

# FLORIDA SCHOOL OF TRADITIONAL MIDWIFERY



# Student Handbook

Academic Year 23-24, Version 1

## **Gainesville Location**

810 East University Avenue Gainesville, FL 33601

# **Cypress Grove Location**

16821 NE 6th Avenue North Miami Beach, FL 33162

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#### HANDBOOK INFORMATION

This handbook was written, revised and published in June 2021. All the content within this document is subject to change with notice to students regarding the content of the changes.

## **ABOUT FSTM**

FSTM is a non-profit 501(c)(3) corporation organized under Florida law, licensed by the <u>Florida Commission for Independent Education</u> and accredited by <u>the Midwifery Education</u> <u>Accreditation Council</u>. We offer direct-entry midwifery education that is rooted in evidence-based practice and inspired by the historical traditions of past midwives.

Spanning three years, the FSTM Direct-Entry Midwifery program is comprehensive and prepares students to care for their communities. Graduates of our program will receive a diploma from FSTM and are able to sit for the North American Registry of Midwives (NARM) national licensure examination. Upon passing this exam, graduates are eligible to become licensed by the Florida Department of Health to practice as Licensed Midwives (LM) in the state of Florida. They are also eligible to become nationally certified through NARM as Certified Professional Midwives (CPM).

## **FSTM MISSION**

The FSTM mission is to offer the finest in direct-entry midwifery education in an environment that encourages students to reach their full potential. We believe that it is our responsibility to promote awareness of and access to midwifery services. Our graduates are community-builders who use midwifery as their tool.

# **FSTM VISION STATEMENT**

FSTM believes that every person should have access to the maternity care provider of their choice and to the information necessary to engage in shared decision-making.

# **EQUITY AND SOCIAL JUSTICE POSITION POLICY**

Florida School of Traditional Midwifery (FSTM) is committed to training midwives who will provide safe and respectful care to every family they serve. FSTM is committed to equity and social justice, founded upon anti-racist practices. FSTM recognizes the shortage of Black, Indigenous, Midwives of Color in the state of Florida and nationwide. This policy adheres to the MEAC Standard Benchmark BII.B5.

This policy applies to all employees, instructors, students, visiting guests, contractors, or volunteers working for the institution. It applies to all facilities, owned, leased, or otherwise occupied by FSTM. In addition, it applies to all applicants and those seeking employment.

# Equity and Social Justice in the FSTM Curriculum

The FSTM curriculum includes learning activities, objectives, and experiences that prepare students to care for all pregnant people, babies, and families. This requires that the FSTM curriculum include exposure to ways to care for people from populations that are different from their own.

# Public Acknowledgement of the FSTM Equity and Social Justice Statement

FSTM will place its Acknowledgment Statement in the following locations:

- FSTM Website
- FSTM Catalog
- FSTM Student Handbook

# FSTM Acknowledgement Statement

#### FSTM acknowledges:

- Black, American Indian, and Alaska Native (Al/AN) women are two to three times more likely to die from pregnancy-related causes than white women – and this disparity increases with age, researchers from the Centers for Disease Control and Prevention (CDC) report. (CDC<sup>2</sup>, 2019)
- Black mothers are over three times as likely to die of pregnancy and childbirth related complications than white mothers 40.8 per 100,000 vs. 12.7 per 100,000. (CDC<sup>2</sup>, 2020) [table 1]
- The pregnancy-related mortality rate for Black birthing parents with a college degree was 5.2 times that of their white counterparts. (CDC<sup>1</sup>, 2019)
- Pregnancy-related deaths per 100,000 live births for American Indian and Alaska Native birthing parents older than 30 was four to five times higher than for white birthing parents. (CDC<sup>1</sup>, 2019)
- Even when controlled for socioeconomic status, substance use, geographical location, education attainment, Black birthing parents have three to four times higher rates of perinatal mortality than whites. (Joint Economic Committee, 2020)
- Disparities were persistent and did not change significantly between 2007-2008 and 2015-2016. (CDC<sup>2</sup>, 2019)
- It is estimated that 60% or more of these deaths could have been prevented. (CDC<sup>1</sup>, 2019)

