



Commonsense Childbirth
School of Midwifery

Program Catalog

Version 13

Midwifery Education, Training, and
Development for Improved
Maternal Child Health Outcomes

April 2025

Commonsense Childbirth School of Midwifery (CCSM) is
accredited by the Midwifery Education Accreditation Council
(MEAC)

Licensed by the Commission for Independent Education Florida
Department of Education. License Number: 4052



CORPORATE OWNERSHIP

CCSM is owned and operated by Commonsense Childbirth, Inc., a non-profit corporation formed under the laws of the State of Florida.

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TABLE OF CONTENTS

WELCOME	7
ABOUT CCSM	8
CLINICAL SITES	8
ADMINISTRATION AND FACULTY	9
ADMINISTRATION	9
FACULTY LISTING	19
MISSION STATEMENT	20
VISION STATEMENT	20
PROGRAM GOALS	20
INTRODUCTION	21
PURPOSE AND OBJECTIVES OF THE SCHOOL	22
EDUCATIONAL PHILOSOPHY	23
NON-DISCRIMINATION POLICY	24
DESCRIPTIONS	24
GRIEVANCE POLICY	25
MIDWIFERY MATTERS	28
INTRODUCTION	28
MIDWIFERY HISTORY	29
DEFINITIONS: The Midwives Model of Care™	31
DEFINITIONS: Direct-Entry Midwives	32
STATE MIDWIFERY	32
NATIONAL MIDWIFERY	33
INTERNATIONAL MIDWIFERY	33
MIDWIFERY PROGRAMS OVERVIEW	35
HYBRID DIRECT-ENTRY MIDWIFERY PROGRAM	35
ACADEMIC CURRICULUM AND CLINICAL PROGRAM CURRICULUM	39
COURSE DESCRIPTIONS	44
CLINICAL REQUIREMENTS	55
SKILLS BOOK	57
CLINICAL EXTERNSHIP COURSES	58
NARM REQUIREMENTS	59
SEMESTER CREDIT:HOURS RATIO	60
STUDENT ACHIEVEMENT	60
CALENDAR	61
Open House	63
School Office Hours	63

Hybrid Direct Entry Midwifery Hybrid Program Structure	63
STUDENT INFORMATION POLICIES AND PROCEDURES	65
Financial Policies	65
Returned Check Fee	65
Cancellation and Refund Policy	65
Policy If Program Is Canceled By CCSM	66
Scholarships	66
Administration & Student Services	67
CCSM Clinical Mentor Coordinators	68
Disability Accommodation Policy	69
Acute Accommodation Policy	68
Student Record Policy	70
Transfer of Credit	70
Transferability of Credit	71
Transcript Requests	71
Disciplinary Policies	71
CCSM CODE OF CONDUCT	71
Conduct Statements	72
Grievance Process for Students	73
Grievance Process for those Involving the Dean	74
Complaint Procedure Information	75
Conditions for Dismissal	75
Dismissal and Readmission	76
Conditions for Re-Entry	76
ATTENDANCE POLICY	77
Tardiness	78
Absence Procedure	78
Birth-Related Absence	78
LEAVES OF ABSENCE	78
Clinical Leave of Absence	79
Programmatic Withdrawal	79
Authorized Withdrawal	79
Pregnancy & Postpartum Leave Policy	80

Children Policy	80
GRADING POLICIES AND ACADEMIC STANDING	81
Grading System	81
Basic Grading Scale	82
Academic Standing	83
Grading Rubrics	84
Late Assignments	84
Academic Probation	85
Remedial Plan	86
Clinical Remedial Plan	86
Withdrawing from a Course	86
Incomplete Policy	87
Clinical Externship Incomplete Policy	87
Failing an Academic Course	88
Withheld Grades	88
STUDENT PROGRESS	88
Evaluations	88
GRADUATION REQUIREMENTS	90
Minimum and Maximum Time Frames for Completion	90
Requirements for Graduation	90
Certification Ceremony	90



NON-DISCRIMINATION POLICY

CCSM under the “Florida Educational Equity Act” welcomes academic and clinical faculty and staff of any sex, gender identity or expression, race, color, national and ethnic origin or ancestry, marital or familial status, religion or creed, age, sexual orientation, or ability.

We do not discriminate any individual or group on the basis of their actual, implied or perceived: race; color; national or ethnic origin or ancestry; religion or creed; sex, gender, gender identity or expression, including transgender identity; sexual orientation; marital status; familial status; age; disability; genetic information; or any other protected category under federal, state, or local law.

CCSM COMPLIANCE

Commonsense Childbirth School of Midwifery is in compliance with Title VI of the Civil Rights Act of 1964, Title IX of the Educational Amendments of 1976, Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990 which prohibit discrimination on the basis of race, creed, color, age, national origin, sex or handicap. Licensed by the Commission for Independent Education Florida Department of Education. Additional information regarding this institution may be obtained by contacting the Commission at 325 West Gaines Street, Suite 1414, Tallahassee, FL 32399-0400, toll-free telephone number (888) 224-6684.

WELCOME

Our founder Jennie Joseph has the vision to create a path for student midwives. Proving our students with safe learning environments following the JJ way tenants access, connection, knowledge and empowerment. Commonsense Childbirth School of Midwifery (CCSM) was developed around principles that have driven midwifery practice worldwide: trust, respect, and *necessity* . However, in the United States midwives are faced with the challenge of not being seen as the optimum choice in providing maternity care.

CCSM provides quality, practical, culturally-sensitive training and education that is integral to maternity health care systems by:

1. assembling a training and education program that forms a measurable, competitive advantage for the practitioner and growth in women’s health care delivery;
2. providing authentic professional development with clear career paths - a strong magnet for attracting top-quality students;
3. elevating the profession’s profile through robust competency training;
4. ensuring that competency training has the lowest cost structure possible;
5. providing genuine engagement and access to care for all communities; and,
6. educating and empowering women and families thereby presenting a *de facto* experience: “your birth, your way”.

Data supports the safety and efficacy of the midwifery model of care. America needs an urgent change in its maternity healthcare delivery system in order to address challenges of rising medical interventions, cesarean sections and healthcare costs, and high infant and maternal mortality rates. **CCSM stands for that change – ‘getting to the heart of the matter’, one mother, one baby, one family at a time** . We are proud to offer the *Hybrid Direct-Entry Midwifery* program to further our mission.

Thank you for joining us, and welcome!

Zulgeil E. Ruiz Ginés, LM,CPM
Dean of Midwifery Program & Operations

ABOUT CCSM

CCSM is a Hybrid Midwifery Program where students are required to meet virtually on Fridays.

CLINICAL SITES

The student is responsible for finding a preceptor throughout their time at CCSM. Prior to enrollment, students will have a conversation with a member of the Clinical Department staff to discuss preceptors in their area or if the student requires relocation to be able to find available clinical sites. If at any time, for any reason the student leaves a clinical site or changes preceptors, the student is responsible for communicating this with their Clinical Mentor Coordinator (CMC) prior to the change and ensuring they remain in good clinical standing throughout the transition. Students are responsible for providing potential preceptors with the Preceptor Application available on the CCSM website.

The Clinical Mentor Coordinator will provide support and mentorship to the student while they seek out a preceptor and attend clinic. CMCs will track student progress and inform the student when they are falling behind or not meeting the requirements of the program. The CMC assists with the preceptor onboarding process and maintenance of the clinical relationships on behalf of all students. Once a preceptor has submitted an application, CCSM will review their application for appointment as a clinical preceptor. CCSM will provide future preceptors with a Typhon login and the information they need to onboard and conduct themselves as a CCSM preceptor.

ADMINISTRATION AND FACULTY

ADMINISTRATION

Jennie Joseph LM, CPM

Founder, President



DIPLOMA IN NURSERY NURSING 1978
National Nursery Examination Board, UK
Harrow College of Technology and Art, London, England

DIPLOMA IN MIDWIFERY 1981
Central Midwives Board, UK
Barnett College of Nursing and Midwifery, London, England

CERTIFICATE IN MIDWIFERY 1994
School of Complementary Medicine, Oviedo, Florida

CERTIFIED PROFESSIONAL MIDWIFE 1995
North American Registry of Midwives (NARM)

Jennie Joseph, a British-trained midwife and women’s health advocate, moved to the United States in 1989 and began a journey which has culminated in the formation of an innovative maternal child health care system, *The JJ Way*®. (<https://commonsensechildbirth.org/the-jj-way/>)

Jennie has worked extensively in European hospitals, American birth centers, clinics and home birth environments. Jennie has been instrumental in the regulation of Florida midwives since the 1990's and has been involved in midwifery education since 1995. She is a former Chair of Florida’s State Council of Licensed Midwives. Currently, she owns a Florida licensed midwifery school attached to her nationally-renowned birth center and maternity medical home in Winter Garden, Florida. She also developed and administers perinatal professional training and certification programs to address the health care provider shortage, diversify the maternal child health (MCH) workforce, and address persistent racial and class disparities in birth outcomes.

Due to the high prematurity rates experienced by low income and uninsured women Jennie established an outreach clinic for pregnant women, who are at risk of not receiving prenatal care. Her ‘*Easy Access*’ Prenatal Care Clinics offer quality maternity care for *all*, regardless of their choice of delivery site or ability to pay and has successfully reduced both maternal and infant morbidity and mortality in Central Florida. There are both quantitative and qualitative studies underway regarding Jennie’s work as well as continuous reviews of the impact of her clinical and educational programs.

Jennie’s model of health care, *The JJ Way*®, provides an evidence-based system to deliver MCH services which improve health, reduce costs and produce better outcomes all round.

As Founder and Executive Director of her own non-profit corporation *Commonsense Childbirth Inc.* Jennie firmly believes that: **“Every woman wants a healthy baby and every woman deserves one”**.



Zulgeil Ruiz-Gines, BA, LM, CPM

Executive Director of Midwifery Program and Operations

BACHELOR OF ARTS IN HUMANITIES

University of Puerto Rico

DIRECT ENTRY MIDWIFERY PROGRAM DEGREE

National College of Midwifery

DIRECT ENTRY MIDWIFERY PROGRAM DEGREE

Commonsense Childbirth School of Midwifery

LICENSED MIDWIFE, State of Florida, State of California

CERTIFIED PROFESSIONAL MIDWIFE

North American Registry of Midwives (NARM)

Zulgeil Ruiz-Gines is a midwife, educator, and advocate for culturally safe midwifery care. She holds licenses as a Midwife in the states of California and Florida. Born and raised on the magical island of Puerto Rico, she earned her BA degree in Humanities from the University of Puerto Rico. Zul's journey into midwifery education began in Temixco, Mexico, where she spent nine months learning from an indigenous midwife who opened her vision, spirit, and heart to the world of midwifery. She graduated from the National College of Midwifery and obtained her license in California through the Medical Board. Additionally, she earned her license in Florida through the Commonsense Childbirth School of Midwifery.

Zul is deeply committed to the education and training of new midwives and the future of midwifery. Her dedication has led her to various roles, including Midwifery Instructor at Midwifery Program at Southwest Wisconsin Technical College, DIE Coordinator, Midwifery Program Strategist, and involvement in legislative efforts in Puerto Rico.

Currently Zul is pursuing her masters degree in Oregon State University in Medical Anthropology. Her research focuses on the history and sustainability of the accredited Midwifery programs for community midwives in the United States.



Andrea Herrada, BA , MAEd
Admissions & Student Services Manager

BACHELOR OF ARTS IN INTERDISCIPLINARY STUDIES
Western Governors University

MASTER OF ARTS IN MATHEMATICS EDUCATION
Western Governors University

PROFESSIONAL EDUCATOR CERTIFICATE
Florida Department of Education

Andrea Herrada is an educator and project manager. She is a Western Governors University graduate with a focus on Education. Andrea has spent 10+ years in the field of education: teaching, developing and implementing curriculum. She has also implemented various technologies into the learning environment to support various styles of learners, especially after attending an online college herself. Andrea is also the project manager of a maternal educational consulting firm and continuing education platform, KIBI, for two years. As a bilingual educator born in Florida with Puerto Rican and Mexican descent, she has been able to help provide the Latino/a community with receiving quality opportunities for higher learning and advocating for reproductive justice.

For her, being a part of CCSM allows the opportunity to assist future midwives begin their educational journey while providing the safe space during the uncertainty of enrollment and throughout their educational experience. Outside of her passion for education, Andrea enjoys spending time with her three daughters and traveling. Andrea is currently pursuing her educational development by completing a Google Project Management Professional Certificate.



Maddy Popkin, CPM
Academic Faculty Coordinator

CERTIFIED PROFESSIONAL MIDWIFE
Commonsense Childbirth School of Midwifery

CERTIFIED PROFESSIONAL MIDWIFE
North American Registry of Midwives (NARM)

Maddy Popkin is a Certified Professional Midwife, doula, lactation educator, and childbirth educator. They have been learning, training, and working alongside many incredible midwives in the Boston area since 2021 and completed their studies at Commonsense Childbirth School of Midwifery in 2024. Maddy came to midwifery from community organizing and is committed to midwifery as a healing practice. They love growing flowers, collecting hobbies, and spending time with their partner, their baby, and their dog.



Taylor Buccello
Learning Management Systems Specialist

MASTER OF SCIENCE IN APPLIED ANTHROPOLOGY
Oregon State University

BACHELOR OF SCIENCE IN PRE-MEDICINE BIOLOGY
Oregon State University

BACHELOR OF SCIENCE IN RELIGIOUS STUDIES
Oregon State University

Taylor Buccello is an educator and reproductive justice advocate. She completed BS degrees in Pre-Medicine Biology and Religious Studies. Shortly after she decided attending medical school wasn't her path, she met Dr. Melissa Cheyney, a home birth midwife and reproductive equity researcher. From there, they began a MS degree in applied anthropology with a focus on public health and epidemiology. In 2025, they completed a thesis that evaluated Oregon's role within the U.S. abortion care landscape. Taylor has given their time to multiple reproductive justice and equity research projects, copy-edited for the journal Birth, worked with Corvallis, Oregon's Community Doula Project, and trained as a birth doula and an abortion doula/support professional. They are part of the Uplift Reproductive Equity Lab, which is where they met Zulgeil Ruiz-Gines and was invited to join CCSM. Taylor is deeply committed to supporting instructors and students, especially those who are working to improve reproductive health and outcomes. Taylor enjoys reading, playing video games, and spending time with her cat, Nina, and snake, Ibn.



Dayna Hernandez, BA, CPM
Clinical Mentor Coordinator

BACHELOR OF ARTS IN ART HISTORY
The City College of New York

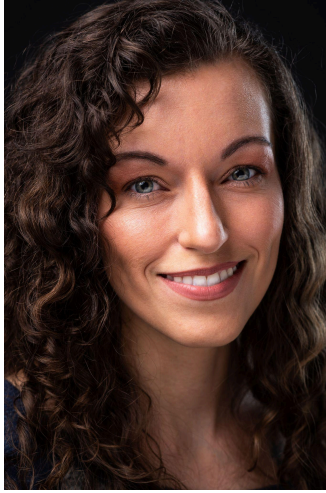
MIDWIFERY DEGREE
Southwest Wisconsin Technical College

CERTIFIED PROFESSIONAL MIDWIFE
North American Registry of Midwives (NARM)

Dayna Hernandez is a Certified Professional Midwife, birth assistant, birth & postpartum support person and lactation support counselor who traverses between worlds; the Womb and the Earth; the spiritual and the physical; Spanish & English. At a certain point into her first pregnancy she realized that her life would be forever changed after the birth of her son, for reasons apart from the obvious transformation from individual person to the mom-baby dyad. She was beginning to hear the echoes of her *calling* and gradually became receptive to the “spiritual healer” within.

She is spiritually motivated to serve families and to be with them during a most transcendent and transformational moment of their lives. Her mom would often say to her, “*nosotros somos gente humilde.*” It means, “we are humble people.” And for her, part of that humility meant that every person deserves safety, care and respect in the pregnancy and birth continuum.

She currently works Full-Time at Commonsense Childbirth School of Midwifery as a Clinical Mentor Coordinator and Student Services Administrator at CCSM.



