

**American Midwifery Certification Board, Inc.
(The Corporation)**

Policies and Procedures Manual

June 2007



Section 1. General Policies

Section 2. Procedures

Section 3. Discipline Policies and Procedures

Section 1. General Policies

- I. Election of Officers, Committee Chairpersons and other Directors
 - A. The President shall make public announcement of available positions no later than the first quarter of the final year of the incumbent's term of office.
 - B. The President shall appoint an ad hoc Nominating Committee of at least two members of the Board by July 1 of each year as needed.
 - C. By October 1, potential candidates shall submit a completed application to the Corporation's office. Completed applications shall be forwarded to the Nominating Committee.
 - D. The Nominating Committee shall prepare a slate of candidates for election by a simple majority of the Board by the end of the calendar year.

- II. Appointment of Committee Members
 - A. The President shall make announcement of opportunities for committee appointment publicly. Nomination for appointment may be by individuals themselves, current committee members, committee chairpersons, or board members.
 - B. A term of appointment shall be three years with a maximum of two consecutive terms. After the second term, a member is not eligible for reappointment as a member of the same or any other committee for at least one year. This does not exclude election to a chairperson position.
 - C. Composition of committees
 1. At least two-thirds of the members of all committees shall be certified nurse-midwives or certified midwives. (Exception: Finance and Public Relations Committees)
 2. Committee membership should reflect the diversity of the profession where appropriate.
 - D. Qualifications for committee membership
 1. Minimum education of a master's degree and/or evidence of academic or experiential knowledge relevant to the committee's function.
 2. Potential candidates shall submit a completed application to the Corporation's office.
 - E. Applications are due October 1 for committee appointments available the following January. Completed applications shall be forwarded to the appropriate committee chairperson.
 - F. Committee chairpersons shall present a roster of recommended committee appointments *by December 1st* of each year for approval by the board. The roster shall minimally include the qualifications of the candidates and a rationale for how the candidates complement the existing committee membership.

- III. Committee Responsibilities
 - A. Credentials, Administration and Reporting Committee (CAR)
 1. The Candidate Handbook contains the operating procedures for
 - a. the credentialing of candidates
 - b. the administration of the examination and preparation of results to candidates
 - c. the policies for certificate maintenance

2. The Handbook should be reviewed once a year or as needed with the appropriate staff member and recommendations for changes should be presented to the Board of Directors.
 3. This committee is also responsible for handling candidate concerns regarding eligibility, the application process, administration of the exam, or ADA as needed. When a resolution to any of these is not clearly delineated then the concern should be brought to the Executive Committee for review and recommendations.
 4. The Chair of the Committee is responsible for
 - a. recommending committee members for appointment as needed
 - b. delivering a short written report for each AMCB Board of Directors meeting and as requested by the President
- B. Certificate Maintenance Program Committee (CMP)
1. This committee will work with the appropriate staff to develop and maintain a recertification program that assesses and enhances the continuing competencies of the certificants. Conditions of the CMP Program are outlined in the CMP Brochure and on the AMCB website. Any changes to the CMP Program will be reflected in the CMP section of the website. The committee will also produce one new module for the program each year.
 2. The Chair of this committee is responsible for
 - a. recommending committee members for appointment as needed
 - b. working closely with the responsible staff to administer the program.
 - c. coordinating and implementing annual audits of
 1. the accuracy of the data maintained by the staff
 2. the validity of CEUs presented by certificants.
 - d. Chair must also deliver a short written report at each AMCB Board of Directors meeting and as requested by the President.
- C. Exam Committee
1. This committee will work closely with the Test Consultant(s) and meet as needed to research and create new examination questions. This process will be based upon the “Examination Construction Procedures and Guidelines” document.
 2. The committee will annually review examination specifications and content outline and make recommendations to the Board of Directors if a new Task Analysis is indicated.
 3. A criterion-referenced pass/fail standard for each test form will be determined by committee members and the Test Consultant(s). A statistical report of item and test performance and the candidate critiques shall be reviewed periodically by committee members in consultation with the Test Consultant.
 4. The Chair of this committee is responsible for
 1. recommending committee members for appointment to the Board of Directors.

2. delivering a short written report for each AMCB Board of Directors meeting and the President as requested. This report will include the pass rate of the first time, repeat and re-certification candidates.