- The infants of Black birthing parents are greater than twice as likely than white parents to have their infants die in their first year of life (CDC<sup>3</sup>, 2019)
- Infant mortality rates for American Indians and Alaska Native babies was 9.4 per 1,000 births compared to 4.9 deaths per 1,000 for white non-Hispanic babies (CDC<sup>3</sup>, 2019) [table 2]
- Data from the Urban Health Institute collected from the organizations' 33
  nationwide health-care locations found that maternal mortality rates for Native
  women was 4.5 times greater than non-Hispanic white women (Urban Indian Health
  Institute, 2016)
- Results examining 1.8 million hospital births in the state of Florida between 1992 and 2015 suggest that newborn–physician racial concordance [doctor and newborn are of the same race] is associated with a significant improvement in mortality for Black infants. (Greenwood, Hardemanb, Huangc, & Sojournerd, 2020)
- Specifically, a Black infant under the care of Black physician reduces their risk of death by greater than half. (Greenwood, Hardemanb, Huangc, & Sojournerd, 2020)
- These study results further suggest that these benefits manifest during more challenging births and in hospitals that deliver more Black babies. (Greenwood, Hardemanb, Huangc, & Sojournerd, 2020)

These healthcare disparities are best addressed with culturally concordant care by well-trained midwives. Existing barriers to obtaining midwifery education occur dynamically at micro (individual), mezzo (organizational) and macro (institutional) levels. To increase access to culturally concordant care, FSTM is committed to identifying barriers and increasing access to meaningful support systems within the midwifery profession for Black, Indigenous, Students of Color to achieve their goal of becoming a midwife and being available to serve their communities.

# FSTM COMMITMENT TO SOCIAL JUSTICE AND EQUITY

FSTM commits to the continued development of a social justice and equity agenda that includes, but is not limited to, the following practices:

- Create a culturally safe classroom space that is conducive to learning and free of stereotyped bias and racism.
- Ensure accessible institution-wide anti-racism and anti-oppression training for board, students, faculty, staff, and preceptors, with an emphasis on incorporating inclusive and diverse approaches within the curriculum and in the classroom setting.
- Encourage accountability, listening to those impacted, and the continued learning of administrators, staff, faculty, preceptors, and students to address actions and

inactions that may cause harm to Black, Indigenous, People of Color institutionally, and in the classroom and clinical setting.

- Increase the recruitment and retention of administrators, staff, and faculty of color to reflect our diverse student body.
- Foster relationships with Black, Indigenous, Midwives of Color to increase access to culturally concordant clinical placements for Black, Indigenous, Students of Color.
- Prioritize the voices of Black, Indigenous, People of Color when they elect to share their lived experience and needs in discussions about racism, racial bias, microaggressions, equity, and justice.
- Listen carefully to the stated and identified needs of the Black, Indigenous, Students of Color at FSTM, and whenever possible implement policies, procedures, and practices that support those stated needs.
- Accurately represent the profession of midwifery in the institutional reflections of history, politics, and institutions including how they were historically and are currently experienced by Black, Indigenous, Students and Midwives of Color.
- Utilize cultural safety and cultural humility as the foundational framework for educating the next generation of midwives to create client-centered safe, equitable and just clinical practices, free of discrimination.
- Improve the educational system at FSTM by promoting continual self and institutional reflection and evaluation of results.

# HISTORY OF LICENSED MIDWIFERY

It is important that FSTM recognize the work of the people, particularly the black grand midwives of the South from whom the work of licensed midwifery became possible and realized as we know it today. The following historical timetable and annotations were adapted from the NACPM Webinar from April 6, 2017 by Sharon Hamilton, LM, and Mainstreaming Midwives: The Politics of Change by R.D. Floyd and C. Johnson.

Please Note: for the purpose of this historical timeline and for FSTM nomenclature, the term licensed "Grand Midwife" will be used in place of licensed "Lay Midwife" or "granny midwife" because the term is more widely accepted by the midwives who served in this era and is more respectful and representative of their experience and work.