D'Vorah (Dev) Honey, BS, LM
Clinical Mentor Coordinator

BACHELOR OF SCIENCE IN SCIENCE OF NUTRITION

LICENSED MIDWIFE
State of Virginia

D'Vorah Honey, also known as Dev, is a homeschool mom, a Licensed midwife, a published author, and a certified K9 Handler and trainer. Dev sits on the board of the non-profit Smithfield Moms Collective, which works to provide free resources to support the wellbeing and mental health of postpartum moms for the first year after birth. Dev is a member of a lobbying group working to change state laws that regulate midwives, currently working in North Carolina. Dev began her focus on health as an athlete with a Bachelor's in the Science of Nutrition which led to a career as a Fitness Coordinator for the Department of Defense. After the birth of Dev's second child she was called to serve as a midwife. Dev currently works as a contracted, traveling midwife and a working dog handler with law enforcement and pest control canines. She continues her mission to create a better future for midwives, families and communities through education and evidence-based care.



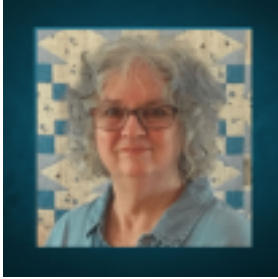
Kimberly Haines, LM, CPM
Clinical Mentor Coordinator

DIRECT ENTRY MIDWIFERY PROGRAM DEGREE
Florida School of Traditional Midwifery

LICENSED MIDWIFE
State of Virginia

CERTIFIED PROFESSIONAL MIDWIFE
North American Registry of Midwives (NARM)

Kimberly Haines is a second generation midwife with a passion for student education. She began attending births in 2004 and quickly recognized the vast shortcomings in women’s healthcare. She graduated from the Florida School of Traditional Midwifery in 2012 with a goal to offer a more empowering approach to prenatal,antenatal and postpartum care in her community. Kimberly began attending births as a Licensed Midwife in Virginia in 2014. She has since been dedicated to raising the community standard of out-of-hospital care while precepting student midwives to provide exceptional birth options to low risk families. Kim has also thrived in the chaos of raising five amazing kids with her equally passionate partner of 23 years.



Justine Clegg - MS, LM, CPM, LMHC, BA, CLC
Senior Instructor

MASTER OF SCIENCE IN EDUCATIONAL COUNSELING
Florida International, University, Miami, Florida

CERTIFICATE IN MIDWIFERY
South Florida School of Midwifery, Miami, Florida

CERTIFIED PROFESSIONAL MIDWIFE
North American Registry of Midwives (NARM)

BACHELOR OF ARTS IN COMMUNICATIONS AND
MARKETING
University of Miami, Miami, Florida

CERTIFIED LACTATION COUNSELOR
|Academy of Lactation Policy and Practice

Justine Clegg has been active in maternal and child health since 1974 when she became a La Leche League Leader, then a childbirth educator, labor coach and birth assistant. She holds a Bachelor's degree in Communications from the University of Miami, a 3-year Diploma from the South Florida School of Midwifery, and a Masters in Science degree in Counseling from Florida International University.

Ms. Clegg is a homebirth midwife licensed in Florida since 1986. She has been a Certified Professional Midwife through the North American Registry of Midwives since 1993. She has been a Florida Licensed Mental Health Counselor since 1993. She became a Certified Lactation Counselor, Academy of Lactation Policy and Practice, in 2008. She was Midwifery Program Director at Miami Dade Community College, Medical Center Campus, 1994-2008, and received an Endowed Chair, 2003-2006.

Ms. Clegg was a member of the Board of Directors of the Midwifery Education Accreditation Council from 1994 to 2002. She participated in developing the North American Registry of Midwives certification process, exam item writing and grading, and is a former Qualified Evaluator. She was Chairperson of the Council of Licensed Midwifery, the Florida state regulatory board for midwives, January 1993 through December 2001. She chaired the Fetal and Infant Mortality Review team, Healthy Start Coalition of Miami-Dade County, 2004-2009. She is currently President of the Association of Midwifery Educators, and has been a board member since 2007. Ms. Clegg is the mother of three and attended the births of three of her six grandchildren, making her a proud "grandma midwife."



Reina Chavez
Student Academic Mentor

ASSOCIATES IN BUSINESS
Broward College

BACHELORS IN MIDWIFERY
Midwives College of Utah

LICENSURE BY ENDORSEMENT
Commonsense Childbirth School of Midwifery

LICENSED MIDWIFE,
State of Florida & California

CERTIFIED PROFESSIONAL MIDWIFE
North American Registry of Midwives (NARM)

Reina Chavez is a licensed midwife in both California and Florida, and also holds a current licensure of Phlebotomy as well as certifications in birth & postpartum doula, lactation & childbirth educator and placenta encapsulation. She holds an Associate's degree in Business from Broward College and a Bachelors in Midwifery from Midwives College of Utah; and also recently completed the CCSM Licensure by Endorsement program.

Her focus on marginalized communities has been grounded by her apprenticeship with Black and Brown midwives in Los Angeles, as well as her lived experiences supporting and educating families.

Reina's complex journey to midwifery revealed a passion for helping expand midwifery and as the Academic Student Mentor, she provides support for those enrolled in CCSM. Her mentorship can be as simple as lending a safe ear to as complex as developing success plans with students to keep them on track.



Debbie Allen pending bio.

Debbie Allen, LM, CPM
California Program Site Lead & Academic Faculty

DIRECT ENTRY MIDWIFERY PROGRAM DEGREE
Pending

LICENSED MIDWIFE
State of California

CERTIFIED PROFESSIONAL MIDWIFE
North American Registry of Midwives (NARM)

FACULTY LISTING

Janell Moore,

LM, CPM, MPH

Jo Crawford,

LM, CPM

Jessica Johnston

LM, CPM

Willa Woodard-Ervin,

CPM, LDM, PMH-C, HCHI

Jacqueline George,

BSN, RN, CEN, CD, CBE

Tamara Trinidad,

CPM

Charlotte Goudeau,

LM, CPM

Andie Wyrick,

DNP, APRN, CNM

MISSION STATEMENT

The Commonsense Childbirth School of Midwifery (CCSM) mission is to provide quality, practical, and culturally sensitive midwifery training and education that will prepare midwives of caliber who can represent themselves and their profession in any arena. We aim to inspire our students to become perinatal leaders in the maternal child health field, willing to provide access to respectful maternity care for all communities with an emphasis on eliminating health disparities through the education and empowerment of women and families so that they can once again *safely* experience 'their birth, their way; every person, every time.'

VISION STATEMENT

We envision a maternity care climate saturated with culturally sensitive and racially congruent care that results in equitable and superior outcomes in maternal and infant health for all populations. We seek to reach as many as we can because there is no time to lose. We are in the business of saving lives. In order to achieve our vision we seek to open a pathway for midwives of color to again become autonomous community providers, to address and redress the historical, structural and institutional inequities that continue to decimate Black and indigenous people, and to restore trusted birth workers to the heart of their communities once again.

PROGRAM GOALS

To enroll, retain, graduate, and successfully place a student body that is representative of the US population.

To have the most diverse faculty and staff of any midwifery program in the nation.

To achieve a 70% retention rate.

To achieve an 80% graduation rate of students retained into the 2nd year.

To achieve an 80% certification and placement rate.

To graduate over 50 BIPOC midwives in the next 10 years

To become ICM accredited when that accreditation is available in the US.

INTRODUCTION

CCSM was established to provide midwifery education and training. The program was designed to enable students to gain the knowledge and skills needed to become highly competent midwives. An emphasis is placed on teaching the art of community based care, differentiating between low-risk and high-risk pregnancies and preparing students to organize and operate as a professional midwife after licensing. Graduates will know how to work within their legal scope of practice and will be educated in collaborative management with other medical professionals. Graduates will possess the knowledge and skills essential to practice as a Licensed Midwife. CCSM's curriculum is based on professional standards for Certified Professional Midwives/Licensed Midwives as outlined in the [Florida Statutes](#), [Florida Council of Licensed Midwifery Rules](#), [Florida Administrative Code](#), Core Competencies of the Midwives Alliance of North America (MANA) and the [American College of Nurse Midwives \(ACNM\)](#), the [Midwifery Education Accreditation Council \(MEAC\) Curriculum Essential Competencies](#), [The International Childbirth Initiative's \(ICI\) 12 Steps to Safe and Respectful MotherBaby-Family Maternity Care](#), and the [ICM Standards for Midwifery Education](#).

Graduates of the Direct-Entry Midwifery Program will receive a Diploma from CCSM and be eligible to sit for the North American Registry of Midwives (NARM) exam. Contact NARM at www.narm.org for testing information and details about the CPM credential.

Commonsense Childbirth School of Midwifery was granted institutional accreditation by the Midwifery Education Accreditation Council ([MEAC](#)) on July 8, 2020.

For more information go to www.meacschools.org.

PURPOSE AND OBJECTIVES OF THE SCHOOL

It is the purpose and objective of CCSM to provide an educational environment that promotes optimum learning and prepares each of our students to:

- Practice independently as a Licensed Midwife
- Provide maternity care as an informed professional who is aware of community health issues, epidemiological concepts and social service resources
- Communicate effectively and employ counseling techniques when necessary
- Understand the importance of research and statistical data and to use both for professional growth, high standard of practice, and to educate the public
- Provide collaborative prenatal and postpartum care to pregnant women not at low risk in their pregnancy, labor, and delivery, within a written protocol within local regulations
- Provide "evidence-based maternity care, acknowledging the interaction between the MotherBaby dyad, Family and Environment as well as their interactions with health providers and health systems" (International Childbirth Initiative)
- Pass the North American Registry of Midwives (NARM) National Examination
- Meet Criteria for becoming a Certified Professional Midwife (CPM)

These objectives will be attained by providing each student with an education based on a combination of the art of traditional midwifery, and the knowledge of health equity and medical science. Programs are designed to help students develop and refine both the clinical and academic skills essential to provide exemplary midwifery care. In practice, it is imperative to respect the dignity and rights of clients and families, communicate effectively, be able to differentiate between low-risk and high-risk obstetric clients and to make arrangements for collaboration or referral whenever necessary. Recognizing the rich cultural diversity in the United States of America and the increasingly diverse populations in our country, we seek to recruit a student population that is culturally and ethnically reflective of our communities and to prepare students to provide effective midwifery services which are responsive to the needs of consumers. Successful students will graduate with a Diploma in Midwifery from CCSM.

EDUCATIONAL PHILOSOPHY

The educational philosophy is to facilitate and encourage lifelong learning and assist students in building upon the knowledge and skills acquired in their chosen program of study. CCSM focuses on creating a learning environment which provides emotional support, encouragement, and the mutual respect that is conducive to the development of a positive self image.

We are dedicated to educating midwifery students in the ancient art and modern science of midwifery practice with the belief that any student wanting to reach their goal will be able to benefit from the education offered.

We believe that every person should have access to a maternity care provider of their choice and to the information needed to make informed decisions. Our goal is to develop competent, highly educated midwives who can provide this option.

We believe that midwives should be based in their communities where they are able to provide maternity care, education and social support to women and their families.

We believe that midwives should be an integral part of the international midwifery community and we will offer opportunities to become world healthcare service providers.

Graduates will leave CCSM with the finest academic background throughout the national and international community in direct-entry midwifery as well as above average communication and counseling skills, prepared to meet the global challenges as midwifery professionals.

Faculty at CCSM will motivate students to use academic abilities to their greatest capacity.

NON-DISCRIMINATION POLICY

CCSM welcomes students, academic and clinical faculty, and staff of any sex, gender identity or expression, race, color, national and ethnic origin or ancestry, marital or familial status, religion or creed, age, sexual orientation, or ability.

Under the “Florida Educational Equity Act”, CCSM does not discriminate any individual or group on the basis of their actual, implied or perceived: race; color; national or ethnic origin or ancestry; religion or creed; sex, gender, gender identity or expression; sexual orientation; marital status; familial status; age; disability; genetic information; or any other protected category under federal, state, or local law.

CCSM does not discriminate based on any of these above categories in:

- administration of its academic policies
- administration of its clinical policies
- administration of its student admissions policies
- hiring, recruitment, appointment, or promotion of faculty
- any other organization-administered programs or processes

At CSSM we promote equity, equality, diversity and inclusion consistently throughout everything we do.

CCSM believes that exposure to diversity will best prepare our students to serve all women and families. Because of our strong commitment to equity and social justice the school promotes non-discrimination in all its facets, policies and procedures. Equity and inclusivity is inbred into the culture of the school and throughout our organization. It starts at the very top of the organization and is modeled and encouraged by all. There is a broad spectrum of diversity throughout the school employees and contractors, including administration. All students, faculty, guest lecturers, staff, and contractors are invited and encouraged to be confident to challenge and confront discriminatory practices if you see this in our school at any time. All staff and faculty orientation training contains a session on equity and diversity as well as information about the school ethos and the JJ Way®.

(<https://commonsensechildbirth.org/the-jj-way/>)

DESCRIPTIONS

The following descriptions are used to further understanding of our non-discrimination beliefs:

Equity is providing equitable treatment at all times and acknowledging diversity by

recognizing and celebrating differences; and by eliminating the structural and interpersonal barriers that limit the opportunities for underrepresented and underserved people and groups.

Equality is about treating people alike according to their needs.

Diversity can be described as ‘difference’. All individuals are different; the many different parts of a person’s character and identity make them unique including age, appearance, ability, disability, occupation, health, background, gender identity, family, friends, sexual orientation, religion, belief, values, culture, marital status.

Inclusion is ‘being included within either a group or society as a whole’. Excluding people *because* of their differences is known as discrimination.

Discrimination is action that is often based on a person’s negative attitude towards others. The following can all lead to discrimination:

- Labeling - this is to give a group of people a name because of characteristics. For example, ‘Goth’.
- Stereotyping - to have an opinion about a group and applying this to anyone belonging to the group. For example, ‘women cannot park a car’.

Prejudice involves treating people differently because of assumptions made about them or a group of people based on their differences.

All reports of discrimination, harassment, and other issues will be addressed utilizing the CCSM grievance process below:

GRIEVANCE POLICY

Grievance Process for Grieved Person(s)

Staff and faculty of CCSM complete harassment training during their onboarding and aim to provide privacy and security involving student complaints and sensitive matters. If a person identifies a grievance against any peers, staff (not including the Dean), or faculty they will comply with the following procedure, with a focus on respecting the inherent worth of each person involved. Grievances involving the Dean will follow a separate procedure.

Complainants who actively engage in this process are protected from retaliation and therefore adverse action can not be taken against them.

All documentation and discussions regarding the grievance shall be considered confidential and shall be treated as such. The number of parties involved in the grievance process should also be kept to a minimum.

STEP 1:

Complaints must first be directed to the person(s) involved according to the following process:

- Engage in a safe space by approaching the situation with curiosity and humility.
- We statements should be limited as much as possible. Each person should speak with I statements and discuss their own personal experiences of the situation.
- Choose a method for presenting the concern: offer a meeting time and place, write an email, or schedule a virtual meeting.
- Give the other person an appropriate time to respond.

STEP 2:

If a satisfactory resolution cannot be achieved among the individuals involved, the second step is for the person with the complaint to elevate the concerns to the Dean via the CCSM Student Grievance form. The Dean will coordinate and lead a meeting of one of the three choices.

1. The complainant will fill out the Grievance Form, which will initiate a formal complaint.
2. The Dean will then have 5 business days to respond.
3. A meeting type of the student's choice (see below) will then be scheduled within 5 business days. *An additional CCSM staff member will be present as a witness and to record minutes of the meeting.*
 - a. An individual meeting with the Dean or
 - b. The Dean and involved parties; or
 - c. The Dean, involved parties, and an additional student support person (the Student Mentor Coordinator or their Clinical Mentor Coordinator).
4. All parties will be informed as to the date, time, and place the grievance will be discussed. Each party will have the opportunity to provide the attending members with supporting documentation no later than 48 hours prior to the scheduled meeting.
5. At the conclusion of the meeting, if a satisfactory resolution was not achieved the Dean reserves the right to consult the Advisory Board on a reasonable solution. The Dean will then make the final resolution to the matter.
6. The written recommendation of the Dean, will be reported to the involved parties within 15 calendar days after the conclusion of the meeting.

Grievance Process for those involving the Dean

If the grievance involves the Dean the written grievance shall be submitted to the Human Resources/Chief Operating Officer of Commonsense Childbirth Inc. The following steps should be taken:

Step 1:

1. The email shall be sent to at hr@commonsensechildbirth.org, with a copy (cc'd) submitted at the same time to the Dean.

The written grievance must include the name of the complainant, an explanation of the concern, proof of violation of the Code of Conduct or company policy(ies), and the desired resolution.

