute of Midwifery prepares midwives to provide excellent midwifery care to healthy pregnant women and their newborns, including the ready identification of complications requiring consultation or referral

The Nizhoni midwifery education program provides a means for students to obtain formal midwifery education while preserving the advantages of the midwifery preceptorship model. By combining independent and group study, online discussion and classroom training with supervised clinical experience, midwifery students develop the necessary knowledge and skills essential for safe, entry-level midwifery practice. The format allows the student to integrate midwifery theory with practice and develop the analytical skills and critical thinking pathways that provide the foundation for clinical problem-solving

The program meets course objectives through guided study, discussion, practice of clinical skills, and the use of multi-media materials and computer-based education. Learning activities are evidence-based and oriented toward the synthesis of didactic information with midwifery practice

The didactic portion of the program is three years in length and consists of 888 hours of didactic study. Students may be allowed up to six years to complete the program in order to complete all required clinical competencies or to remediate deficiencies. *Students who do not complete the program within six years of the original date of enrollment will be automatically dismissed from the program. If they desire readmission it will be necessary to reapply and retake the entire program; these students are not eligible for advanced placement*

Clinical experience occurs with one or more approved preceptors; students are encouraged to obtain clinical experience with two preceptors whenever possible. Preceptorship usually begins after approximately eight months in the didactic program and may take place in the student's community or at an approved clinical site. Clinical experience is comprised of 2,000 hours of supervised practice with credentialed midwife mentors until all clinical competencies have been satisfactorily completed in accordance with the requirements of Nizhoni Institute of Midwifery and the North American Registry of Midwives. All classroom and clinical requirements must be completed in order to graduate from the Nizhoni Institute of Midwifery

Students obtain certification as professional midwives through the North American Registry of Midwives as a condition of graduation. The CPM is a widely recognized credential and is increasingly viewed as the entry-level professional standard for midwives providing care in out-of-hospital settings

Nizhoni Institute of Midwifery is approved by the California Bureau for Private Postsecondary Education and the Medical Board of California and has been awarded full accreditation status from the Midwifery Education Accreditation Council, a United States

Department of Education recognized accrediting agency. For further information, contact MEAC at 360-466-2080 or PO Box 984, La Conner, WA 98257 or continue to this link: <http://www.meacschools.org/>

n-Profi Stat

The Nizhon Institute of Midwifery is a non-profit educational organization legally registered in Idaho and California. Nizhon is approved by the Internal Revenue Service as a 501(c)(3) public charity. Donations are tax deductible.

Program Objectives of the Nizhon Institute of Midwifery

The Nizhon Institute of Midwifery exists to provide a professional education for midwives who will promote maternal, infant and family health for the communities they serve. In addition to specialist midwifery knowledge and skills, midwives share common knowledge with nurses, obstetricians, perinatologists, behavioral health specialists and practitioners of complementary medicine. Midwives are expected to exemplify personal and professional accountability and promote and protect informed consent and evidence-based midwifery care.

Graduates of the Nizhoni Institute of Midwifery are prepared to:

1. Practice as professional midwives, meeting nationally accepted standards of midwifery practice, to promote the health and well-being of childbearing families and of women throughout their life cycle.
2. Provide safe, competent midwifery care to childbearing women and their newborns through appropriate utilization of the midwifery model of practice in primary care collaboration, and timely and appropriate consultation and referral.
3. Analyze, synthesize, and apply concepts from midwifery, nursing, obstetrics and complementary medicine within the framework of the midwifery model of care in order to improve maternal, perinatal and community health outcomes. Midwives should be able to evaluate the adequacy of underlying knowledge from midwifery science, related fields and professional foundations as it informs advanced midwifery practice.

Midwives are prepared for the scope of practice outlined by the Midwives' Alliance of North America (MANA) Core Competencies, the North American Registry of Midwives (NARM) certification requirements for Certified Professional Midwives, and the joint mission statement of the Midwives Alliance of North America and the American College of Nurse-Midwives.

"The entry level midwife is a primary health care professional who independently provides care during pregnancy, birth, and the postpartum period for women and newborns within their

communities. Services provided by the midwife include education and health promotion. With additional education and experience, the midwife may provide well-woman gynecological care, including family planning services. When the care required extends beyond the midwife's abilities, the midwife has a mechanism for consultation, referral and continued involvement."

The Course of Instruction

Each module in the midwifery program is completed in one month. The knowledge gained in each module provides the foundation for the next module's learning activities. There are thirty-seven required modules and an Integration Phase.

1. Foundations of Midwifery (24 didactic hrs)

The Midwives' Model of Care

Midwifery Practice and Professionalism

Contemporary Midwifery History and Politics

Informed Consent

An introduction to the Midwives' Model of Care, setting the context for professional midwifery practice. Students consider the sociopolitical ramifications of contemporary midwifery while examining global, national and local professional issues. Students explore the contributions of modern midwives to current midwifery practice.



- 2. Introduction to Medical Terminology** (24 didactic hrs)
Medical Terminology and Abbreviations
Learn basic medical and midwifery terminology as a valuable means of creating commonality, mutual understanding and professionalism between health care providers.
- 3. Practice Documentation** (24 didactic hrs)
Developing a Documentation System
Standardized Procedures and Practice Guidelines
An introduction to legal and ethical guidelines for documentation of midwifery care. Students apply medical terminology to midwifery practice with simulated charting exercises. Informed consent is introduced as the context of care for the midwife-patient relationship.
- 4. Communication Skills** (24 didactic hrs)
Midwifery in Multicultural Settings
Communication and Counseling Skills
Learning Styles and Social Styles
Communication, education and counseling skills for midwifery practice with attention to learning styles, social styles, cultural competency and communication skills as applied to midwifery settings.
- 5. Introduction to Midwifery Skills** (24 didactic hrs)
Hygiene, Clean and Aseptic Technique
Universal Precautions and OSHA Standards
Introduction to Clinical Skills
Universal precautions, aseptic technique and basic midwifery skills with application to practice in clinical settings.
- 6. Foundations of Reproductive Science** (24 didactic hrs)
Reproductive Anatomy and Physiology
Ethical Considerations in Reproductive Health
An overview of reproductive anatomy and physiology with application to well-woman gynecologic care.
- 7. From Conception to Birth** (24 didactic hrs)
Introduction to Genetics
Embryology, Fetal Development and Teratogens
An introduction to genetics, fetal development and teratogenic complications of pregnancy with applications for pre-conceptual counseling and midwifery practice as well as referral to perinatal providers.
- 8. Introduction to Microbiology for Midwives** (18 didactic hrs, 6 hrs practicum)
Introduction to Microbiology and Laboratory Skills
An introduction to basic microbiology and laboratory skills with application to midwifery and well-woman healthcare.

- 9. Complete Health Assessment** (18 didactic hrs, 6 hrs practicum)
Taking a Midwifery/Medical History
The Complete Physical Examination
Learn to take a detailed midwifery and medical history, evaluate histories from other health care providers and perform a physical exam in a clinical setting.
- 10. Well-Woman Care** (18 didactic hrs, 6 hrs practicum)
Well-Woman Gynecologic Exam
Reproductive Tract Infections/Sexually Transmitted Infections
Pap Testing and Vaginal Cultures
Clinical Skills Practicum
Students learn to perform a well-woman gynecologic exam, including Pap tests. Clinical and laboratory evaluation and treatment of sexually transmitted infections. Guidelines for referral of communicable diseases.
- 11. Nutrition in Pregnancy** (24 didactic hrs)
Methods of Nutritional Assessment
Improving Perinatal Outcomes through Nutritional Applications
Nutritional Supplementation
The impact of nutrition on pregnancy, including prevention of complications such as preterm labor, anemia, pre-eclampsia and abruptio placenta. Emphasis is placed on research regarding the direct impact of nutrition on perinatal outcomes and long-term health.
- 12. Diagnostic Testing in the Childbearing Year I** (24 didactic hrs)
Identifying and Preventing Perinatal Complications with Diagnostic Testing
Clinical Skills Practicum
A survey of laboratory testing in pregnancy and introduction to the use of these tests to improve pregnancy outcomes.
- 13. Diagnostic Testing in the Childbearing Year II** (18 didactic hrs, 6 hrs practicum)
The uses of obstetrical and perinatal technologies in midwifery care. Students learn to select appropriate diagnostic tools during pregnancy and ways to use them to improve maternal and infant outcomes. Students learn phlebotomy skills.
- 14. Prenatal Care I** (24 didactic hrs)
Facilitating Health during Pregnancy
The Place of Birth and Choices in Childbirth
Risk Assessment
The Midwifery Care Plan
Develop critical thinking skills relative to midwifery care and treatment of common complaints during the normal pregnancy, including risk assessment.
- 15. Prenatal Care II** (18 didactic hrs, 6 hrs practicum)
Providing Prenatal Care
Issues of Abuse: Victims and Survivors Give Birth

Clinical skills involved in the provision of prenatal care. Learn about the unique value of the home visit and explore the psychosocial impact of abuse issues relative to pregnancy, birth and perinatal outcomes.