D. Research Committee

1. This committee will develop and periodically review guidelines for evaluating research proposals requesting access to AMCB data.
2. The committee will conduct a survey of the “face validity” of the national certification examination, known as the Task Analysis of Midwifery Practice. A new Task Analysis should begin within 5 years of the publication of the prior Task Analysis.
3. The committee will conduct internal research relevant to the mission of the corporation.
4. The Chair of this committee is responsible for
 - a. recommending committee members for appointment to the Board of Directors
 - b. delivering a short written report for each AMCB Board of Directors meeting and the President as requested.

IV. Certificant Maintenance Policies

- A. Certificants are expected to keep their certification current.
- B. Once the certificant has lapsed, in order to become recertified the individual must
 1. re-take the exam (CBT)
 2. submit an average of 10 ACNM/ACCME continuing education contact hours for each year since the date of last certification
 3. pay the full exam fee, (previous fees paid into CMP do not apply to exam fee)

V. Ethics

- A. The Board of Directors, Committee Members and Staff pledge to:
 1. Contribute to defining the corporation’s mission, and policies and procedures governing the fulfillment of that mission.
 2. Carry out responsibilities and functions assigned by the Corporation consistent with the Corporation’s bylaws, policies and procedures.
 3. Hold in confidence all proprietary and sensitive information
 4. Perform her/his duties in the best interest of the Corporation, rather than as a personal agent or from the perspective of any other professional organization to which she/he belongs.
 5. Represent the Corporation in a professional manner.
 6. Declare a conflict of interest when necessary and abstain from both the discussion and the vote on any matter in which she/he has a personal or business interest. A conflict of interest is defined as any social, professional or economic relationship with the individuals or the matter at hand that could affect her/his judgment and result in an outcome that might not reflect the best interest of the Corporation.
 7. Resign from her/his position in the Corporation, if, for any reason, she/he finds herself/himself unable to carry out the above duties.

- B. Members of the BOD are prohibited from being employed by or serving as paid consultants of the Corporation for a period of 2 years following the end of their terms of service.

VI. Confidentiality

A. Certification materials

1. Individuals who have access to secured materials must meet the following requirements prior to the beginning of their term of service or employment:
 - a. Verification of credentials, including professional licensure, as applicable
 - b. Three letters of reference attesting to the individual's professional integrity
 - c. Signing of the confidentiality affidavit
2. During the period of service and for 3 years after the term of service or employment has ended, individuals who have access, or potential access, to the certification exam may not participate in activities related to the development or presentation of any materials, outlines, texts or courses designed to prepare candidates for the exam.

B. Applicants and certificants

1. Application status and results will be kept confidential at all times
2. Application materials and examination results reports will be kept under lock and key at the headquarters office
3. A list of certified individuals will be published on the website and ACNM will be notified
4. Individual information in database will be kept confidential and password protected
5. All employees, volunteers, and exam consultants will read and sign the Confidentiality Affidavit.

VII. Release of Applicant or Certificant Information

- A. The Corporation's officers, directors, committee members, employees, agents and others may communicate any and all information relating to any application, certification decision, and review thereof, including but not limited to communication concerning the status and results of proceedings in disciplinary matters to ACNM, state and federal authorities, licensing boards, employers, and others.
- B. The Corporation reserves the right in its sole discretion to publish, disseminate or otherwise disclose information relating to certification, review and disciplinary matters, including those matters involving applicants.

VIII. Security

- A. The confidential nature of materials and information will be protected through development and enforcement of security procedures. These procedures will protect among other things the following matters:
 1. Selected individual applicant and certificant data
 2. Selected exam and certificate maintenance materials
 3. Financial data and information
 4. Personnel files as required by law