Step 2:

1. A meeting will be scheduled by HR, involving the complainant, to better understand the concern. If determined by HR that further action is warranted, the complaint will proceed to Step 3.
2. If no further action is warranted, a written recommendation will be reported to the involved parties within 15 calendar days after the conclusion of the meeting.

Step 3:

1. An internal review process will be initiated, which may include one, or a combination of the following:
 - a. A private meeting with the Dean, to facilitate a review of the complaint and to offer the Dean an opportunity to rebuttal.
 - b. An internal investigation process led by the HR department and/or President.
 - c. A mediation meeting, with the Dean, involved parties, and HR department representative and/or President, and a facilitator (if requested by any of the parties).

An additional CCSM staff member will be present as a witness and to record minutes of the meeting.

Unresolved grievances and complaints may be directed to Commission for Independent Education 325 West Gaines Street, Suite 1414 Tallahassee, FL 32399-0400, phone number (888) 224-6684; or to the Midwifery Education Accreditation Council (MEAC) 850 Mt. Pleasant Ave. Ann Arbor, MI 48103 info@meacschools.org Tel (360) 466-2080

What to do if you Observe a Violation of the Code

If you perceive a violation of this Code in any CCSM Setting, you may follow the procedures in the Grievance and Complaint Process. Student complaints may be sent via the [Student Grievance and Complaint Form](#) describing the unacceptable behavior. Staff and/or Faculty may be sent via the [Staff & Faculty Grievance and Complaint Form](#) describing the unacceptable behavior.

MIDWIFERY MATTERS

INTRODUCTION

CCSM was established to provide midwifery education and training. We designed this program to enable students to gain the knowledge and skills needed to become highly competent midwives. We place an emphasis on teaching the art of out-of-hospital birth, differentiating between low-risk and high-risk pregnancies and preparing students to organize and operate as a professional midwife after licensing. Our graduates will know how to work within their legal scope of practice and will be educated in collaborative management with other medical professionals. Our graduates will possess the knowledge and skills essential to practice as a Licensed Midwife under the Midwifery Practice Act, Florida Statute 467. The Department of Health, Council of Licensed Midwifery and the Division of Medical Quality Assurance in the State of Florida regulate Licensed Midwives. The protocols for Licensed Midwives in Florida are contained within the Council of Licensed Midwifery Rules, Chapter 64B24, of the Florida Administrative Code. Core Competencies of the Midwives Alliance of North America (MANA) and the American College of Nurse Midwives (ACNM), as well as the Florida Department of Education - Health Science Core, the Midwifery Education and Accreditation Council (MEAC) Curriculum Essential Competencies and the International Childbirth Initiative's (ICI) 12 Steps to Safe and Respectful MotherBaby-Family Maternity Care are incorporated into our midwifery programs (see appendix).

Graduates of the Direct-Entry Midwifery Program will be eligible to sit for the North American Registry of Midwives (NARM) exam. The NARM is the national licensing exam for the Midwifery profession in both Florida and California. Graduates will receive a Diploma from CCSM and on passing the NARM they will also be awarded the Certified Professional Midwife (CPM) national credential from NARM. Students must pass the NARM exam and be granted licensure by the Council of Licensed Midwifery before they may work as a midwife in the State of Florida. Contact NARM at www.narm.org for testing information and details about the CPM credential and the Council of Licensed Midwifery for licensure information at <http://www.floridahealth.gov/licensing-and-regulation/midwifery/>

Commonsense Childbirth School of Midwifery was granted institutional accreditation by the

Midwifery Education Accreditation Council ([_MEAC_](http://www.meacschools.org)) on July 8, 2020. For more information go to www.meacschools.org.

MIDWIFERY HISTORY

Midwife means “with woman”

Throughout history, women of strength and wisdom have practiced midwifery. Indigenous and traditional cultures hold their midwives in great esteem and recognize them for their selfless and sacred contributions to society. Midwives throughout the ages have supported other women so they could realize their power and their beauty through the work and the wonder of labor and childbirth. Historically, midwives were older women who had already given birth. Their skills and knowledge passed from generation to generation as they were honored and respected throughout the centuries.

During the Renaissance, the Church often licensed European midwives. As time passed, scientific knowledge increased and European healthcare systems developed. Midwifery skills and services have remained an integral part of maternity care in Europe and the rest of the world. Midwives deliver over 80% of babies born in the world today. Western European countries have lower infant and maternal mortality rates, lower cesarean rates, fewer unnecessary interventions and lower healthcare costs than in the United States. This is accomplished by an extensive health care and social support system, wherein midwives are the primary maternity care providers for women. Midwives today are well-educated

and competent primary caregivers for normal pregnancy and birth. They should be given the same respect today as was given throughout the centuries to their ancestral sisters. Midwives understand the mind-body connection in providing care. They have the knowledge and skills to provide professional health care as well as to counsel and educate.

US lags behind developed world in successful births



In the 20th century, midwifery was nearly eliminated in the U.S. A purposeful smear campaign targeted midwives who were attending mothers at home. As the medical profession developed, many states passed laws restricting and preventing midwifery practice, and accepted

federal funding for public health departments and professional nurses. Southern states in particular instituted laws to regulate Black midwives who cared for all women, including the poor, and rural and African-American communities, as they had done since their enslavement, and throughout the ‘Jim Crow’ period and beyond. In 1920, Florida Health Department officials estimated that 4000 midwives were practicing in Florida. In 1931, licensing became a requirement in this state. Fewer than 1400 midwives were licensed and

their numbers declined rapidly following efforts to ‘retire’ and replace them, while encouraging women into hospitals to deliver their babies. Sadly, the majority of midwives were gone by the 1960s and American women were mostly delivered in hospital with obstetricians, a trend that continues to this day.

The 1960s brought a renewed interest in holistic lifestyles, alternative healthcare practices, natural childbirth and breastfeeding. Women wanted to be more educated about their pregnancies, fathers wanted to become more involved in the births of their children and consumers began to seek options for “awake and aware” childbirth. National organizations such as ASPO-Lamaze, International Childbirth Education Association (ICEA) and La Leche League were founded to respond to consumer needs. The demand for midwives began to grow again across the United States. In the early 1970’s Florida initiated licensing of Certified Nurse-Midwives (CNMs) as Advanced Registered Nurse Practitioners through the Board of Nursing. These CNMs began to provide maternity care in county public health clinics and hospital-based deliveries. However, hospital policies such as restricting movement of women in labor, prohibiting fathers from the labor and birth arena, strapping women in the lithotomy position for delivery, general anesthesia and prolonged separation of mother and newborn motivated consumers to seek alternative care and out of hospital birthing options.

The Florida midwifery law required Licensed Midwives to complete a specified number of deliveries under the training of a physician and receive an endorsement from the Health Department director in the county in which the applicant resided. Both requirements were increasingly impossible to satisfy. A few applicants who completed physician-supervised training sued the state of Florida in the 1960s and 1970s to become “Licensed Lay Midwives” and were able to open birth centers and provide home births to meet the increasing consumer demand for out of hospital services.

In 1979, as Florida contemplated how to eliminate the “midwifery problem” once again, a handful of consumers and aspiring midwives founded the Midwives Association of Florida (MAF) to pass licensing legislation. In 1982, the Midwifery Practice Act became law. Licensed Midwives were now required to complete a post-secondary “direct entry” education program and pass a state licensing examination. “Direct Entry” is a term borrowed from Europe where most midwives enter directly into midwifery education. Nursing is not a prerequisite for acceptance into a “direct entry” midwifery program.

In 1983, two “direct entry” midwifery schools opened in Florida: the South Florida School of Midwifery in Miami, and the North Florida School of Midwifery in Gainesville. In 1984, the Florida legislature, during its Sunset Review process, found licensed midwifery to be safe and effective and endorsed the provisions of the midwifery licensing law. However, in May 1984, as a result of an amendment added during the final days of the legislative session by a physician legislator, the law renewing licensure of direct-entry midwives contained a

provision restricting

licensing to only those midwives who were currently licensed, with future licensing limited to those students who were already enrolled in one of the two midwifery schools.

MAF, Florida Friends of Midwives, the Midwifery Access Project and many others finally succeeded in lifting these restrictions 11 years later, during the 1992 legislative session. After being signed into law by Governor Lawton Chiles, whose support contributed to the legislative success, F.S. 467, the Midwifery Practice Act, became law on October 1, 1992, once again re-opening Florida's licensing of direct-entry midwives.

Women across the U.S. are increasingly choosing the support and comfort of a midwife-assisted birth. Growth is expected to remain steady as the number of practicing direct-entry midwives and nurse-midwives continues to increase. Several states have passed favorable midwifery legislation, and more join them each year. Increasingly, research proves to policy makers the valuable, cost-effective services that midwives provide, and recently enacted national health care reform legislation secures federal reimbursement of all state-licensed maternity care providers practicing in birth centers including Florida Licensed Midwives and Certified Professional Midwives (CPMs).

MIDWIFERY DEFINITIONS

THE MIDWIVES MODEL OF CARE™

The Midwives Model of Care™ is based on the fact that pregnancy and birth are normal life events. The Midwives Model of Care™ 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 delivery 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.

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DEFINITIONS: Direct-Entry Midwives

STATE MIDWIFERY

Definition of Licensed Midwifery (LM) Practice in Florida

“Midwifery” means the practice of supervising the conduct of a normal labor and childbirth, with the informed consent of the parent; the practice of advising the parents as to the progress of the childbirth; and the practice of rendering prenatal and postpartum care.

Source: <https://www.flsenate.gov/Laws/Statutes/2012/Chapter467/All>

Florida Licensed Midwives

In Florida, a Licensed Midwife (LM) provides primary maternity care for women with low risk pregnancies, offering complete prenatal, delivery and postpartum care. Licensed Midwives may work to meet their communities’ needs in a variety of settings including home birth practices, birth centers, clinics and hospitals. They are also eligible to be Medicaid providers and receive insurance reimbursement.

In conjunction with a physician, Florida Licensed Midwives may provide collaborative prenatal and postpartum care for women whose pregnancies have been screened as at-risk.

The Department of Health, Council of Licensed Midwifery and the Division of Health Quality Assurance in the State of Florida regulate Licensed Midwives. The Midwifery Practice Act is Chapter 467, of the Florida Statutes. The protocols for Licensed Midwives in Florida are contained within the Council of Licensed Midwifery Rules, Chapter 64B24, of the Florida Administrative Code.

Scope of Practice for Florida Midwives

Chapter 467 of the Florida Statutes, the Midwifery Practice Act, defines Midwifery as: “ *The practice of supervising the conduct of a normal labor and childbirth, with the informed consent of the parent; the practice of advising the parents of the progress of the childbirth and the practice of prenatal and postnatal care .*” [467.003 (8)]

“ *Normal labor and childbirth means the physiological process of a healthy woman giving birth to a healthy infant and expelling an intact placenta, without injury, complications or undue strain to the mother .*” [467.003 (9)]

NATIONAL MIDWIFERY

Definition of a Certified Professional Midwife (CPM), North American Registry of Midwives (NARM)

A Certified Professional Midwife (CPM) is a knowledgeable, skilled and professional independent midwifery practitioner who has met the standards for certification set by the North American Registry of Midwives (NARM) and is qualified to provide the Midwives Model of Care™. The CPM is the only midwifery credential that requires knowledge about and experience in out-of-hospital settings. Most CPMs own or work in private home or birth center based practices throughout the United States, Canada, and Mexico. Providing continuous care for women throughout their childbearing cycle, CPMs generally carry a relatively low client load (averaging 3-6 births per month) which allows for more personalized and comprehensive care than typical obstetrical practices. The scope of practice of the CPM is derived from the NARM Job Analysis, state laws and regulations, and individual practice guidelines developed by each midwife according to her skills and knowledge.

Based on the MANA Core Competencies, the guiding principles of the practice of CPMs are to work with women to promote a healthy pregnancy, and provide education to help her make informed decisions about her own care. In partnership with their clients they carefully monitor the progress of the pregnancy, labor, birth, and postpartum period and recommend appropriate management if complications arise, collaborating with other healthcare providers when necessary. The key elements of this education, monitoring, and decision making process are based on Evidence-based Practice and Informed Consent.

Source: <http://narm.org/>

INTERNATIONAL MIDWIFERY

International Confederation of Midwives (ICM)

International Definition of the Midwife

A midwife is a person who has successfully completed a midwifery education programme that is duly recognized in the country where it is located and that is based on the ICM Essential Competencies for Basic Midwifery Practice and the framework of the ICM Global Standards for Midwifery Education; who has acquired the requisite qualifications to be registered and/or legally licensed to practice midwifery and use the title 'midwife'; and who demonstrates competency in the practice of midwifery.

Scope of Practice

The midwife is recognised as a responsible and accountable professional who works in partnership with women to give the necessary support, care and advice during pregnancy, labor and the postpartum period, to conduct births on the midwife's own responsibility and to provide care for the newborn and the infant.

This care includes preventative measures, the promotion of normal birth, the detection of complications in mother and child, the accessing of medical care or other appropriate assistance and the carrying out of emergency measures.

The midwife has an important task in health counseling and education, not only for the woman, but also within the family and the community. This work should involve antenatal education and preparation for parenthood and may extend to women's health, sexual or reproductive health and child care. A midwife may practice in any setting including the home, community, hospitals, clinics or health units.

Adopted at Brisbane Council meeting, 2005 Revised and adopted at Durban Council meeting, 2011 Revised and adopted at Toronto Council meeting, 2017

Source: https://www.internationalmidwives.org/assets/files/definitions-files/2018/06/eng-definition_of_the_midwife-2017.pdf

HYBRID DIRECT-ENTRY MIDWIFERY PROGRAM

(including clinical externship)

MIDWIFERY PROGRAM OVERVIEW

Training Program Name	Hybrid Direct-Entry Midwifery Program
Designation	Diploma in Midwifery
Eligibility	<ul style="list-style-type: none"> <input type="checkbox"/> Be 18 years of age or older <input type="checkbox"/> Be fluent in English <ul style="list-style-type: none"> *CCSM has not been approved to sponsor student visas. Foreign students are responsible for maintaining legal immigration status <input type="checkbox"/> Meet technical performance standards for admission <input type="checkbox"/> Have access to reliable internet and a computer or tablet with camera, microphone, and video conferencing ability. <input type="checkbox"/> Hold a high school diploma, or its equivalent <input type="checkbox"/> Have basic technological skills and abilities <input type="checkbox"/> Have 3 college credits each in Math & English, and a complete Anatomy and Physiology series*
Description	Three year direct-entry midwifery program, 30 months duration which leads to a diploma in midwifery. Clock Hours: 2325 Credits: 91
Program Completion	Most students complete the program within 3-4 years. Students are able to transfer in credit according to the transfer policy and procedure- however students must attend a minimum of 5 semesters at CCSM. Students must complete all graduation requirements within 5 years of enrollment.
Application, Enrollment, Admission Requirements and Prerequisites	<p>CCSM does not discriminate on the basis of race, sex, color, religion, or national origin. Students are admitted on an annual basis. Continuance for each successive year will be based on attitude, behavior, and the academic achievement of the student and is entirely the decision of the school.</p> <p>CCSM will base its admission decisions on an overall evaluation of applicants' merits, strengths, and weaknesses. Applicants should demonstrate combinations of academic preparation, aptitude, motivation, and maturity that promise success in a professional midwifery program.. Admission to the school is at the discretion of the Dean.</p>

	<p>Application fee is \$75 and is non-refundable.</p> <p>The application process and all forms are posted on the CCSM website at: https://commonsensemifwifery.org/hybrid-direct-entry-midwifery-program/</p> <p>Students must submit a completed application package and attend a personal interview with admissions personnel. To practice as a Florida Licensed Midwife applicants must not have any former or current felony on record or have been terminated from any state or federal Medicaid program.</p> <p>The Enrollment Agreement constitutes a binding contract between the institution and the student and no further modification or representation except as herein expressed by both parties will be recognized.</p> <p>All programs require students to complete a four-hour HIV/AIDS course or one-hour update if a currently licensed healthcare provider before starting. The following will need to be completed before enrollment in the program. (Applicants are encouraged to start these within the community prior to the start of school, if possible.)</p> <ul style="list-style-type: none"> ○ Math (3 college-credits) ○ English (3 college-credits) ○ Anatomy and Physiology 1 and 2 (3 college-credits) ○ CPR/BLS for the Healthcare Provider (must include hands-on component) ○ Childbirth Education Training- preferably includes out-of-hospital (6 hours minimum) ○ Breastfeeding Support Training (6 hours minimum) ○ Doula Training ○ Bloodborne Pathogen Training (OSHA) ○ HIV (4-hour minimum) ○ Neonatal Resuscitation - AAP-approved - must include hands-on component (<i>completion within first year in program</i>)
<p>Cost***</p>	<p>Program Cost: \$35,850.00</p> <p>Tuition: \$31,850.00</p> <p>Total Program Credits: 91 credits</p> <p>Cost per Credit: \$350.00</p>

