

Midwifery Program

Student Handbook

Academic Year 2024-2025



DOWNSTATE
HEALTH SCIENCES UNIVERSITY

Revised June 2024

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The Midwifery Program is fully accredited by the Accreditation Commission for Midwifery Education (ACME)

For information about ACME accreditation, please contact the ACME office at:

2000 Duke Street, Suite 300
Alexandria, Virginia 22314
www.theacme.org
(703) 835-4565

This program is registered with and approved by the New York State Education Department.
Its HEGIS code is **1203.10**.

The program registration number for the Advanced Certificate in Midwifery is **12042**. The registration number for the Master of Science Degree in Midwifery is **21570**.

Statement of Understanding*

I, _____, have read and completely understand the policies and procedures of the Midwifery Program as delineated in this Handbook and in the Midwifery Clinical Handbook.

I am aware of the additional policies, procedures, rules, and regulations of the School of Health Professions and the State University of New York (SUNY) Downstate Health Sciences University as identified in the SUNY Downstate Health Sciences University Student Handbook. I understand that I must comply with these policies in every way. I further understand that failure to comply at any time may result in disciplinary actions against me including possible dismissal from the program.

I understand that if I am a continuing student, the policies in this new Midwifery Program Student Handbook and those in the most recent version of the SUNY Downstate Health Sciences University Student Handbook supersede the policies of the previous handbooks.

The program may change policies at any time. Students will be notified of changes promptly by email.

Student's _____

Date _____

* After carefully reading and signing the above statement, please email your signed form to the Program Administrator no later than the **second Tuesday in September**. This is mandatory to continue in the program for all students.

SCHOOL OF HEALTH PROFESSIONS

AI Policy Statement

Introduction

The mission of SUNY Downstate Health Sciences University is, “To provide outstanding education of physicians, scientists, nurses and other healthcare professionals; to advance knowledge through cutting edge research and translate it into practice. To care for and improve the lives of our globally diverse communities. To foster an environment that embraces cultural diversity.”

The School of Health Professions (SOHP) acknowledges the growing presence of Artificial Intelligence (AI) in health care and education. Therefore, SOHP recognizes the need to address AI in the context of the education of students and promote responsible use of this technology. SOHP is developing policies to teach our students how to use AI responsibly. The development of AI literacy is increasingly important for health professionals. We anticipate that students with proper preparation will be able to discern the difference between improper, appropriate, and ethical use of AI.

Definitions

Artificial Intelligence (AI) is computer-based technology that uses algorithms to drive computers and robots to react; mimic, and work like humans. AI is also assistive technology that provides quick and easy access to information, facilitates decision-making, and supports creative endeavors.

Generative AI is AI that is capable of generating images, text, and other media in response to prompts. It is capable of producing output that extends well beyond the material students have been trained on, it is often inaccurate, and is to be used with extreme caution only as a supplement to traditional scholastic effort.

Privacy and Security

At this time generative AI does not assure privacy. Therefore, generative AI is not to be used in HIPPA regulated data either in research or clinical charts or practice. This will ensure data security and privacy are not compromised.

Responsible use of AI in SOHP

- AI tools may be used to enhance learning of new concepts and ideas. AI generated information is not to be used to replace student and faculty analytical thinking or in place of completing one’s own assignments.
- Students should refer to individual course syllabi for policies regarding use of AI for specific assignments.
- AI tools may be used to improve writing at the sentence level. This is predicated on students generating the sentences first and using the tools to offer a point of view for consideration in enhancements. Inclusion of an AI generated paragraph is prohibited and is not considered original student work. Inclusion of an AI generated paragraph is improper use of the technology.

Here are some general guidelines for AI usage:

- Improper use of AI in assignments or exams may constitute plagiarism and is subject to the same penalties. Taking credit for AI-generated content without appropriately assigning attribution is a case in point.
- Verify accuracy and validity of all AI generated information.
- Use proper citation of sources and check that the sources are appropriate (follow discipline-specific citation guidelines).
- Students must follow policies in place during clinical rotations.
- Do not enter protected information or health record data into AI tools.
- Instructors have discretion to use AI tools in creative ways.
- Instructors have discretion to limit or prohibit the use of AI tools for particular purposes and as needed as per instructor prerogative and consistent with academic freedom.
- Ultimately, students are fully responsible for the content of work they submit.

SOHP Honor Code and AI

- Individual assessments, assignments and examinations must be original work and not AI-generated unless otherwise stated by the instructor of the course.
- Students are responsible for assuring their work adheres to all other policies and procedures in regard to academic integrity and policies on course syllabi.

To ensure a student understands the information above when turning in an assignment each student is to attest to the following:

I, (sign name electronically), pledge that I have neither received nor provided unauthorized assistance during the completion of this work.

Or

I, (sign name electronically), acknowledge that I have received or used the following tools during the completion of this work.

List tools including but not limited to grammar checking programs, academic support services, outside tutoring services etc.

Welcome

Welcome to the SUNY Downstate Health Sciences University Midwifery Program. The midwifery faculty is committed to educating competent and compassionate midwives to serve diverse populations in a variety of health care settings. The faculty strives to provide a caring and supportive learning environment. The faculty's responsibility is to ensure that, upon successful completion of the program, each student possesses entry-level competency required for safe professional midwifery practice.

The midwifery faculty believes that open and effective communication is a key component of student success. This handbook has been developed to provide you with general program information; to familiarize you with the program philosophy, purpose, and objectives; and to inform you of policies and procedures that govern our program within the School of Health Professions (SOHP). It is your responsibility to become familiar with and abide by the information and policies described in this handbook along with the academic regulations and professional requirements published in the current *SOHP Bulletin* and the *SUNY Downstate Health Sciences University (HSU) Student Handbook* (see, specifically, the section on the School of Health Professions). Any areas pertaining to student policies not specifically delineated in this handbook are found in the current *HSU Student Handbook*.

SUNY Downstate and the Midwifery Program reserve the right to alter the existing rules and regulations and the Midwifery Program of Study as deemed necessary by the institution, school, or program. SUNY Downstate expressly reserves the right, whenever deemed advisable to: 1) change or modify its schedule of tuition and fees; 2) withdraw, cancel, reschedule, or modify any course, program of study, degree, or any requirement or policy in connection with the foregoing; and 3) change or modify any academic or other policy. Written notification will be provided to all students regarding any change.

The Midwifery Program and SUNY Downstate must respond to national or global emergencies as appropriate and at times with limited advanced notice. This may require alteration of course sequencing, course schedules, delivery of course materials, assignments to clinical rotations, graduation dates, and/or other appropriate adjustments. We recognize that in such circumstances, changes may not be optimal. The faculty will do everything it can to communicate such changes, maintain open communication with all students during such changes, and limit disruptions to the extent possible.

Essential changes including those noted in the previous paragraph concerning new academic regulations, policies, or programs will be published in one or more of the following: e-mails, memos, newsletters, program webpage, the program's Learning Management System, or other University publications. It is the responsibility of each student to ascertain current information that pertains to the individual's program, particularly regarding satisfaction of degree requirements by consultation with the student's advisor, the student's program faculty and/or staff, the Office of the Dean of the School of Health Professions, the Office of Student Affairs, the Office of the Registrar, and/or other offices as appropriate.

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Updated copies of all regulations, course offerings, and specific program policies are available for review in the respective program office, SOHP Dean's Office, and in the Office of Student Affairs.

Although the Midwifery Program adheres to the School's published academic calendar, some modifications may be required in order to meet academic and/or clinical scheduling needs. These modifications are made to ensure that students have maximal opportunity to fulfill academic and clinical course objectives. Students will be given advanced notification of deviations from the published academic calendar.

Each student is responsible for obtaining current information that pertains to individual programs of study, particularly regarding satisfaction of degree requirements. Students are strongly encouraged to refer to the *SUNY Downstate Health Sciences University Student Handbook*, other university publications, and/or consult with their Midwifery Program faculty advisor, the Office of the Dean, the Office of Student Affairs, and/or other offices as appropriate.

The faculty looks forward to developing a rewarding partnership with students and will help them pursue their academic and professional goals. All students are assigned a faculty advisor to help with this process. These assignments are distributed at the Midwifery Program orientation. We ask that students make an appointment with their faculty advisors to discuss any questions or concerns they have following review of this handbook.

Mission/Vision/Values Statements

State University of New York (SUNY) Downstate Health Sciences University

Mission:

- To provide outstanding education for physicians, scientists, nurses, and other healthcare professionals.
- To advance knowledge through cutting edge research and translate it into practice.
- To care for and improve the lives of our globally diverse communities.
- To foster an environment that embraces cultural diversity.

Vision:

SUNY Downstate will be nationally recognized for improving people's lives by providing excellent education for healthcare professionals, advancing research in biomedical science, health care and public health, and delivering the highest quality, patient-centered care.

Values:

P R I D E - To take satisfaction in the work we do every day, and to value our collective contributions to the Downstate community.

P r o f e s s i o n a l i s m - We commit to the highest standards of ethical behavior and exemplary performance in education, research, and patient care

R e s p e c t - We value the contributions, ideas and opinions of our students, coworkers, colleagues, patients and partnering organizations

I n n o v a t i o n - We research and develop new and creative approaches and services for the anticipated changes in healthcare

D i v e r s i t y - We embrace our rich diversity and commit to an inclusive and nurturing environment

E x c e l l e n c e - We commit to providing the highest quality of education and service to our students, patients, and community by holding ourselves, our coworkers, and our leaders to high standards of performance

<https://www.downstate.edu/about/our-mission.html>

School of Health Professions

Mission

The mission of the School of Health Professions is to educate health professionals in the delivery of excellent health-care service by developing their scientific competence and fostering their humane spirit. The School seeks to accomplish this by providing a challenging and supportive atmosphere for learning that offers opportunities for structured experiences as well as independent inquiry. Faculty contribute to knowledge in allied health through

advancements in clinical practice, scholarly activities, and basic and applied research. Collaboration is emphasized among students, faculty, clinicians, and professionals in health care and related disciplines. Students are prepared for professional leadership roles through course work and professional and campus activities. The School fosters ongoing professional growth by sponsoring continuing education opportunities in several disciplines. The School strives to serve the urban community in which it is located by providing health services and education to the population.

Vision

SOHP programs share the common goal of becoming nationally recognized, producing graduates who are leaders in advancing the practice of their respective fields. Every program aims to have graduates proficient at responding to the healthcare needs of diverse service recipients in different medical settings and the communities they serve.

Values

- SOHP curricula are designed to support the needs and expectations of stakeholders including students, graduates, faculty, sponsor administrations, employers, physicians, and the public while meeting nationally accepted standards.
- Respect for the rights and dignities of individuals is a critical characteristic of a competent healthcare professional and should be a central concern in the learning environment.
- Programs urge students to adhere to the Codes of Ethics of their corresponding professions.
- SOHP programs aim to have a diverse student body that includes underrepresented people.
- SOHP programs commonly foster a sense of responsibility, professionalism and commitment to life-long learning in their students.

Diversity Statement

The School of Health Professions (SOHP) embraces a culture of diversity and inclusiveness throughout its educational community. We are committed to building and fostering a diverse workforce that reflects the community we serve. We value individual differences and work to ensure that an individual's difference and/or disadvantage does not impede intellectual or professional achievement regardless of gender/gender identity, sexual orientation, disability, religion, race, ethnicity, socioeconomic status, nationality, and other culture-influencing characteristics.

To promote diversity, equity, and inclusion, SOHP will:

1. Improve the cultural diversity of the matriculating student body, faculty and staff through the implementation of more culturally relevant recruitment and retention strategies,
2. Facilitate awareness by infusing cultural diversity and health inequities, as well as disability disparities content into all SOHP program curricula,
3. Infuse content on evidence-based care for culturally diverse populations in all SOHP program curricula, and
4. Improve interaction with culturally diverse Brooklyn communities through culturally humble and

respectful community engagement strategies and interprofessional collaboration and partnerships.

<https://www.downstate.edu/education-training/school-of-health-professions/mission.html>

Philosophy of Care of the American College of Nurse-Midwives (ACNM)

We, the midwives of the American College of Nurse-Midwives, affirm the power and strength of all people seeking midwifery care and the importance of their health in the well-being of families, communities, and nations. We believe in the basic human rights of all persons, recognizing some incur disproportionate risk when these rights are violated. Human dignity and bodily autonomy are basic human rights that should be protected and respected in all areas of care, including in reproductive and sexual health.