- 16. Complications of Pregnancy I** (24 didactic hrs)
Recognizing and Treating Complications to 28 Weeks Gestation
- 17. Complications of Pregnancy II** (18 didactic hrs, 6 hrs practicum)
Recognizing and Treating Complications at 28 Weeks Gestation and Beyond
Clinical Skills Practicum
- 18. Assessment of Fetal Well-Being** (18 didactic hrs, 6 hrs practicum)
Midwifery Evaluation of Fetal Well-Being
Technological Approaches to Fetal Assessment
Introduction to Evaluation of Fetal Heart Tones
Learn low- and high-tech approaches to the assessment of fetal well-being and develop appropriate guidelines for referral in the presence of complications.
- 19. Normal Labor and Birth** (24 didactic hrs)
The Physiology of Labor and Birth
Common Variations in Labor and Birth
- 20. Intrapartum Care I** (24 didactic hrs)
Students learn skills to assist in supporting the woman in labor and are introduced to the practices, skills and attributes necessary to assist a primary midwife during labor, birth and the immediate postpartum period. Introduction to primary midwifery care during labor, birth and the immediate postpartum period. Evaluation of fetal heart tone patterns in labor.
- 21. Pharmacology I: American Herbal Pharmacology** (12 hrs didactic, 12 hrs practicum)
Traditional American herbal pharmacology with applications to women's health.
- 22. Pharmacology II: Homeopathy for Midwives** (12 hrs didactic, 12 hrs practicum)
Introduction to Classical Homeopathy
Homeopathy for the Childbearing Year
The history and foundation principles of homeopathic practice. Techniques for acute prescribing in the context of midwifery care of mother and infant are discussed with case studies provided.
- 23. Pharmacology III: Intro. to Traditional Chinese Medicine** (18 hrs didactic, 6 hrs practicum)
An introduction to the basic theory and philosophy of Chinese medicine and acupressure with applications to pregnancy, birth and the postpartum period.
- 24. Pharmacology IV: Intro. to Allopathic Pharmacology** (18 hrs. didactic, 6 hrs practicum)
Allopathic Pharmacopoeia and the Childbearing Year
Clinical Skills Practicum

Allopathic treatment of problems during pregnancy, birth and the postpartum period. Case studies are provided.

- 25. Pharmacology V: Intravenous Therapy for Midwives** (18 hrs didactic, 6 hrs practicum)
Introduction to Chemistry and Fluid and Electrolyte Balance
Use and Administration of IV Fluids
The applications of basic chemistry to fluid and electrolyte balance. Correct selection and use of intravenous fluids during labor, birth and the postpartum periods. Didactic content satisfies the requirements for Intravenous Therapy certification standards for midwifery practice in California and other states.
- 26. Intravenous Skills Practicum** (12 hrs didactic, 12 hrs practicum)
IV Equipment and Technique
Learn and practice techniques for starting an intravenous infusion. This practicum satisfies the requirements for Intravenous Therapy certification standards for midwifery practice in California and other states.
- 27. Intrapartum Care II** (24 didactic hrs)
The treatment of complications of labor and birth, including prolonged and dysfunctional labor, non-reassuring fetal heart rate patterns, problems involving the umbilical cord, meconium staining, and the special needs of clients planning a vaginal birth after cesarean section.
- 28. Intrapartum Care III** (18 hrs didactic, 6 hrs practicum)
Comprehensive overview of the treatment of complications of labor and birth, including breech births, shoulder dystocia, hemorrhage, treating shock, recognition of placental abnormalities, and hospital transfer. Simulations assist in integrating theory with practice.
- 29. The Postpartum Period** (24 hrs didactic)
The Normal Postpartum Course
Recognition and Treatment of Postpartum Complications
Normal and complicated postpartum findings and application of appropriate practice guidelines.
- 30. Perineal Integrity and Repair** (12 hrs didactic, 12 hrs practicum)
Anatomic Review of Pelvic Structures
Performing Episiotomies and Assessing Perineal Lacerations
Principles and Techniques of Perineal Repair
Clinical Skills Practicum
A comprehensive overview of the anatomy of the female pelvis. Recognize degrees of laceration and practice techniques of perineal repair for first and second degree lacerations. The appropriate and timely use of episiotomy is discussed. Review sterile technique, learn selection of appropriate equipment and sutures, administration of local anesthesia, and practice the use of instruments, throws and hand and instrument ties.

- 31. Care of the Normal Newborn** (18 hrs didactic, 6 hrs practicum)
Newborn Assessment, Care and Development
Issues in Newborn Care
Clinical Skills Practicum
Recognize the signs of normal newborn transition and learn effective practices for stabilizing a baby following birth. Learn to perform a complete newborn physical examination. Care of the infant during the postpartum period and genetic screening (pursuant to California Code of Regulations Title 17) are also addressed in this module.
- 32. Complications of the Neonatal Period** (18 hrs didactic, 6 hrs practicum)
Recognition of Newborn Complications
Care of the Newborn with Complications
When Grief Is Part of Birth
Clinical Skills Practicum: Neonatal Resuscitation Program
Recognize neonatal complications and develop guidelines for treatment and referral to hospital-based providers. The American Academy of Pediatrics Neonatal Resuscitation Program (NRP) certification course (sections I-IV) is offered to participants who do not hold current NRP certification.
- 33. Infant Feeding** (24 didactic hrs)
Healthy Mother, Healthy Baby: Maternal Nutrition for Lactation
Initiating and Sustaining the Breastfeeding Relationship
Nourishing the Special Needs Baby
The Politics of Infant Feeding
An introduction to the intricate maternal-infant physiology of breastfeeding. Short- and long-term benefits of breastfeeding for mother and baby are discussed. Students learn techniques to assist the new mother in establishing breastfeeding and how to advise her regarding nursing complications.



- 34. Human Sexuality and Family Planning** (18 hrs didactic, 6 hrs practicum)
Contraceptive Options and Counseling
Natural Family Planning Methods
Human Sexuality
- 35. Midwifery Research** (24 didactic hrs)
Introduction to Statistics for Health Professionals
Reading and Understanding Midwifery and Medical Research
Analysis of Selected Midwifery and Obstetric Studies
Introduction to basic statistical applications for midwifery and medical studies.
Learn to evaluate studies for statistical merit and evidence-based practice.
- 36. Midwifery and the Law** (24 didactic hrs)
Licensure and Certification: Maintaining Your Right to Practice
Covering Your Assets: Protecting and Preserving Your Livelihood
Facilitating Good Practice Outcomes with Disgruntled Clients
The Progress of Midwifery Legislation
Research the laws relative to midwifery practice in the students' intended area of practice. A comprehensive overview of the historical impact of case law on midwifery practice. Students explore the use of legal and legislative systems as mechanisms for improving the climate of birth locally, nationally and globally.
- 37. The Midwifery Practice** (24 didactic hrs)
Establishing Your Midwifery Practice
Billing and Coding
Marketing Midwifery and Multiple Streams of Midwifery Income
Taxes
Introductory midwifery business practices, including practice structure, marketing, insurance coding and billing, and tax requirements.



Integration Phase

The Integration Phase allows a student additional time, if needed, to complete graduation requirements, including supervised externship, during which time the student functions as a primary midwife under supervision. The length of the Integration Phase is a minimum of three months and varies according to the individual needs of the student.

Certificates, Degrees and Accreditation

Upon satisfactory completion of all course requirements, the Nizhoni Institute of Midwifery awards a Diploma in Holistic Midwifery Studies. The Institute promotes the highest standards in midwifery education but does not award degrees. Significant consideration was given to this decision that was made with the support of representatives of the former California Bureau of Private, Postsecondary and Vocational Education and the Idaho State Board of Education. While there are midwifery programs that are approved by the state in which they are registered to grant degrees, state approval to grant degrees is significantly different from accreditation. Accreditation is a voluntary, rigorous process that typically requires several years to complete. Midwifery schools that choose to undergo accreditation do so because of their commitment to excellence in the field.

The number of midwifery schools in the United States is steadily increasing as women gain experience with the midwifery model of care. Some schools are approved by the state in which they reside to grant degrees. Some schools, such as Nizhoni Institute of Midwifery, offer diploma or certificate programs. Some schools are accredited by the Midwifery Education Accreditation Council (MEAC). Other midwifery schools hold neither state approval nor MEAC accreditation, nor do they intend to pursue these routes.