	<p>Application fee: \$75.00 (non-refundable)</p> <p>Enrollment fees include:</p> <p>Registration fee of \$1,000.00 and Technology Enrollment fee of \$500.00</p> <p>Skills Fee (per semester): \$500.00</p> <p>Student payment schedules for tuition and fees will be worked out on an individual basis and are due as agreed per the contract signed at enrollment.</p> <p>Students are responsible for the purchase of textbooks. Lists will be provided at Student Orientation meetings and at the beginning of any session when updates/changes are made for textbooks. (approx \$1000)</p> <p>Students are responsible for the purchase of all midwifery equipment used in their Clinical Externship and onward into professional practice (approx \$2000)</p> <p>Students are responsible for all travel expenses related to in-person attendance at Lab classes each semester (cost varies)</p> <p>Students are encouraged to work with preceptors within their home community. Some states (such as NY) do not allow practice by direct entry students and those students will incur additional relocation expenses. Students may decide voluntarily to travel to gain clinical experience. Students are responsible for all expenses related to clinical placement. CCSM discourages the use of paid clinical sites.</p> <p>Additional semesters to complete clinical requirements beyond the completion of academic coursework \$500/6 months</p>
<p>Format</p>	<p>Hybrid program, didactic courses are offered in 17-18 week semesters with live instruction virtually through video conference one day per week. Lab courses are offered each semester, with weekly virtual meetings and an in-person lab workshop in Winter Garden, FL twice a year. Clinical externships occur in clinical practices in the student’s local community or at a relocation site, as agreed upon by the student and clinical preceptor, and approved by CCSM.</p>
<p>Assessment</p>	<p>All classes, clinicals and work is taught and assessed by:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Lecture <input type="checkbox"/> Project Presentation/Analysis

	<ul style="list-style-type: none"> <input type="checkbox"/> Written examination/ term paper/ research paper <input type="checkbox"/> Lab <input type="checkbox"/> Externship <input type="checkbox"/> Demonstration/practicum <input type="checkbox"/> Final projects, presentation, report, interview <p>Classes, practicums, and assessments are delivered by the Dean, Faculty and Preceptors. (Figure 1)</p>
<p>Time and Credits</p>	<p>The direct entry student completes 750 classroom clock hours, 50 credits; 165 lab clock hours, 11 credits and 1350 externship clock hours, 30 credits during which time the student will complete the observation of 25 women in the intrapartum period and the managed care of 50 women in each of the prenatal, intrapartum, and postpartum periods, and 50 newborn exams.</p>
<p>Objectives</p>	<p>Upon graduation, students will be able to:</p> <ul style="list-style-type: none"> ● Practice independently as a Licensed Midwife ● Provide maternity care as an informed professional who is aware of community health issues, epidemiological concepts and social service resources ● Communicate effectively and employ counseling techniques when necessary ● Understand the importance of research and statistical data and to use both for professional growth, high standard of practice, and to educate the public ● Provide collaborative prenatal and postpartum care to pregnant women not at low risk in their pregnancy, labor, and delivery, within a written protocol within local regulations ● Provide "evidence-based maternity care, acknowledging the interaction between the MotherBaby dyad, Family and Environment as well as their interactions with health providers and health systems" (International Childbirth Initiative) ● Pass the North American Registry of Midwives (NARM) National Examination ● Meet Criteria for becoming a Certified Professional Midwife (CPM)
<p>Class Size</p>	<p>Enrollment is limited to 25 students per class.</p>

<p>New Student Orientation</p>	<p>All students who are attending CCSM for the first time are required to attend an orientation.</p> <p>There is no charge for this orientation; however, it will appear on the student's transcript.</p>
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**Or demonstrate competencies by passing the College Level Equivalent Proficiency (CLEP) with a score of 45 or higher, or have passed the College Level Academic Scholastic Test (CLAST) with a score of 295 or higher.*

***1 Clock Hour is equivalent to a period of 60 minutes with a minimum of 50 minutes of instruction in the presence of an instructor.*

**** Federal Student Financial Aid is not available at CCSM.*

ACADEMIC CURRICULUM AND CLINICAL PROGRAM

The Hybrid Direct-Entry Midwifery program is designed to meet the educational needs of the student who enrolls with no prior midwifery or nursing education and requires the completion of our Midwifery Core Curriculum.

CCSM reserves the right to change program content, faculty or schedules as it deems necessary to maintain a suitable learning setting. No change in total hours, program titles or tuition shall occur without the approval of the licensing board and execution by the student of a new enrollment agreement.

Our Program

CCSM curriculum covers all the academic and clinical requirements specified in Florida Statute 467 the Midwifery Practice Act. The Midwifery Education Accreditation Council (MEAC) Essential Competencies for Midwifery Education are based on the ICM Essential Competencies, NARM Knowledge and Skills List, and MANA Core Competencies and they form the basis for the Direct Entry Midwifery Program at CCSM. Core Competencies identify the essential knowledge base required of an entry-level midwife. The curriculum is also consistent with the Curriculum Framework developed by the Florida Department of Education and the requirements of Florida law. Students enrolled in the Direct Entry Midwifery Program's academic and clinical coursework are considered full-time students. There is no part-time option.

Students attend didactic and skills classes at CCSM for 3 years, increasing their knowledge and skills and displaying increasing levels of responsibility in their clinical externship placements.

Year 1: Students are introduced to the midwifery model of care and the JJ Way. They learn principles of public health, the provision of healthcare, and basic midwifery knowledge and skills. Clinical externships focus on observation and gaining the ability to begin assisting under supervision.

Year 2: Students gain a foundation of knowledge and skills in the provision of normal prenatal, intrapartum, and postpartum care. Clinical externships hone the students skills as an assistant while teaching preparing students for the role of primary midwife under supervision.

Year 3: Students learn the knowledge required to recognize and manage deviations from normal and the skills involved in responding to complications occurring during the prenatal, intrapartum, and postpartum periods. Clinical externships give students practice in managing these conditions under the tutelage and supervision of an experienced midwife.

Faculty members are Licensed Midwives, Certified Nurse-Midwives, Medical Doctors, and other professionals who are highly qualified in their respective disciplines. Faculty members have an interest in midwifery education and a desire to promote and to be a part of the profession's growth and success.

The academic environment at Commonsense Childbirth School of Midwifery is geared to the adult learning style. Teaching methodologies use a variety of strategies to engage all learning levels, to develop clinical skills, critical thinking and problem solving abilities. Classes are interactive and student participation is required. Our programs are varied in format. Research is facilitated and encouraged. We provide clinical experience concurrent with academic coursework, giving relevance to classroom material. Upon graduation, the student will have compiled a notebook of materials and practice protocols to be prepared to practice as a Florida Licensed Midwife or Certified Professional Midwife.

Preceptors who work with our students include Licensed Midwives, Certified Nurse Midwives, and Medical Doctors. We believe it is important that students rotate through various types of clinical settings in order to learn valuable skills and to be prepared for all venues of practice.

HYBRID DIRECT-ENTRY MIDWIFERY PROGRAM CURRICULUM

Course Number	Course Title	Credits	Class Hours
Year One Semester One (Fall)			
MW-LEGAL1101	Legal and Ethical Aspects of Midwifery	2	30
MW-CHW1102	Community Health Worker for Midwives	1	15
MICRO1103	Microbiology for Midwives	1	15
HF-1104	Healthcare Fundamentals Theory	2	30
HF-LAB1	Healthcare Fundamentals Lab I	2	30
MWCE-1:1	Clinical Externship 1:1	3	125
	Total	11	245
In-Person Fall Skills			
Year One Semester Two (Spring)			
APR1201	Anatomy and Physiology of the Reproductive Cycle	2	30
MW-CS1202	Communication Skills for Midwives	2	30
MW-EMB1203	Embryology/Fetal Growth and Development	2	30
CAM1204	Intro to Complementary and Alternative Medicine (CAM)	1	15
MW-INTRO1105	Intro The Clinical Setting and Birth Assisting	1	15
MWSL-1	Midwifery Skills Lab I	2	30
MWCE-1:2	Clinical Externship 1:2	3	175
	Total	13	325
In-Person Spring Skills			
Year One Semester Three (Summer)			
MWCE-1:3	Clinical Externship 1:3	2	60
Wkshp	(Required) CCSM Academic Workshop	0	
	Total	2	60
Course Number	Course Title	Cr	Class Hours

Year Two Semester One (Fall)			
MW-PSY2101	Psychology & Counseling for Midwives	2	30
MW-ANT2102	Antepartum Theory	3	45
MW-GMW2103	Global Midwifery	2	30
MWSL-2	Midwifery Skills Lab II	2	30
MWCE-BR-2:1	Birth Review 2:1	CE	15
MWCE-2:1	Clinical Externship 2:1	4	190
	Total	13	340
In-Person Fall Skills			
Year Two Semester Two (Spring)			
MW-NUTR2201	Perinatal Nutrition	2	30
EPI2202	Epidemiology	2	30
MW-ANTCOM2203	Antepartum Complications	2	30
MW-INTRA2204	Intrapartum Theory	3	45
MWSL-3	Midwifery Skills Lab III	2	30
MWCW-BR-2:2	Birth Review 2:2	CE	15
MWCE-2:2	Clinical Externship 2:2	4	200
	Total	15	380
In-Person Spring Skills			
Year Two Semester Three (Summer)			
MWCE-2:3	Clinical Externship 2:3	2	60
Wkshp	(Required) CCSM Academic Workshop	0	
	Total	2	60
Course Number	Course Title	Cr	Class Hours
Year Three Semester One (Fall)			
MW-INTRACOM3101	Intrapartum Complications	3	45
MW-PP3102	Postpartum Theory	2	30

MW-NN3103	The Neonatal Period	3	45
MWSL-4	Midwifery Skills Lab IV	3	45
MWCE-BR-3:1	Birth Review 3:1	CE	15
MWCE-3:1	Clinical Externship 3:1	5	270
	Total	16	450
In-Person Falls Skills			
Year Three Semester Two (Spring)			
MW-GYN3201	Well Person Gynecology & Family Planning	2	30
MW-PI3202	Professional Issues	1	15
PHAR3203	Pharmacology	2	30
MW-PRACT3204	Establishing and Managing a Practice	2	30
JJ WAY-EAC3205	JJ Way®Community Care and Easy Access Clinic™	2	30
MWCE-BR-3:2	Birth Review 3:2	CE	15
MWCE-3:2	Clinical Externship 3:2	5	200
	Total	14	350
In-Person Spring Skills			
Year Three Semester Three (Summer)			
MW-NARM3302	NARM Exam Review	3	45
MWCE-3:3	Clinical Externship 3:3	2	70
	Total	3	45
	Overall Total	91	2325

This program provides students with the academic and clinical learning experiences required for graduation pursuant to Florida's Midwifery Practice Act, FS 467.009 and the Department of Health, Council of Licensed Midwifery and NARM clinical requirements. The Midwifery Core Curriculum is 2325 clock hours over three years.

COURSE DESCRIPTIONS

Year 1, Semester 1

MW-LEGAL1101 Legal and Ethical Aspects of Midwifery

30 clock hours, 2 credits, prerequisites: None

This course covers Florida Law and Rules affecting midwifery practice, the Health Insurance Portability and Accountability Act (HIPAA) requirements, history of midwifery, the legislative and rule-making processes, state licensing and national certification, as well as the roles of state and national private and governmental agencies. Medical terminology, medical errors prevention, charting and documentation, ethics and principles of informed consent are covered. Students will develop their own statements of philosophy and ethics. The student's Protocol Notebook will be introduced.

MW-CHW1102 Community Health Worker for Midwives

15 clock hours, 1 credit, prerequisites: Doula Certification and Lactation Training

This course prepares students to become community-based providers and front-line health workers who, by virtue of their trusted status in the community, serve as a liaison, link and intermediary between health services and the community, to facilitate access to services and improve the quality and cultural competence of service delivery. Students will also learn the scope of practice of a Doula, a perinatal educator, providing culturally sensitive social support, coping with non-medical complications in pregnancy, labor, newborn care and breastfeeding.

MICRO1103 Microbiology for Midwives

15 clock hours, 1 credit, prerequisites: None

This course is a survey of basic principles and concepts in microbiology, virology, and immunology as they relate to midwifery and the pathogenicity of microorganisms as they affect various body sites.

HF-1104 Healthcare Fundamentals Theory

30 clock hours, 2 credits, prerequisites: None

This course introduces classic healthcare principles that underpin future clinical practice. Students will be expected to demonstrate beginning competency in application of the clinical process.

HF-LAB1 Healthcare Fundamentals Lab I

30 clock hours, 2 credits, corequisite: HF-1104 Healthcare Fundamentals Theory

This course includes the practice of fundamental healthcare skills in midwifery including vital signs, aseptic techniques, charting, medical terminology, and techniques in specimen collection.

In addition, students will learn the elements of a physical exam. Required supplies: watch with second hand, blood pressure cuff, adult stethoscope, digital thermometer, and gloves.

MWCE-1:1 Clinical Externship 1:1

125 clock hours, 3 credits, prerequisites: None.

Externship will include orientation to midwifery practice in various settings, and opportunities to observe births. Students are expected to start the semester with a fully onboarded preceptor in which case they will have opportunities to observe prenatal, intrapartum, postpartum and neonatal care. Note that only after the initial (10) observed births, students can start counting prenatal exams, postpartum exams, newborn exams, if their preceptor is in agreement. A Clinical Mentor Coordinator (CMC) will be assigned to each student to facilitate evaluation of the student's process through the clinical preceptorship experience. Students will be able to achieve the learning objectives for this course through the following evaluation methods and learning activities: Clinical hours log, staying current with Typhon, Weekly Clinical Reflection Forms, Monthly Check-In Surveys, Preceptor and Student Evaluations and Reports and Meetings with their CMC.

Year 1, Semester 2

APR1201 Anatomy and Physiology of the Reproductive Cycle

30 clock hours, 2 credits, prerequisites: two semesters of Anatomy and Physiology from a postsecondary accredited institution within the last 10 years with a grade of C or higher

This course reviews the structure and function of the human body with special emphasis on changes and demands on the body systems in the childbearing year and covers structure and function of the male and female reproductive systems, fertility, the menstrual cycle, conception, pregnancy, miscarriage, birth, lactation, and menopause from a biophysical perspective.

MW-CS1202 Communication Skills for Midwives

30 clock hours, 2 credits, prerequisites: None

This course encourages personal growth through group projects and discussions. Topics will include self-esteem, assertiveness, and effective stress management techniques. Theories of psychological development and strategies for change will be explored through self-assessment and class activities. The students will learn to apply this knowledge to their personal and professional relationships to become more efficient and effective midwives. Emphasis will be placed on listening and communication skills and problem-solving techniques.

MW-EMB120 Embryology/Fetal Growth and Development

30 clock hours, 2 credits, prerequisites: None

This course follows the conceptus from fertilization through the embryonic and fetal stages of growth and development, including genetics, inheritance, genetic diseases, congenital anomalies, developmental disorders and potential teratogenic agents.

CAM-2303 Introduction to Complementary and Alternative Medicine (CAM)

15 clock hours, 1 credit, prerequisites: None

Through this course the student will learn alternatives to allopathic medicine with introductions to varied modalities such as physical therapy, homeopathy, chiropractic, massage, acupuncture, and traditional Chinese medicine. This class explores the use of herbs for the management of signs and symptoms of pregnancy by trimester are examined.

MW-INTRO1105 Introduction to Midwifery: The Clinical Setting

15 clock hours, 1 credit, prerequisites: None

This course is meant to introduce the new student to the midwifery model of apprenticeship. The course serves as an introduction to a clinical environment including NARM requirements, Typhon, the student handbook, birth review, and clinical expectations. Successful completion of the course ensures that the student has the knowledge of what a birth assistant does.