We believe every person has a right to:

- Equitable, ethical, accessible quality health care that promotes healing and health
- Health care providers who demonstrate respect for human dignity, individuality, and diversity among groups; act without bias or discrimination and actively seek to disrupt systems of power and privilege that cause harm
- Complete, accurate, and accessible information to make informed health care decisions
- Self-determination and active participation in health care decisions, as the final decision maker of the health care team
- Involvement of people the individual considers important to them, in, to the extent desired, in all health care experiences

We believe the best model of health care:

- Involves a continuous and compassionate partnership between persons seeking care and their health care providers
- Recognizes the importance of interdisciplinary, collaborative care
- Respects the individual's absolute right to bodily autonomy
- Honors a person's expertise, life experiences, and historical knowledge
- Includes methods of care and healing guided by research and best evidence, centered on the individual's decisions, values, and preferences
- Balances watchful waiting and support of physiologic processes with the appropriate use of interventions and technology
- Involves therapeutic use of human presence and skillful communication

These beliefs and values, centered in cultural humility and delineated in ACNM's Vision, Mission, and Core Values provide the foundation for commitment to individual and collective leadership at the community, state, national, and international levels to improve health. We affirm that midwifery care incorporates these qualities and that healthcare needs are well-served through midwifery care.

REFERENCE

Core Competencies for Basic Midwifery Practice (2020). Retrieved from: <https://www.midwife.org/our-philosophy-of-care>

Code of Ethics of The American College of Nurse-Midwives (ACNM)

Certified nurse-midwives (CNMs) and certified midwives (CMs) have three ethical mandates in achieving the mission of midwifery to promote the health and well-being of women and newborns within their families and communities. The first mandate is directed toward the individual women and their families for whom the midwives provide care, the second mandate is to a broader audience for the “public good” for the benefit of all women and their families, and the third mandate is to the profession of midwifery to assure its integrity and in turn its ability to fulfill the mission of midwifery.

Midwives in all aspects of professional relationships will:

1. Respect basic human rights and the dignity of all persons.
2. Respect their own self-worth, dignity, and professional integrity.

Midwives in all aspects of their professional practice will:

3. Develop a partnership with the woman, in which each share relevant information that leads to informed decision-making, consent to an evolving plan of care, and acceptance of responsibility for the outcome of their choices.
4. Act without discrimination based on factors such as age, gender, race, ethnicity, religion, lifestyle, sexual orientation, socioeconomic status, disability, or nature of the health problem.
5. Provide an environment where privacy is protected and in which all pertinent information is shared without bias, coercion, or deception.
6. Maintain confidentiality except where disclosure is mandated by law.
7. Maintain the necessary knowledge, skills and behaviors needed for competence.
8. Protect women, their families, and colleagues from harmful, unethical, and incompetent practices by taking appropriate action that may include reporting as mandated by law.

Midwives as members of a profession will:

9. Promote, advocate for, and strive to protect the rights, health, and well-being of women, families, and communities.
10. Promote just distribution of resources and equity in access to quality health services.
11. Promote and support the education of midwifery students and peers, standards of practice, research and policies that enhance the health of women, families, and communities.

Source: Ad Hoc Committee on Code of Ethics Approved by Board of Directors June 2005 Reviewed and Endorsed by the ACNM Ethics Committee, October 2008, December 2013- April 2014

<https://www.midwife.org/acnm/files/ACNMLibraryData/UPLOADFILENAME/00000000048/Code-of-Ethics.pdf>

American College of Nurse-Midwives (ACNM) Position Statement on Fatigue, Sleep Deprivation & Safety

If not addressed, fatigue, sleep deprivation, and long periods of on-duty time can present potential safety risks for midwives, midwifery students, and the women and families for whom they provide care. The American College of Nurse-Midwives (ACNM) and its members are committed to providing safe, ethical, and high-quality care for women and infants. To achieve this commitment, it is the position of the American College of Nurse-Midwives (ACNM) that:

- Midwives have a professional responsibility to be aware of the effects of sleep deprivation on clinical and personal safety and take steps to limit those effects as suggested below.
- Midwives and midwifery services have a responsibility to create and use strategies to address and minimize sleep deprivation through which personal, physical, and mental/cognitive limitations are acknowledged. These strategies should take into account acute issues (e.g., prolonged wakefulness during labor support) and chronic issues (e.g., call schedules and staffing patterns) to minimize the risks of sleep deprivation.
- Midwives should plan a rest period after 16 hours of continued wakefulness and be aware that the urge to sleep is strongest between 3AM and 5AM.
- Midwives are encouraged to schedule 7 hours of uninterrupted sleep on a regular basis.
- Midwives who are sleep deprived or feel drowsy are advised to take naps before operating motor vehicles.

In recognition that practicing student midwives are also learners, it is the position of ACNM that midwifery students should be well-rested before scheduled call times, have a period of 4 hours of uninterrupted rest after 16 hours of active on-duty time, and/or take rest breaks before working more than 16 hours.

<https://www.midwife.org/acnm/files/ACNMLibraryData/UPLOADFILENAME/000000000306/Sleep-Guidelines-04-07-17.pdf>

Midwifery Program Philosophy

Midwifery care respects the unique physical, emotional, social, and cultural characteristics of each individual.

Midwifery care is based on a partnership with individuals, acknowledging the therapeutic value of compassion, continuity of care, human presence, and communication that demonstrate cultural humility and respect and provide for cultural safety in all care encounters.

Midwifery care fosters the belief that pregnancy and birth are healthy physiologic processes to be respected and supported.

Midwifery care fosters the belief that all life cycle stages and transitions are healthy physiologic processes.

Midwifery care supports non-intervention in physiologic processes and judicious use of intervention and technology when necessary to ensure healthy outcomes and recognizes that care must be individualized and based on the best available evidence.

Midwifery care emphasizes health promotion and disease prevention and recognizes that these must be relevant to each person's life experiences and knowledge and must be offered in a health care system that is equitable, accessible, and ethical.

Midwives provide education and counseling with which individuals can make informed decisions, thereby taking responsibility for their health and their newborns' health.

Midwives serve as advocates for all individuals in the health care system and, within the struggle for basic human rights and social justice, recognize that violation of the rights of any group violates all people's rights.

Midwifery care is family-centered and strives to involve the patient's significant others in the delivery of care as the patient chooses and deems appropriate.

Midwives recognize the potential transformative aspects of pregnancy and childbirth and that these experiences may enhance the individual's self-esteem, health, and personal growth.

Midwives incorporate a public health perspective into all care, recognizing that each person's health contributes to family, community, national, and global health.

Midwives utilize an understanding of social determinants of health to provide high-quality care to all persons, including those from underserved and underrepresented communities.

Midwives provide safe and effective care across settings, including homes, birth centers, hospitals, and other care settings for maternity and other services.

Midwifery is an independent health profession possessing its own core of knowledge, skills, and competencies, yet midwives recognize the need for consultation and collaboration with other health care team members and referral as appropriate.

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Midwifery recognizes the importance of confidentiality and respect for privacy in all health care encounters.

Midwifery education recognizes that education and continuing competency are lifelong pursuits and therefore the faculty is committed to providing opportunities for professional advancement for students and midwives.

Midwifery education recognizes that adult students are responsible for their own learning and therefore the faculty provides a climate that facilitates the acquisition of knowledge and skills essential to safe clinical practice while respecting individual learning styles and differences.

Midwifery education promotes community service.

Midwifery education promotes professional role development that mandates an appreciation for global health care policy, assessment of the health of communities, and participation in teaching.

Midwifery education, practice, and research are based upon ethical principles.

Midwifery supports anti-racism in all students' educational experiences including in the classroom and clinical sites.

Midwifery education is enhanced through diversity of students and faculty.

Individuals from a variety of educational and experiential backgrounds can be comparably prepared to enter the profession of midwifery as safe beginning practitioners.

Faculty members contribute to knowledge in the health professions through advancements in clinical practice; scholarly activities; basic and applied research; and professional service.

Revised & updated by midwifery faculty on 6/18/24

Midwifery Perspective on Learning

1. Learning is a self-directed process for which the adult learner assumes primary responsibility.
2. Midwifery faculty provides resources and support to facilitate student learning.
3. Individual faculty members differ in teaching styles. Students may benefit from exposure to various approaches, both in the classroom and clinical settings.
4. Evaluation is part of the learning process. Learning is facilitated by reinforcement and constructive feedback from others.
5. Students are responsible for self-evaluation, a critical component of the learning process. Students are responsible for communication of learning needs to core (academic) and clinical faculty.
6. In clinical practice, it is the faculty's responsibility to maintain boundaries of safety and the learner's responsibility to respect those boundaries.
7. Learning is facilitated by a variety of instructional modalities and interprofessional approaches.

Revised & updated by midwifery faculty on 6/28/22

Midwifery Program Purpose

The purpose of the Program is to graduate safe, beginning midwives. This is accomplished by assisting each student to:

1. acquire depth and breadth of midwifery and related theory
2. acquire competence in the performance of midwifery skills
3. apply theoretical knowledge, including evidence-based research, to clinical practice
4. utilize the midwifery management process in all aspects of midwifery care
5. become a culturally humble and respectful primary health care provider

Midwifery Program Outcomes

The program offers qualified post-baccalaureate students the opportunity to become safe beginning Certified Nurse-Midwives (CNMs) and Certified Midwives (CMs) who can:

1. Provide primary health care, encompassing, reproductive and sexual, health care, across the lifespan
2. Recognize the role midwives play in caring for transgender and gender non-conforming individuals (TGNC).
3. Recognize and support physical, psychological, emotional, social, and behavioral development, including growth and development related to gender identity, sexual development, sexuality, and sexual orientation.
4. Manage perinatal care. Monitor fetal growth and well-being.
5. Assess the neonate's adaptation to extrauterine life and initiate resuscitative measures when appropriate.
6. Perform comprehensive neonatal assessment, facilitate the newborn's integration into the family, and provide anticipatory guidance related to infant care.
7. Collaboratively manage the care of individuals with selected obstetric and/or medical complications and make appropriate referrals.
8. Provide emergency care as appropriate.
9. Analyze the impact of health care delivery systems and the practice of midwifery on public policies, legislation, social justice, racism, and social determinants of health.
10. Apply leadership, management, and teaching/learning theories to effect change within the health care delivery system
11. Assess the needs of communities and promote changes in health care delivery that are responsive to the needs of populations, with a focus on the underserved.
12. Interpret, evaluate, and apply research studies relevant to reproductive health care and midwifery practice.
13. Analyze the role of research in promoting the advancement of midwifery education, practice, health, and health care.

Midwifery Program Statement on Discriminatory and Abusive Behavior

The faculty does not tolerate harassment, disrespect, or abuse of students, patients, support persons, families, or staff, including, but not limited to, racist or sexual harassment or abuse.

For the institution's policies on such conduct, please refer to the Office of Diversity and Inclusion's webpage:

<https://www.downstate.edu/about/our-administration/diversity/office-of-diversity-inclusion/policies/index.htm>

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In addition, per President Wayne J. Riley:

If you feel unsafe, experience acts of harassment, discrimination, or observe vandalism on the campus:

- DO immediately call University Police at X2626 or 911 if there are any safety threats to you or your fellow students.
- DO document the incident. If you discover graffiti such as anti-Semitic speech or posters, please call University Police at X2626 to file an incident report.
- DO report the incident to a campus authority as a bias incident. Even if campus security determines that the action was not illegal, a report of the incident ensures follow-up.

Further, any individual who believes he/she (sic) has experienced discrimination should immediately contact the Office of Diversity and Inclusion at (718) 270-1738. You may also email ODI at AskODI@Downstate.edu.

You may also reach out to the Office of Student Life & Services at (718) 270-2187 or email studentaffairs@downstate.edu. All calls and emails are kept confidential.

Mandatory Midwifery Attendance at SOHP-wide Interprofessional All-Program Events

All students in the SOHP are required to participate in the following events:

Annual Interprofessional Case Study (ICS) Symposium – The ICS Committee selects a clinical case in which all SOHP disciplines develop plans of care to be presented at a symposium on campus in the spring. All students in the Gynecologic, Reproductive and Sexual Health course will work in groups to prepare the midwifery presentation and attend the symposium to meet the course requirements. Since this course emphasizes the midwife's role in interprofessional work and collaboration around patient care. A debriefing session to discuss and critique the event will be held thereafter.