In the United States there are two types of recognized educational accreditation from the United States Department of Education: specialized accreditation and institutional accreditation. Specialized accreditation is awarded to programs within institutions or to professional schools. Institutional accreditation is awarded to colleges and universities. Institutional accreditation is granted by one of six recognized regional accrediting commissions: the New England Association of Schools and Colleges; the Middle States Association of Colleges and Schools; the North Central Association of Colleges and Schools; the Northwest Association of Schools and Colleges; the Southern Association of Colleges and Schools; and the Western Association of Schools and Colleges. These accrediting bodies are recognized by the United States Department of Education (DOE) and the Council for Higher Education Accreditation (CHEA). Major universities in the United States are accredited by one of the six recognized accrediting commissions and attendance at a regionally accredited college or university significantly facilitates the recognition of degrees and credit transfers.

In contrast, attending a program that is only state-approved offers little chance of transfer of credits to a regionally accredited university. For example, if a student receives a baccalaureate degree from a state-approved midwifery school but later decides to pursue a

master's degree in public health at a major university, the baccalaureate credits earned at the midwifery school are unlikely to be accepted by the university. In order to pursue an advanced degree, the graduate of a state-approved school would have to start over to obtain a bachelor's degree from a college or university that is accredited by one of the six recognized regional accrediting commissions.

Students also should be aware that not all accreditation associations are legitimate. Diploma mills often form their own "accrediting commissions" (often with names similar to those above) and then "accredit" their own programs. Some non-traditional schools join together to form accreditation organizations, but their accreditation is meaningless when it comes to a student's ability to pursue an advanced degree at a major college or university or even to apply for licensure in a profession. For example, some schools of naturopathic medicine offer "accredited" programs, but graduates of these programs are not allowed to sit for state licensure as naturopaths because the "accrediting" body is not recognized by the naturopathic licensing boards in states in which naturopathic practice is legal.

Fortunately, midwifery has a respected mechanism for accreditation through the Midwifery Education Accreditation Council (MEAC). MEAC offers specialized accreditation and is the *only* accrediting body recognized by the United States Department of Education for the accreditation of midwifery education schools and programs. Some states require graduation from an approved midwifery program to sit for licensure; these states often specify that the program must be a MEAC-accredited school. Graduating from a MEAC-accredited program facilitates the process of becoming a Certified Professional Midwife (CPM) through the North American Registry of Midwives. The CPM credential has become the "gold standard" for midwives who attend homebirths and birth center births. Typically it is the entry-level standard in states where midwives are licensed or registered.

The transferability of credits you earn at Nizhoni Institute of Midwifery is at the complete discretion of the institution to which you may seek to transfer. Acceptance of the diploma you earn in the Holistic Midwifery Studies program is also at the full discretion of the institution to which you may seek to transfer. For this reason you should make certain that your attendance at Nizhoni Institute will meet your educational and career goals. This may include contacting any institution you wish to attend after graduating from Nizhoni Institute to determine if your credits will transfer.

The Bureau for Private Postsecondary Education

In June 2007, the Bureau for Private Postsecondary Vocational Education (BPPVE) granted temporary approval to operate to Nizhoni Institute of Midwifery. Shortly afterward the authority granted to the BPPVE was rescinded by the governor of the State of California. On January 1, 2010, the BPPVE's successor, the Bureau for Private Postsecondary Education (BPPE), began operations in the state commensurate with changes in the rules and regulations governing private postsecondary education in the State of California. Nizhoni Institute of Midwifery has applied to the BPPE for approval by virtue of its full accreditation status with the Midwifery Education Accreditation Council.

Section Two: Student Policies and Procedures

Admission Requirements and Recommendations

Admission to the Nizhoni Institute of Midwifery is competitive. To be considered for admission, students must submit the following items prior to application deadlines:

- High school graduation or the equivalent.
- Official transcripts from any post-secondary programs attended. The transcripts should be sent directly from the school to Nizhoni Institute of Midwifery.
- Personal interview (by telephone or in person) with a member of the admissions committee.
- A completed application form with required essays.
- Three completed references. One reference should be from a supervisor or instructor familiar with the applicant's recent quality of work or study. Please do not use family members as references.
- Current certification as an American Heart Association approved Basic Life Support (BLS) provider. BLS classes are available through local fire departments, hospitals, the American Red Cross and professional certifying organizations. Costs for BLS training vary but average \$60.00.
Students are required to maintain current BLS certification over the entire course of the midwifery education program.
- Two passport photos.
- Thirty-five dollar (\$35.00) non-refundable application fee.

It is recommended that students complete college-level introductory courses in anatomy and physiology or their equivalent before entering the program or in first year.

Nizhoni Institute of Midwifery represents a stand for strengthening and preserving midwifery as a profession around the world and for the right of women and their babies to enjoy the benefits of safe, physiologic birthing. We recommend that students enter this program with at least beginning competency in a foreign language. (Spanish is highly recommended.) Students without a second language competency are encouraged to develop one during the program.

Because all training in the midwifery program is conducted in the English language and there is no instruction in English as a Second Language (ESL), foreign students are required to submit official TOEFL (Test of English as a Foreign Language) scores for consideration.

Be advised in advance of your application to Nizhoni Institute of Midwifery that state healthcare licensing boards perform criminal background and fingerprint checks of midwifery licensure applicants. An applicant who has been convicted for crimes against persons, drug-related activity, custodial interference, healthcare fraud and crimes relating to financial exploitation, including the misuse of public funds, may be prevented from obtaining a midwifery license in the state(s) in which they desire to practice. If you have questions, contact your state licensing authority for clarification of their policies concerning criminal history prior to making application to this program.

The Nizhoni Institute of Midwifery does not discriminate against students with regard to sex, race, marital status, ethnic origin, creed, age, sexual orientation or physical ability. Students should be aware, however, that certain physical attributes and abilities are generally necessary to the practice of midwifery. These include the ability to:

- Work for long hours, sometimes with minimal breaks, while maintaining mental clarity and physical stamina
- Maintain sufficient fine motor dexterity to allow for administering medication, starting IVs and suturing
- Lift and reposition clients, sometimes without assistance
- Hear soft sounds, such as fetal heart tones and cardiac sounds
- Speak, read and write clearly
- Maintain physical, emotional and mental health

Nizhoni Institute of Midwifery can assist in making reasonable accommodations for students with disabilities. The prospective student must provide a formal statement of diagnosis from a qualified practicing physician (M.D. or D.O.) or nurse practitioner. This statement must include the projected needs of the student with regard to needed accommodations.



Progression through the Program and the Academic Calendar

Midwifery students enter and complete their midwifery program as a group, taking each module in sequence since each new module builds upon previous skills and instruction. This form of study creates a cohesive and logical structure within the program and avoids gaps in learning that may occur when students take courses out of sequence.

Students are expected to complete the didactic portion of their coursework within the three-year period allotted for it. An additional three years may be taken for completion of the course, including the clinical skills application provided by the Integration Phase. A completion contract will be signed by the student and a Co-Executive Director.

Prior Experiential Learning and Advanced Placement

Nizhoni Institute of Midwifery recognizes that certain health care professionals, including but not limited to practicing midwives, foreign educated midwives and licensed health care professionals (e.g., licensed vocational nurses, registered nurses, nurse practitioners, physician assistants, physicians, licensed acupuncturists, chiropractic physicians and others) may be qualified to enter a direct-entry midwifery program as Advanced Placement students. Nizhoni Institute of Midwifery has therefore established an Advanced Placement process.

Students accepted for advanced placement are typically individuals who are licensed health care professionals such as nurses, certified midwives, medical and osteopathic physicians, and foreign-educated physicians and midwives with a specialty in women's health care.

Nizhoni Institute of Midwifery is in the process of creating articulation agreements with other midwifery institutions in order to facilitate transfer of credits for students who are moving into or out of the geographic area served by Nizhoni Institute of Midwifery or who wish to change to a distance education format or who wish to pursue advanced education options.

5. **All Advanced Placement students must apply for admission to Nizhoni Institute of Midwifery, complete the Enrollment Form and submit required fees and documentation, including three professional references.**
 - a. **Licensed health care providers without credentialing in family medicine or a women's health care specialty.**
 1. This category includes registered nurses, licensed vocational nurses, licensed acupuncturists, chiropractic physicians and other licensed health providers specializing in areas other than family medicine or women's health care. This category does *not* include medical assistants.

2. These students may be eligible to waive the first year of the midwifery education program. Student transcripts are evaluated to ensure that the student has completed the equivalent of the first year of the midwifery program. The student's health care license must be a current, legible, unencumbered from one of the United States. These students are required to attend the remaining second- and third-year modules of the midwifery education program.

b. Licensed health care professionals with credentialing in family medicine or a women's health care specialty.