- <u>1920</u>: Approximately 4000 midwives were serving Florida families, including Seminole, Miccosukee, African American and poor rural white families (Fla. Health Dept. estimate).
- 1931: Florida passed the first state midwifery licensing law, Florida Statute 485; 1400 Grand Midwives became licensed.

- 1933: Florida Midwife's Manual was written for Grand Midwives. Midwives attended parents in labor and birth. Public health nurses provided prenatal care. This manual was created under the guise of educating Grand Midwives, many of whom had been safely in practice for decades. Grand Midwives were state sanctioned to practice by the state of Florida and County Health Departments until the 1960s.
- 1930s: The Florida Department of Health recruited and trained midwives to care for those families who did not have access to medical care due to poverty and segregation. This period was marked by the movement of middle- and upper-class white parents out of the home setting and into the hospital setting for childbirth.

This recruitment largely centered around Black and Indigenous Grand Midwives who were already providing exceptional care to Black, Indigenous, and indigent white families who were excluded from the option to birth in the hospital due to racial segregation or inability to afford a hospital birth.

Doctors and public health nurses of this era intentionally used Grand Midwives to provide their knowledge and skills that the Grand Midwives possessed, while undermining them within the community.

Public Health Nurses provided prenatal care while the Grand Midwives were expected to be on call to attend births in the family's home.

Many Grand Midwives were paid in produce, canned foods, eggs, chickens, pigs and livestock, or with barter and trade, whatever the families could afford.

• 1950s-1980s: Gladys Milton, LM (1924-1999) Midwife to NW Florida families.

In the 1950s, the Walton County Health Department recruited Gladys Milton to be trained by physicians. Gladys was licensed to practice midwifery in Florida in 1959. Gladys Milton delivered approximately 3,000 babies during her 40 years practicing midwifery (1959-1999). From 1959-1976 Gladys attended home births in NW Florida.

In 1976, Gladys opened the Milton Memorial Birthing Center, to provide a safe, family-oriented environment for low-risk parents who could not afford hospital care. In the late 1980s, with help from the Florida midwifery community, Gladys successfully fought off a challenge by the FL DOH to maintain her midwifery license.

Gladys was inducted into the Florida Women's Hall of Fame in 1994.

Gladys' daughter, Maria Milton, also a Florida Licensed Midwife, continues her mother's work at the Milton Memorial Birthing Center.

• **1960s and 70s**: Florida hospitals were desegregated, US Medicaid instituted - families once served by Grand Midwives became desirable to obstetricians.

The numbers of Grand Midwives begin to dwindle as the Florida Dept of Health and Rehabilitative Services notified Grand Midwives their services would no longer be needed, and they should turn in their licenses and receive a "certificate of appreciation" from the state.

This sudden requirement to turn in their licenses coincided with hospital birth becoming more widely available to Black, Indigenous, and indigent white families.

- 1969: The first Nurse-Midwife was licensed in Florida, under the Board of Nursing. Many of these early Nurse-Midwives have been informally trained in the art of midwifery by the Grand Midwives, under the guise of the Public Health Nurses educating them.
- **1969**: Health Department officials moved to eradicate the Grand Midwives and replace them with nurse midwives.
- 1960s-1970s: The majority of Florida Grand Midwives were retired by 1970.

Simultaneously, demand for midwives nationwide was on the rise, sparked by many factors, including the Lamaze movement (est. in U.S. 1960s), the Bradley method of natural childbirth (also known as "husband-coached childbirth) (1965), the book: Awake & Aware Childbirth by Irwin Chabon (1966), the Women's Liberation Movement, La Leche League (est. 1956), the book: Spiritual Midwifery by Ina May Gaskin (1975), and The Farm midwifery (est. 1970).

In the late 60s and early 70s, general interest in natural childbirth began to grow. Many families wanted to be more educated about and more involved in their pregnancies and the births of their children. Fathers wanted to be part of the birth.

In 1964, 191 midwives hold Florida licenses. By 1974, that number drops to 54 midwives with a Florida license.

• **1970s**: A law to license "Lay" Midwives was still on the books. To become licensed, midwives had to attend 15 births with a sponsoring physician and receive the endorsement of their County Health Department supervisor, usually a doctor.