All students in the midwifery program are invited and encouraged to participate annually.

Ethics Day – Attendance at Ethics Day is a requirement of our Professional Issues and Leadership course and students will also complete the mandatory written assignment to successfully meet the requirements for passing the course.

All students in the midwifery program are invited and encouraged to participate annually.

Career Alumni Networking Event – Attendance at this event will be required among all first- and second-year students. Following the event, students will work together to develop, update, and pass along a directory of compiled contacts and resources gathered from the event to the incoming class each year. This will be an assignment required for successful completion of our Toward Racial and Social Justice course. * 2-3 students will be recruited from the graduating class each year to return as a panelist for this event.

All students in the midwifery program are invited and encouraged to participate annually.

SOHP Research Day – This event is mandatory for students in research courses. Attendance and/or presentation is part of the required final projects/papers and course grade.

All students in the midwifery program are invited and encouraged to participate annually.

SOHP Dean's Lecture Series – Attendance at 7 out of 9 lectures in the series (and/ or the reviewing of recordings) is required of all students, except during the integration rotation. Students may be allowed to utilize topics discussed in the series to complete further research and a paper to meet requirements of Independent Study course work when needed. Faculty will also consider including questions from content discussed in lecture series, to be included in extra credit quizzes or on exams for topics that are complimentary to course offerings.

Midwifery Education Minimal Technical Standards for Admission and Continuation

Introduction

Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act require that no qualified individual with a disability shall, by reason of such disability, be excluded from participation in or denied the benefits of SUNY Downstate Health Sciences University's services, programs or activities or be subjected to

discrimination by SUNY Downstate.

The term “qualified individual with a disability,” means an individual with a disability who, with or without reasonable modifications to rules, policies, or practices, the removal of architectural, communication or transportation barriers, or the provision of auxiliary aids and services, meets the essential eligibility requirements for the receipt of services or for participation in programs or activities.

The Committee on Admissions and Academic Standing does not discriminate against qualified individuals with disabilities. Students must demonstrate the performance of the program's essential functions to meet certain minimum academic and technical standards. In carrying out their functions, the Committee is guided by the technical standards necessary for admissions, continuance, and successful completion of the program.

Technical Standards

The purpose of the Midwifery Program at Downstate Health Sciences University is to graduate safe, beginning midwives. This is accomplished by assisting each student to:

- acquire depth and breadth of midwifery and related theory
- acquire competence in the performance of midwifery skills
- apply theoretical knowledge, including evidence-based research, to clinical practice
- utilize the midwifery management process in all aspects of midwifery care
- Promote, advocate for, and strive to protect the rights, health, and well-being of members of the community
Promote just distribution of resources and equity in access to quality health services

Students are required to successfully complete both the academic and clinical requirements of the program to receive the MS degree in Midwifery or Advanced Certificate in Midwifery. In order to carry out the activities described below, candidates for the MS or the Advanced Certificate must be able to consistently, quickly, and accurately learn, integrate, analyze, and synthesize data. The activities described below are the technical standards necessary to complete the Midwifery Program and to perform as a safe beginning midwife.

A candidate for a Midwifery degree or the Advanced Certificate must have abilities, attributes, and skills in five major areas: 1) Observation, 2) Communication, 3) Motor Coordination, 4) Intellectual, including conceptual, integrative, and quantitative abilities, and 5) Behavioral and Social. Developing autonomy is an essential function of the program and profession.

1. Observation

Students must have sufficient vision to be able to observe demonstrations, experiments, and laboratory exercises in the basic sciences. They must be able to observe a patient accurately at close range and at a distance, be able to obtain an appropriate medical history directly from the patient or guardian and observe digital and waveform readings and other graphic images to determine a patient’s condition. Students must be able to perceive the signs of disease and infection through visual inspection, palpation of changes in various organs and tissues, such as the uterus, ovaries, and pelvic adnexal area and auscultation of sounds such as those of the heart, lungs, and bowel. Such observation necessitates the functional use of vision, hearing and other sensory modalities.

2. Communication

Students should be able to communicate, understand and observe patients to elicit information, perform their examinations, describe changes in mood, activity and posture, and perceive nonverbal communications. They must be able to communicate effectively and sensitively with patients. Communication includes not only speech but also reading and writing. Students must also communicate effectively and efficiently in oral, written, and electronic form with all health care team members to convey information for safe and effective care.

3. Motor Coordination

Students should be sufficiently mobile to execute movements required to provide general care and emergency treatment to patients. Students should be able to do basic screening and examination procedures, including but not limited to physiological measures such as heart rate and respiration; palpation; percussion; and auscultation. They should be sufficiently mobile and possess the eye-hand coordination and motor strength, to execute movements required to provide general treatment of patients (including transfers) and provide general care and emergency treatment to patients. Examples of emergency treatment reasonably required of midwives are cardiopulmonary resuscitation, the application of pressure to stop bleeding, and the performance of maneuvers to manage shoulder dystocia in a rapid manner. Additionally, students must be able to perform the maneuvers involved in vaginal assessment in labor, delivery, and suturing. Such actions require coordination of both gross and fine muscle movements and functional use of the senses of touch and vision.

4. Intellectual - conceptual, integrative, and quantitative abilities

These abilities include measurement, calculation, memorization, reasoning, analysis, and synthesis. Problem solving, the critical skill demanded of midwives, requires all these intellectual abilities. In addition, students should be able to comprehend three-dimensional relationships and to understand the spatial relationships of structures.

5. Behavioral and Social

Students must be able to fully utilize their intellectual abilities, exercise good judgment, promptly complete all responsibilities attendant to the diagnosis and care of patients, and develop mature, sensitive, and effective relationships with patients. Students must be able to adapt to changing environments, to display flexibility and to learn to function in the face of uncertainties inherent in the clinical problems of many patients.

The student must be able to experience empathy for the situations and circumstances of others and communicate that empathy. Compassion, integrity, concern for others from all levels of society, respect for human diversity, interpersonal skills, interest, and motivation are all personal qualities that are assessed during the admissions and educational process.

Conclusion

The SUNY Downstate Health Sciences University Midwifery Program and its sponsoring institution will attempt to develop creative ways of opening the Program to competitive, qualified individuals with disabilities. In doing so, however, the Program and sponsoring institution must maintain the integrity of the curriculum and preserve those elements deemed essential to the education of a Midwife. The Program and sponsoring institution cannot compromise the health and safety of patients. An applicant or student unable to meet the minimum academic and technical standards is not qualified for the profession.

General Information

Program Office & Classroom Locations

The SUNY Downstate Health Sciences University Midwifery Program address is:
450 Clarkson Avenue, Mail Stop Code 1227, Brooklyn, N.Y. 11203-2098

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The program office is in the Health Science Education Building (HSEB), 7th floor, Room 7-043. The phone # is (718) 270-7740 and the Fax # is (718) 270-7634.

Program classrooms are located on the 7th floor HSEB, Room 7-031 and on the 8th floor HSEB, Classroom 8 D/E. Additional laboratory, lecture hall and classroom spaces are used as needed in HSEB, the Center for Healthcare Simulation (CHS), and/or the Basic Sciences Building (BSB).

The SOHP computer lab is located on the 7th floor HSEB, Room 7-045 and additional computer terminals are available for student use in the library.

Program Accreditation

The Midwifery Program is fully accredited by the Accreditation Commission for Midwifery Education (ACME) <http://www.midwife.org/acme>

The ACME office is located at:
2000 Duke Street, Suite 300
Alexandria, Virginia 22314
www.theacme.org
(703) 835-4565

The national certifying organization for individual midwives is the American Midwifery Certification Board (AMCB). The phone number of the AMCB is (866) 366-9632 and the website address is: <http://www.amcbmidwife.org>

This program is registered with and approved by the New York State Education Department. The registration number for the advanced certificate in Midwifery is **12042**. The registration number for the Master of Science in Midwifery is **21570**. The HEGIS code is **1203.10**

Communication with Faculty and Staff

A. Offices and Office Hours

All faculty offices are on the 7th floor. Room numbers are listed below. Faculty work on-site and off-site. When faculty are on campus, their doors may be closed because of building fire regulations. However, the Program philosophy is “Open Door.” Students should feel free to knock if they need to speak to a faculty member. If students have something that will take time to discuss or the faculty member is not on campus that day, an appointment is required. Students make appointments with faculty via e-mail.

B. E-Mail

Downstate E-mail is the official method of communication between students, staff, and faculty. All faculty members and staff check their e-mail with great frequency. Students are strongly encouraged to check email daily. Faculty and staff e-mail addresses are listed below.

Midwifery Faculty and Staff Information
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Name	Rm. #	Campus Ext.	E-mail address
Shakima Wiggins, Program Chair	7-046	270-7757	shakima.wiggins@downstate.edu
Susanrachel Condon	7-044	270-7754	susanrachel.condon@downstate.edu
Amal Amar	7-047	270-7759	amal.amar@downstate.edu
Niyoka Turnbull	7-043	270-7740	niyoka.turnbull@downstate.edu

Students

1. Student Electronic Mail

All students are given individual e-mail accounts by the University from the time of enrollment in the program, until 6-12 months after graduation. **This university e-mail account is the official and *only* e-mail address utilized by the faculty for communication with students. Students are expected to check their Downstate e-mail DAILY, including summer, and as often as possible during all school breaks.**

2. Learning Management System (LMS)

All students have access to the School's online learning management system. Students will receive training on how to access this electronic system. Students will have access to all course materials through the LMS and related mobile applications, which may be downloaded to students' devices.

3. Student Clinical Documents

The Midwifery Program uses the Learning Management System to maintain and track all data relating to students' clinical experiences. Students are responsible for uploading to the clinical courses in the Learning Management System, as instructed by faculty prior to starting all clinical rotations. Documentation needed for clinical placements includes, but is not limited to:

- name and address
- phone number
- updated resume
- current certificate of insurance (student liability, also called malpractice)
- documentation of current outside course work necessary for certain clinical rotations (see later) such as

Basic Life Support (BLS), Neonatal Resuscitation Program (NRP), and a fetal monitoring course.

In addition, faculty will utilize The Midwifery Faculty Student folder in OneDrive to store important information that students need:

- faculty advisor/advisee list

- little sibling/big sibling list
- Midwifery Program Student Handbook
- Midwifery Program Clinical Handbook
- Orientation Materials

4. Online Program Calendars

Students will be advised regarding the program calendar at orientation. Occasionally there are unavoidable schedule changes. Check the calendar regularly to ensure the information students rely on is up to date.

Emergency Information

In case of an on-campus emergency, students should call 718-270-2626 for university police *and* 911. In addition, students are encouraged to register for Downstate’s Emergency Alert System: SEND WORD NOW. Information regarding registration can be accessed at <http://downstate.sendwordnow.com>.

In a weather or other emergency, SUNY Downstate has a special phone system. The number is **718-270-7703**. Call to get the most updated information. In general, information for the day will be provided by 7am, but it might change as circumstances change.

If classes are cancelled for the entire University, students will hear that message and need make no other call (except if students are scheduled for clinical that day—see the third paragraph below). If there have been no changes for the University as a whole, students will hear a standard greeting:

“Welcome to Downstate Health Sciences University and its University Hospital of Brooklyn. If you are dialing from a touchtone phone, press 1. If you are dialing from . . .”

This greeting means the President has not closed the University. However, the School of Health Professions (SOHP) may be closed, or some classes cancelled. Dial 7703, to get SOHP’s individual message. The faculty will make every effort to have our individual class postings announced on this message.

Students who are scheduled for a clinical session on a day with an emergency must contact their preceptors to find out whether they will be in. If so, students are expected to be there if it is possible and safe to do so. Students who cannot attend must inform their preceptors. Students are expected to make up the clinical time.

Student Services

Services for Students with Disabilities

Students are referred to the current *SUNY Downstate Health Sciences University Student Handbook* for a

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description of the procedures for requesting accommodations due to temporary or permanent disabilities. Only the Disability Accommodations Coordinator in Student Affairs can determine appropriate and reasonable accommodations. The Office of Student Affairs will confidentially inform the program of the specific accommodation(s) that will be made for any individual student.