1. This category includes but is not limited to AMCB-certified midwives, adult and women's health care nurse practitioners, medical or osteopathic physicians with a specialty in family practice or OB/GYN, physician assistants with a specialty in family medicine or women's health care, and midwives licensed in states that do not have a reciprocity agreement with the State of California.
2. Provide copies of licenses, certifications, transcripts from educational and training programs, etc. that demonstrate that the applicant has met all requirements for the provision of both general and specialized health care services. Licenses and certificates must be current, legible, unencumbered and verifiable.
3. Successfully complete a preceptorship of at least six months' duration with an approved preceptor who is actively attending out-of-hospital births. The AP student's skills will be formally evaluated and reviewed by the Executive Directors every two months. The student must successfully demonstrate all clinical requirements as delineated by the North American Registry of Midwives, Midwives Alliance of North America, Medical Board of California and Nizhoni Institute of Midwifery, including requirements for attendance at out-of-hospital births, continuities of care and well-woman care..
4. A student who does not successfully complete all requirements for supervised clinical practice within a six-month time period must extend the preceptorship via an Individual Learning Contract with Nizhoni Institute of Midwifery.
5. When all clinical requirements have been satisfactorily completed, the student will apply for the Certified Professional Midwife credential. Upon passing the NARM examination, the student may apply for licensure as a midwife through the Medical Board of California. An AP student who holds a current Certified Professional Midwife credential does not retake the NARM exam but may apply to the Medical Board for the LM license upon completion of all other requirements as above.

- c. **Foreign-educated midwives and physicians with credentialing in family medicine or a women's health care specialty.**
1. Provide evidence of formal recognition as a midwife or physician in the country of preparation with a specialty in family medicine or women's health care. The Commission on Graduates of Foreign Nursing Schools (CGFNS) assists foreign-trained health care professionals with credentialing information. They may be reached at 215-349-8767 or at www.CGFNS.org.
 2. If an applicant's native language is not English, the applicant must submit acceptable scores from either the internet-based version (score of 213 or above) or the paper-and-pencil version (score of 550 or above) of the Test of English as a Foreign Language (TOEFL) exam. An acceptable alternative to a passing TOEFL score is the completion of the online course English 090, Basic Verbal Skills, with a grade of 3.0 or above, from the regionally accredited program Nursingabc.com.
 3. Successfully complete a preceptorship of at least six months' duration with an approved preceptor who is actively attending out-of-hospital births. The AP student's skills will be formally evaluated and reviewed by the Executive Directors every two months. The student must successfully demonstrate all clinical requirements as delineated by the North American Registry of Midwives, Midwives Alliance of North America, Medical Board of California and Nizhoni Institute of Midwifery, including requirements for attendance at out-of-hospital births, continuities of care and well-woman care.
 4. A student who does not successfully complete all requirements for supervised clinical practice within a six-month time period must extend the preceptorship via an Individual Learning Contract with Nizhoni Institute of Midwifery.
 5. When all clinical requirements have been satisfactorily completed, the student will apply for the Certified Professional Midwife credential. Upon passing the NARM examination, the student may apply for licensure as a midwife through the Medical Board of California. An AP foreign-educated midwife who holds a current Certified Professional Midwife credential does not retake the NARM exam but may apply to the Medical Board for the LM license upon completion of all other requirements as above.
- c. **Foreign-educated health professionals without credentialing in family medicine or a women's health care specialty.**
1. Provide evidence of formal recognition as a health care provider in the country of preparation. The Commission on Graduates of Foreign Nursing Schools (CGFNS) assists foreign-trained health care

professionals with credentialing information. They may be reached at 215-349-8767 or at www.CGFNS.org.

2. If an applicant's native language is not English, the applicant must submit acceptable scores from either the internet-based version (score of 213 or above) or the paper-and-pencil version (score of 550 or above) of the Test of English as a Foreign Language (TOEFL) exam. An acceptable alternative to a passing TOEFL score is the completion of the online course English 090, Basic Verbal Skills, with a grade of 3.0 or above, from the regionally accredited program Nursingabc.com.
3. These students may be eligible to waive the first year of the midwifery education program. Student transcripts are evaluated to ensure that the student has completed the equivalent of the first year of the midwifery program. The student's health care license must be a current, legible, unencumbered from one of the United States. These students are required to attend the remaining second- and third-year modules of the midwifery education program.

d. Experienced Midwives who do not hold a current credential as a Certified Professional Midwife.

1. Complete a Portfolio Assessment to include a practice portfolio, three professional references with current contact information, and 20 midwifery charts for review by the members of the Admissions Committee. Additional charts may be required for review by the Admissions Committee.
2. Successfully complete a preceptorship of at least six months' duration with an approved preceptor who is actively attending out-of-hospital births. The AP student's skills will be formally evaluated and reviewed by the Executive Directors every two months. The student must successfully demonstrate all clinical requirements as delineated by the North American Registry of Midwives, Midwives Alliance of North America, Medical Board of California and Nizhoni Institute of Midwifery, including requirements for attendance at out-of-hospital births, continuities of care and well-woman care.
3. A student who does not successfully complete all requirements for supervised clinical practice within a six-month time period must extend the preceptorship via an Individual Learning Contract with Nizhoni Institute of Midwifery.
4. When all clinical requirements have been satisfactorily completed, the student will apply for the Certified Professional Midwife credential. Upon passing the NARM examination, the student may apply for licensure as a midwife through the Medical Board of California.

Transferring Credit from Other Institutions

Nizhoni Institute of Midwifery accepts for transfer from U.S. students completed courses from institutions recognized by the United States Department of Education and/or the Council for Higher Education Accreditation, including but not limited to the Midwifery Education Accreditation Council, National League for Nursing Accrediting Commission, Commission on Collegiate Nursing Education, the Division of Accreditation of the American Midwifery Certification Board, and the Accreditation Review Commission on Education for the Physician Assistant. To be accepted for transfer, a course must have been completed within five years and carry a grade of “B” (a 3.0 on the standard grading scale) or higher. Courses must be accompanied by a detailed course description to determine equivalency with courses at Nizhoni Institute of Midwifery.

Clinical Training Opportunities

Nizhoni students complete clinical preceptorships with an approved preceptor as part of their midwifery education. Students without previous midwifery experience usually complete the first twelve modules before beginning their clinical experience. Students interview with prospective preceptors and arrange their own preceptorships. Preceptorship may take place in the student’s community or at an approved clinical site. Preceptorship is generally comprised of 2,000 hours or more of supervised clinical practice and must be at least twelve months in length. It is strongly recommended that students work with at least two preceptors during their training in order to give the student the opportunity to experience multiple practice styles and to minimize knowledge deficits. *At least one of the student’s preceptorship experiences must be with a midwife.* The student will remain in preceptorship until all clinical competencies have been satisfactorily completed in accordance with the requirements of the Nizhoni Institute of Midwifery, the Midwifery Education Council and the North American Registry of Midwives.

Qualified preceptors are those who meet the requirements of the North American Registry of Midwives, the Midwifery Education Accreditation Council and the Nizhoni Institute of Midwifery. Midwifery preceptors must be:

- A nationally certified midwife (CPM, CNM or CM); or
- Legally recognized in a jurisdiction, province or state as a practitioner who specializes in maternity care; or
- A midwife practicing as a primary attendant without supervision for a minimum of three (3) years and fifty (50) out-of-hospital births.

All direct-entry midwifery preceptors must be appropriately credentialed for the state in which they practice (i.e., CPM, LM, RM, LDEM, etc.). Students may also work with certified nurse-midwives and certified midwives (certified by the American Midwifery Certification Board) as well as with licensed naturopathic physicians with training specific to midwifery (ND-LMs). Selected medical or osteopathic physicians with current training and practice in obstetrics may also be approved as preceptors.

All prospective preceptors must be approved by the Nizhoni Institute of Midwifery through verification of the provider’s credentials. Prospective preceptors are also

asked to participate in the NARM Preceptor Database program. NARM may request information from preceptors, including charts, practice guidelines, informed consent documents, handouts and emergency care plans in order to verify a student's clinical experience.

For the protection of the client, the midwifery student and the supervising midwife, all preceptors must agree to provide Nizhoni students with physical on-the-premises supervision as they provide clinical care for midwifery clients. Violation of this rule is cause for termination of the preceptorship agreement.

Preceptors should have a sufficient number of clients so that students are able to complete their clinical experience requirements. Inasmuch as students are required to perform well-woman care skills, it is helpful to work with a preceptor who provides full-service midwifery care, including well-woman care. Nizhoni Institute of Midwifery will assist the student in locating an appropriate preceptor but, due to the nature of midwifery practice, it is not possible for the program to guarantee to each student that their clinical experiences will be completed within a three-year time period. Students do have the option to obtain clinical experience in birth centers and other facilities; however, practitioners at these facilities must also meet the standards set by Nizhoni, MEAC and NARM.