MWSL-1 Midwifery Skills Lab I

30 clock hours, 2 credits, prerequisites: HF-LAB1 Fundamentals of Healthcare Lab I

The course introduces the student to clinical elements of an initial prenatal visit with a focus on consultation/preconception counseling, elements of history taking, and principles of informed consent. Students will be expected to complete a skills assessment at the conclusion of the course.

MWCE-1:2 Clinical Externship 1:2

175 clock hours, 3 credits, prerequisites: MWCE-1:1 Clinical Externship 1:1

Externship will include orientation to midwifery practice in various settings, and opportunities to minimally assist prenatal, intrapartum, postpartum and neonatal care. Note that only after the initial (10) observed births, students can start counting prenatal exams, postpartum exams, newborn exams, if their preceptor is in agreement. Their Clinical Mentor Coordinator (CMC) will facilitate evaluation of the student's progress through the clinical preceptorship experience. Students will be able to achieve the learning objectives for this course through the following evaluation methods and learning activities: Clinical hours log, staying current with Typhon, Weekly Clinical Reflection Forms, Monthly Check-In Surveys, Preceptor and Student Evaluations and Reports and Meetings with their CMC.

Year 1, Semester 3

MWCE-1:3 Clinical Externship 1:3

60 clock hours, 2 credits, prerequisites: MWCE-1:2 Clinical Externship 1:2

Students are developing antepartum, intrapartum, postpartum, and newborn skills at their clinical site, learning assist skills incrementally. Their Clinical Mentor Coordinator (CMC) will facilitate evaluation of the student's progress through the clinical preceptorship experience. Students will be able to achieve the learning objectives for this course through the following evaluation methods and learning activities: Clinical hours log, staying current with Typhon, Weekly Clinical Reflection Forms, Monthly Check-In Surveys, Preceptor and Student Evaluations and Reports and Meetings with their CMC.

Year 2, Semester 1

MW-PSY-2101 Psychology & Counseling for Midwives

30 clock hours, 2 credits, prerequisites: None

This course, developed especially for midwives, is the psychological study of the changes that occur in people and their behavior during the lifespan. Special emphasis will be given to women's development from puberty to menopause with highlights on the normal psychology of women during pregnancy, childbirth and postpartum. This course also covers the knowledge and skills needed to counsel clients and family members in labor and birth related issues. Emotional, psychological, and spiritual issues will be discussed in this course. Topics include depression during the childbearing year, domestic violence, disclosing diagnostic testing results, caring for abuse survivors, adoption, loss, and the grieving process.

MW-ANT2102 Antepartum Theory

45 clock hours, 3 credits, prerequisites: APR1201 Anatomy and Physiology of the Reproductive Cycle

This course will cover the initial contact with a pregnant client through the onset of labor and the role of the midwife in helping to achieve optimal pregnancy outcome. Normal pregnancy will be emphasized. A wide range of topics will be covered including establishing pregnancy, determining due date, deviations from the normal pregnancy and physiologic basis of solutions for the common discomforts of pregnancy, the schedule of prenatal care, assessments, interventions, testing, education and guidance throughout the course of pregnancy, Initial and ongoing evaluation of wellbeing, strategies and guidance for risk prevention and warning signs. The class will integrate the medical and midwifery models while providing the foundation for the student to begin the evolution toward providing primary care at clinical sites.

MW-GMW2103 Global Midwifery

30 clock hours, 2 credits, prerequisites: None

This course examines global initiatives towards reducing maternal and infant mortality through current practices for the care of birthing persons during the perinatal period. By examining the impact of socioeconomic factors, the social determinants of health, and the impact of colonization, race, and maternal reproductive care from a cultural lens, this course provides students with an overview of the common causes of mortality and morbidity within marginalized populations located within the United States. Students will learn best practices in maternity care from a global perspective, including how to counsel and treat illnesses common to the developing world and skills related to natural disaster relief preparedness.

MWSL-2 Midwifery Skills Lab II

30 clock hours, 2 credits, prerequisites: MWSL-1 Midwifery Skills Lab I

The focus of this course will be on routine prenatal exams through pregnancy and the changes in laboratory results observed during pregnancy. This course is designed to familiarize the student with the numerous diagnostic tests that can be ordered to assist in diagnosing, monitoring and treating the client through the antepartum period. Students will learn to demonstrate accurate specimen collection and assessment of ultrasound and lab tests.

MWCE-BR-2:1 Birth Review 2:1

15 clock hours, corequisite: MWCE-2:1 Clinical Externship 2:1

MWCE-2:1 Clinical Externship 2:1

190 clock hours, 4 credits, prerequisites: MWCE-1:3 Clinical Externship 1:3

Students may assist the primary midwife, providing supportive care that helps to develop critical thinking and other clinical skills, but does not yet apply those skills consistently or proficiently. Their Clinical Mentor Coordinator (CMC) will facilitate evaluation of the student's progress through the clinical preceptorship experience. Students will be able to achieve the learning objectives for this course through the following evaluation methods and learning activities: Clinical hours log, staying current with Typhon, Weekly Clinical Reflection Forms, Monthly Check-In Surveys, Preceptor and Student Evaluations and Reports and Meetings with their CMC.

Year 2, Semester 2

MW-NUTR1301 Perinatal Nutrition

30 clock hours, 2 credits, prerequisites: None

This course will provide the student with a foundation of nutrition and will focus on assessment and counseling skills. Nutritional requirements during pre-pregnancy, pregnancy, lactation, postpartum and infancy will be covered including topics such as food safety, factors that affect

weight gain during pregnancy, care plans for pregnant women with eating disorders, nutritional and fluid demands of women with prolonged labor and many others.

EPI-2202 Epidemiology

30 clock hours, 2 credits, prerequisites: Certificate of Completion for a course on HIV/AIDS

In this course, students will gain an essential understanding of blood-borne pathogens, communicable diseases, and immunodeficiency diseases, with an emphasis on effects during pregnancy, childbirth and lactation. Ethics and public health issues are included.

MW-ANTCOM2203 Antepartum Complications

30 clock hours, 2 credits, prerequisites: MW-ANT2102 Antepartum Theory

This course teaches how to differentiate between high and low risk pregnancy, prevention, identification and management of pregnancy complications. Additionally, this course will review the indications for consultation, referral and collaborative care according to F.S. 467, The Midwifery Practice Act. Ongoing risk assessment during antepartum to determine the appropriate site and provider for each client will be emphasized.

MW-INTRA2204 Intrapartum Theory

45 clock hours, 3 credits, prerequisites: MW-ANT2102 Antepartum Theory

This course will cover the steps of the normal labor process including mechanisms of labor and birth. Students will use their knowledge of the anatomy and physiology of the maternal pelvis and fetal anatomy as well as how to assess the mother and baby's wellbeing and screen for complications in each stage of labor with reference to midwifery practice rules.

MWSL-3 Midwifery Skills Lab III

30 clock hours, 2 credits, prerequisites: MWSL-2 Midwifery Skills Lab II

The course prepares students for an active role on the clinical site including participating in client prenatal, intrapartum, postpartum and neonatal care. This skills lab will focus on skills during the intrapartum period. Students will complete a skills assessment at the conclusion of the course.

MWCE-BR-2:2 Birth Review 2:2

15 clock hours, corequisite: MWCE-2:2 Clinical Externship 2:2

MWCE-2:2 Clinical Externship 2:2

200 clock hours, 4 credits, prerequisites: MWCE-2:1 Clinical Externship 2:1

Externship will include further orientation to midwifery practice, and opportunities to assist or manage prenatal, intrapartum, postpartum and neonatal care. Students may be beginning to make management decisions to prepare for their upcoming role managing the entire

experience. Their Clinical Mentor Coordinator (CMC) will facilitate evaluation of the student's progress through the clinical preceptorship experience. Students will be able to achieve the learning objectives for this course through the following evaluation methods and learning activities: Clinical hours log, staying current with Typhon, Weekly Clinical Reflection Forms, Monthly Check-In Surveys, Preceptor and Student Evaluations and Reports and Meetings with their CMC.

Year 2, Semester 3

MWCE-2:3 Clinical Externship 2:3

60 clock hours, 2 credits, prerequisites: MWCE-2:2 Clinical Externship 2:2

Externship will include further orientation to midwifery practice, and opportunities to assist or manage prenatal, intrapartum, postpartum and neonatal care. Students may be beginning to make management decisions to prepare for their upcoming role managing the entire experience. Their Clinical Mentor Coordinator (CMC) will facilitate evaluation of the student's progress through the clinical preceptorship experience. Students will be able to achieve the learning objectives for this course through the following evaluation methods and learning activities: Clinical hours log, staying current with Typhon, Weekly Clinical Reflection Forms, Monthly Check-In Surveys, Preceptor and Student Evaluations and Reports and Meetings with their CMC.

Year 3, Semester 1

MW-INTRACOM3101 Intrapartum Complications

45 clock hours, 3 credits, prerequisites: MW-INTRA2204 Intrapartum Theory, MW-PP2301 Postpartum Theory

This course differentiates normal and abnormal labor and delivery; prevention, identification and management of complications; how to differentiate between normal and abnormal immediate postpartum scenarios; and prevention, identification, and management of maternal and neonatal complications. This class focuses on the scope of midwifery practice with protocols for consultation, referral, transfer of care, emergency and non-emergency transport. Class will include a Breech Without Borders Pro Course.

MW-PP2301 Postpartum Theory

30 clock hours, 2 credits, prerequisites: MW-INTRA2204 Intrapartum Theory

In this course the midwifery student will gain an understanding of the normal events in the immediate postpartum and ensuing days. The cause of postpartum discomforts and how to alleviate them will be taught. Postpartum nutritional requirements, emotional changes, bonding, mothering concerns, evaluations and counseling of the client will be covered and students will learn how to monitor the needs of the mother and child in the "fourth trimester" including conducting the postpartum visits. Initiating and establishing successful breastfeeding, recognizing and managing common breastfeeding problems. It also addresses cultural barriers to knowledge and support to breastfeeding families and health practitioners.

MW-NN2302 The Neonatal Period

45 clock hours, 3 credits, prerequisites: MW-EMB1203 Embryology/Fetal Growth and Development

This course covers basic anatomy and physiology of the newborn, transition from intrauterine to extrauterine life, normal newborn appearance and behavior, the midwife's role and responsibilities during the neonatal period. In addition, this course covers complications of the newborn. The signs and symptoms of impending problems, physical exams, identifying and managing abnormal findings, common medications and when to transfer to the NICU will be discussed. Maintaining good relationships and communicating effectively with the pediatrician are included, as well as referrals to lactation counselors and other professional services to help parents cope with difficulties including breastfeeding problems, prematurity, multiples, congenital anomalies, and other challenging situations.

MWSL-5 Midwifery Skills Lab V

45 clock hours, 3 credits, prerequisites: MWSL-4 Midwifery Skills Lab IV

This course prepares students for primary management of clients during pregnancy, labor, delivery and the postpartum including management of the newborn in the birth center and/or homebirth. This lab will focus on abnormal and emergency situation skills. Students will learn skills for providing emergency management while accessing medical services. Additionally, this course is designed to integrate theory and principles of suturing with practical experience and knot tying techniques on laboratory models. Students will gain an understanding of relevant anatomy and physiology, cause and prevention of lacerations, severity of wounds, pre-suturing assessments, relaxation techniques to be used during the suturing process, postpartum assessment of the sutured area and teaching techniques to aid the client in facilitating the healing process. Students will complete a skills assessment at the conclusion of the course, which will demonstrate satisfactory completion of all NARM required clinical skills and experiences.

MWCE-BR-3:1 Birth Review 3:1

15 clock hours, corequisites: MWCE-3:1 Clinical Externship 3:1

MWCE-3:1 Clinical Externship

270 clock hours, 5 credits, prerequisites: MWCE-2:3 Clinical Externship 2:3

Externship will include further orientation to midwifery practice, and opportunities to manage prenatal, intrapartum, postpartum and neonatal care. As students approach their last births students they should be able to competently manage normal labor from the onset of labor to discharge (for at least 25 births where the student catches the baby). They will also be working towards their Continuity of Care clients (minimum of five). Their Clinical Mentor Coordinator (CMC) will facilitate evaluation of the student's progress through the clinical preceptorship experience. Students will be able to achieve the learning objectives for this course through the following evaluation methods and learning activities: Clinical hours log, staying current with Typhon, Weekly Clinical Reflection Forms, Monthly Check-In Surveys, Preceptor and Student Evaluations and Reports and Meetings with their CMC.

Year 3, Semester 2

MW-GYN3201 Well Person Gynecology & Family Planning

30 clock hours, 2 credits, prerequisites: None

This course is an introduction to the fundamentals of well-woman care from the onset of menarche through menopause including history and physical examination. Students will gain the knowledge and skills to provide care, support and information to women regarding their overall reproductive health including understanding the normal life cycle of women. Topics of this course include a review of the menstrual cycle, evaluations and treatments for problems associated with the female reproductive system and breasts, natural family planning and other methods of contraception, fertility awareness and enhancement, issues involved in decision-making regarding unwanted pregnancies, and women's health issues such as sexuality, depression, anxiety, cancer screening, prevention of osteoporosis and heart disease including medical and "alternative" modalities for prevention, assessment and treatment including resources for counseling and referral.

MW-PI3202 Professional Issues

15 clock hours, 1 credit, prerequisites: None

This course addresses the legal aspects of the midwifery profession. through exploring issues of impact such as socio-cultural, historical, political, regulatory, ethical, and institutional factors. Against these factors, the role of the midwife as primary health provider will be considered.

PHAR-2201 Pharmacology

30 clock hours, 2 credits, prerequisites:

This course presents basic principles of pharmacology, pharmacokinetics and drug therapy for pregnancy, birth and postpartum. Students will explore, among other topics, routes of administration, the nervous system and chemical interactions in the body, pregnancy drug categories and potential effects on the developing fetus, the “rights” of administration, management of idiosyncratic reactions and anaphylaxis, and other knowledge necessary for safe administration of medications. Prevention of medical errors as regards to pharmacology and medical charting procedures will be covered.

MW-PRACT3304 Establishing and Managing a Practice

30 clock hours, 2 credits, prerequisites: None

This course is an overview of the professional, legal and ethical issues related to establishing and maintaining a practice. Emphasis will be on establishing a business plan and working collaboratively with other health care providers as well as the everyday workings and administration of practice. Additional topics covered also include malpractice insurance options, choosing a midwifery partner, the employer-employee relationship, scheduling, obtaining medical equipment, pharmaceuticals, backup with area physicians and hospitals, quality improvement, preventing litigation, and the benefits and problems of working with insurance, HMOs, and Medicaid. Billing and coding will also be discussed.

JJ Way-EAC3301 JJ Way® Community Care and Easy Access Clinic™

30 clock hours, 2 credits, prerequisites: MW-PSY-2101 Psychology & Counseling for Midwives

This course covers the role of the midwife in affecting the surrounding community by supporting women who may not otherwise receive prenatal care. This training provides ways to negotiate and navigate through the perinatal health care systems for women and babies who are at particular risk by encouraging collaboration and the sharing of knowledge and resources. Topics covered will include each level of the perinatal hierarchy, methods of access and approaches to increase linkages. The JJ Way® is a maternal child health care system which promotes the four tenets of access, connections, knowledge and empowerment as an advocacy tool to decrease health disparities, improve birth outcomes, and reduce costs.

MWCE-BR-3:2 Birth Review 3:2

15 clock hours, corequisites: MWCE-3:2 Clinical Externship 3:2

MWCE-3:2 Clinical Externship 3:2

200 clock hours, 5 credits, prerequisites: MWCE-3:1 Clinical Externship 3:1

Externship will include further orientation to midwifery practice, and opportunities to manage prenatal, intrapartum, postpartum and neonatal care. As students approach their last births, they should be able to competently manage normal labor from the onset of labor to discharge (for at least 25 births where the student catches the baby). They will continue to work with their Continuity of Care clients (minimum of five). Their Clinical Mentor Coordinator (CMC) will facilitate evaluation of the student's progress through the clinical preceptorship experience. Students will be able to achieve the learning objectives for this course through the following evaluation methods and learning activities: Clinical hours log, staying current with Typhon, Weekly Clinical Reflection Forms, Monthly Check-In Surveys, Preceptor and Student Evaluations and Reports and Meetings with their CMC.

Year 3, Semester 3

MW-NARM3302 NARM Exam Review

45 clock hours, 3 credits, corequisites: MWCE 3:2 Clinical Externship 3:2

This course is a review in preparation for the North American Registry of Midwives (NARM) examination for licensure to practice as a Midwife in the State of Florida. Also covered will be multiple choice test construction and test taking strategies.