Academic Services and Advisement

Academic Services provides support for academic success at no additional cost to students. A detailed description of this service appears in the current SUNY Downstate Health Sciences University (HSU) Student Handbook. All students, but especially those who experience academic difficulties, are highly encouraged to access the Academic Services. At times, the faculty may refer a student to these services. For appointments with an Academic Counselor, please contact Academic Services at 718-270-7536.

Student Counseling Service

Counseling Services provides support at no additional cost to students. A detailed description of this service appears in the current SUNY Downstate Health Sciences University (HSU) Student Handbook. Confidential student counseling is available through the Downstate Health Sciences University Student Counseling Services. Student counseling services are offered via teletherapy (telephone or video-based) to Downstate students in need. **Faculty will not be informed when students receive this service.** Please contact Student Academic Services by email to Ms. Sze-Ying Lee sze-ying.lee@downstate.edu (preferred method) or email the office account at

Student Health Service

A detailed description of this service appears in the current SUNY HSU Student Handbook. The Student Health Service provides emergency and ambulatory care to all matriculated students at no additional cost. Its webpage is [Student Health Center | Student Services | SUNY Downstate Health Sciences University](#)

Services are available by appointment or on a walk-in basis Monday to Friday from 8:00am-4:00pm at 440 Lenox Road, Suite 1-W. The Student Health phone number is 718-270-2018 and in emergencies, students can call 718 270-3166 or 270-4577 for instructions when closed.

Transportation/Shuttle Service

Downstate Health Sciences University provides complimentary van services for students to select subway stations/bus stops and to the parking lots. See University Police section in the HSU Student Handbook. In addition to scheduled pickups, individuals traveling to and from the subways late at night and/or at odd times can arrange to be picked up by calling 718-270-2626. Students will need ID cards. For more information and schedule go to: [Transportation & Shuttle Services | University Police | SUNY Downstate Health Sciences University](#)

Financial Aid Information

The Financial Aid Office provides current information about eligibility for financial aid, loans, and scholarships to students. Other external sources of scholarships may be available. Students can check the [Financial Aid | SUNY Downstate](#) website for information on Financial Aid. Students can also call the Financial Aid Office at 718-270-2488 or email them at financialaid@downstate.edu

Each year, several external scholarships specific to midwifery are available. Sometimes information about these and others not specific to midwifery is sent to the Program Chair who will then forward this information to students via e-mail. Other scholarships are announced at local midwifery meetings (NYC or LI), or on the ACNM website: www.acnm.org. It is advisable to check this website periodically. New York State Midwives (NYM)

also sends emails about scholarship opportunities. Students need to be members of the midwifery professional organization that offers the scholarship.

Additional Student Information

Information about policies regarding review of student records; equitable tuition refund; access to university/college catalogs; and access to academic calendars is available through the Office of Student Life and Services and the SUNY Downstate Handbook. The URL for the University Handbook is:

<https://www.downstate.edu/education-training/student-affairs/student-handbook.html>

After reviewing the SUNY Downstate Handbook, additional questions or concerns should be directed to the appropriate office for further information (e.g., Bursar's Office; Office of Student Affairs; Office of the Registrar).

Required Textbooks/Equipment

Faculty will review the required and/or recommended textbooks and equipment for each course in the orientation session to that course. Information about textbooks for the first year is included in the Important Information letter new students receive via email during the summer.

All students should have an up-to-date medical dictionary, such as Stedman's or Taber's (or any other).

Midwifery Student Academic Policies

Students in the Midwifery Program are educated for a profession that relies on its providers to function at the highest level of integrity. Providing care to individuals and families requires honesty, responsibility, trustworthiness, and respect for others. In essence, by attending this program, students are signing onto a lifelong honor code. However, to help negotiate the academic environment, and to have guidelines should problems arise in students' ability to maintain these characteristics or to perform at the level of excellence required for this program, the faculty has developed explicit policies for both academic and clinical work in the program. These are detailed in the sections that follow.

The following policies that relate to academic standing and promotion have been reviewed and approved by the Academic Policy Committee of the School of Health Professions. The policies that students are responsible for abiding by are included in the current versions of two documents: this Midwifery Program Student Handbook and the *SUNY Downstate Health Sciences University Student Handbook*.

I. Registration

All students are expected to register online through the Banner portal according to the schedule established by the Registrar's office. Some courses may require faculty approval.

II. Program Length

1. A two-year program of study is designed to be completed in 5-6 semesters
2. A three-year program of study is designed to be completed in 7-8 semesters
3. The MS in Midwifery completion for CMs and CNMs is designed to be completed in 2, 3, or 4 semesters.
4. Due to ongoing changes in clinical site availability related to the COVID pandemic, graduation within these time frames cannot always be guaranteed at this time.

III. Midwifery Programs of Study (tracks)

All students, regardless of track, are required to successfully complete the graduate credit Midwifery program core curricula.

Note: As of 2011, the American Midwifery Certification Board (AMCB) has required a graduate degree in midwifery or a related field to take its national certification exam (that is needed for midwifery practice). Therefore, any student entering the program without a related Master's degree will be required to enroll in the Master's track.

Advanced Certificate Midwifery:

Students registered for the advanced certificate track graduate with an Advanced Certificate in Midwifery upon successful completion of the Midwifery Program core curriculum.

Students may enroll in the Advanced Certificate track if they have a Master's in a related field approved by the midwifery faculty.

Master of Science (MS) degree in Midwifery:

Students registered for the Master's track are eligible for a Master of Science (MS) degree in Midwifery upon successful completion of the Midwifery program core curriculum plus an additional 12 credits that comprise the Master's component.

Certified Midwives (CMs), Certified Nurse-Midwives (CNMs), Graduate Midwives (GMs), or Graduate Nurse-Midwives (GNMs) who register for the Master's Completion program are awarded up to 30 graduate level credits of advanced standing.

IV. Midwifery Curriculum

Two-year and three-year course sequencing is outlined in the following pages for the 1) Master of Science degree in Midwifery and 2) Advanced Certificate in Midwifery. Modified programs of study are available and may be individualized based on a student's progress.

Master of Science Program of Study: 7 – 8 Semesters

All students must hold a current American Heart Association (AHA) Basic Life Support (BLS) certification before beginning courses marked as "clinical," and hold current certification in neonatal resuscitation (AAP/AHA) prior to taking NRMW 5107 Neonatal Clinical or NRMW 5121 Intrapartum Care, Clinical (may be taken the same semester or not). Students must

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also take a basic fetal monitoring course with examination before taking NRMW 5215 and an advanced fetal monitoring course with examination before taking 5120 Intrapartum Care, Didactic. These required courses incur additional costs.

First Year

Fall

Course No.	Course Title	Credits
NRMW 5017	Professional Issues & Leadership in Midwifery	3
NRMW 5401	Research I +	3
NRMW 5407	Educational Theories, Philosophies, and Practices for Didactic and Clinical Teaching+	3
NRMW 5117	Continuity of Care Elective 1 ##	0.5 ##
	Total Credits	9-9.5 ##

Spring

Course No.	Course Title	Credits
NRMW 5402	Research II +	3
NRMW 5403	Health Care Policy & Community Assessment *** +	3
NRMW 5018	Toward Racial and Social Justice and Equity in Midwifery Practice and Education	1
NRMW 5216	Continuity of Care Elective 2 ##	0.5
	Total Credits	4-7.5 *** ##

Summer

Course No.	Course Title	Credits
NRMW 5310	Continuity of Care Elective 3 ##	0.5 ##
NRMW 5700	Independent Study #	1-3 #
	Total Credits	0-3.5 * ###

Second Year

Fall

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Course No.	Course Title	Credits
MIDW 4001	Basic Health Skills*	3*
NRMW 5112	Advanced Physical Assessment of Women, Didactic	1
NRMW 5113	Advanced Physical Assessment of Women, Clinical	1
NRMW 5114	Pelvic Assessment of Women, Didactic	0.5
NRMW 5115	Pelvic Assessment of Women, Clinical	0.5
NRMW 5116	Advanced Pathophysiology of Acute and Chronic Conditions in Women and Their Primary Care	3
NRMW 5205	Advanced Pharmacology	3
	Total Credits	9 -12*

Spring

Course No.	Course Title	Credits
NRMW 5209	Medical & Obstetric Complications of Pregnancy	1.5
NRMW 5212	Gynecologic, Reproductive, and Sexual Health, Didactic	1.5
NRMW 5213	Gynecologic, Reproductive, and Sexual Health, Clinical++	1.5++
NRMW 5214	Antepartum Care, Didactic	1.5
NRMW 5215	Antepartum Care, Clinical++	1.5++
	Total Credits	4.5-7.5++

Summer

Course No.	Course Title	Credits
NRMW 5208	Clinical Practicum in Primary Care	1

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MIDW 5302	International Women's Health Care Policy *** +	3 **
NRMW 5309	Medical Complications of Pregnancy	1.5
NRMW 5213	Gynecologic, Reproductive and Sexual Health, Clinical (if not taken in the spring) ++	1.5++
NRMW 5215	Antepartum Care, Clinical (if not taken in the spring) ++	1.5++
NRMW 5700	Independent Study #	1-3 #
	Total Credits	2.5 - 8.5 ** #++

Third Year

Fall

Course No.	Course Title	Credits
NRMW 5106	Neonatology, Didactic	2
NRMW 5107	Neonatology, Clinical	1
NRMW 5118	Postpartum Care, Didactic	.5
NRMW 5119	Postpartum Care, Clinical++	.5++
NRMW 5120	Intrapartum Care, Didactic++	2.5++
NRMW 5121	Intrapartum Care, Clinical++	3++
NRMW 5409	Obstetric Complications of Pregnancy++	1.5++
NRMW 5700	Independent Study #	1-3 #
	Total Credits	3.5 – 11++

Spring

Course No.	Course Title	Credits
NRMW 5405	Integration of Clinical Studies++	4++

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NRMW 5122	Preparation for Midwifery Practice++	1++
NRMW 5119	Postpartum Care, Clinical (if not taken in the fall) ++	.5++
NRMW 5120	Intrapartum Care, Didactic (if not taken in the fall) ++	2.5++
NRMW 5121	Intrapartum Care, Clinical (if not taken in the fall) ++	3++
NRMW 5409	Obstetric Complications of Pregnancy (if not taken in the fall) ++	1.5++
	Total Credits	5 – 12.5++

Summer

Course No.	Course Title	Credits
NRMW 5405	Integration of Clinical Studies (if not taken in the spring) ++	4++
NRMW 5122	Preparation for Midwifery Practice (if not taken in the spring) ++	1++
	Total Credits	5++

Total Credit Allocation for the Program: 52/54.5##/54*/55.5*####

* 3 credits of supplemental course for Direct-Entry Midwifery Track (required for state licensure). This course, or equivalent, is required only for direct entry students.

*** Either Health Care Policy and Community Assessment, NRMW 5403, or International Women's Health Care Policy, NRMW 5302, satisfies the requirements for the MS degree in Midwifery.

A 1-3 credit independent study (NRMW 5700) may be taken as an elective with faculty permission. Credits for these courses are not included in the number required for the Advanced Certificate or master's degree.

This elective must be taken for all 3 semesters. It involves following for observation only one family planning a home birth through all prenatal visits, observing the birth, and following the family up to 6 weeks of the postpartum period. It must be taken for 3 semesters unless the family opts out of care or has transferred to the hospital. Credits for these courses are not included in the number required for the Advanced Certificate or master's degree.

+ Courses in the MS in Midwifery Completion program.

++ May be taken in one of two designated semesters.

Advanced Certificate Program of Study 5 – 6 Semesters

All students must hold a current American Heart Association (AHA) Basic Life Support (BLS) certification before beginning courses marked as “clinical,” and hold current certification in neonatal resuscitation (AAP/AHA) prior to taking NRMW 5107 Neonatal Clinical or NRMW 5121 Intrapartum Care, Clinical (may be taken the same semester or not). Students must also take a basic fetal monitoring course with examination before taking NRMW 5214 Antepartum Care Didactic, and an

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intermediate fetal monitoring course with exam before taking NRMW 5120 Intrapartum Care Didactic. These required courses incur additional costs.