Some preceptors charge the midwifery student for the preceptorship. However, many do not, feeling that the work provided by the student is fair exchange for clinical instruction provided by the preceptor. *The Nizhoni Institute of Midwifery does not pay for a student's preceptorship experience.* Students are strongly advised to carefully consider the terms of *any* prospective preceptorship and to structure such an arrangement as a written contract with clear terms agreeable to all parties. Students must be willing to meet the clinical

requirements set by the North American Registry of Midwives.



Attendance, Absence and Tardiness

- I. Students meet together in class with an instructor once each week for an entire day. In addition to classroom lectures, students attend clinical days with approved preceptors.
2. Nizhoni Institute does not have a universal course attendance policy for didactic classes (modules). *However, faculty members may separately establish attendance requirements for individual modules.* Students are responsible for the information and material missed during an absence and must make arrangements to complete any missed examinations or fulfill other assignments in a timely manner as required by the instructor. (See Section 5.) Some state licensing boards may specify attendance requirements for students. In these instances, the student intending to apply for licensure in such a state is responsible for notifying both the faculty member and the Co-Executive Directors of the need to document the student's attendance.
3. An absence is considered excused under the following circumstances:
 - a. Illness of the student midwife (documentation of illness may be required).
 - b. Illness of the student midwife's immediate family member when the student has care-giving responsibility (documentation of illness may be required).
 - c. Legitimate personal emergency, including death in the immediate family.
 - d. Doula birth or documented birth with an approved preceptor. Attendance at births is documented via the student's Birth Attendance Log and must be countersigned by the student's preceptor(s) or hospital staff member (RN, CNM, MD). Documentation must include the time of birth and the date and time the student arrives and leaves the site of the birth.
 - e. Professional conference or workshop. Students desiring to attend a professional conference or workshop must receive advance permission from the instructor(s) if the class has a specified attendance requirement or assignment or examination planned during the time of the conference.
 - f. Religious holidays for which advance notice is given to the instructor. If an examination falls on a religious holiday, the student must make arrangements with the faculty to complete the missed examination in a timely manner as required by the instructor.
 - g. Attendance at a midwifery clinical intensive in a geographic area greater than 100 miles from class. The Executive Directors and the instructor(s) must approve a student's attendance at a midwifery clinical intensive at least one month in advance of the event. Attendance at the clinical intensive must be documented and countersigned by the student's on-site preceptors. Documentation will include the date and time of the student's arrival and departure from the clinical intensive.
4. In situations involving illness, personal emergency or attendance at a birth, the student is required to notify the faculty member by leaving a message via voicemail

or email informing the faculty member of the situation prior to the start of class. Faculty may require documentation of the absence upon the student's return.

5. *Regardless of the reason for an absence, all class modules are to be completed and submitted according to the dates specified by the faculty member.* If the student requires an extension for completion of coursework, the request for an extension must be submitted in writing to the faculty member and a separate Executive Director. An Individual Learning Contract will be established with the student and maintained in the student's file, along with the date of satisfactory completion.
6. If a student misses more than the stated requirements for a class, this may adversely impact the student's grade in the class. In such cases, the student will be required to set up an Individual Learning Contract which may include repeating missed coursework with an available cohort prior to graduation.
7. Tardiness is defined as arriving more than 30 minutes late for the start or leaving 30 minutes prior to the end of a class with specified attendance requirements. Habitual tardiness may adversely impact a student's grade. Habitual tardiness will be documented and the student may be required to establish an Individual Learning Contract; the terms of the ILC may include repeating the module with another cohort prior to graduation.
8. In the event of an unplanned school closure for weather-related reasons or other emergencies, students will be required to make up missed coursework and will be granted an extension by the faculty and administration. If the closure is too long to make up missed work within the duration of the module, Nizhoni Institute of Midwifery reserves the right to extend the duration of the program in order to allow for additional time to make up the missed coursework.





Academic Performance and Student Grading Policy

1. California law pertaining to midwifery licensure requires graduation from an approved midwifery education program that is a minimum of three years in duration, unless the student completes a challenge process approved by the Medical Board of California. Nizhoni Institute of Midwifery recognizes that, because of personal illness, pregnancy, family emergencies or other considerations, a student may need time to complete all graduation requirements beyond the three-year minimum specified by California state law. Students are allowed up to six years from the original date of enrollment to complete the program. After completion of the thirty-seven month didactic portion of the midwifery education program, students who need additional time to complete academic and/or clinical program requirements are required to:
 - a. Maintain current records with their clinical preceptor regarding progress through the program, including clinical skills satisfactorily completed
 - b. Meet by phone, electronically or in person with the Executive Directors once each month to discuss their progress through the program
 - c. Participate in regular formal reviews of progress with the Executive Directors.

Failure to complete the midwifery education program within six years of the original date of enrollment results in automatic dismissal from the program. Students who are dismissed for failure to complete the program within six years and who still desire to pursue studies at Nizhoni Institute of Midwifery must apply for readmission and will be required to retake the entire program. These students are not eligible for advanced placement.

2. Academic performance is assessed via a standard percentage grading system, i.e., 90-100% is an A, 80-89% is a B, etc. Student assignments and projects are graded and examinations on course material are given periodically. Grading rubrics for assignments are designed to be quantifiable, objective measures of performance specifying learning activities and/or skills being assessed and the criteria for successful performance of each.

Open-book examinations are administered electronically or as non-proctored pencil-and-paper exams. Examinations are also administered periodically as closed-book, timed tests within the classroom setting. Completed examinations may be graded or marked as Pass/Fail and results are provided to the students. A passing exam grade is 80% or higher. If a student does not pass an examination, the exam may be retaken once at a time agreed upon by the student and faculty member.

The passing grade for each module is 80%. If a student does not pass the module, the student is placed on Academic Probation and must complete an Individual Learning Contract for that module.



3. **Academic grading** is based on evaluation of learning activities specified within each module:
- a. Class participation
 - b. Examinations
 - c. Student research projects
 - d. Simulation exercises and group processes
 - e. Oral presentations
 - f. Written presentations
 - g. Skills demonstrations
 - h. Diagramming, labeling and construction projects
 - i. Problem-based learning activities
 - j. Case studies

Student clinical performance is assessed using the skills delineated by Nizhoni Institute of Midwifery, the North American Registry of Midwives, the Midwives Alliance of North America and the Medical Board of California.

4. Academic progress is tracked within the program and is confidential. Results are made available electronically or by paper to students within one week following the end of each module. Information regarding an individual student's academic progress includes scores and grade point average for the most recently completed module, cumulative grade point average, calculated percentages of classroom and clinical attendance where applicable, current academic status (Good Standing or Academic Probation) and feedback regarding recommendations for improvement. Quarterly performance evaluations are conducted between the students and the Executive Directors. Evaluations are signed by the student and evaluator(s) and documented in the student's academic file.
5. Nizhoni Institute of Midwifery denotes student academic status as follows:
- a. **Good Standing**
A student in Good Standing fulfills all of the following requirements:
 1. Is current on all assignments
 2. Maintains satisfactory academic performance as evidenced by a grade point average of 3.0 or higher on the standard grading scale
 3. Meets attendance requirements for didactic courses and clinical preceptorship
 4. Satisfies all financial obligations to the institution.
 - b. **Academic Probation**
Students with unsatisfactory didactic and/or clinical performance are automatically placed on Academic Probation. A student on Academic Probation is required to sign an Individual Learning Contract (ILC) and may be held to other evaluative criteria or sanctions specific to the situation.

If a student does not make arrangements in advance with faculty for an extension secondary to an excused absence or fails to complete the assignments, examinations, or attendance requirements for a module within the time allotted for completion, the student may request an “Incomplete” grade for that module. This is done by petitioning the instructor and the Executive Directors in writing for a grade of “Incomplete” within one week after the module is completed or the assignment was due, whichever is later. The student is automatically placed on Academic Probation. The student, Executive Directors and Chair of Faculty and Student Services formulate an ILC for completion of the module, which specifies:

1. The assignment(s) or portion of assignment(s) to be completed;
2. A revised date of completion for the module requirements; and
3. Any changes in assessment criteria that may be necessary in order to reasonably evaluate the student’s progress.

An “Incomplete” course must be completed with a score of 80% (3.0) or higher within the time delineated in the Individual Learning Contract (ILC). Conditions of an ILC may include retaking the module with the next available cohort, provided the module is available within a two-year period. Inasmuch as the student is already on Academic Probation, a student who does not meet the terms of an ILC, including the planned date of completion, is assigned an “F” as the final grade for that module and is subject to withdrawal from the program for unsatisfactory academic performance.