MWCE-3:3 Clinical Externship 3:3

70 clock hours, 2 credits, prerequisites: MWCE-3:2 Clinical Externship 3:2

Externship will include further orientation to midwifery practice, and opportunities to manage prenatal, intrapartum, postpartum and neonatal care. As students approach their last births they should be able to competently manage normal labor from the onset of labor to discharge. They will be wrapping up births and their Continuity of Care clients (COC) clients. Their Clinical Mentor Coordinator (CMC) will facilitate evaluation of the student's progress through the clinical preceptorship experience. Students will be able to achieve the learning objectives for this course through the following evaluation methods and learning activities: Clinical hours log, staying current with Typhon, Weekly Clinical Reflection Forms, Monthly Check-In Surveys, Preceptor and Student Evaluations and Reports and Meetings with their CMC.

CLINICAL REQUIREMENTS

CCSM CLINICAL REQUIREMENTS
PHASE: OBSERVE
<p>(25) Births Observes</p> <ul style="list-style-type: none"> ❖ Signature needed to validate birth in any setting <p>(10) Observed births = silent observation</p> <ul style="list-style-type: none"> ❖ Observer Preceptor Agreement may be required <p>(15) Observed births = silent or assist with <u>minimal</u> participaiton (Onboarded Preceptor Required)</p> <ul style="list-style-type: none"> ❖ after initial (10) observed births, students may start counting prenatal exams, postpartum exams, newborn exams ❖ (2) Planned Hospital Births (non-intrapartum transfers)*
PHASE: ASSIST
<p>(25) Prenatal Exams Assist under Supervision</p>
<p>(5) Initial Prenatal Exams Assist under Supervision</p>
<p>(20) Births Assist under Supervision</p>
<p>(10) Postpartum Exams as Assist under Supervision</p>
<p>(20) Newborn Exams as Assist under Supervision</p>

PHASE: MANAGE	
(55) Managed Prenatal Exams	
(20) Managed <i>Initial</i> Prenatal Exams	
(30) Managed Births (Primary under Supervision)	
<ul style="list-style-type: none"> ❖ (5) Continuity of Care: Defined as (5) prenatals spanning (2) trimesters, the birth, newborn exam and (2) postpartum exams. <ul style="list-style-type: none"> ❖ Maximum of (2) intrapartum transfers ❖ (10) births must include at least (1) prenatal appointment 	
(30) Managed Newborn Exam	
(40) Manage Postpartum Exams	
TOTALS	
(105)	Prenatals
Births: minimum of (5) home births must be attended in any role	
(25)	Observed Births
(50)	Managed Births (Assist under supervision included here)
Postpartum: (10) 6-week appointment in any phase	
(50)	Postpartum Exams (Assist under supervision included here)
(50)	Newborn Exams (must be done within 12 hours of birth) (Assist under supervision included here)
1350 Clinical Externship Hours	
(2) PAPs - skills requirements**	

Additional requirements for graduation include 5 sutures and Practice Guidelines (informed consent, protocols, emergency care plan, etc.).

*Planned hospital births may be observed at any point throughout the three-year program.

***Students should keep it in mind during initials and postpartum to sign skills book*

NOTE: Students from outside of the State of Florida, and Florida students desiring CPM certification to be granted simultaneously with Florida Licensure, will need to complete a NARM Application Packet (provided by CCSM).

Preceptors and Clinical Externship: **before** starting externship, the preceptor must be approved and onboarded by CCSM Clinical Department following the onboarding instructions.

The following will need to be completed by the end of the first-semester or sooner if your preceptor requires it for clinical placement. You are encouraged to start these within your community prior to the start of school, if possible.

- Neonatal Resuscitation - AAP-approved - must include hands-on components.
- CPR/BLS for the Healthcare Provider - must include hands-on component)
- Childbirth Education Training- preferably includes out-of-hospital (6 hours minimum)
- Breastfeeding Support Training (6 hours minimum)
- Complete Doula Training
- Bloodborne Pathogen Training
- HIV (4-hour minimum)

SKILLS BOOK

Practical Skills Guide For Midwifery Book

This book is used exclusively throughout the clinical training to document students' skills ongoingly. Both preceptors and clinical instructors may sign off students during the externship experience or during classroom skills lab courses. This book should be completed by the end of the full three-year training period and presented for final evaluation in order to be eligible to apply for the NARM exam through CCSM.

<http://www.morningstarpub.com/psgm.html>

CLINICAL EXTERNSHIP COURSES

Clinical Hours

For students lacking clinical hours here is a short list options to obtain more hours aside from time with your preceptor:

- Approved workshops, seminars, conferences
- Volunteer at local or national midwifery organization
- Some links for of approved courses for additional clinical hours:

<https://www.kibiceu.com>

Observe Phase: Students are introduced to antepartum, intrapartum, postpartum, and newborn skills at the clinical site. The observer role is one of learning and observation, beginning to explore the relationship between theoretical knowledge of skills and practical application.

Ten Silent Observer experiences as well as the two planned hospital births do not require a CCSM-approved Preceptor and can be approved in observation-only clinical sites (home, birth center, hospital), although an Observe Preceptor Agreement may be required. The clinical department will accept 10 observed births from another MEAC program or Phase 1 of the PEP process OR 5 prior births in any capacity (doula, BA, etc.), from within 24 months prior the date of enrollment.

Beginning Management Phase (Assist Under Supervision): Students are developing antepartum, intrapartum, postpartum, and newborn skills at their clinical site, learning skills incrementally. Students may assist the primary midwife, providing supportive care that helps to develop critical thinking and other clinical skills, but does not yet apply those skills consistently or proficiently. They should not be expected to be able to manage the entire labor on their own. They may be beginning to make management decisions to prepare for their upcoming role managing the entire experience. Breaking down the management during labor, birth and the immediate postpartum into different components helps make sure the student develops proficiency in all the management steps.

Manage Phase: Toward their last management, students are able to competently manage normal labor from the onset of labor to discharge. They are able to identify and

appropriately manage complications and transports, have the hands-on skills as well as the knowledge to determine normal from abnormal, the implications and management of abnormal.

“A student midwife, during training, shall undertake, under the supervision of a preceptor, the care of 50 women in each of the antenatal, intrapartum, and postpartum periods, but the same women need not be seen through all three periods. The student midwife shall observe an additional 25 women in the intrapartum period before qualifying for a license.”
FS 467.009

Each birth experience is different and unique. Knowing this, the exact number of hours required to attend the mandated number of birth experiences will vary. However, students will spend at least 1350 clock hours in the clinical setting. Students must understand that the time spent at a birth may be in addition to the externship hours listed in the curriculum.

Graduates of the Direct-Entry Midwifery Program will be eligible to sit for the North American Registry of Midwives (NARM) exam. The NARM is the Florida licensing exam for the midwifery profession. Graduates will also receive a diploma from CCSM. Students must pass the NARM exam and be granted licensure by the Council of Licensed Midwifery before they may work as a midwife in the State of Florida.

Clinical externships at CCSM meet Florida state licensure and NARM certification requirements, and ensure that students are properly prepared for midwifery practice. On occasion, additional time is required beyond the 3 year academic program to complete clinical externships. All graduation requirements must be met within 5 years from the date of enrollment.

Please note, Florida clinical experience requirements for midwifery licensure are different from NARM clinical experience requirements for the CPM. All students must complete CCSM’s requirements for clinical experience, regardless of intended location of practice, in order that both Florida and NARM minimums are met.

NARM Requirements:

10 Births as an Observer:

The applicant must attend a minimum of ten births in any setting, in any capacity (observer, doula, family member, friend, beginning student).

Assistant Under Supervision:

20 births, 25 prenatals (including three initial exams), 20 newborn exams, and ten postpartum visits

Primary Under Supervision:

75 prenatal exams, including 20 initial exams

20 newborn exams

40 postpartum exams

A minimum of 25 primary births, to include:

- 5 births with full Continuity of Care (COC): five prenatals spanning at least two trimesters, the birth, newborn exam (within 12 hours), and two postpartum exams.
- 10 births with one prenatal visit
- 10 births in homes or other out-of-hospital settings

Semester Credit : Hours Ratio

CCSM Direct Entry Midwifery Program

Total program credits: 91

Total program hours: 2325

Lecture – 50 credits @ 15 hours/credit = 750 hours

Lab – 11 credits @ 15 hours/credit = 165 hours

Externship – 30 credits @ 45 hours/credit = 1350 hours

Birth Review – 60 hours

Program breakdown

35% Theory/Lecture

7% Lab

58% Clinical Externship

The school reserves the right to change program content, faculty or schedule as it deems necessary to maintain a suitable learning setting. No change in total hours, program title or tuition shall occur without the approval of the licensing and accreditation boards and execution by the student of a new enrollment agreement.

STUDENT ACHIEVEMENT

Our programs have achieved exceptional success with our past cohorts. We are happy to share our student achievement rates below:

Achievement Measure	July 1, 2021-June 30, 2022	July 1, 2020-June 30, 2021
Retention	–	80%
Completion	–	71%
NARM Pass	–	100%
Graduation Placement	–	100%

CALENDAR

“WELCOME BACK” OPEN HOUSE

Annually, a “Welcome Back” for current and prospective students will occur in August. The Dean will go over expectations and goals for the academic year. Sufficient notice will be given for these occasions.

CCSM will not hold classes on the following holidays listed in the Academic Calendar. Additional religious holidays may be declared at the discretion of the Administration.

CCSM Academic Calendar 2025

New Year’s Day (Observed)
January 1, 2025
First Day of Spring Semester
January 17, 2025
Martin Luther King Jr. Day
January 20, 2025
Presidents’ Day
February 17, 2025



Spring Skills (In-Person)
March 20-23, 2025
Spring Break
March 24-28, 2025
School-Wide Meeting (Education Series)
TBD
Spring Semester Ends
May 23, 2025
Memorial Day
May 26, 2025
Summer Semester Begins
June 6, 2025
Juneteenth
June 19, 2025
School-Wide Meeting (Education Series)
TBD
Independence Day
July 4, 2025
Summer Semester Ends
August 1, 2025
Fall Semester Begins
August 15, 2025
Labor Day

September 1, 2025
School-Wide Meeting (Education Series)
TBD
Fall Skills (In-Person)
October 9-12, 2025
Columbus Day
October 13, 2025
Veteran's Day
November 11, 2025
Fall Break (Thanksgiving Holiday)
November 27-28, 2025
Fall Semester Ends
December 12, 2025

SCHOOL OFFICE HOURS:

The school office hours are from 8:30 am to 3:00 pm with the exception of the legal holidays listed above and during each semester's break. Messages can be left for the school administration after hours by phone or email.

DIRECT ENTRY MIDWIFERY PROGRAM STRUCTURE

Year 1	Approximate Dates
Semester 1	Second Week of August
<i>Lab Workshop (onsite)</i>	<i>Second Weekend of October</i>
<i>Winter Break</i>	<i>Last Week of December-First Week of January</i>



Semester 2	Second Week of January
<i>Spring Break</i>	<i>Last Week of March</i>
<i>Lab Workshop (onsite)</i>	<i>Third Week of March</i>
Semester 3	First Week of June
<i>Summer Academic Break</i>	<i>June-July (Clinical Externship Ongoing)</i>
Year 2	
Semester 1	Second Week of August
<i>Lab Workshop (onsite)</i>	<i>Second Weekend of October</i>
<i>Winter Break</i>	<i>Last Week of December-First Week of January</i>
Semester 2	Second Week of January
<i>Spring Break</i>	<i>Last Week of March</i>
<i>Lab Workshop (onsite)</i>	<i>Third Week of March</i>
Semester 3	First Week of June
<i>Summer Academic Break</i>	<i>June-July (Clinical Externship Ongoing)</i>
Year 3	
Semester 1	Second Week of August
<i>Lab Workshop (onsite)</i>	<i>Second Weekend of October</i>
<i>Winter Break</i>	<i>Last Week of December-First Week of January</i>
Semester 2	Second Week of January
<i>Spring Break</i>	<i>Last Week of March</i>
Semester 3	First Week of June
MW-NARM3302: Narm Exam Review Course	<i>June-July (Clinical Externship Ongoing)</i>

Students attend all academic, clinical externship and skills classes during Spring and Fall semesters. Students will attend only clinical externships during Summer semester. This

constitutes full-time enrollment. Virtual classes are held on Friday unless rescheduled due to a Holiday. Normal class hours will be 8:30 am to 5:30 pm with 1 hour for lunch.

STUDENT INFORMATION POLICIES AND PROCEDURES

Non-Discrimination Policy

See policy on page 24 of the catalog

Financial Policies

The Application Fee is \$75.00 for Hybrid Direct Entry Midwifery Program and is non-refundable. There is an enrollment fee of \$1500.00 due upon enrollment to cover registration, lab, and technology fees for the entire program. Refunds of the Enrollment fee will be made according to the refund schedule. CCSM is a private institute and is not subsidized by the Government, nor are students eligible for Federal Grants, Loans, or other Federal Student Aid. Tuition fees are due per the contract signed during enrollment. Fees may be paid electronically via PayPal or other platforms as set up by CCSM, or by check or money order. Cash payments will not be accepted. **Fees may be subject to change with a minimum 30 days notice to students.** The Administrative Team is available to provide students with academic, financial aid, and personal advice.

Returned Check Fee

There is a \$30.00 service fee for any returned checks. Upon notification of a returned check, the student must clear the debt within 24 hours after receiving notice. If the notice is received on the day before a holiday or on a Friday or a weekend day, the debt must be cleared by the first 24 hours of the next business day. Returned checks may be redeemed from the Administrative Office Secretary by paying in cash, certified check, or by money order. Noncompliance will result in action to have the student immediately dismissed from the institution.

Cancellation and Refund Policy

1. Cancellation can be made by electronic mail to admissions@commonsensemifwifery.org, by Certified Mail or by school termination.

2. All monies will be refunded if the school does not accept the applicant or if the student cancels within three (3) business days after signing the enrollment agreement and making initial payment, with the exception of the application fee (not to exceed \$75.00) and used books.
3. Cancellation after the third (3rd) Business Day, but before the first class of the program, will result in a refund of all monies paid, with the exception of the application and enrollment fee (not to exceed \$75.00) and used books.
4. Cancellation after attendance has begun through 40% completion of the program will result in a Pro Rata refund computed on the number of hours completed to the total program hours. Cancellation after completing more than 40% of the program will result in no refund.
5. Termination Date: When calculating the refund due to a student, the last date of actual attendance by the student is used in the calculation unless earlier written notice was received.
6. Refunds will be made within 30 days of termination of the student's enrollment or receipt of a Cancellation Notice from the student from the admissions@commonsensemifwifery.org, by Certified Mail or by school termination of the student.

Policy If Program Is Canceled By CCSM

Any student who has paid all fees and is enrolled in a program canceled by CCSM may apply the fees to the same or a different class offered within 12 months or request a return of the fees paid. Students are required to make all requests in writing.

Scholarships

Scholarships at CCSM are provided by donations from community members or organizations. Scholarships are awarded by semester. Students who receive a scholarship must ensure to maintain the following guidelines.

To be eligible for scholarships, students must meet all requirements listed below:

- Be current with coursework and clinical progress
- Remain in academic and clinical good standing throughout the program;
- Demonstrate excellent student discipline, attendance, positive school and community behavior, and serve as a role model for other students.

Administration & Student Services

The Administrative Team is available to provide students with academic, financial aid, and personal advising.

The Student Services Department is available to support students through their educational journey at CCSM. The student services that CCSM currently provides are as follows:

- Mentorship
- Disability Accommodations
- Acute Accommodations
- Financial Services
- Transcript Requests

CCSM Clinical Mentor Coordinators CMCs

The CMC is a liaison between clinical faculty and students attending clinical externships at CCSM. The primary duties are to collect, maintain and evaluate student clinical forms for their clinical externship experiences to ensure they remain on track with their educational goals.. Preceptors meet with their student's CMC a minimum of three times per semester. Preceptors meet with the CMC at the end of each semester to complete an end of semester evaluation and set goals for the next. Preceptors are offered a mid-semester meeting and may request additional meetings at any time.

CCSM CMC's are meant to support and impart knowledge to student midwives (mentees) through their CCSM educational experience. Support and knowledge will be shared primarily through monthly virtual mentor meetings between CSC and student, which will include developing strategies to achieve educational goals in the clinical setting, establishing boundaries and preventing burnout, managing difficult birth outcomes and providing opportunities to analyze births through Birth Review (course), stress management, time and organization management, professionalism, NARM prep, and more to support students in becoming the most efficient student midwife they can be. Additional sessions can be scheduled directly with the CMC.