First Year

Fall

Course No.	Course Title	Credits
MIDW 4001	Basic Health Skills *	3 *
NRMW 5112	Advanced Physical Assessment of Women, Didactic	1
NRMW 5113	Advanced Physical Assessment of Women, Clinical	1
NRMW 5114	Pelvic Assessment of Women, Didactic	0.5
NRMW 5115	Pelvic Assessment of Women, Clinical	0.5
NRMW 5116	Advanced Pathophysiology of Acute and Chronic Conditions in Women and Their Primary Care	3
NRMW 5205	Advanced Pharmacology	3
NRMW 5017	Professional Issues & Leadership in Midwifery	3
	Total Credits	12-15 *##

Spring

Course No.	Course Title	Credits
NRMW 5009	Obstetric Pharmacotherapeutics	1
NRMW 5209	Medical & Obstetric Complications of Pregnancy	1.5
NRMW 5212	Gynecologic, Reproductive, and Sexual Health, Didactic	1.5
NRMW 5213	Gynecologic, Reproductive, and Sexual Health, Clinical++	1.5++
NRMW 5214	Antepartum Care, Didactic	1.5
NRMW 5215	Antepartum Care, Clinical++	1.5++
NRMW 5018	Toward Racial and Social Justice and Equity in Midwifery Practice and Education	1.0

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Total Credits	5.5-8.5 ###+
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Summer

Course No.	Course Title	Credits
NRMW 5208	Clinical Practicum in Primary Care	1
NRMW 5309	Medical Complications of Pregnancy	1.5
NRMW 5213	Gynecologic, Reproductive and Sexual Health, Clinical (if not taken in the spring) ++	1.5++
NRMW 5215	Antepartum Care, Clinical (if not taken in the spring) ++	1.5++
NRMW 5700	Independent Study #	1-3 #
	Total Credits	2.5-8.5##

Second Year

Fall

Course No.	Course Title	Credits
NRMW 5106	Neonatology, Didactic	2
NRMW 5107	Neonatology, Clinical	1++
NRMW 5118	Postpartum Care, Didactic	.5
NRMW 5119	Postpartum Care, Clinical++	.5++
NRMW 5120	Intrapartum Care, Didactic++	2.5++
NRMW 5121	Intrapartum Care, Clinical++	3++
NRMW 5409	Obstetric Complications of Pregnancy++	1.5++
	Total Credits	3.5-11++

Spring

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Course No.	Course Title	Credits
NRMW 5119	Postpartum Care, Clinical (if not taken in the fall) ++	.5++
NRMW 5120	Intrapartum Care, Didactic (if not taken in the fall) ++	2.5++
NRMW 5121	Intrapartum Care, Clinical (if not taken in the fall) ++	3++
NRMW 5409	Obstetric Complications of Pregnancy (if not taken in the fall) ++	1.5++
NRMW 5405	Integration of Clinical Studies++	4++
NRMW 5122	Preparation for Midwifery Practice++	1++
	Total Credits	5-12.5++

Summer

Course No.	Course Title	Credits
NRMW 5405	Integration of Clinical Studies (if not taken in the spring) ++	4++
NRMW 5122	Preparation for Midwifery Practice (if not taken in the spring) ++	1++
	Total Credits	5++

Total Credit Allocation for the Program: 40-49 *++

* 3 credits of a supplemental course for Direct-Entry Midwifery Track (required for state licensure). This course, or equivalent, is required only for direct entry students.

A 1-3 credit independent study (NRMW 5700) may be taken as an elective in either or both of the first two summer semesters with faculty permission. Credits for these courses are not included in the number required for the Advanced Certificate or master's degree.

++ May be taken in one of two designated semesters.

V. Attendance/Punctuality

1. Students are expected to attend all scheduled classes, seminars, examinations, competency performance examinations (CPEs), and clinical experiences. In case of illness or emergency, the student must notify the instructor/preceptor by text or e-mail prior to the scheduled class/experience or as soon thereafter as possible. Ascertain communication method preferences of preceptors at the outset of each new rotation. Students with multiple preceptors should know who to contact in the event of illness or emergency inability to attend a session.

Students are expected to be on time for all synchronous classes and scheduled clinical sessions.

2. Students habitually late or absent from class will be counseled by the faculty. See course syllabi for policies regarding class participation. Students are responsible for learning all course material regardless of class attendance.
3. Students must attend all assigned clinical sessions. Students who are repeatedly late to clinical may be dismissed from the clinical site. Habitual lateness and or absence may result in permanent removal from the clinical site with possible course failure. This includes when preceptors advise students to arrive early for extended time for chart review.
4. All requests for non-emergency clinical schedule changes must be approved in advance by the Clinical Site Service Director or designee, or preceptor at the clinical site. The Course Coordinator or Faculty Liaison to the Clinical Site must also be notified. Approval of clinical time requests is subject to availability of clinical experience. Students must make up missed clinical time.
5. Because of issues of health and safety and as a courtesy to classmates and faculty, infants and children are not permitted in class or exams. Lactating students may pump quietly in class or during class breaks. There is a nursing space in the Public Health Academic Building (PHAB).

VI. Evaluation

Completion of the program is based on the achievement of didactic and clinical course competencies. Candidates for graduation must have a minimum cumulative grade point average of a 3.0 (B). There are three types of Midwifery courses---didactic only, clinical only, and combined didactic/clinical. Students must pass all didactic courses or the didactic component of combined didactic/clinical courses with a grade of 80% (B) or better. Students must achieve a grade of Pass in all clinical courses or in the clinical component of combined didactic/clinical courses. Issues related to course failure and other academic and/or clinical problems will be handled as specified in the appropriate sections below. In addition, there are specific policies in each course syllabus that describe in greater detail how these policies will be implemented in that course. If there is nothing more specific in a particular course relating to a policy area, the policies below apply to that course.

A. Academic Evaluation

Students must take all examinations and Competency Performance Examinations (CPEs) at the time and date scheduled by the Course Coordinator(s). Exams and CPEs will only be rescheduled for illness or extreme emergency at the discretion of the Course Coordinator. If a student misses an exam for other than illness or emergency the student will receive a “0” grade for that exam or failure in a CPE.

1. Students are expected to be on time for all scheduled examinations and CPEs. Extra time will not be given to latecomers. Cell phones must be turned off during all examinations and CPEs. Students are not permitted to wear smart watches during an examination. The only reason that students may leave an examination before they complete the examination is to use the restroom. Only one student will be allowed to leave the room at a time. The student will turn in examination materials and/or scrap paper to the proctor before leaving.
2. All examinations are given via the Respondus Lockdown Browser. To facilitate off-campus examinations, students will download Respondus Lockdown Browser to their computers. Off-campus examinations will be proctored remotely, and students may be recorded via the Respondus Monitor. Guidelines for these exams will be shared with students at the time of the examination, and they must adhere to them.
3. Examination Integrity Policy: Examinations are meant to reflect each student’s individual achievement. Infractions of these policies compromise the integrity of the examinations and violate the integrity of the midwifery program and profession. Such violations will result in documentation of the violation in the student’s record and the student is subject to discipline in accordance with the policy set forth in the current *SUNY Downstate HSU Student Handbook*.
 - A. Making whole or partial copies (**including reconstructions from memory**), or delivering, receiving, possessing, posting on the web, or transmitting (electronic or otherwise) any material contained in the examination before, during or after the examination constitutes academic dishonesty and violates the honor code. See SOHP handbook for academic integrity policy.
 - B. Students should not relay specific examination content to anyone taking an examination later or to those who assist students with examination preparation. Relaying specific examination content constitutes academic dishonesty and violates the honor code.
4. Students are expected to complete and submit all required assignments and/or learning activities by the deadline(s) established by the Course Coordinator(s). A request for approval of an extension of a deadline must be made via e-mail to the Course Coordinator(s) prior to the deadline. Penalties for late work will be at the discretion of the Course Coordinator(s) and published in the course syllabus. When the assignment requires the use of references, either the American Psychological Association (APA) or the biomedical format (as used in the *Journal of Midwifery and Women’s Health*) must be used consistently within the body of the assignment and in the reference list.
5. A cumulative average grade of 80% (B) or higher is required for passing each course. A grade of less

than 80% results in a grade of F. This policy is based on the faculty's belief that grades of less than 80% reflect insufficient knowledge for safe midwifery practice and do not reflect satisfactory graduate level work.

6. In courses in which examinations are given, students must achieve an average of at least 80% on the examinations, unless otherwise delineated in the course syllabus. If a student achieves less than an 80% average on examinations, irrespective of how many other components comprise the didactic grade in the course, the student will either fail the course or be eligible for a cumulative re-examination. To be eligible for a cumulative re-examination student must have an average on examinations of 70% or higher at the end of the course. The cumulative re-examination will be scheduled by the Course Coordinator(s). The student must achieve at least 80% on this re-examination to pass the course.

No matter what the passing grade on the cumulative re-examination, the final grade given will be 80%.

- 7a. In courses in which there are no examinations, students must achieve an average of at least 80% on all course assignments. If a student achieves less than an 80% average on these assignments, an assignment or assignments will be developed by the Course Coordinator. The student must achieve at least 80% on this/these re-assignment(s) to pass the course.
7. Students who fail to achieve 80% (B) in any course, or on the cumulative re-examination and/or reassignments, will receive a grade of F and must repeat the course when it is next offered. When students retake a course, the original F grade is no longer counted in determining their cumulative grade point average (GPA), but the F counts toward the numbers of credits or courses that may be retaken.
8. A student will be allowed to retake any given course only once. Failure on retake of a course will lead to dismissal from the program.
9. Dismissal from the program occurs when
 - a. A student fails 6 or more credits
 - b. A student fails 3 courses
 - c. A student fails the same course twice
10. Students will not be permitted to take a course for which they have failed any prerequisite course. The following courses have prerequisites and/or co-requisites as indicated (**with exceptions made in special circumstances at the discretion of the midwifery faculty**):

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COURSE	CO-REQUISITE(S) (in some cases, may be a pre-requisite)	PRE-REQUISITE(S)
Antepartum (AP) Didactic	Medical & Obstetric Complications of Pregnancy (MOC)	Physical Assessment of Women (PHAW) Clinical & Didactic+ Pelvic Assessment of Women (PAW) Clinical & Didactic Advanced Pharmacology (Pharm) Basic Health Skills (BHS)* Patho Acute & Chronic Conditions in Women & Primary Care (PC)
Antepartum (AP) Clinical	AP Didactic	PHAW Clinical & Didactic+ PAW Clinical & Didactic Pharm BHS*
Advanced Patho Acute & Chronic Conditions in Women & Primary Care	PHAW Clinical & Didactic+	
Gynecologic, Reproductive & Sexual Health, (GRSH) Didactic		PHAW Clinical & Didactic+ PAW Clinical & Didactic Pharm BHS* PC
Gynecologic, Reproductive & Sexual Health (GRSH) Clinical	Gynecologic, Reproductive & Sexual Health (GRSH) Didactic	PHAW Clinical & Didactic+ PAW Clinical & Didactic Pharm BHS*
Intrapartum (IP) Didactic	Postpartum (PP) Didactic	Basic Fetal Monitoring course AHA/AAP Neonatal Resuscitation (NRP) certification Pharm AP Didactic & Clinical MOC Medical Complications of Pregnancy (MCOP) BHS*
Intrapartum (IP) Clinical	IP Didactic Obstetric Complications of Pregnancy (OCOP) Postpartum (PP) Didactic	Basic Life Saving (BLS) course Pharm AP Didactic & Clinical MOC Medical Complications of Pregnancy (MCOP) BHS*
Postpartum (PP) Didactic		PHAW Clinical & Didactic+ PAW Clinical & Didactic Pharm BHS* AP Didactic & Clinical

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Postpartum (PP) Clinical	PP (Didactic)	
Neonatology (Neo) – Didactic		PHAW Clinical & Didactic+
Neonatology (Neo) Clinical	NRP Certification Neo Didactic	
Clinical Practicum in Primary Care		Patho Acute & Chronic Conditions in Women & Primary Care PHAW Clinical & Didactic+ PAW Clinical & Didactic BHS*
Medical and Obstetric Complications of Pregnancy (MOC)	AP Didactic	
Medical Complications of Pregnancy (MCOP)	AP Didactic	
Obstetric Complications of Pregnancy (OCOP)	IP Didactic & Clinical MOC MCOP	
Integration of Clinical Studies		AP Didactic & Clinical GRSH Didactic & Clinical Patho Acute & Chronic Conditions in Women & Primary Care IP Didactic & Clinical PP Didactic & Clinical Neo Didactic & Clinical MOC MCOP OCOP BHS* Pharm
Research II		Research I