IX. Financial

- A. Annual Budget
 - 1. The annual budget is confidential.
 - 2. The annual budget is prepared by the Executive Director and Treasurer and presented by Treasurer for approval by the Board
 - 3. An Ad Hoc Finance Committee will be established at the recommendation of the Treasurer or Board of Directors when considering actions with major financial implications to the organization.
 - B. An annual audit of the organizations finances will be conducted on an annual basis by an independent auditor.
- X. Legal Counsel
- A. The Corporation may consult with and be represented by legal counsel at any time, and on any matter of interest to the Corporation.
 - B. Legal consultation for non-routine matters requires the approval of the president or a simple majority vote of the Board.
- XI. Use of the Corporation's Certification Marks
- A. The Corporation owns and licenses the Certification Marks "Certified Nurse-Midwife" ("CNM") and "Certified Midwife" ("CM").
 - B. The Corporation does not warrant the professional practice or job performance of its certificants.
 - C. Certification by the Corporation is the grant of a non-exclusive, non-transferable limited license to use the certification mark "Certified Nurse-Midwife" ("CNM") or "Certified Midwife" ("CM"). Any other use or display of the Corporation's Certification Marks without its prior written consent is prohibited.
 - D. The Corporation's exams, exam questions, score sheets, certificates, certification designations and abbreviations relating thereto may not be used in any way without the express prior written consent of the Corporation.
 - E. At the request of the Corporation, the candidate or other person shall immediately relinquish, refrain from using, and/or correct at his or her expense any outdated, inaccurate or unauthorized use of the Corporation's certificate, certification marks, or other intellectual property.
 - F. If the individual refuses to relinquish immediately, refrain from using or correct at his or her expense any misuse or misleading use of any of the above items when requested, the applicant or certificant agrees that the Corporation shall be entitled to obtain preliminary and permanent injunctive relief, damages, and costs, as well as attorney's fees incurred in obtaining any such or other relief.

XII. Disclaimer of Responsibility

- A. The Corporation assumes no responsibility for any act of God or humans that is beyond its control and affects the administration, evaluation, or reporting of exam results or certificate maintenance activities.
- B. Should such an event occur, at the discretion of the Board the candidate(s) or certificant(s) involved will be allowed to take or retake another form of the certification exam or certificate maintenance activities without additional fee.

XIII. Non-Disciplinary Appeals

- A. Grounds for appeal of Corporation policies or actions are:
 - 1. Failure to meet eligibility requirements
 - 2. Suspected errors, including but not limited to:
 - a. Examination scoring
 - b. Denial of an application for certification
 - c. Denial of certification
 - d. Denial of recertification
 - e. Suspected irregularities during examination
- B. The president in consultation with the executive committee is responsible to develop and submit appeal procedures to the Board for approval. These procedures shall minimally include:
 - 1. Timeline for appeals process
 - 2. Guidelines for handling appeals
 - 3. Means for communicating appeals and decisions.
 - 4. Guidelines for review committees
- C. The decision of an appeal body will be final.
- D. The appellant is responsible for reasonable costs that may be incurred by the Corporation during an appeal.
- E. The president shall submit a report of appeals and their disposition at the annual meeting of the Board.

Section 2. Procedures

I. Credentials and Reporting Committee (CAR)

A. The Candidate Handbook must include information on the following items:

Mission Statement	Accreditation
Overview of Exam	CMP Enrollment
Name and Address Change	Eligibility Requirements
Procedures for Initial Application	Denial of Eligibility
Fees	Americans With Disabilities Act
Scheduling	Procedures for Taking Exam
Re-Taking Exam	Format and Content of Exam
Suggested References	Exam Development and Standard Setting
Scoring	Score Verification
Notification of Results	Verification of Certification
Disclaimer	Content Outline and Sample Questions
Appeals	Discipline Policy and Procedures

II. Certificate Maintenance Program Committee (CMP)

- B. **Audit of Data** – A member of the committee will conduct an audit each year of the validity of the data in the database for the certificants completing their 8 year cycle that year. The following items should be audited during this process: 1. The number of people certified in the given year versus the number in the database. 2. A 10% random sample of all those identified as having completed all CMP requirements will be checked for a zero balance, three completed modules, and 2.0 CEUs. 3. Identify reason for any incomplete records.

- C. **Audit of CEUs** – The CMP staff will conduct a random audit of 10% of all participants completing the CMP Program that year. The participants will be notified by February 15th that they have been selected for the audit and they will have until December 1 of the same year to submit proof of CEUs. Any questionable CEUs will be reviewed by the CMP Committee for a final decision.