Disability Accommodation Policy:

In accordance with the Americans with Disabilities Act, JJWay® and the four tenets, CCSM believes in providing equitable educational experiences to all individuals that promote accessibility and connection. CCSM adheres to the CDC definition of disability which states, “A disability is any condition of the body or mind (impairment) that makes it more difficult for the person with the condition to do certain activities (activity limitation) and interact with the world around them (participation restrictions).” The School aims to provide reasonable accommodations for enrolled students. Though full accommodations are not guaranteed, CCSM is committed to supporting students, as able, towards their success.

CCSM does not discriminate against individuals with disabilities in decisions about admission, enrollment, registration, and participation in learning activities and the CCSM community at large.

Should CCSM students experience discrimination due to their disability, we encourage students to follow the Grievance and Complaints policy which can be found [here](#). If no resolution is made towards the complaint/grievance, students have the right to take their concerns to the Florida Department of Education Commission for Independent Education (CIE). Please follow the student concerns process outlined on [the CIE website](#). Furthermore, students have the right to take their concerns to the Midwifery Education Accreditation Council (MEAC). Please follow the student concerns process outlined on [MEAC’s website](#).

Acute Accommodation Policy:

CCSM is devoted to supporting students in need of temporary accommodations during their education. Such requests must be reviewed by the Student Services Manager and approved by the Dean.

Students who experience adverse events during their time at CCSM should reach out to the Student Services Manager at andrea.herrada@commonsensemifwifery.org. Students must meet with Student Services to discuss their request and need(s). After this meeting, Student Services will meet with applicable members of CCSM Administration to establish a plan within the school’s means and capacity.

Once a plan is established, the student will receive an accommodation document, which

must be signed by the student and applicable members of CCSM Administration in order to implement the accommodations. This accommodation plan will be shared with academic instructors as well as the student's preceptor, if applicable. Students will meet with their Clinical Mentor Coordinators and Preceptors to discuss how their accommodation(s) may impact their clinical progress.

Accommodation timelines vary depending on the unique situations each student encounters. Accommodations are not to surpass four weeks in length. If after four weeks, the acute condition is not resolved, a meeting with the applicable members of CCSM Administration and the student will be required to reassess the student's need(s) and options.

Student Record Policy

All students' records are permanently on file in the Administration Office. Any student requesting to see personal records may do so by appointment only.

Transfer of Credit

New students beginning the program who wish to have previous education experiences evaluated **must** submit their official transcripts and a formal request for transcript evaluation upon notification of acceptance into CCSM. Only official transcripts will be accepted and reviewed for transfer credit. Transcript evaluation costs are tiered and the fees are non-refundable.

Please complete this [Transcript Evaluation Request form](#) in order to initiate the transcript evaluation process.

CCSM follows the below guidelines when evaluating courses for credit:

- Transferred courses listed on a transcript are not eligible for consideration; official transcripts from the original college or university are required.
- CCSM will consider courses for transfer credit from the following:
 - Regionally accredited college or university
 - nationally accredited programs
 - nationally accredited independent postsecondary school or college
 - Capstone AP courses offered through a state licensed high school will be accepted if the student earned a grade of 3 or higher
 - provided through Coursera or Straighterline
- For each course to be accepted, the hours of study must meet or exceed CCSM requirements
- The course content as defined in the course description must cover at least 80% of the CCSM course content
- The student passed the course with a grade of C or higher
- The student took the course within the last 10 years or has continually applied course content to professional practice

If a student is unsatisfied with their evaluation they may appeal the decision with the Dean of Midwifery Program.

NOTICE CONCERNING TRANSFERABILITY OF CREDITS AND CREDENTIALS EARNED AT CCSM:

The transferability of credits you earn at CCSM is at the complete discretion of an institution to which you may seek to transfer.

Acceptance of the diploma you earn upon completion of the Hybrid Direct Entry Midwifery Program is also at the complete discretion of the institution to which you may seek to transfer. If the clock hours, credit hours, or diploma that you earn at CCSM are not accepted at the institution to which you seek to transfer, you may be required to repeat some or all of your coursework at that institution. For this reason you should make certain that your attendance at CCSM will meet your educational goals. This may include contacting an institution to which you may seek to transfer to determine if your diploma or clock hours will transfer.

Transcript Requests

Student financial obligations must be met in order to receive an official transcript. A complimentary official transcript will be provided to students upon graduation or withdrawal from the program. For additional transcripts, students must request them by email to student services. A \$5.00 fee will be assessed each time a student requests a physical transcript to be mailed from the school. Electronic transcripts will be emailed for free upon the request of a student.

Disciplinary Policies

When a problem is identified, a verbal and written warning will be given to the student. If the problem persists, the student will meet with a disciplinary committee composed of administration, and the faculty member involved, if any. A probationary period may be assigned. At the end of the probationary period, if the problem has not been remedied, the student may be dismissed from the program.

CCSM CODE OF CONDUCT

The Commonsense Childbirth School of Midwifery (CCSM) Code of Conduct is a reflection of who we are, what we value, and how we engage and communicate with each other. This Code applies to every CCSM setting, including our in-person interactions, meetings, Skills Lab, classroom discussions, preceptor/clinical sites, public-facing engagement (how we represent the school online in forums and social media), and whether it is through verbal, written, or video communication. This Code will be implemented in any setting where CCSM is the facilitator of said space and/or a member of the CCSM community represents the school.

Aside from academic excellence, we at CCSM expect the code of conduct to be observed and incorporated into our interpersonal and intrapersonal (within one's self) relationships.

Specifically at the school, the following are the clear expectations we have of students conducting themselves with us and in the representation of the school:

Conduct Statements

Through their conduct, students ensure that:

1. They interact with others (faculty, staff, peers, etc) in a fair and respectful manner.
2. They do not make malicious or unfounded criticisms of faculty, staff, and colleagues or preceptors that may undermine the client's trust in the care or treatment they receive or in the judgment of those treating them.
3. They do not bully or harass one another.
4. They avoid engaging in personal attacks against others and CCSM faculty and staff.
5. They are accountable for their conduct. They are accountable to themselves, student midwives, faculty, staff, their preceptor (if applicable), the clients and their families, the midwifery profession, and to the community.
6. They avoid using obscene, vulgar, or inappropriate language and/or images as well as engaging in unjustified negative criticisms and any false, malicious, or demeaning comments about colleagues, CCSM decision-making and leadership in verbal, written, and electronic communications with clients, other professionals, or the general public.
7. They respect and advocate for diversity in our community and profession.
8. They communicate in a professional manner.
9. They are familiar with the appropriate processes to follow if they have concerns about a faculty member, peer, preceptor, or staff's behavior.
10. They avoid making statements on behalf of CCSM. To safeguard CCSM's reputation and integrity, they are expected to portray their statements as their opinion.
11. If the community member does have concerns that they would like addressed, they will refer to the Grievance and Complaint policy and protocols.
12. CCSM Communication and material (recorded classes, course documents, syllabi, skills equipment and resources, online library, and school related events) are utilized for their intended purposes and kept within CCSM. When unsure whether content is consistent with these policies, they err on the side of caution and refrain from the conduct or do not use the content. If they have any questions on what content is appropriate, they will contact the CCSM administration.
13. Abide by classroom policies and virtual learning etiquette at all times. Students are expected to have their cameras on at all times and be engaged at a stable location.
14. Faculty, school staff, or students may never use offensive or inappropriate language at any time, harass, insult or threaten others, engage in illegal activities online, create or share computer viruses or subscribe to unauthorized news or mail lists.
15. While using social media, avoid slander of the school, faculty, staff, colleagues, preceptors, and clinical sites.

This Code of Conduct establishes standards, but it does not cover every situation. You are expected to be respectful and to use good judgment in your words and actions.

Process for Observation of a Violation of the Code

If you perceive a violation of this Code in any CCSM Setting, you may follow the procedures in the Grievance and Complaint Process. Student complaints may be sent via the [CCSM Grievance and Complaint Form](#) describing the unacceptable behavior. Staff and/or Faculty complaints may be sent via the [CCSM Grievance and Complaint Form](#) describing the unacceptable behavior.

Grievance Process for Students

Staff and faculty(Academic/Clinical) of CCSM complete harassment training during their onboarding and aim to provide privacy and security involving student complaints and sensitive matters. If a person identifies a grievance against any peers, staff (not including the Dean), or faculty they will comply with the following procedure, with a focus on respecting the inherent worth of each person involved. Grievances involving the Dean will follow a separate procedure.

Complainants who actively engage in this process are protected from retaliation and therefore adverse action can not be taken against them.

All documentation and discussions regarding the grievance shall be considered confidential and shall be treated as such. The number of parties involved in the grievance process should also be kept to a minimum.

STEP 1:

Complaints must first be directed to the person(s) involved according to the following process:

1. Engage in a safe space by approaching the situation with curiosity and humility.
2. **We** statements should be limited as much as possible. Each person should speak with **I** statements and discuss their own personal experiences of the situation.
3. Choose a method for presenting the concern: offer a meeting time and place, write an email, or schedule a virtual meeting.
4. Give the other person an appropriate time to respond.

STEP 2:

If a satisfactory resolution cannot be achieved among the individuals involved, the second step is for the person with the complaint to elevate the concerns to the Dean via the CCSM Student Grievance form. The Dean will coordinate and lead a meeting of one of the three choices.

1. The complainant will fill out the [Grievance Form](#), which will initiate a formal complaint.
2. The Dean will then have 5 business days to respond.
3. A meeting type of the student's choice (see below) will then be scheduled within 5 business days. *An additional CCSM staff member will be present as a witness and to record minutes of the meeting.*
 - a. *An individual meeting with the Dean or*
 - b. *The Dean and involved parties; or*
 - c. *The Dean, involved parties, and an additional student support person (the Student Mentor Coordinator or their Clinical Mentor Coordinator)*
4. All parties will be informed as to the date, time, and place the grievance will be discussed. Each party will have the opportunity to provide the attending members with supporting documentation no later than 48 hours prior to the scheduled meeting.
5. At the conclusion of the meeting, if a satisfactory resolution was not achieved the Dean reserves the right to consult the Advisory Board on a reasonable solution. The Dean will then make the final resolution to the matter.
6. The written recommendation of the Dean, will be reported to the involved parties within 15 calendar days after the conclusion of the meeting.

Grievance Process for those Involving the Dean

If the grievance involves the Dean the written grievance shall be submitted to the Human Resources/Chief Operating Officer of Commonsense Childbirth Inc. The following steps should be taken:

STEP 1:

1. The email shall be sent to at hr@commonsensechildbirth.org, with a copy (cc'd) submitted at the same time to the Dean.
2. The written grievance must include the name of the complainant, an explanation of the concern, proof of violation of the Code of Conduct or company policy(ies), and the desired resolution.

STEP 2:

1. A meeting will be scheduled by HR, involving the complainant, to better understand the concern. If determined by HR that further action is warranted, the complaint will proceed to Step 3.
2. If no further action is warranted, a written recommendation will be reported to the involved parties within 15 calendar days after the conclusion of the meeting.

STEP 3:

1. An internal review process will be initiated, which may include one, or a combination of the following:
 - a. A private meeting with the Dean, to facilitate a review of the complaint and to offer the Dean an opportunity to rebuttal.
 - b. An internal investigation process led by the HR department and/or President.
 - c. A mediation meeting, with the Dean, involved parties, and HR department representative and/or President, and a facilitator (if requested by any of the parties)

An additional CCSM staff member will be present as a witness and to record minutes of the meeting.

Unresolved grievances and complaints may be directed to Commission for Independent Education 325 West Gaines Street, Suite 1414 Tallahassee, FL 32399-0400, phone number (888) 224-6684; or to the Midwifery Education Accreditation Council (MEAC) 850 Mt. Pleasant Ave. Ann Arbor, MI 48103 info@meacschools.org Tel (360) 466-2080.

Complaint Procedure Information

Federal regulations and State laws require that public colleges in The Florida College System have processes for students, employees, and applicants to file complaints against any respective college. In almost every situation, the college's process for resolving complaints must be followed first.

<http://www.fldoe.org/schools/higher-ed/fl-college-system/about-us/complaints.stm>

Conditions for Dismissal

Conditions for dismissal and discipline include, but are not limited to, the following:

- Academic dishonesty/plagiarism
- Failure to fulfill academic or financial requirements (per enrollment agreement)
- Attending classes or clinical experiences under the influence of alcohol or drugs
- Behaving in any manner that may be harmful to the learning environment or harmful to the reputation of CCSM
- Health Insurance Portability and Accountability Act of 1996 (HIPAA) violations
- (<https://aspe.hhs.gov/report/health-insurance-portability-and-accountability-act-1996>)
- Any disruptive, threatening, or unprofessional behavior
- Bullying or hazing to staff, peers, and/or families (in the clinical setting).

Dismissal and Readmission

When a student is dismissed, it will be communicated to the student by the Administration team, with the reason for dismissal and if there is an option for readmission.

Students who are dismissed for academic failure may apply for readmission and will be considered on a case-by-case basis. Re-admission is at the discretion of the Dean and Advisory Board. Students who are dismissed for financial indebtedness are allowed to reapply for possible admission, once the indebtedness has been resolved.

Students who are dismissed for plagiarism, theft, alcohol or drug use, violence, or any other behavior that may be harmful to the learning environment or reputation of CCSM, and/or that would endanger the safety or well being of any person, the school, preceptor site, or anyone present at a birth, will not be readmitted.

Students who are dismissed and were previously receiving a scholarship will no longer be eligible to receive the same scholarship.

Conditions for Re-Entry

In addition to reapplying to the program, if a student wishes to re-enter school after dismissal, a request must be made in writing to CCSM Administration. The Administration shall review the request and give a written response by email/mail within 14 business days. The student should expect to repeat the entrance procedure, including fees, before being readmitted.

ATTENDANCE POLICY

- Students may not attend classes unless they have been officially enrolled in the class.
- Students who do not attend at least one of the first two meetings of a class may be dropped from the course/clinic.
- Students are permitted two opportunities to miss class during a regular 18-19 week semester.
- These absences do not require additional documentation, but do require written notification and approval from the instructor.
- These absences are without grade penalty and will receive an “E” (Excused) for their Attendance & Participation grade.
- Students who miss class are responsible for:
 - Reaching out to their instructor for in advance of the absence
 - Watching the class recording of the lecture to keep on pace with the class
 - Turning in all assigned work (assignments, tests, etc.) by the due date regardless of class absence
- Every absence after will affect the student’s grade, academic standing, and scholarship opportunities
- Students who drop below 75% in attendance are at risk for failing the course at the end of the term.

Students are responsible for completing all attendance requirements of CCSM; attendance that does not meet the required hours of the program will be grounds for dismissal.

CCSM acknowledges that extreme emergencies or unplanned circumstances can, and do, come up. These include a death in the student’s immediate family, hospitalization or extreme illness, natural disasters, and other unforeseeable accidents. Students are required to be in close communication for the reason for the absence with the Dean and instructors regarding such matters. Absences are only approved at the discretion of the administration and faculty. Without notification, an absence will be considered unexcused.

Student attendance during the week of skills lab demonstration and testing is mandatory for all students. Anyone who cannot attend skills test outs must make prior arrangements approved by the Dean, their CMC, and the skills lab instructor.

Attendance of classes and the school-wide meetings with Southwest Wisconsin Technical College constitutes having the computer camera on and active participation during the duration of the class meeting. Unless the instructor approves a request for the camera to be off, the student is considered absent, regardless of participation, when the camera is turned off.

Tardiness

Tardiness or early departures can result in the student considered absent from the class, a deduction of participation points, missing assignments and/or information that may jeopardize a student's ability to succeed. Students are expected to be on time and stay for the entirety of class.

Late arrival to class or early dismissal for any reason must be approved by the instructor.

Absence Procedure

The procedure for being absent from class is as follows:

1. Report absences by contacting the instructor via email before the missed class.
2. Excused absences consist of student illness, death in the family, extreme family emergencies, a previously approved commitment, or other reasons that are at the discretion of the instructor and school administration.
3. The student is responsible for turning in assigned work to the instructor prior to a non-emergency absence. Failure to complete requirements by the designated time will result in a grade of zero for the assignment, quiz, or exam. It is the student's responsibility to make other arrangements with the instructor (see late assignment policy).