*Basic Health Skills = Student Midwives (SMs) only

11. The following are Midwifery Program grade delineations:

- a. A 93-100 (4.0)
- b. A- 90-92 (3.67)
- c. B+ 87-89 (3.33)
- d. B 80-86 (3.0)
- e. F <80 (0)

12. Students experiencing academic and/or clinical difficulties are strongly encouraged to meet with a faculty member and develop improvement strategies. In clinical courses, faculty may develop a

learning contract and require that the student meet conditions set forth in the contract. The learning contract is developed by the faculty in coordination with the clinical site. Students must sign learning contracts to acknowledge their understanding of what is required to complete the rotation and pass the course. *Failure to meet the learning contract conditions will result in course failure.*

13. The policy of SOHP regarding incomplete (“I”) grades is clearly delineated in the *SUNY HSU Student Handbook*, in the section relating specifically to SOHP. To summarize, an “I” grade is defined as “a portion of the requirements for the course have not been completed for reasons beyond control of the student (e.g., illness).” In addition, the policy clearly states that permission for an “I” grade must be requested from the course instructor prior to the deadline for submission of course grades. *The midwifery faculty requires that a student request permission for late submission of any assigned course work before its deadline.*
14. A Comprehensive Examination, a summative evaluation of the student's knowledge and ability to apply theory to midwifery management, is given on a set date and time during the Integration of Clinical Studies course. Students will first take a mandatory practice comprehensive examination. The faculty will review areas of strength and weakness with students who fail the practice exam. Grading policies, including those regarding a re-exam, are available in the course syllabus for NRMW 5405 Integration of Clinical Studies.

After completing an examination, students will only have access to the exam for review at specified times under faculty supervision. Students are strongly encouraged to review all their examinations at these designated times. A student who fails an examination is required to review the examination with the Course Coordinator(s) or designee, ideally within two weeks of notification of the grade. The Course Coordinator will send the student a list of possible times for reviewing the examination and the student will either choose one of those times to meet with the coordinator or request alternate times for the exam review.

15. Students who are challenging courses through the Midwifery Program Challenge Mechanism option will be given specific policies regarding challenges.

Some courses require that students pass a Competency Performance Examination (CPE) before students are permitted "hands on" experience in that specific competency in the clinical setting. For these courses, this is noted in the Course Policies and Evaluation Methods section of the Course Syllabus. Prior to the CPE, students will be given information about what is expected to pass. Students must demonstrate satisfactory, safe performance of technical skills and/or procedures in a classroom or lab setting, based on the knowledge of when, why, and how those skills/procedures are to be performed. A student whose performance is deemed unsatisfactory on the first attempt will be counseled, given an opportunity for remediation, and have a second opportunity to demonstrate beginning competence. *Inability to pass the CPE on the second opportunity will result in failure of the course.*

VII. Leave of Absence

The Program's Leave of Absence and Maintenance of Matriculation policies follow those outlined in the current *SUNY HSU Student Handbook*. The Program Director and the SOHP Committee on Admissions and Academic Standing must approve a leave of absence request.

VIII. Change of Status

- A. A student following a two-year program of study may request a change to three-year status. On occasion, a student in the three-year program of study may request to decelerate and complete the program in a longer time frame. This request must be made via e-mail to the Program Director. An individualized program of study will be developed by the faculty as necessary for the student to fulfill the graduation requirements.
- B. Upon recommendation of the faculty and approval of the SOHP Committee on Admission and Academic Standing, a student may be required to decelerate to a modified study program if the student is in academic and/or clinical jeopardy, including probation.
- C. A student cannot change from three-year to two-year status because of the program course sequencing.
- D. The Program must be completed within five years.

IX. Program of Study Change(s)

Changes in the program of study may be recommended by the faculty or requested by a student. The faculty may also mandate such a change. The Committee on Admissions and Academic Standing must then approve this change. A student request for approval of any change in the program of study (e.g., from Advanced Certificate to MS or MS to Advanced Certificate if the student already has a related master's degree) must be made via e-mail and submitted to the Program Director. A conference may be scheduled to discuss the students' requests.

X. Probation

The following probation policies are stated in the current *SUNY HSU Student Handbook*.

1. See the *SUNY HSU Student Handbook* for indications for probationary status.
2. The SOHP Committee on Admissions and Academic Standing will review the student's record and the program faculty recommendation (see above). The Committee will either concur with the suggested plan or decide on an alternative plan of action.
3. The SOHP Dean will consider the recommendation of the SOHP Committee on Admissions and Academic Standing and makes the final decision regarding SOHP probationary status.
4. To remove Probation, the student must re-register for, retake, and pass the course(s) in its/their entirety during the next semester in which the course is routinely given. Removal from Probationary status must be recommended by the Committee on Admissions and Academic Standing.

XI. Program Deceleration

1. Indications:

- a. A student who fails a course must decelerate.
- b. A student who fails to achieve a 3.0 grade point average (GPA) either cumulative or in any semester (also SOHP probation) may have to decelerate.

2. Program Faculty Action:

- a. A student who decelerates may be allowed to progress to certain subsequent courses, assuming the student has passed prerequisite course(s).
- b. The program faculty and student will negotiate and develop a plan to assist the student to return to good academic standing

XI. Dismissal

Grounds for Dismissal

1. A student fails the same course twice
2. A student fails to achieve a B or better in didactic courses or P in clinical courses totalling 6 or more credits
3. A student who breaches academic, professional, and/or ethical conduct

Program and School Actions

A student who is subject to dismissal from the program will be presented to the SOHP Committee on Admissions and Academic Standing. The Committee reviews the student's records considering the program policies and votes whether to recommend dismissal. The Dean is informed of the Committee's recommendation and will notify the student in writing regarding her/his status in the program and of the right to appeal.

XII. Grievance/Appeal Procedures

See "Student Academic Appeals" and "Guidelines for Resolving Academic Integrity Cases" policies in the SOHP section of the current SUNY HSU Student Handbook. See also Appendix, "Procedures for Processing Grievances Alleging Discrimination."

XIII. Student/Class Responsibilities

- A. Select a student class representative from your cohort to facilitate faculty/student communication. This class representative will be invited to some faculty meetings, although they will be asked to leave when individual students are discussed. The faculty welcomes input from students at these meetings. Class representatives should attempt to communicate with their cohort and obtain their input/opinions/concerns. The class representative should also communicate pertinent issues to other students from these meetings.
- B. The student representative will forward current cohort concerns to the Program Administrator via

email no later than 1 week before the faculty meeting. Each student representative will be given a maximum of 10 minutes at the faculty meeting to discuss their cohort's concerns.

- C. Contribute to the evaluation of courses, learning opportunities, and the overall program. Complete all online *course evaluations for the courses in which students are registered at the end of the semester. Complete the overall program evaluation upon completion of all program requirements.
- D. Contribute to the learning of classmates by sharing knowledge, experiences, coming prepared and on time for class, actively participating in classes, assisting peers, and demonstrating sensitivity to the learning needs of others. This includes personal hygiene, cleanliness, and attention to modesty.
- E. Share resources. Return all borrowed books and equipment in the same condition in which they were obtained. **The student borrower must replace damaged or lost books and equipment.**
- F. Keep classroom spaces locked and clean. Classroom computers must be turned off, window(s) kept closed, and classroom locked as the classroom is vacated.
- G. Respect faculty members' time and privacy. Although faculty generally have an "open-door" policy and are receptive to meeting briefly with students on an impromptu basis, students are advised to make an appointment to discuss any personal or program-related matter, unless of an emergency nature. Use discretion in time of day chosen when telephoning and texting an academic or clinical faculty member.
- H. Make known to the faculty any specific learning or practice needs, including suggestions for seminar topics, guest speakers, and clinical resources.
- I. Share information with classmates and faculty regarding current literature and/or other references or resources not cited in the course syllabus.
- J. Participate actively in constructive self-evaluation.
- K. Identify academic or clinical learning difficulties and initiate discussion with faculty of plans to overcome these difficulties.
- L. In the event of a virtual meeting cameras must be kept on. Students are welcome to blur their backgrounds or use a virtual background should they choose. Students may use the library or computer lab on campus.
- M. Silence all phones and electronic devices during onsite class, lab practice, exams, and clinical experiences. All personal electronic equipment, including laptop or tablet computers may be brought to class for educational purposes only and used only on silent mode. Students should not be disrespectful to faculty, classmates, or guest speakers by using computers during class for game playing, reading, or sending email, online chatting, checking social media sites, or other activities that do not relate to the class. **For safety reasons, all personal computers, tablets and cellphones must be used on battery power only unless the class is taking place in a room that has charging stations by each seat.**
- N. Obtain permission of the instructor prior to audio or video taping any class or review session.
- O. Course materials are for the sole use of students registered in the course. The posting of course materials without the permission of the author is a copyright violation. Reproduction of course material is prohibited without the author's consent.
- P. Discuss academic or clinical conflicts by speaking directly to the faculty member involved. In the event that the problem cannot be resolved at this level, promptly contact the Course Coordinator, Faculty Liaison to Clinical Site, or Faculty Advisor. The Program Chairperson may become involved at the request of the student or faculty. Also, see "Guidelines for Resolution of a Problem During Clinical Experiences." This document appears in the

Midwifery Clinical Handbook.

- Q. Immediately report to the course coordinator or clinical faculty liaison, via e-mail or telephone, any untoward incident or poor outcome that occurs in the clinical area.
- R. Maintain accurate and up-to-date statistics for all clinical experiences and cumulatively for the program by the program's end.
- S. Maintain accurate academic and clinical records throughout the program in a timely fashion. These student records are needed for obtaining professional licensure, obtaining required information for program accreditation, and compiling data when requested by the School or University. These should be uploaded to the LMS during each clinical rotation and at the programs end. These will be retained by the Midwifery Program for three to five years.
- T. Purchase student Midwife liability insurance (commonly called "malpractice") before the beginning of the first clinical rotation. Submit proof of current coverage to the clinical course in the LMS. Students cannot begin clinical until they have uploaded their certificates. Renew the policy as needed for the program's duration.
- U. Submit proof of completion of a basic fetal monitoring course before starting Antepartum Care (AP) and intermediate fetal monitoring before Intrapartum Care (IP). These courses must have an examination component and be approved for continuing education by ACNM, AWHONN, or for Continuing Medical Education (CMEs).
- V. Complete an American Heart Association Basic Life Support (BLS) before students take their first clinical course(s).
- W. Complete a Neonatal Resuscitation Program offered by the American Heart Association/American Academy of Pediatrics or demonstrate evidence of current certification in neonatal resuscitation prior to starting Neonatology, clinical (Neo) or Intrapartum Care, didactic (IP) (whichever comes first).
- X. Complete the interprofessional IV and Patient Safety courses, when offered, at the Center for Healthcare Simulation (CHS).
- Y. Download and/or print all electronic course materials by the end of the semester in which students are enrolled in the course as they may lose online access through the LMS when the course ends.

***Course and program evaluations are distributed annually or at the end of each semester where appropriate. All are reviewed by course coordinators upon completion and by the entire faculty during our formal annual review. Feedback from students, faculty, and other stakeholders are utilized to make changes that might improve the curriculum and overall student educational experience.**

XIV. Assignments

All formal written assignments must be submitted electronically via the assignment tab or discussion forum in the appropriate course. All assignments must be proofread (use spellcheck and grammar check) with proper format (including citations) prior to submission to the faculty. The faculty also recommends downloading the free version of Grammarly and using it. Refer to the SOHP AI policy in the SUNY Downstate Health Sciences University Handbook. The faculty accepts either American Psychological Association (APA) or the biomedical format (as used in the *Journal of Midwifery and Women's Health*) as the reference format.

Specific requirements and policies for written assignments are delineated in each course in which research or other papers are required.