A student may not have more than two open Individual Learning Contracts at any time during the program. A student who is more than two modules behind the remainder of their academic cohort will be withdrawn from the program for unsatisfactory academic performance with the reasons documented in the student’s file and signed by the student, the Executive Directors and the Chair of Faculty and Student Services.

If a student fails to complete the assignment(s) for a module and does not petition the course instructor and the Executive Directors in writing for a grade of “Incomplete” within one week after the assignment for the module was due, the student will be assigned a grade of “F” for that module and is subject to withdrawal from the program for unsatisfactory academic performance.

A student whose grade point average (GPA) falls below the 3.0 minimum on the standard grading scale delineated in Section 2 is automatically placed on Academic Probation and will remain so for at least four consecutive modules, at which time the student’s GPA will meet or exceed 3.0. If the student fails a class while on Academic Probation, the student is withdrawn from the program for unsatisfactory academic performance.

Upon satisfactory completion of an ILC, completion by the student is acknowledged, signed, dated and retained in the student's file.

A student who maintains satisfactory academic performance for four consecutive months (modules) will automatically return to Good Standing provided all other requirements for Good Standing are met. Satisfactory academic performance is defined as remaining current on all assignments and achieving a grade of 80% (3.0) or higher on each module.

c. Withdrawn

1. Withdrawn in Good Standing

Nizhoni Institute of Midwifery recognizes that extenuating circumstances such as illness, pregnancy, financial hardship or family emergencies may necessitate withdrawal from the program. Students in Good Standing at the time of their withdrawal from the program are classified as "Withdrawn in Good Standing" and may resume their studies with the next available cohort without loss of academic standing. Students who are Withdrawn in Good Standing have the option of repeating with their new cohort any modules they had previously completed in order to prepare for re-entry the midwifery education program at the previous point of withdrawal from the program. The student's request for readmission and plan for completion of midwifery studies will be documented, signed by the Chair of Faculty and Student Services and Executive Directors and retained in the student's file.

2. Withdrawn

A student may be "Withdrawn" from the program because:

- a. The student does not maintain the terms of an Individual Learning Contract
- b. The student has two open ILCs and demonstrates unsatisfactory academic performance in a third module
- c. The student does not meet attendance requirements for didactic courses in which attendance is required and:
 1. Does not create an ILC to remediate missed class or clinical time OR
 2. Does not maintain the terms of the ILC
- d. The student is remiss in meeting financial obligations to the institution and:
 1. Does not formulate an acceptable contract with the Executive Directors to meet financial obligations OR
 2. Does not fulfill the terms of the contract to meet financial obligations
- e. The student does not complete the midwifery program within six years of the original date of enrollment. Students who are withdrawn for failure to complete the program within six years

and who still desire to pursue studies at Nizhoni Institute of Midwifery must apply for readmission and, if readmitted, are required to retake the entire program and are not eligible for advanced placement status.

3. Withdrawn in Poor Standing

A student may be “Withdrawn in Poor Standing” from the midwifery education program if he or she:

- a. Willfully jeopardizes the life, health and/or well-being of a midwifery client, student, faculty member or staff member.
- b. Is absent without prior approval from class for three weeks or misses more than 20% of clinical time with an approved clinical faculty member.
- c. Fails to comply with requirement to disclose all felonies at time of application for admission, fails a criminal background check or is convicted of a felony while attending Nizhoni Institute of Midwifery after a background check is conducted.
- d. Violates the midwifery laws of the State of California or the state or country in which the student is precepting.
- e. Accepts midwifery clients without supervision by an approved preceptor or represents herself or himself as a midwife before being licensed to do so.
- f. Except in rare instances of an emergent precipitous birth, attends the birth of a baby while functioning as a midwife without the physical presence of a clinical faculty member approved by Nizhoni Institute of Midwifery.
- g. Falsifies records, cheats, plagiarizes or commits any other fraudulent act(s).
- h. Demonstrates unprofessional conduct, including unreliable attendance at planned events with clinical faculty (preceptors), disregard for client confidentiality and documented instances of disruptive, profane, intractably argumentative, or violent behaviors.
- i. Abuses alcohol or other substances, as evidenced by impairment of performance in clinical and academic settings or conviction by law.
- j. Is convicted of sexual harassment or abuse.
- k. Violates copyright law with respect to copyrighted course material used by Nizhoni Institute of Midwifery.

Withdrawal from the program is documented in the student’s academic file, along with reasons for the withdrawal, supportive evidence and documentation regarding the situation and the student’s final status at the time of the withdrawal. The withdrawal document is signed by the student, the Executive Directors and the Chair of Faculty and Student Services. A

student's refusal to sign the withdrawal document will be noted and retained in the student file.

6. Students who were withdrawn from the program may apply for readmission to the midwifery education program unless they were Withdrawn in Poor Standing. Students who were Withdrawn in Poor Standing are not eligible for readmission to the midwifery education program. Qualified applicants must:
 - a. Apply for readmission within two years of withdrawal from the program as documented in the student's file.
 - b. Write a letter that defines the circumstances that affected the student's previous academic and clinical performance, delineates the student's accountability and describes the reasons that the applicant is more likely to achieve a successful outcome with readmission to the program.
 - c. Meet with a Re-Entry Evaluation Team for a personal interview. This team may be comprised of Nizhoni program administrators, faculty members, members of the Board of Trustees and graduates of the program who are actively practicing midwifery.

After consideration of the student's previous circumstances, application, letter and interview, the re-entry evaluation team members will make a decision regarding reentry to the program within one month, at which time the Chair of Faculty and Student Services and/or the Executive Directors will inform the applicant of the team's decision.

7. Any student who wishes to appeal decisions regarding academic standing and readmission to the program must make a written petition to the Chair of Faculty and Student Services for a hearing with the Board of Trustees. The student petitioner, faculty or administrative member referenced in the petition may be asked to attend the meeting of the Board of Trustees. A decision will be made at that Board meeting and all parties will be informed of the decision. If a decision made by the Board of Trustees is unsatisfactory, the accrediting agency for the school may be contacted. The accrediting agency's contact information is:

Midwifery Education Accreditation Council
P.O. Box 984
La Conner, WA 98257
360-466-2080

Student Attendance at Births

The following policies pertain to apprenticeship and attendance at births:

1. Because of legal and ethical considerations, students are prohibited from assisting at out-of-hospital births as a student midwife with anyone other than an **approved** preceptor.
2. Students are expressly prohibited from representing themselves as midwives and/or accepting midwifery clients before graduation.
3. After completion of classroom studies, students must practice under supervision until any remaining clinical requirements are completed.

These policies are for the protection of the student and the program and are strictly enforced. *Violation of these policies is grounds for immediate dismissal from the program.*

Tuition and Expenses

Students at Nizhoni Institute of Midwifery commit to pay for the midwifery education course on a per module basis; the cost per module is currently \$550.00 per month. Thirty-seven required modules must be completed in order for the student to graduate from the Nizhoni Institute program. Payments of tuition and fees are to remain current in order to remain a student in Good Standing. Students who are experiencing financial difficulties must make specific financial arrangements with the school.

A sustaining fee is assessed annually at the first October class of each year that the student remains in the midwifery education program (maximum time limit for completion of the program is six years). The current cost of the sustaining fee is \$550.00. The annual sustaining fee is applied to the costs of equipment, copies, workshop supplies, accreditation costs and other needs of the institution.

There are several required textbooks for this course. Students should budget approximately \$1500 for these texts. A list of required textbooks is available; all textbooks must be the most current editions. Books may also be available by loan from course instructors or via library resources. However, students are encouraged to have personal copies of their textbooks as they will likely wish to make notes within the pages and keep the textbooks as valuable resources even after graduation.

Students will need to obtain midwifery equipment over the course of the program in order to safely and competently provide assistance at births. Students should have a complete midwifery kit by the end of their program.

A personal computer with Internet access capability is essential for completion of coursework and for online midwifery learning opportunities and communication. Contact

the program for technical recommendations regarding computer systems and software requirements.

Students are required to maintain Basic Life Support (BLS) certification during the course of their midwifery education. BLS classes must be American Heart Association approved. BLS classes are available through local fire departments, hospitals, the American Red Cross and professional certifying organizations. Costs for BLS training vary but average \$60.00.

Students are also required to have completed a Neonatal Resuscitation Program (NRP) workshop by the time they register for Module #33. NRP certification is available at most hospitals. An NRP workshop specifically for out-of-hospital birth will be made available to Nizhoni students for a cost of \$175.00.