Most County Health Department supervisors were doctors and refused to license Lay Midwives. Several midwives challenged their refusals in state courts and received their licenses. Florida DHRS actively encouraged the remaining Licensed "Lay" Midwives to retire in favor of Nurse-Midwives.

Simultaneously, the rate of home births in Florida delivered by "other" rose to a statistically significant level.

• **1978**: Birthplace, an alternative birthing center established by Byllye Avery and others in Gainesville, Florida.

Byllye later moved to Atlanta (1981) and started the National Black Women's Health Project.

- <u>1979</u>: Midwives Association of Florida (MAF) is formed, to keep direct-entry midwifery licensure available.
- 1979: MAF meets with FL DOL (Dept of Labor) people to propose an apprenticeship training program for Licensed "Lay" Midwives, which is ultimately rejected.
- Lates 70s and early 80s: MAF secures bill sponsors and submits a bill to license midwives. The bill was introduced in 1979, 1980, & 1982.
- 1982: Florida Midwifery Practice Act, F.S. 467 passed. Required: 3 yr. "direct entry" midwifery education, 25 birth observes, 25 primary managements under supervision, and passing a state licensing exam. Nursing is not a prerequisite. Two-year "Sunset Review Study" is mandated.
- 1984: "sunset review" amendment added to Florida Midwifery Practice Act, F.S. 467 by opponents at the last minute.
- 1983: The North Florida School of Midwifery opens in Gainesville, seating its first and only class.
- <u>1984</u>: The South Florida School of Midwifery opens in Miami, seating its first and only class.
- 1984: Sunset Review Study recommended continuation of licensing study finds Licensed Midwives provide safe, effective care that meets a public need. Despite study findings, opposition from the medical community forced amendment to F.S. 467 that closed off licensing to all non-nurse midwives except those currently licensed and students already enrolled in the two midwifery education programs. This action was called "The Meyers amendment", as it was sponsored by Senator "Doc" Meyers of Sarasota, FL.
- 1986: Establishment of FABC (Florida Association of Birth Centers).
- 1988: Licensed Midwives and families worked to remove restrictions in the law. Grassroots consumer groups organized throughout Florida. Passage of law required private insurance companies to reimburse midwives licensed pursuant to 467 for maternity care.
- 1989: Florida Friends of Midwives was formed, under the leadership of Becky Martin.
- 1989: US Senator Lawton Chiles' son and his wife had an unplanned preterm breech delivery at home. Florida Licensed Lay Midwife who was also a paramedic was called in and successfully delivered the baby. Senator Chiles expressed gratitude that the midwife saved his grandchild's life. Lawton Chiles decided to run for governor as the Democratic candidate. Licensed midwives contributed to and worked in his campaign. Chiles was elected Florida governor in 1989 and re-elected in 1993.
- 1991: Passage of "Sunrise Report" by the Florida Legislature called for reopening F.S. 467 to enable the education and licensure of new midwives. Governor Chiles' daughter Rhea had the first of her 3 children in a birth center owned by a Licensed Midwife. Rates of home births and birth center births continue to rise. Senate HRS committee study finds Licensed Midwives' safety record comparable to Certified

- Nurse Midwives and Physicians; and that the public could benefit from increasing the number of practicing midwives.
- 1992: New Licensed Midwife Law passed, licensure reopened. Educational and clinical requirements and scope of practice were revised. Birth management requirements increased from 25 to 50. Medicaid reimbursement mandated for Licensed Midwife services: prenatal and postpartum care, and birth center births. Home births excluded. Regulation moves from DHRS to DBPR. Midwives regulated by the Council of Licensed Midwifery, an independent council. Efforts to place the Council under the authority of the Florida Board of Nursing were defeated. Gov. Lawton Chiles' Healthy Start Initiative passed and became law. The sunset review is abolished.
- <u>1993</u>: Council of Licensed Midwifery Began Rules Development.
- Council of Licensed Midwifery comprised 9 members: 4 LMs, 1 CNM, 1 OB, 1 pediatrician, 1 family practice physician and 1 consumer. Florida Dept of Education develops Curriculum Framework for state educational programs, levels midwifery at Associate Degree. Healthy Start Advisory Committee recommends 50% of healthy parents deliver with midwives by the year 2000.
- 1993: Miami Dade Community College became the only public institution in the U.S. to offer a degree for Licensed Midwives.
- 1993: The National School of Technology starts a midwifery program in Miami.
- <u>1995: The Florida School of Traditional Midwifery accepts its first class in</u>