Student presentations in a class or seminar are required in many courses. Guidelines for what is expected, and evaluation criteria are provided for any course in which a student presentation is assigned. Verbal and/or written feedback is given, and a grade may be assigned.

XV. Student E-mail

A student's Downstate e-mail address is the official e-mail for communication with faculty. **Students must access their on-campus e-mail DAILY.** No other e-mail address will be used to communicate with students. Campus e-mail is the most frequently used method for faculty to communicate with students outside of class. The more frequently students check their e-mail, the less likely they are to miss program or course information and important announcements. Students should continue to check e-mail frequently (weekly is recommended) during the summer and holidays breaks.

XVI. Program Completion

Upon successful completion of all course competencies and all program requirements and having earned a master's degree or Advanced Certificate in Midwifery, the Program Director will refer the graduate to the American Midwifery Certification Board (AMCB) to apply for the certifying examination. Applications and information about the examination and instructions on registration are available (at www.amcbmidwife.org/). Payment of the examination fee is the responsibility of the student. Students wishing to be licensed in New York State must also contact the State Education Department for information about licensure at <https://www.op.nysed.gov/verification-search>

XVII. Graduation Requirements

Graduation requirements are detailed in the SUNY HSU Student Handbook.

All students will have a final conference with a designated academic faculty member to formally complete the Midwifery Program.

XVIII. Honors and Awards

A variety of individual awards may be conferred at the faculty's discretion at the SOHP Annual Convocation Ceremony or at a Midwifery Program Convocation.

There are also two Midwifery awards chosen by the graduating class. The ***Outstanding Student Leadership Award*** is given to the student who, in the judgment of the graduating class, demonstrates consistent and exemplary leadership in promoting the highest goals of Midwifery care. The other award granted by students is the ***Joni Zavitz Memorial Award for Perseverance***.

XIX. Professional Development

Student membership in the American College of Nurse-Midwives (ACNM) at the local, state, and national levels is expected of all students. National ACNM membership includes a subscription to the *Journal of Midwifery and Women's Health*. Students may apply online for national ACNM membership at <https://www.midwife.org/join-acnm>. Membership in ACNM automatically includes membership in the state affiliate—the New York Midwives (NYM)—students who live in New

York State. Regardless of a student's address, students can join New York City Midwives as a member of the Downstate community. The New York City (NYC) and Long Island (LI) Midwives can be accessed and joined on-line at <http://www.nycmidwives.org> or <http://www.longislandmidwives.com>.

Local midwifery meetings are held 4 times a year. Students are encouraged to attend local meetings whenever possible, as well as NYM's Advocacy Day in Albany and at least one national ACNM Annual Meeting.

Student Advisement

Faculty Advisors

A list of faculty advisor assignments will be distributed at the Midwifery Program Orientation. Students are responsible for arranging a meeting with their designated advisor at least once each semester.

The role of a designated faculty advisor is:

- 1) to ensure on-going, one-on-one communication with a program faculty member.
- 2) to provide a supportive relationship for discussion of academic and clinical progress, as well as personal issues, as the student desires.
- 3) to serve as a resource and mentor for professional &/or personal matters.
- 4) to assist with problem-solving and in meeting special learning needs.

The faculty encourages all students to avail themselves of this special relationship with a faculty member. The assignment of an advisor is not meant to limit a student's out-of-class contact or communication with any/all faculty members. Continue to meet with any faculty as the need or desire arises. Appointments are encouraged.

The Midwifery Program Administrator, Niyoka Turnbull, is also available for guidance, advice, or to serve as a sounding board for any student issues or problems that the students do not want to bring to the attention of a faculty member.

Course Coordinator

Please direct questions/concerns about a specific course to the appropriate Course Coordinator(s). The Course Coordinator(s) are usually best able to address questions and/or provide clarification regarding that course.

Faculty Liaison to Clinical Sites

Liaisons are designated for the clinical sites in Ambulatory Care, Clinical Practicum in Primary Care, Intrapartum/Postpartum/Neonatology and Integration of Clinical Studies. Please direct questions/concerns about a specific clinical site to the Faculty Liaison for that site because the liaison will usually be best able to address questions &/or provide clarification regarding that facility.

Program Chair

The Program Chair is available to meet with students about any individual student issue or concern or any Program matter.

Faculty Availability

In general, the faculty are available via email, text or telephone or onsite. However, appointments are advisable. Appointments can be made via e-mail (preferred), by telephone, or by stopping in when a faculty member is in the office.

**SUNY DOWNSTATE HEALTH SCIENCES UNIVERSITY
SCHOOL OF HEALTH PROFESSIONS (SOHP)**

Midwifery Program Clinical Guidelines



DOWNSTATE
HEALTH SCIENCES UNIVERSITY

NOTE: The SUNY Downstate Midwifery Program reserves the right to make modifications to clinical experiences, policies, and procedures.

Overall Guidelines

1. The Midwifery Program faculty holds that all midwifery students have an equal right to clinical placements.
2. Once a site has been notified that a student will attend their site, the student may not cancel the placement. Such cancellation is disruptive to the administration of the program and the clinical site assignment process. It puts individual students at a disadvantage.
3. Each site has a different onboarding process. This may include presentation of many documents. Screenings for health clearance, criminal background checks, forensic drug screenings (urine toxicology), orientation meetings, etc. may take several weeks for processing prior to beginning clinical rotations. Students are responsible for contacting their assigned sites as soon as they receive contact information from the Program to determine specific requirements of that facility.

3a Failure to submit clinical onboarding requirements will jeopardize your clinical site placement, possibly resulting in delayed progression in the program.

4. Student health forms are maintained by Downstate Student Health Service (SHS) in a secure and confidential setting. The SUNY Downstate Midwifery Program does not have access to student health forms. Students must provide a copy of their medical clearance from the Student Health Services before each rotation starts. Most sites, however, require more than the SHS clearance and will want copies of physical examination and all relevant labs including titers as appropriate. -Students must keep copies of these documents throughout their time in the program and be prepared to submit them to clinical sites.
5. Students are responsible for all costs related to clinical rotations, including but not limited to medical screenings, malpractice and medical insurance, criminal background checks, drug screening, fingerprinting, and transportation to and from clinical sites. In some cases, housing will be an additional expense although students will only be assigned to these sites on their request

6. Students must complete all required didactic and clinical courses in sequence except in special circumstances as approved by faculty.
7. Students who may need accommodations must contact the Disability Coordinator in the Office of Student Affairs as soon as possible after matriculation or when the need arises regarding any condition that may affect their ability to carry out the responsibilities of clinical assignments. Students are also referred to the Technical Standards in the Midwifery Program Student Handbook for specific physical, emotional, and cognitive requirements to become a midwife.
8. Students must adhere to all policies, procedures and clinical guidelines of the sites to which they are assigned for any given clinical rotation.
9. Students may be required to travel outside their residential neighborhoods to complete a clinical placement. Students may have to travel up to 2.5 hours each way for clinical experiences

10. Students may not contact any clinical site with an active Affiliation Agreement (contract) with Downstate to pursue a clinical placement unless this site has indicated that they accept/prefer student outreach. This includes sites for which contracts are pending. Sites' preferences and contract status are delineated in the Clinical Tracker spreadsheet. Students who fail to comply with this policy will not be placed at the pursued site.
11. Students must adhere to the guidelines stated in the "system for students finding their own sites" document (see below) and the associated Clinical Tracker spreadsheet when reaching out to sites that prefer students direct contact.
12. If a student would like to identify a potential new site, the student must notify a member of the midwifery faculty and provide contact information for the facility. The Program's Clinical Coordinator will contact the site to pursue it as a possible clinical placement. If a student has a site in mind, the student should notify the faculty as soon as possible upon entering the Midwifery Program as completing contracts is a lengthy process.
13. Site assignments are made as soon as possible before the start of a semester in which a student will do a clinical rotation. Sites are assigned via a stratified lottery as they become available. Stratification includes factors such as a site requesting a particular student; language facility; being on call or the need for a car. Other factors that may affect placements include but are not limited to low staffing, staff on maternity leave, site commitment to other programs, pandemics or natural disasters, orientation of new staff, or other difficulty renewing a contract/addendum within a given timeframe.

14. Some sites have informed the program that they require student interviews before beginning the clinical experience. The faculty must accept the site's right to refuse a placement if the Service Director or designee determines that the student would not match well with the site. Because of the lottery, some sites that request interviews will be given student names through the lottery to interview and it will be up to the site to choose.
- a. Students will not be placed at clinical sites where they are currently employed
 - b. Students interested in community birth sites may have this option for Integration if they have completed the Intrapartum rotation in hospital setting.
 - c. Students are not permitted to decline clinical placements assigned by the program.

System for Students Finding Their Own Sites

The Downstate Midwifery Program shares clinical sites with five other area midwifery programs and three distance programs. All programs endeavor to find timely placements for their students; but in recent years, there has been a shortage of local sites for all programs. Downstate's program does not have funding to pay sites for student placements, as some private universities do. Nor does Downstate currently have a faculty practice, as some universities do. Relationships between programs and sites are carefully tended. Therefore, it is imperative that students respect the process and follow the policies and procedures outlined in this handbook.

1. The program is responsible for allocating clinical sites.
2. Clinical assignments are determined by the program.
3. Students may seek new clinical site affiliations which will be considered after the proposed site undergoes review of the contractual policies and procedures of our university and our program.
4. After consulting with the program clinical coordinator and/or reviewing the clinical tracker for current or pending contracts, Students can look for a new site anytime in the program—when they first enter or a semester before each clinical rotation. Students are encouraged to request to utilize the site for all three clinical rotations. (ambulatory

(AP and RSH); Intrapartum/Postpartum/Neo; Integration) when they are asking for one of these rotations.

5. Students are not to contact sites that do not want students to contact them directly, as noted in the Clinical Tracker.

6. The program uses a stratified lottery system. Priority lottery will be given to students who choose not to contact sites for their own experiences. Once those students (i.e., who opt out of the option to seek their own site) are placed through the lottery, the remaining students (i.e., those who sought a site but have not yet found one—even if they are still in the process of seeking a site) will be included in the lottery. The lottery cannot include sites that have stated they want students to contact them directly for administrative purposes (impossible to administer).

7. Once a student who has contacted a site or sites has been chosen by a site, they will no longer be in the lottery. Those students who contacted sites and were placed via lottery must accept the site they sought if that comes through after their lottery-assigned placement. Their lottery-assigned placement will then go to another student.

8. Information about whom to contact at any new sites must be forwarded to the faculty for facilitation of the contract and other discussions. This includes the name of the Service Director and the person who negotiates the contract at the site. The faculty also needs the address, phone numbers and emails of contact people at the site.

Faculty reserves the final decision to site assignment.

Clinical Placements outside the N.Y. Metropolitan Area:

Although most clinical placements are in the NY metropolitan area, the Midwifery Program maintains a limited number of contracts with facilities outside the metropolitan area. The program will refer new sites outside the metropolitan area to the SOHP Affiliations Coordinator according to the criteria below. The Downstate legal department is responsible for negotiating and executing new contracts. Students requesting such placements must notify a faculty member **as soon as possible upon enrollment in the Midwifery Program** regarding their specific needs. Each request will be considered individually. The student must have a compelling reason to seek a placement outside of the New York metropolitan area.

Clinical Evaluations and Progression

A student's self-evaluation of clinical experiences must be completed in the “the clinical electronic data base and submitted to the clinical preceptor for review and comments at the end of daily or weekly clinical experiences. **The student must complete both the numeric and comments sections of the self-evaluation form before submitting it to the clinical preceptor. Substantive evaluative comments on the day’s or week’s performance are required. Self-evaluation is a critical component of the midwifery learning process. Completion of the self-evaluation portion is not optional. Evaluations lacking self-evaluations are incomplete and therefore not acceptable.** Self-evaluations should address both strengths and areas for improvement and should reflect a cumulative evaluative approach. A student-preceptor conference immediately following each clinical experience is optimal to facilitate this process. The deadline for submitting to the electronic database is at the end of the week of the clinical experience. Failure to submit evaluations in a timely manner will result in suspension from clinical sites, and delayed progression through and completion of the clinical rotation. If the clinical site cannot keep the student beyond the expected timeframe due to student suspension, the student may receive an incomplete grade for the rotation and may need additional time at a different site, should one be available.