- D. **Modules** – New modules will be developed in each content area every three years. The content areas will approximately reflect the emphases determined by the Task Analysis that guides the National Certification Exam.
 - 1. Each module will contain content specific objectives, a reference list, a post test and an evaluation form. The references will be from major texts and peer-reviewed journals. Each post-test will be comprised of 50-75 questions.
 - 2. Topics will be selected based upon nationally recognized population-based health needs of women and infants, solicited input from CNMs/CMs, and recommendation of a panel of experts.
 - 3. Modules will be retired after 34 months.
 - 4. After the module is completed, AMCB will apply for ACNM CEUs for each module.

III. Exam Committee

A. Examination construction procedures.

1. Examination construction begins with the preparation of a draft examination that is based on a form of the examination about to be retired from use;
 - a. The examination consultants (consultants) review the test and item level statistical data for the examination being retired and remove items that are too easy ($p > .90$), too difficult ($p < .40$) and/or poor discriminators ($rpb > .10$);
 - b. The consultants review the test specifications and produce a table indicating the number of items in each content area needed as replacements;
 - c. The examination committee members (committee) perform an item-by-item review of the draft prepared by the consultants and take any of the following actions: 1) retain item; 2) retain item with revisions; 3) delete item; and 4) select items to replace those removed by the consultants in their preparation of the draft and those removed by the committee in its item-by-item review;
 - d. The consultants execute the committee's item revisions and replacements and submit the next draft of the examination to the committee for review;
 - e. The committee performs a review of the second draft of the examination prepared by the consultants and takes any of the following actions: 1) retain item; 2) retain item with revisions; 3) delete item; and 4) select items to replace those removed by the committee in its item-by-item review;
 - f. The consultants execute the changes made by the committee and prepare a third draft of the examination. Draft three is submitted to the committee chairperson for finalization by her and selected members of the committee; and
 - g. The consultants execute the changes made in the finalization process and produce the examination in a form suitable for submission to the computer-based testing vendor.

B. Examination review Guidelines

1. Items will be reviewed for clarity, accuracy, and relevance to the test specifications and to entry-level midwifery practice;
2. Every item approved by the committee will have a current or classic reference;
3. At each committee meeting, items selected for use in an exam will be evaluated by committee members to ensure that the items continue to reflect current, best practice;
4. References for items previously used will be reviewed to ensure that they comply with the need to have been published within the last 5 years;
5. Staff will provide the committee with a library of references/resource materials for use during meetings; and
6. Committee members may bring and use personal references/resources for use during meetings

C. Examination Format and Content

1. The national certification examinations in nurse-midwifery/midwifery consist of items written in the multiple choice format
2. The content areas covered by the certification examination and the percentages of the total represented by each area are determined by the periodic task analysis completed by the Research Committee. For 2006 they are as follows:

Antepartum	25-30%
Intrapartum	25-35%
Postpartum	5-10%
Family planning/gynecology	15-20%
Newborn	5-10%
Primary care	5-10%
Professional issues	Up to 5%

Knowledge and judgment abilities of both normal and deviations from normal will be tested for all clinical areas

3. At least two forms of the certification examination shall be constantly available for computer based testing. In general, each form of the certification examination shall remain in use for 12 months. However, the maximum active use of any form of the certification examination shall be 24 months.

D. Examination Scoring and Standard

1. A criterion-referenced pass/fail standard for each test form will be determined by Examination Committee members and the Test Consultant(s). A statistical report of item and test performance and the candidate critiques shall be reviewed periodically by Examination Committee members in consultation with the Test Consultant.
2. Candidates who fail may request verification of results. Cost for this verification is delineated by the AMBC fee schedule.
3. The AMBC Board of Directors will be informed periodically of the pass rate of the first time, repeat and re-certification candidates.

IV. Research Committee

A. Task Analysis

1. The research committee will conduct a survey of the face validity of the national certification examination.
 - a. The survey should include a random sampling of 25% of all candidates who sat the examination in the interval since the previous survey.
 - b. It should consider any relevant policy, position or clinical practice statement used by ACNM and other relevant professional organizations since the previous task analysis.
 - c. The survey should contain items which will determine those persons' perceptions of the relevancy of examination content to those knowledge and skills competencies which are encompassed in the practice of midwifery.
 - d. The survey may also include questions that address candidate's perceptions of issues related to exam format and administration, and other issues that are of timely importance to the AMCB.
 - e. As a guide a new Task Analysis should begin within 5 years after the publication of the prior task analysis.