Birth-Related Absence Policy

Students will not be excused from class to attend or manage births. Observation and participation in birth is an integral part in Midwifery Education; however, classroom time takes precedence over birth number requirements. Therefore, students will need to make adequate arrangements with their preceptors to be off-call during CCSM classroom days and times. As a student, you are responsible to inform/remind your preceptor(s) that you will not be on call for births starting at midnight before class days through the end of the class day or any other day that an additional class may be scheduled (for example, a weekend seminar, Educational Series with SWTC, or skills weekends). Students who find themselves at a prolonged labor that extends into the evening before class days need to remind their preceptor that they must leave the birth to attend class in the morning. Work missed due to absence from a course for any reason must be completed in a manner acceptable to the instructor.

LEAVES OF ABSENCE

Types of Leaves of Absence:

- Programmatic LOA: CCSM consists of a three year sequential academic curriculum. All CCSM Courses are not offered simultaneously each semester– therefore CCSM does not offer a Programmatic LOA

- Clinical LOA: a Leave Of Absence from Clinical Externship only

Clinical Leave of Absence

In order to enroll in a clinical externship course, students must have an established relationship with a registered clinical preceptor. If the student is unable to establish a preceptor relationship prior to the start of the semester they will not be enrolled in the current clinical externship course and will be required to request a clinical leave of absence, and will be placed on a clinical leave of absence. A student can be on a clinical leave of absence for a maximum of 6 months during the course of the program.. Students who lose their preceptor relationship mid-semester may be given an incomplete in their clinical externship course. An incomplete in a clinical externship course will not result in the student being placed on academic probation as long as the student meets with their CMC to create a plan and the student abides by the plan.

Students are expected to [fill out this form](#), which may also be located in your externship classroom, in order to request a Clinical LOA for approval.

Programmatic Withdrawal

If a student finds that they are unable to remain in the program, for whatever reason, a meeting must be requested with the Dean and Student Services Manager. In addition, the [Programmatic Withdrawal Request Form](#) must be completed in order to trigger the withdrawal process. Students are solely responsible for the completion of the Programmatic Withdrawal Request Form.

Once a student's programmatic withdrawal has been processed, the student will have two weeks to retrieve important information and documents before their CCSM email will be deactivated. Additionally, students will receive a financial report upon their withdrawal and are responsible for any outstanding charges per the pro rata tuition fee outlined in the student's enrollment agreement. Students will receive an official transcript once all financial obligations have been met.

Students who withdraw from the program and were receiving a scholarship will no longer be eligible to receive the same scholarship.

Authorized Withdrawal

If a student is not in attendance for more than five scheduled class days (due to illness or that the absence was beyond the student's control) without communication to CCSM Administration or Staff/Faculty, the student will be withdrawn from class. This is recognized as an "authorized withdrawal". In such a case the instructor shall record a grade of "W" and

document the last date of attendance. Otherwise, un-authorized withdrawals are converted from a “W” to a “F” in the student’s academic file.

Proof of illness must be documented on letterhead by a physician. Death of a family member must be substantiated by a death certificate or death notice. There are no refunds given for consumable materials.

Pregnancy & Postpartum Leave Policy:

If a student is pregnant, or becomes pregnant, during the course of the CCSM program, that student will be required to take a mandated six-week postpartum leave period from their clinical externship. Extensions for pregnancy/postpartum leave may be granted on individual circumstances through a meeting with the Clinical Mentor Coordinator. After the student’s pregnancy/postpartum leave, they will need:

- Meet with the Clinical Mentor Coordinator to assess the student’s postpartum well-being and their plans for returning to clinic,
- Meet with the Dean and Clinical Mentor Coordinator to assess the student’s postpartum well-being and their academic progression.
- The pregnant student may also choose to pause their academic courses while on their pregnancy/postpartum leave. The following condition must be met:
- Be in good academic standing with no “incomplete” courses pending (this requirement may be waived by the administrative team due to extraordinary circumstances)

To ensure continuity and logical progression in the student’s studies, it may be necessary for a student returning from pregnancy/postpartum to enroll on a less than full time basis if the core midwifery courses are being taught only once each year.

If additional time is required for your emotional, mental, and physical health, please reach out to the Dean immediately. CCSM is here to support our students through the postpartum period while on their midwifery journey.

Children Policy

Parents are permitted to bring children under 6 months for skills weekends, upon approval from the school administration.

GRADING POLICIES AND ACADEMIC STANDING

Grading System

Grading criteria for each course is established by the instructor. Instructors are expected to use rubrics to communicate assignment expectations to students. All courses at CCSM use a letter grading system.

The student is required to pass each course with a grade of “C” (75%) or better. Letter grades have the following numerical equivalents:

A = 93% -100%

B = 84% - 92%

C = 75% - 83%

D = 70% - 74%

F = below 70%

I = Incomplete

W = Withdrawal

X = Audit

IP = In progress across multiple terms

IW = Involuntary Withdrawal

Basic Grading Scale

<u>Grade</u>	<u>Quality of Achievement</u>	<u>Points/Credit Hour*</u>
A	Excellent progress	4.0
B	Above average progress	3.0
C	Average progress	2.0
D	Below average progress	1.0
F	Failure	0.0
P	Pass	-
I	Incomplete	-
W	Withdrawn	-
X	Signifies enrollment in a special class for which no credit was earned or recorded	
IP	Course was not completed within the semester was taken	
IW	Student was withdrawn from the class involuntarily, such as for non-payment	

***The credit points awarded for the course are calculated by multiplying the points per credit hour by the hours of credit for the course. The points per credit hours are awarded based on the grade earned in the course as described above.**

Academic Standing

CCSM student academic standing is assessed on a semester by semester basis and is designated as follows:

Grade Point Average Guide:			Academic Standing Key:	
Grade	Quality of Achievement	Points Per Credit Hour	GPA/ Grade	Standing
A	Excellent progress	4.0	3.75 - 4.00	Honors
B	Above average progress	3.0	2.50 - 3.74	Good Standing
C	Average progress	2.0	2.00 - 2.49	Academic Warning
D	Below average progress	1.0	Any grade of D or F	Academic Probation
F	Failure	0.0	Any grade of D or F in more than one semester	Dismissal

A student who is having difficulty earning a grade of “C” or better is responsible for seeking assistance from their instructor or clinical preceptor. CCSM is proactive with efforts to mentor/tutor or provide individual interventions to support students who have a willingness to complete the program and achieve their goals.



Grading Rubrics

A grading rubric is an assessment tool, used to grade a student's assignment, written paper, oral presentation, or required performance. It is usually in the form of a table or grid, which contains both the stated objectives, specific skills or accomplishments being assessed, and the criteria for determining how well the student has met each objective.

Instructors will provide a rubric with appropriate assignments so that the student will have full understanding of expectations in order to pass the course. Instructor rubrics may be in the following formats but will vary according to each course subject and criteria.

Example 1: Content:

- 5 = excellent, thorough, comprehensive, complete, detailed
- 4 = very good, covered all major information
- 3 = good, covered most important content areas
- 2 = fair, missing much of the important content areas
- 1 = poor, inadequate, omitted major important information
- 0 = not done

Example 2: Presentation:

- 5 = excellent, superior presentation
- 4 = very good, above average
- 3 = good, met but not exceeded expectations
- 2 = fair, partially met
- 1 = poor, inadequate, deficient
- 0 = not done

Late Assignments

All assignments are to be handed in on time unless prior arrangements have been made individually between the student and the instructor (including externship courses). If the assignment is a summative assignment, it must be submitted and receive a passing raw score in order for the student to pass the course. Instructors will accept no more than 3 three late assignments in one semester.

- If a student communicates with their instructor prior to the due date, agreeing upon a new deadline, no point deduction will be made for late work. If said assignment is not turned in by the new deadline, a zero will be given for that assignment.
- If a student fails to communicate with their instructor prior to the due date and the

- assignment is not turned in, a deduction of 10% per day up to five days will be taken.
- If the assignment is not turned in by the 5th day, a score of zero will be assigned.

Academic Probation

At the first sign of concern (more than one absence/tardy, a late assignment submission, more than one request for late assignment submission, etc.) faculty members may submit an alert to the Student Services department and request that the student meet with them regarding their concerns. Students who fall below a passing grade will be issued a Warning Letter generated by Student Services to set up an **Academic Mentor Meeting**, to discuss the student's current situation and plan for success in the course. If after this meeting the student shows further concerning signs, a **Remedial Plan** with actionable goals may be drafted, reviewed, and signed by the student. If those goals aren't met, the student will be provided an **Academic Probation letter** outlining the consequences related to continued subpar performance, and be placed on **Academic Probation**. For students experiencing a life event with possible long term need for accommodations, the student must present this matter to the Dean as soon as possible, and an Emergency Circumstance Remedial Plan will be drafted. If the student fails to make the Dean aware of this matter within a timely manner, it may not be possible to provide the student with timely accommodations, resulting in failure of course(s) or dismissal from the program.

Students on academic probation will be required to meet with the school Dean or designated personnel at the beginning and middle of the semester of the probation period, and will be required to pay for, retake, and pass the failed course in order to remain enrolled and before being eligible to graduate.

Remedial Plan

Any student who continues to fall behind or who has not been able to maintain their grades in more than one class, including Externship, will be put on Academic Probation. This may include a personalized Remediation Plan, which outlines a series of steps to help get the student back on track to passing their class(es) and/or meet clinical standards. Being on academic probation may affect the student's eligibility for scholarship.

CCSM is proactive with efforts to mentor/tutor or provide individual interventions to support students who have a willingness to complete the program and achieve their goals. A student who is unable to earn a grade of "C" or better, or is unable to pass a lab skill, will be unable to continue on in the program (ie. will be dismissed from the program). CCSM is a structured 3-year program, where a predetermined set of classes is offered each semester, and specific classes cannot be offered out of sequence.

Clinical Remedial Plan

Any student who continues to fall behind or who has not been able to maintain their grades in more than one class, including Externship, will be put on Academic/Clinical Probation, which may include a personalized Remediation Plan, or being placed on hold of attending clinic. The Remedial Plan will outline a series of steps to help get the student back on track to passing their class(es) and/or meet clinical standards. Students with a Remedial Plan/Incomplete will be responsible for all required assignments as outlined in externship class (weekly reflections, monthly surveys, clinical documentation reports, CMC Meetings). Being on academic/clinical probation may affect the student's eligibility for scholarship.

CCSM is proactive with efforts to mentor or provide individual interventions to support students who have a willingness to complete the program and achieve their goals in the expected sequence and progression of the program. CCSM is a structured 3-year program, where a predetermined set of classes is offered each semester, and specific classes cannot be offered out of sequence. If the plan is not met, the student will be in danger of dismissal, or not receiving the renewal of their scholarship.

Withdrawing From a Course

Students may withdraw from a course(s) with a grade of "W" if they withdraw after the 3rd week and before the end of the 12th week of the semester. If a student withdraws before the 3rd weekly meeting, a grade will not appear on a student's academic record. Provided a [Withdrawal form](#) is received no later than Friday of the 12th week of the semester, no punitive grade will be issued. After the 12th week of class, the student receives the grade earned at the end of the semester unless a special withdrawal is granted with approval of the Dean or designee. Students do not receive grade points for Withdraw (W) grades, but a notation appears on the transcript. Financial liability is not reduced when a student

withdraws from a course.

Students must complete the withdrawal process by submitting the completed Withdrawal form to the Admissions & Student Services Manager or Dean. Requests to withdraw from a course will not be accepted by telephone or text message. Students are required to personally complete, sign and date all withdrawal information. Confirmation of receipt is the responsibility of the student.

A student withdrawn from all enrolled courses for a term, is considered fully withdrawn from the Program.

Withdrawing from a course may cause a student to drop behind in the projected progress through the program or affect their financial status. For example, since CCSM does not offer rolling semesters, the student may need to wait a year or more for the course withdrawn from to be offered again. Additionally, students may be required to enroll at less than full time until the course can be repeated to ensure that all prerequisites are met. These changes to the normal timing of course may delay a student's expected graduation date. Alternatively, when available, students may incur additional fees to cover the cost of private instruction in order to stay on track. Lastly, students should be aware that withdrawing from a course could jeopardize a student's ability to meet their scholarship requirements as listed in their scholarship acceptance agreement and or remain in the program.

Incomplete Policy

A student may request an incomplete grade from an instructor. Incompletes are given at the discretion of the instructor. Poor performance in a course does not qualify as a reason for an incomplete grade. A student must offer a compelling reason for the request and a plan for completing the course work. At least 80% of the course work must have been completed at the time of the request. At the instructor's discretion, an incomplete can be issued for no more than 30 days after the end of the session. An "I" will appear in the transcript until the instructor submits a final grade. If the course is a prerequisite to another course, the student may not register for the subsequent course until a passing grade is on record. If the student does not complete the course work, an "F" will automatically become the final grade.

Clinical Externship Incomplete Policy

Students must complete a minimum of 75% of clinical requirements in order to move onto

the next externship. This means 75% of births and 75% of hours for the externship. The remaining hours must be completed in a timely manner as agreed with their CMC. Ultimately the decision to move onto the next externship is approved by the student's CMC and the Dean. A student may receive an "Incomplete" if clinical requirements (births, prenatals, postpartum, newborn exams, hours, etc.) for the enrolled externship have not been met by the last day of the semester. If the clinical requirements are *not* met by the following Externship, students will receive a failing grade for that respective Externship course. A timely meeting with the CMC is required to discuss a clinical plan and to ensure that the clinical site is adequate for meeting externship requirements. Receiving an "Incomplete" in Externship may affect the student's eligibility for scholarship.

Failing an Academic Course

In the unfortunate event that a student fails a course, the student may be subject to the terms outlined under Conditions for Dismissal and Readmission if readmission was recommended by the Dean.

Withheld Grades

The school will withhold final grades under the following situations:

- Outstanding financial debt on the student's account
- Incompletion of course and/or course evaluation

STUDENT PROGRESS

Evaluations

Throughout each semester students are provided feedback about their performance in courses, this encourages and facilitates the student's self-evaluation under the guidance of faculty and the staff. Student progress is reported at midterm from their instructors and preceptors. Additionally, instructors provide thorough student updates to the Academic Faculty Coordinator and Dean. Warning letters may be issued based on the evaluation and feedback received. At the end of each term, students are evaluated through their final course grades and academic and clinical Letters of Good Standing. Academic probation letters are issued for students who are not in good standing.

Clinical Mid-Semester Progress reports are completed by preceptors. This progress report is part of the student's grade for externship. End of Semester Transition Evaluations are completed at the end of each. It is to be completed in part by the student and in part the preceptor. The intention is for it to be completed together as only the preceptor will have

access to the survey. Students will be graded on the timely completion of the evaluation.

Academically, a student may be considered “at-risk” for a GPA below 2.49 or other circumstances which the administrative team feel warrant closer observation and communication. Clinically, students are considered “at-risk” if they are not able to maintain a reasonable progress of the clinical requirements or other circumstances that the administrative team feel warrant closer observation and communication.

GRADUATION REQUIREMENTS

Minimum and Maximum Time Frames for Completion

The minimum time frame to complete the Direct-Entry Midwifery Program didactic training is twenty-seven (27) calendar months and the equivalent of ninety (91) credits total, including the clinical component of the program which must span the twenty-seven (27) months in duration. The maximum time frame to complete this program is five (5) years which includes the completion of clinical experiences as well as all credits that are applied to this program.

If after the three year programmatic portion a student has not completed the clinical externship, students have 24 months. (Upon approval from the Clinical Department and the Dean) A student must have passed all courses, fulfilled clinical requirements, paid tuition/fees in full and complied with rules and regulations of the school to be awarded a Diploma.

Requirements for Graduation

A student must have passed all courses, fulfilled clinical requirements, submitted all experience and skill documentation and signatures, paid tuition/fees in full and complied with rules and regulations of the school to be awarded a Diploma or Certificate.

Certification Ceremony

Individuals who successfully complete graduation requirements of the Hybrid Direct-Entry Midwifery Program will receive their Diploma in Midwifery.

All graduates will be honored at a combined graduation awards ceremony which is held to acknowledge and celebrate their academic achievements.

****Following final grade submission, transcripts will be checked for graduation requirements. Diplomas will be mailed once all academic/clinical requirements are completed and submitted.*

Students who complete the academic requirements but not the clinical requirements will be provided an unofficial transcript until the completion of their clinical requirements.