For California Students: The Student Tuition Recovery Fund

The Student Tuition Recovery Fund (STRF) was established by the Legislature to protect any California resident who attends a private postsecondary institution from losing money if tuition was prepaid and the student suffered a financial loss as a result of the school closing, failing to live up to its enrollment agreement, or refusing to pay a court judgment.

California students who pay their own tuition, either directly or through a loan, are required to pay a state-imposed assessment fee for the Student Tuition Recovery Fund. You must pay the state-imposed fee for the Student Tuition Recovery Fund (STRF) if all of the following applies to you:

1. You are a student who is a California resident and prepays all or part of your tuition either by cash, guaranteed student loans, or personal loans, and
2. Your total charges are not paid by any third-party payer such as an employer, government program or other payer unless you have a separate agreement to repay the third part.

You are not eligible for protection from the STRF and you are not required to pay the STRF fee, if either of the following applies:

1. You are not a California resident.
2. Your total charges are paid by a third party, such as an employer, government program or other payer, and you have no separate agreement to repay the third party.

The State of California created the Student Tuition Recovery Fund (STRF) to relieve or mitigate economic losses suffered by California residents who were students attending schools approved by, or registered to offer Short-term Career Training with, the Bureau for Private Postsecondary Education. You may be eligible for STRF if you are a California resident, prepaid tuition, paid the STRF fee, and suffered an economic loss as a result of any of the following:

1. The school closed before the course of instruction was completed.

2. The school's failure to pay refunds or charges on behalf of a student to a third party for license fees or any other purpose, or to provide equipment or materials for which a charge was collected within 180 days before the closure of the school.
3. The school's failure to pay or reimburse loan proceeds under a federally guaranteed student loan program as required by law or to pay or reimburse proceeds received by the school prior to closure in excess of tuition and other cost.
4. The schools' breach or anticipatory breach of the agreement for the closure of instruction.
5. There was a decline in the quality of the course of instruction within 30 days before the school closed or, if the decline began earlier than 30 days prior to closure, the period of decline determined by the Bureau.
6. The school committed fraud during the recruitment or enrollment or program participation of the student.

You may also be eligible for STRF if you were a student that was unable to collect a court judgment rendered against the school for violation of the Private Postsecondary and Vocational Education Reform Act of 1989.

Non-residents of California and students who receive third-party payor tuition and course costs, such as workforce investment vouchers or rehabilitation funding, are not eligible for protection under and recovery from the Student Tuition Recovery Fund.

The cost of the STRF is determined by set formula set forth in the California Education Code and is a function of the total amount of tuition charged by the program to which the student is applying. The cost of the STRF for Nizhoni Institute of Midwifery Students is determined at a rate set by the Bureau for Private Postsecondary Education (the "Bureau"), is paid by the student to the school and is submitted to the Bureau by Nizhoni Institute of Midwifery.

To be eligible for STRF, you must be a "California resident" and reside in California at the time the enrollment agreement is signed or when you receive lessons at a California mailing address from an approved institution offering correspondence instruction. Students who are temporarily residing in California for the sole purpose of pursuing an education, specifically those who hold student visas, are not considered a "California resident."

To qualify for STRF reimbursement you must file a STRF application within one year of receiving notice from the Bureau that the school is closed. If you do not receive notice from the Bureau, you have four years from the date of closure to file a STRF application. If a judgment is obtained you must file a STRF application within two years of the final judgment.

It is important that you keep copies of the enrollment agreement, financial aid papers, receipts or any other information that documents the monies paid to the school.

Questions regarding the STRF may be directed to:

Bureau for Private Postsecondary Education
P. O. Box 980818
West Sacramento, CA 95798-0818.

Receipts for tuition payments are provided to each student and student ledgers are updated regularly.

Withdrawing from the Program: Cancellation and Refund Policies and Rights

A student has the right to withdraw from the Nizhoni Institute of Midwifery program. Any notification of withdrawal from the Nizhoni Institute of Midwifery or cancellation of enrollment must be made by the student in writing of the intent to withdraw from the program. No further payment will be sent by the student because s/he has decided to withdraw. A copy of the Policies and Procedures related to Student Cancellation and Refund is available from the Executive Directors.

Access to Records and Confidentiality of Records

Students may access their records via a written request to the Executive Director or the Custodian of Records. Student records are confidential and are maintained under a secure system. Student records are maintained permanently after graduation.

Withholding of Grades and Transcripts

Nizhoni Institute of Midwifery reserves the right to withhold student grades and transcripts under the following conditions:

1. The student has outstanding financial debt to the program.
2. School materials are not returned or are damaged and not replaced.

Grades or transcripts may be withheld until the outstanding balance of tuition, fees or damages has been paid.

Do you have a complaint?

If you have a complaint about the program, you may present your concerns to an instructor or directly to the Co-Executive Directors. If the Co-Executive Directors are unable to resolve the problem, or are part of the problem, the matter may be taken to the Board of Trustees. We will make an effort to review documents and discuss the situation with the parties involved to resolve your concerns in a manner that is reasonable, timely and in complete accordance with the provisions of the laws by which we are governed. A student's participation in the complaint procedure and the disposition of a student's complaint will not limit or waive any of the student's rights. Records of any student

complaints and the resolution process are maintained in the student's file and an entry is made into a Student Complaint Log.

A summary of your rights as a student, including the correct procedure for registering a complaint, is available from Nizhoni Institute's Co-Executive Directors. Students may lodge unresolved complaints and grievances with the Midwifery Education Accreditation Council (MEAC). This excerpt outlines their grievance process:

Institutions accredited by MEAC are recognized as meeting and maintaining certain standards of quality. It is the mutual goal of MEAC and the institution to ensure that these standards are maintained. When problems arise, students should make every attempt through the formal complaint procedure within the institution to find a fair and reasonable solution. However, in the event that a student has exercised the channels available within the institution to resolve the problem(s) by way of the institution's formal complaint procedure, and the problem(s) have not been resolved, the student has the right and is encouraged to take the following steps:

1. Complaints should be in writing and mailed, faxed or emailed to the MEAC office. Complaints received by phone will be documented, and the complainant will be requested to submit the complaint in writing.
2. The letter of complaint must contain the following:
 - a. A detailed description of the problem(s);
 - b. The approximate date(s) that the problem(s) occurred;
 - c. The full name(s) and title(s) or position(s) of the individual(s) involved in the problem(s), including both institutional staff and/or other students who were involved;
 - d. Evidence demonstrating that the institution's complaint procedure was followed prior to contacting MEAC;
 - e. The name and mailing address of the complainant.
3. The complainant should be aware that other relevant supporting documentation may be requested (if not already included) in order to adequately investigate the complaint (e.g., the student's enrollment agreement, the syllabus or course outline, correspondence between the student and the institution).
4. Send to: Midwifery Education Accreditation Council
P.O. Box 984, La Conner, WA 98257
Telephone 360-466-2080 Fax 480-907 -2936
Email info@meacschools.org

Complainants will receive an acknowledgement of receipt within 15 days.

Student Services

Mentoring: Instructors provide students with didactic and clinical education and are available to answer students' questions. Generally the faculty member who has been instructing the class during a specific module will also be the one responsible for answering any inquiries regarding that module. Instructors will discuss with the students their availability for mentoring by telephone or email. Students have access to instructors via email and computer-based discussion.

Skills Sessions and Study Groups: Nizhoni Institute faculty members are available to students for periodic skills sessions. Nizhoni students have formed a regional Student Group that includes student midwives from other midwifery educational programs in order to improve the quality of midwifery education in the community. Students are strongly encouraged to participate. The Student Group Leader is a visible role model for the midwifery community.

Online Community: Students are invited to "meet" regularly for online discussion via the Nizhoni Institute online community group. Students, alumnae and faculty share ideas, insights and information to facilitate an ongoing educational experience.

Academic Counseling: Students who demonstrate academic or clinical performance deficiencies are given specific guidelines for improvement. Academic counseling is provided by the Executive Directors with one additional faculty member present. Assessment of student progress is based on examination performance, student attendance and participation, project performance and feedback from the student's clinical preceptor.

Senioring: Students are assigned a senior midwifery student who is available to provide support to the new student. The "senior" is a significant source of encouragement and valuable feedback and assists the newer student to adjust to the demands of study and the midwifery lifestyle. The program also provides an opportunity for senior students to serve and give back to their midwifery community.

Student Representation: A Student Representative is selected from each class to represent the student body and to communicate ideas and concerns to the Board of Trustees. The Student Representative is a midwifery leader who represents the Nizhoni Institute of Midwifery in local, state and national student midwifery organizations.

Library Services: Students may utilize Nizhoni's extensive library facilities and may also arrange to borrow textbooks if necessary.

Accommodation for Students with Disabilities: Nizhoni Institute of Midwifery will make every reasonable effort to accommodate students with physical and learning disabilities. Students with disabilities must be able to perform the cognitive and physical skills for entry-level midwives as outlined by the MANA Core Competencies and NARM Skills Requirements.