B. Internal Research

1. Research committee will prepare a list of all on-going research and the frequency with which it is to be conducted
2. Committee will prepare annual report for BOD approval summarizing previous year's research and projecting efforts, with priorities, for the next year
3. When an AMCB committee submits a proposal for research the proposal shall be reviewed by the Chair of the committee, one uninvolved member of the Research Committee and the Chair of any affected committee. If appropriate, the committee may request an outside expert review. The Chair will then submit the request to the BOD and make recommendations.

Proposals should include the following:

- a. Introduction and rationale
- b. Objectives
- c. Methodology and materials
- d. Time schedule
- e. Measures to protect the security of the examination or the privacy of the applicants/candidates
- f. Budget

C. External Research

2. Approval Process
 - a. Proposal is submitted to Research Committee

- b. Proposal is reviewed by Chair of Research Committee, one uninvolved member of the Research Committee and Chair of any affected committee
- c. If appropriate, the committee may request an outside expert review
- d. Proposal is submitted to the BOD for approval
- e. Researcher should allow a minimum of 2-3 months for completion of the review process

The application to AMCB Should include:

- 1. Introduction and rationale
- 2. Objectives
- 3. Methodology and materials
- 4. Time schedule
- 5. Specific data or access requested from AMCB
- 6. Human subjects protection and measures to protect privacy of applicants/candidates
- 7. Curriculum vitae

V. Confidentiality of Materials

- A. Specific materials to be secured include but are not limited to the original and all copies of:
1. Approved exam items
 2. Draft and final exams
 3. Exam answer keys (certification and certificate maintenance)
 4. Completed exam booklets or answer sheets (certification and certificate maintenance)
 5. Exam critiques (individual forms and compilation report)
 6. Psychometric exam analysis
 7. Individual performance data that includes personal identifiers with exception of certification and/or certification maintenance status
 8. Electronic files containing any of the above
- B. The Executive Director shall develop and maintain corporate office procedures to ensure the tracking and security of materials both within the Corporate office and during electronic or hard copy transmittal of such materials.
- C. Committee chairpersons shall develop and maintain committee procedures to ensure the security of materials.
- D. Exam related materials to be secured should not be transmitted via fax nor sent by mail or other delivery mechanisms to educational or clinical sites.
- E. Secured materials eligible for destruction shall be permanently destroyed in a secure manner.

VI. Records Retention Policy

Description of Records	Manner of Record Keeping	Disposition
Corporate Organizational Records		
Incorporation documents including articles of incorporation, bylaws, and related documents	File in EDs office	<u>Permanent</u>
Tax-exemption documents including application for tax exemption (IRS Form 1023), IRS determination letter, and any related documents	File in EDs office	<u>Permanent.</u> Federal law requires copies of these documents to be held at organization's headquarters office. These records must be made available for public inspection upon request.
Meeting/board documents including agendas, minutes and related documents	One copy of each Board Book kept in EDs office	<u>Permanent</u>
Policies and Procedures Manual	Copy kept with each staff person and ED	<u>Permanent</u>
Candidate Handbook	Copy with each staff person and ED and copy available online	<u>Permanent</u>
Task Analysis	At least one copy at headquarters office	<u>Permanent</u>
Application for Examination	Hard copy kept at Headquarters office	<u>Permanent for Successful Examinees</u> <u>2 Years For Unsuccessful Examinees</u>
Examination Data Reports	Electronic copies kept at headquarters office	<u>Permanent</u>
Financial records		
Year end Treasurer's financial report/statement	In Board Book and electronic copy	<u>Permanent</u>

Bank statements, canceled checks, check registers, investment statements, and related documents	Compile & file records on a yearly basis.	<u>Seven Years.</u> Store w/financial records. Destroy after seven years.
Annual information returns (IRS Forms 990)	Federal law requires that the three most recent years returns be kept in the organization's headquarters office and be made available for public inspection upon request.	<u>Seven Years.</u> Store w/financial records. Destroy after seven years.
Insurance		
Accident Reports/Insurance Claims	File in Headquarters Office	<u>Permanent</u>
Legal		
Claims and litigation files	File in Headquarters Office	<u>Permanent</u>
Copyright and Trademark	File in EDs Office	<u>Permanent</u>
Contracts	Headquarters Office	<u>Permanent</u>
Personnel		
Resumes	Headquarters Office	<u>1 Year</u>
Employee Files	Headquarters Office	<u>Permanent</u>
Payroll Records	Payroll Company Keeps but will supply if needed	<u>Permanent</u>