  <u>Gainesville with Jana Borino as its founder.</u> The NARM exam is officially adopted as the Florida state exam.
- 1997: Passage of the law mandating Medicaid Reimbursement for home birth provided by Licensed Midwives, linked with requirement that actively practicing midwives hold Liability ("Malpractice") Insurance.
- <u>1998</u>: Jennie Joseph, British midwife, became a Florida Licensed Midwife, started the The JJ Way® Patient-Centered model of care.
- 2008: Miami Dade College closed its Midwifery Program to new classes. The last midwifery class graduates from Miami Dade College 2009.
- 2009: Jennie Joseph opens Commonsense Childbirth School of Midwifery in Winter Garden (central) Florida
- **2010**: Federal Health Care reform legislation authorizes Medicaid reimbursement for all licensed practitioners in licensed birth centers
- **2006**: Midwifery rules amended to enable LMs to provide HBAC with informed consent <a href="https://www.flrules.org/gateway/ChapterHome.asp?Chapter=64B24-7">https://www.flrules.org/gateway/ChapterHome.asp?Chapter=64B24-7</a>
- **2016**: Successful resolution of ~ 20 years of efforts by members of FABC (Florida Association of Birth Centers) to change birth center rules so LM clients no longer require initial risk assessment by an OB or CNM to enter LM care now finally in agreement with LM homebirth rules

- **2016**: The district 12 ACOG chapter sends a letter to the Council of Licensed Midwifery declaring that legislative action will be taken to address Midwifery Practice Act CH 467. A revival of the long-dormant MAF and other LM professional organizations is underway.
- **2017**: Establishing FLCPM the Florida chapter of NACPM to contribute national resources and connections to the state challenges and work collaboratively with the Midwives Association of Florida
- **2017**: 14 midwives from all over the state converged on Tallahassee for Midwife Day March 29, 2017. Lobbyists set up 19 appointments with different legislators. Teams of 3-4 midwives visited each legislator and sat in on legislative sessions. Efforts are made by the FL Chapter of ACOG to open up CH 467 and attempt to regulate the LM profession; these efforts are successfully delayed.
- **2018**: Continued legislative action unfolds with lobbyists Louis Rotundo and Ron Watson, resulting in Adverse Incident Reports becoming legally required for OOH birth. It is proven that LMs are not the only providers attending OOH birth, thereby ensuring that "adverse incident reporting" laws are written into general maternity care statutes, rather than limiting it to Ch 467 Midwifery Practice Act.
- **2018**: A statewide LM meeting is held in Bartow, FL on February 28, 2018 to decide the next moves on a professional organization.
- 2019: The Florida School of Traditional Midwifery opens Cypress Grove, FSTM's Miami campus and begins to accept applications to the program.
- **2019-2020**: Lobbyists inform LMs that there is a bill that attempts to open up Ch 467 and threaten the LM profession. Legislator sponsors are largely responding to negative press about OOH birth in Florida. LMs successfully educate legislators on Statutes and Rules that are already in place to safeguard clients during care with an LM. No further legislative action is taken.

## **FSTM STAFF**

Amanda Mann, RN, LM - Executive Director

Amanda Mann comes to FSTM with more than 15 years' experience as a teacher, school administrator, and most importantly, a Licensed Midwife at Lakeland Midwifery Care. She also holds a bachelor's degree in English and a masters degree in creative writing. Amanda fervently believes that birth is an essential life process that has the potential to transform, inspire, and engage. She believes that midwifery is an essential intersection between passion and the world's greatest need. Amanda is married with four children, and enjoys reading.