Placement Services: Nizhoni Institute of Midwifery does not offer job placement services after graduation. However, the Program Manager will assist students regarding employment options, placement opportunities and known job opportunities following graduation. Students receive notification and contact information regarding employment opportunities for practicing midwives and, in conjunction with their midwifery business class, receive instruction and guidance regarding interview preparation and development of a curriculum vita. Students should discuss state licensing requirements with the Program Manager.

Requirements for Graduation

In order to graduate from the Nizhoni Institute of Midwifery program, students must:

- a. Successfully complete all required modules, assignments and examinations with a grade point average of 3.0 or above.
- b. Create and submit a complete set of client handouts.
- c. Develop and submit Informed Consent documents.
- d. Prepare and submit an emergency care plan.
- e. Submit written guidelines for the practice of midwifery commensurate with those required for midwifery practice by the State of California.
- f. Successfully pass all required clinical skills under the supervision of an approved faculty member or preceptor(s), with approved documentation.
- g. Hold current Basic Life Support (BLS) and Neonatal Resuscitation Provider (NRP) certifications.
- h. *Under direct supervision by an approved preceptor, competently perform all clinical practice requirements, which include:*
 1. As an active participant, attend a minimum of 20 births
 2. Functioning in the role of primary midwife under supervision, attend a minimum of an additional 20 births
 3. As primary midwife under supervision, attend a minimum of 10 of the 20 births in homes or other out-of-hospital settings;
 4. As primary midwife under supervision, provide continuity of care to a minimum of 3 women, i.e., 3 of the 20 births attended as primary will occur with women for whom the applicant has also provided primary care during at least 4 prenatal visits, birth, newborn exam and 1 postpartum exam
 5. Perform 75 prenatal examinations, including 20 initial visits
 6. Perform 20 newborn examinations
 7. Perform 40 postpartum examinations of mothers and infants.
- i. Perform 20 well-woman/family planning visits under direct supervision.
- j. Pass the North American Registry of Midwives certification examination and complete all requirements to become a Certified Professional Midwife.
- k. Pay all tuition monies and fees in full.

The curriculum of Nizhoni Institute of Midwifery meets or exceeds all requirements for approval of midwifery educational programs in the State of California; these are among the most stringent in the United States. Students should check with the midwifery regulatory bodies in the states in which they intend to practice regarding specific requirements for midwifery education and practice. Students may contact the Executive Director/Program Manager if a need is determined for additional modules specific to the requirements for midwifery education in the state in which they intend to practice.



Senior Nizhoni students with a senior midwifery exchange student from the United Kingdom

Certification by the North American Registry of Midwives

The Certified Professional Midwife certification was developed by the North American Registry of Midwives to “validate entry-level knowledge, skills and experience vital to responsible midwifery practice.” The CPM credential is international and encompasses multiple routes of entry, including both private and university-based midwifery education programs, apprenticeship, and nurse-midwifery education.

The process for obtaining the CPM credential is rigorous and competency-based and has been subjected to extensive review by experts in the fields of healthcare and education. The North American Registry of Midwives recently received the prestigious accreditation of the National Commission for Certifying Agencies, the accrediting body of the Institute for Credentialing Excellence (formerly the National Organization for Competency Assurance). The National Commission for Certifying Agencies was created in 1997 to accredit certification programs and organizations that assess professional competency. Its accreditation is regarded as the highest certification an accrediting body can attain.

Every midwifery student at Nizhoni Institute of Midwifery becomes a Certified Professional Midwife as a requirement for graduating from the program. Our clinical standards are identical to the NARM CPM process, with the additional requirement that each student successfully performs 20 supervised well-woman/family planning visits. For more information about the Certified Professional Midwife credential, please go to <http://www.narm.org/htb.htm>.

Facilities, Equipment and Supplies

The administrative offices and classrooms for Nizhoni Institute of Midwifery are located at the Osteopathic Center for Children, 4135 54th Place, San Diego, California. A conference area and onsite midwifery offices are available for the practice and supervision of clinical skills. The learning facilities provide spacious, well-appointed academic environments with a library, audiovisual materials and access to computer systems. Midwifery clinical workshops may also be scheduled at Best Start Birth Center, 3343 Fourth Avenue in San Diego. Sites are fully compliant with local fire marshal regulations and the facilities requirements of the American Disabilities Act.



]Members of the Faculty of Nizhoni Institute of Midwifery

Gerri Ryan, L.M., C.P.M., C.D.T., Co-Executive Director/Chief Operating Officer and member of the faculty, is a California Licensed Midwife and Certified Professional Midwife with an active midwifery practice in San Diego. She is a nationally certified doula trainer and assists in developing continuing education opportunities for practicing doulas, midwives and health professionals. She has extensive business expertise and is recognized for her contributions to the midwifery and doula communities in San Diego.

Marla Hicks, R.N.-B.C., C.P.M., L.M., is Co-Executive Director/Program Manager and a member of the faculty. She has been practicing midwifery for thirty-five years and is licensed as a midwife by the Medical Board of California. Marla is board certified in perinatal nursing by the American Nurses Credentialing Center and serves on the Board of Directors of the Association of Midwifery Educators, an organization that serves midwifery educators across the United States.

Ladan Ayat, M.S., C.M., is a Certified Midwife who graduated from the midwifery program of the State University of New York in Brooklyn. She has worked in outpatient clinics and hospitals and has attended over a thousand births, both as a midwife and as a surgical first assistant at cesarean sections. She is passionate about teaching midwifery and has served on the faculty of Nyack Hospital (an affiliate of Columbia University) and Imam Reza University Hospital in Iran. She is a member of the American College of Nurse-Midwives.

Lindsey Meehleis, L.M., C.P.M., is licensed by the Medical Board of California and maintains a very busy midwifery practice in Orange County, California. Prior to becoming licensed as a midwife she worked as an Emergency Medical Technician and doula and taught prenatal yoga and childbirth education classes. She is a graduate of Nizhoni Institute of Midwifery and is the managing director of Birth without Borders, a grassroots humanitarian organization that serves mothers and babies worldwide.

Nicole Morales, L.M., C.P.M., is a licensed midwife in San Diego County, California and a graduate of the first class of Nizhoni Institute of Midwifery. She is a respected facilitator of Birthing from Within and serves the larger community by assisting women across the lifespan to claim the power of the menstrual cycle and reproduction.

Heather LeMaster, L.M., C.P.M., is a graduate of Nizhoni Institute of Midwifery. She has experience working in both home and birth center settings. Heather coordinates and teaches clinical education classes for Nizhoni.

Adjunct faculty members comprised of midwives, acupuncturists, physicians, and scientists teach specialty classes in Emergency Midwifery Care, Traditional Chinese Medicine, Introductory Cellular Biology and Microbiology, Suturing Technique and other courses. A majority of these instructors hold a master's degree or an earned doctorate.

Members of the Board of Trustees of Nizhoni Institute of Midwifery

Kim Smith, C.C.E., C.M., C.H.T., is Chair of the Board of Trustees for Nizhoni Institute of Midwifery. She maintained a successful homebirth practice for many years and for over ten years she co-directed a community midwifery education program in Utah. Presently she is the lead childbirth educator at a large metropolitan hospital.

Rebekah Lavery, Vice Chair of the Board of Trustees, has attended over a thousand births as a primary midwife. She has a great love for teaching and has served as a faculty member for a community midwifery program. Currently she uses her expertise in complementary medicine and women's health care to manage and consult for a natural foods store corporation.

Julie Harker Buck, M.H.E., R.D., L.D., C.D, Manger of Out-of-State Operations, holds a master's degree in Health Education and is a licensed and registered dietician. She attended a direct-entry midwifery program and is a certified doula practicing in Idaho.

Peggy Baxter, C.P.A., Treasurer, is a Certified Public Accountant specializing in full-service accountancy for small- and medium-sized businesses. She has served as the accountant for Nizhoni Institute of Midwifery for several years and provided valuable financial expertise as the school moved through the processes of California state approval, IRS 501(c)(3) charitable organization status and MEAC pre-accreditation.

Michelle Freund, L.M., is Chair of Faculty and Student Services for Nizhoni and a member of the clinical faculty. She is licensed as a midwife by the Medical Board of California and maintains a very busy practice in the San Diego County area. Michelle serves the larger midwifery community on both state and national levels.

Cindy Manning Starr, Chair of Gifts and Donations, has a strong background in business, project management, and information technology within the health care field. She has a special interest in working with midwifery-related organizations.

Marie Adams, Custodian of Records, brings a broad breadth of midwifery clinical, political and business experience to her position on the Board of Trustees.