American Midwifery Certification Board (Corporation)
Discipline Policy and Procedures
June 2007

I. Discipline Policy

- A. Grounds for Disciplinary Action. The Corporation may sanction an applicant for certification or recertification or a current certificant in the event of any of the following:
1. Ineligibility for certification or recertification or violation of the Corporation's Bylaws, policies or rules.
 2. Fraud or deceit in an application, reapplication or other communication to the Corporation including but not limited to providing a false or misleading statement, and/or knowingly assisting another to obtain or attempt to obtain the Corporation's certification or recertification by fraud or deception.
 3. Irregularity regarding an exam of the Corporation including but not limited to providing or receiving unauthorized assistance before, during, or after an exam, providing false information to gain admittance to an exam, or impersonating another.
 4. Misrepresentation of certification or violation of the Corporation's personal and/or intellectual property rights including but not limited to unauthorized access, possession of, use of, distribution of, or access to (i) the Corporation's exams, (ii) certificates, (iii) name, trade name or trademarks; and (iv) any of its other personal and/or intellectual property.
 5. Habitual use of alcohol or any other substance of abuse, or any physical or mental condition that impairs competent and objective professional performance.
 6. Gross or repeated negligence or malpractice in professional work.
 7. Limitation or sanction by a federal, state or private licensing board, administrative agency, association or health care organization relating to public health or safety, or midwifery practice.
 8. Conviction of, plea of guilty to, or plea of nolo contendere to a crime directly relating to midwifery practice and/or public health and safety. Individuals convicted of a felony described in this section shall be ineligible to apply for certification or recertification for a period of three (3) years from the exhaustion of appeals, completion of probation or final release from confinement (if any), whichever is later.
 9. Engaging in conduct which is inconsistent with professional standards, including but not limited to (i) any practice that creates unnecessary danger to a patient's life, health or safety; and (ii) any practice that is contrary to the ethical conduct appropriate to the profession that results in termination or suspension from practice. Actual injury to a patient or the public need not be shown under this provision.

B. Sanctions. Sanctions for violation of the Disciplinary Policy may include one or more of the following:

1. Denial, suspension or revocation of certification;
2. Non-renewal of certification;
3. Reprimand; and/or penalty
4. Other corrective actions such as, but not limited to: re-taking the certification examination, supervised clinical practice, repeating and ACME (Accreditation Commission for Midwifery Education) accredited education program.

C. Notice of Possible Violation.

1. Notice of an alleged violation of the grounds of this Discipline Policy should be submitted in writing to the President.
2. The notice to the President should:
 - a. Identify the person(s) involved.
 - b. Provide a detailed description of the pertinent facts or occurrences.
 - c. Include the name, address and telephone number of the person providing the notice to the Corporation and the person's relationship to the matter.
3. The President may proceed in a matter with or without a complainant where there is reason to believe that a violation of the Discipline Policy has occurred.

D. Procedure

1. The President shall develop disciplinary procedures in consultation with the BOD and legal counsel.
2. These procedures shall be reviewed annually by the BOD.

II. Disciplinary Procedures

A. Upon receipt of a complaint or notice of a possible violation of this Discipline Policy, the President:

1. Shall investigate the matter in consultation with legal counsel, the Corporation's staff, and such others as may be appropriate.
2. May request additional information or documentation from the candidate or certificant, or from third persons.
3. Shall review the matter to determine whether the facts, if true, could constitute a violation of one or more of the grounds of this Discipline Policy.
4. Shall close the matter if the facts, even if true, would not constitute a violation of the grounds identified in this Discipline Policy. The complainant, if any, shall be notified of this decision.

- B. Candidates or certificants who are the subject of a possible discipline violation are required to provide any information or documents requested by the President within thirty (30) days of the date of the notice.
- C. If a violation of the Disciplinary Policy is indicated, the President shall appoint a Chairperson of an Ad Hoc Review Committee and refer the matter to the Committee.
- D. The Review Committee shall be composed of the Chairperson and two members appointed by the Chairperson. Members of the Review Committee shall not have had prior involvement with the matter, the complainant, or the individual against whom discipline is being considered.
- E. Upon appointment of the Review Committee, the President shall send to the applicant/ certificant a notice of the disciplinary proceeding by registered, certified or other traceable mail or delivery service.