Students will complete a mid-experience and final evaluation for all clinical courses. As with daily or weekly evaluations, students will complete the self-evaluation component of these evaluations-before submitting them to their clinical preceptors. The preceptor’s component will be completed by an appropriate person at the mid-experience and at the end of the clinical courses in ambulatory care, primary care, and intrapartum/postpartum care, as well as Integration of Clinical Studies. Evaluation by the service/education director may override that of individual preceptors. *The students MUST schedule a mid-experience and final meetings with the designated Program Faculty Liaison.*

Students with unsatisfactory progress during any clinical rotation will be counseled and may be given a learning contract, with strategies and a timetable for achieving the clinical competencies. Learning contracts are sent to clinical preceptors for revision and/or approval. Students will have an opportunity to review and sign their learning contracts. The student’s unsatisfactory progress, counseling, learning contract and subsequent

clinical progress will be documented by a faculty member and placed in the student's program file. In exceptional circumstances special consideration may be given, and the student will have the chance to improve during the rest of the course and, at the discretion of the faculty and preceptors, may be required to extend the clinical experience. Additional clinical hours *may* be arranged *when and where available before the end of the rotation*. If the student fails to achieve the clinical course competencies by the end of the rotation, the student will fail the clinical course and policies stipulated in the SOHP Student Handbook will apply. The final grade that will appear on the student's transcript will be submitted only after successful completion of all course competencies documented by submission of daily, mid-semester, and final evaluations. In some cases, a student may only need a few weeks to complete a clinical course or the clinical component of a course and may receive an interim grade (In Progress (IP) or Incomplete (I)) for the course and register (and pay for) an Independent Study (NRMW 5700) to complete the clinical requirements following the end of the semester but before the start of the next semester. If these requirements are satisfactorily met, the student will receive a passing grade in both the Independent Study and original course. Students who are unable to meet the clinical competencies of a course fail the course. Students requiring extensions must meet the competencies within five weeks or they fail the course. Students would then be required to register for and repeat the course when a clinical site becomes available.

In the event of failure, a repeat experience must take place at a different facility. The faculty arranges for a repeat experience, but students must understand that a new placement may not be readily available. Registration and repetition of the course cannot be guaranteed within the same semester and is typically completed in the following semester.

Students may request a withdrawal from a clinical placement for extenuating life circumstances or medical conditions according to the policies outlined in the SUNY Downstate Student Handbook. If the withdrawal is temporary, all missed clinical time must be made up within the published semester dates. If these additional days cannot take place during the published semester dates, and the student did not withdraw from the course, a grade of IP is submitted. Because of insurance requirements, students may not attend clinical unless they are currently registered for at least one clinical course. In addition, they must register for an independent study course in order to make up missed clinical days in the semester following the clinical experience unless they will be registered for another clinical course that semester. Upon successful completion of all fieldwork requirements, the IP grade is changed to a P grade for the course.

A student who has completed all course requirements and desires additional clinical experience may request faculty approval to register for an Independent Study course during a subsequent semester, subject to availability of an appropriate clinical site. Independent study credits do not apply towards those required for attainment of the certificate or degree, however students must pass these courses in order to graduate.

Once a student begins the clinical course sequence (antepartum; reproductive, and sexual health; primary care; intrapartum; neonatology; postpartum; and integration) faculty recommend that there be no gaps other than a summer semester in this sequence of courses. If a student must slow or postpone a clinical course, they must take at least a 1-credit Independent Study to continue clinical work. However, this will only be permitted if an appropriate clinical site is available for the student, not to replace a site for a student who needs a site to complete clinical requirements. The Independent Study will not count toward the credit requirement for graduation; however, students must pass these courses to graduate. If the student must take a leave of absence, a plan will be developed for remediation as necessary in clinical work when the student returns.

The following criteria are used to determine a student's completion of each clinical rotation the order presented demonstrates the importance of each criterion. The faculty, however, reserves the right to adjust these in individual situations to best meet the needs of each student and assure each student clinical competence

1. competencies
2. preceptor assessment
3. number of hours in the rotation
4. numbers of experiences

At times, circumstances arise beyond the program's control, such as staffing issues, a pandemic, or preceptor illness. If these occur, adjustments will be made as needed.

See the following sections:

- **Student Responsibilities in Clinical Sites**
- **Preceptor Responsibilities in Clinical Sites**

Guidelines for Resolution of a Problems in the Clinical Experiences On rare occasions, students are given the opportunity to extend clinical experiences, for the purpose of meeting requirements to receive a passing grade.

Student Responsibilities in Clinical Sites

1. Always remember that although you are a part of health care team in your site, you are also a temporary member of that team hence, a visitor. Be polite and professional with all personnel at the site.
2. Consider your clinical assignment in the same way you would consider a job. You are expected to be on time.
3. Dress neatly, modestly, and professionally. No jeans. No sneakers in outpatient settings.
4. Negotiate a clinical schedule with the designated preceptor according to the guidelines provided by the course coordinator.
5. Know the expected procedure for notifying the site if you will have to miss a day. Find out *who* to call, text, or email (e.g., your preceptor, the service director), *when* to call, text, or email (e.g., the morning of the session or the evening before, if possible), and *where* to call, text, or email (e.g., home, cell, the floor or clinic). Make sure you always have the necessary phone numbers and emails.
6. Read the practice guidelines for your site. Ask to see them if they are not offered to you.
7. Always let your preceptor know what you are doing and where you are. Do not leave the site or floor without notifying your preceptor. Do not see a patient unless your preceptor knows you are seeing the patient. Do not ever discharge a patient or conclude an outpatient visit without consulting your preceptor. If a patient goes home without the preceptor's knowledge, you have made an error in judgment.
8. See Guidelines for Managing a Problem in a Clinical Site, should a problem arise. Although we do not anticipate problems, we recognize that they sometimes occur.
9. Present each patient to the preceptor after the history and physical are completed. (At the beginning, the preceptor may require that you present after the history and again after the physical.) Once you have developed a problem list, differential diagnosis, and plan, discuss these with the preceptor and collaboratively determine a

midwifery management plan based on a variety of options that you have considered. Remember, ultimately, the management plan is up to the preceptor.

10. Complete the electronic evaluation form(s) after each session (or weekly in Integration). Complete daily electronic logs in patient rotations.

11. Communicate with the faculty liaison to the site for weekly update reports and additionally for concerns or problems relating to clinical, interpersonal, or professional issues. (For example, if a poor clinical outcome occurs, the student must notify the Faculty Liaison and Program Director as soon as possible.)

12. Complete the electronic site evaluation form at the completion of each clinical rotation.

Preceptor Responsibilities in Clinical Sites

1. The preceptor should orient the student to the clinical site and provide a copy of the site's clinical management guidelines for the student to review.
2. The preceptor should choose appropriate patients for the student to see.
 - a. Female patients or those with female organs**IN PRIMARY CARE**
 - b. Patients with common primary care problems
 - c. Patients who have acute or chronic health needs, but are not severely ill.**IN ANTEPARTUM**
 - d. Patients in all trimesters
 - e. Patients presenting for a new prenatal visit and patients presenting for revisits**IN REPRODUCTIVE, SEXUAL HEALTH (RSH)**
 - f. Patients presenting for annual or follow-up visits or health issues or needs relating to GRSH, including 4-8 weeks postpartum patients
 - g. Patients requesting any method of family planning
 - h. Patients presenting for termination of pregnancy**IN INTRAPARTUM/POSTPARTUM/NEONATOLOGY**
 - i. Any person presenting for triage in labor or during pregnancy
 - j. Any person in labor: physiologic, augmented, or induced

- k. Any person having a normal spontaneous, vaginal birth
 - l. Any person in the immediate postpartum period through discharge
 - m. Any person needing postpartum discharge
 - n. Any normal newborn for physical examination in the birthing room or before discharge
3. The preceptor will collaborate with the student regarding the care for each patient seen. The student is expected to present the patient after completing the history and physical examination and discuss management options. The preceptor will approve of all care to be implemented. The preceptor will sign off on the chart *before* the patient is discharged.
 4. The preceptor and student will conduct a post-conference after each clinical session.
 5. The preceptor will review and corroborate (or not) the students' self-evaluation forms with comments in the SUNY Downstate electronic data base (preferably within 48 hours).
 6. The preceptor will review the students' mid rotation self-evaluation and comment as indicated.
 7. The preceptor will complete students' final evaluation upon completion of the clinical experience.
 8. All evaluations (daily, weekly (in Integration only), mid and final) should be completed in the electronic database.
 9. The preceptor will communicate any concerns regarding the students' learning needs, behaviors, and progress to the SUNY Downstate midwifery faculty liaison in a timely manner.

Examples of issues that should be communicated to academic faculty include, but are not limited to:

- Student appears stressed and overwhelmed
- Student is not communicating clearly, thoroughly or frequently with preceptors, staff or patients
- Student is not meeting deadlines on evaluation forms
- Student is not meeting the attendance policy (arriving late, leaving early, taking excessive sick days, etc.)
- Student appears to rationalize difficulties or becomes defensive when given feedback
- Student does not incorporate constructive feedback
- Student does not perform tasks safely or demonstrates poor judgment
- Student does not initiate self-directed learning
- Student fails to meet expectations for professional behavior, safety, judgment, and/or ethics
- Student does not adhere to the policies and procedures of the site
- Student has difficulty implementing the midwifery management process into patient care

At any time during a student's experiences, if the student is in danger of not being able to meet the competencies by the end of the clinical experience, the clinical preceptor and the faculty site liaison will meet to discuss the best way to move forward to help the student succeed. Usually, a Learning Contract will be developed. It must specifically delineate measurable criteria and expectations. The faculty site liaison, the preceptor or Education or Service Director at the site, and the student must sign and date the contract, signifying that all understand the serious concern with the student's skills/judgements/behaviors. *The consequences of failing to meet the contract's objectives should be clearly communicated as part of the contract.*

GUIDELINES FOR RESOLUTION OF A PROBLEM DURING CLINICAL EXPERIENCES

Problems in the clinical area may relate to a great variety of issues including, but not limited to learning styles, trauma, racism, and other forms of discrimination. These may

be directed toward you, a staff member, or patient. None of these are acceptable. However, as most clinical problems can be resolved with communication, the following guidelines are to be followed:

1. Discuss the problem with your preceptor first. For example, if your preceptor(s) are not giving you enough guidance, or are not letting you manage on your own, raise this issue with them and see if it can be resolved. This is an important skill to be developed, that will stand you in good stead in any midwifery employment setting.
2. Of course, some issues like racism or trauma, regardless of to whom it is directed, are often difficult to discuss directly. If you are unable to approach your preceptor(s) or you have spoken to your preceptor(s) without adequate resolution, you have several choices regarding the next step:
 - A. You can speak to the Course Coordinator, OR
 - B. You can speak to your Site Faculty Liaison, OR
 - C. You can speak to your individual faculty advisor OR
 - D. You can speak to the site Service Director

You should be aware that once you approach faculty, unless you specifically ask the faculty member to keep the problem/discussion confidential, the faculty may approach the preceptor(s), the site Service Director, or may discuss the problem with other faculty.

You may also request a meeting with more than one of these faculty members, and/or with one or more of these faculty members *and* your clinical preceptor(s) and/or the site Service Director. The faculty member may also initiate a meeting with you and other faculty members, and/or your clinical preceptor(s) and/or the site Service Director.

3. If you feel that steps 1 and 2 do not resolve the problem, then you can approach the Program Chairperson. Again, remember, that unless you ask for confidentiality, the Program Chairperson may discuss the problem with other faculty and/or your clinical preceptor(s) and/or the site Service Director. The Program Chairperson may also discuss the issue with the Dean of the School of Health Professions, the Vice President or Associate Vice President of Student Affairs, and/or the Office of Diversity and Inclusion (ODI).

The goal of conflict resolution is to create a win-win situation. Changing your preceptor (s) is not a win-win solution. Except in extreme situations, such as those involving trauma, racism, or other forms of discrimination, it is unlikely that your preceptor or clinical site will be changed; usually neither is a viable option.

In almost all cases, resolution will be achieved by following the above steps. We suggest starting with step #1 early in your identification of the problem each clinical rotation is short and we do not want students to be unhappy, feel traumatized, feel discriminated against, or feel that they are not meeting their goals.