1. If the individual is a certificant, the notice shall include:

- a. The facts alleging a violation of the grounds for disciplinary action, and a copy of the complaint, if any.
- b. That the matter has been referred to the Review Committee and a list of the names of the members of the Review Committee.
- c. That the candidate must respond in writing to the allegations within thirty (30) days of receipt of the notice. The candidate's response must include a statement admitting, or explaining the facts identified in the allegations. Two (2) copies of all materials must be submitted to the office of the Corporation. Electronic, computer or other communications (such as facsimile or e-mail) will not be accepted.
- d. The Review Committee may proceed to review the allegation if the certificant does not respond.

2. If the individual is an applicant or candidate for certification, in addition to paragraphs a - c above, the notice shall include:

- a. That a failure to respond to the allegations on the schedule determined by the Corporation may result in suspension of any pending application until such time as the disciplinary action is decided, or in such other sanction as the Corporation may deem appropriate.
- b. The Review Committee may withhold decision and imposition of a sanction if any until a response is received from the individual and reviewed by the Review Committee.

F. The Review Committee shall:

- 1. Have broad power to correspond with any parties involved in the matter and any other individuals or consultants.
- 2. Decide the matter by majority vote.

3. Render a decision as to whether or not a violation of the Corporation's Discipline Policy has occurred and, if a violation occurred, shall recommend a sanction.
4. Render a written decision and recommended sanction, if any, to the President normally within ninety (90) days from the receipt of the individual's written response. The written decision will include findings of fact and a description of the Committee's decision and recommended sanction.

G. Review By the Board of Directors:

1. Within 30 days of receipt by the President of the decision of the Review Committee, the BOD shall meet by conference call to review the findings and recommendations of the Review Committee.
2. The BOD shall vote to accept or reject the findings and recommended sanctions of the Review Committee, or to impose lesser or greater sanctions.
3. The President shall send the decision of the BOD to the affected individual by registered or certified mail or other traceable delivery service.
4. The decision of the BOD including any sanction shall become effective immediately.

H. Appeal

1. If the decision of the BOD is to deny or limit a candidate's ability to obtain or retain certification by the Corporation, the individual may appeal the decision by submitting two (2) copies of a written appeal consisting of a maximum of 10 typed pages.
2. The BOD shall vote to accept or reject the findings and recommended sanctions of the Review Committee, or to impose lesser or greater sanctions.
3. The individual must also pay the current appeal fee published in the Corporation's current schedule of charges.
4. The appeal must be postmarked within thirty (30) days of receipt of the notice of the BOD's decision.

I. The Appeal/Hearing Committee shall:

1. Be comprised of the members of the Executive Committee of the Corporation and one additional member of the profession who does not sit on the Board of the Corporation.
2. Be chaired by the President.
3. Render a decision on the appeal normally within 30 days of receipt of the individual's appeal.
4. Send its decision to the individual by registered or certified mail or other traceable delivery service.

J. Publication of Adverse Disciplinary Decisions

1. The Corporation has the right to publish adverse decisions and the reasons for such decisions.
 2. Disciplinary decisions that are adverse to the CNM/CM, applicant, or candidate will be communicated to ACNM and to the licensing authorities, and will be provided in response to inquiries into a person's certification status.
- K. Reconsideration of revocation of certification or denial of eligibility due to noncompliance with the Corporation's Discipline Policy may occur on the following basis:
1. In the event of a felony or misdemeanor conviction, plea of guilty, or plea of nolo contendere directly related to public health or the provision of midwifery services, no earlier than three years from the exhaustion of appeals, release from confinement, or satisfactory completion of all terms and the entire length of parole or probation, whichever is later.
 2. In any other case, no earlier than three years from the final decision of ineligibility or revocation.
 3. Reconsideration shall include a review of the underlying matter and any additional evidence the Corporation receives or requests, including evidence of rehabilitation.
 4. Reconsideration shall be conducted by a Review Committee as provided under paragraphs II.D and II.E.
 5. Reconsideration decisions are final and not subject to internal appeal.
 6. The candidate may reapply for reconsideration no more than once every three years.