Email: amann@midwiferyschool.org

Kerri Audette, is a licensed midwife and graduate of the Florida School of Traditional Midwifery. She currently practices in north-central Florida. Kerri also holds a Bachelor's of Design from the University of Florida School of Architecture. She was inspired to pursue work in women's health as a result of her experiences with her local women's roller derby league. Kerri is a Gainesville native and birthed her own children at home with midwives.

Email - kaudette@midwiferyschol.org

Sorell Pagliara, LM, CPM - Clinical Director

Sorell is a Licensed Midwife and a graduate of The Florida School of Traditional Midwifery. Her exposure to the loving and expert care of midwives began with the home birth of her siblings. She was led to midwifery as a career after the birth of her daughters, Willow and Juniper. Working with local midwives she has attended home birth and birth center births in her home town of Gainesville, Florida and the surrounding area since 2012.

Email - spagliara@midwiferyschool.org

Melissa Pierre - IDEA Coordinator,

Melissa is a birth doula and holds a bachelor's degree in Africana Studies from the University of South Florida. Prior to her work with FSTM she worked as an English teacher in Jacmel, Haiti and as a campus manager at the Artists Institute in Jacmel. Melissa is married with 3 children. The birth of her first born sparked her interest in birth work. She enjoys spending time with family and friends.

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Laura Baird - Administrative Assistant

Laura Baird is a recent graduate from Santa Fe College with a bachelor's in Organizational Management. While she does not have experience with midwifery, she is excited to learn more about the practice as she one day hopes to have a family of her own. Laura has been in Gainesville for six years and loves spending time hiking or running the nature trails. In her spare time she enjoys a birds eye view of the city while flying with her dad in his Cessna.

Email: Ibaird@midwiferyschool.org

Heather Harper Palmer, LM - Academic Dean

A mother of 5 children, all born at home, Heather joins FSTM after 20 years of working in reproductive health. During her career, she has had the privilege of educating and

supporting families through non-profit social service agencies, private practice doula work, and health education. She holds a bachelor's degree in Sociology and Spanish and is a graduate of FSTM. Heather currently works as a licensed midwife in Jacksonville.

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Tim Bryant - Business Director

Tim has worked in non-profit finance for 10 years and is excited to serve FSTM students, faculty, and staff as Business Director. He is also the Founder and Executive Director of One Love Prison Meditation Project, a non-profit supporting people who are incarcerated.

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## **GENERAL POLICIES**

## ANTI-RACISM POLICY

FSTM is an actively anti-racism organization that defines itself intentionally as such. We are committed to establishing and curating an environment where everyone (all stakeholders) is valued for who they are as humans. FSTM believes that racism and bias are inherent in people of the dominant culture/race. Because we are an anti-bias and anti-racist organization FSTM commits to the following behaviors:

- Anti-racist, anti-bias training for all staff, faculty, and students.
- Taking a proactive approach to anti-racism including engaging in difficult conversations regarding race and bias.
- A supportive environment in which we approach each other with understanding and grace as we begin dismantling our personal biases, prejudices, and privileges.
- Intentionally support students of color, and black students in particular to reduce or eliminate barriers to accessing midwifery education.
- Consider discussions about race, health inequity and disparities, and privilege to be a primary goal of the program.

Committing to being an anti-racist organization is a continuum along which FSTM must continually engage in, reassess as we learn and grow and commit to each other and the community

# NON-DISCRIMINATION & HARASSMENT POLICY

FSTM is committed to an environment that embraces diversity, respects the rights of all individuals, is open and accessible, and is free of harassment and discrimination based on,

but not limited to, ethnicity, race, creed, color, religion, age, disability, sex, gender identity, sexual orientation, parenthood/pregnancy status, marital status, national origin, political opinions or affiliations, veteran status, physical appearance and genetic information. FSTM does not discriminate in its programs and activities, including employment and admissions. FSTM is an equal opportunity/affirmative action organization.

This policy applies to all employees, instructors, students, visiting guests, contractors, or volunteers working for the institution. It applies to all facilities, owned, leased, or otherwise occupied by FSTM.

## Statement of Non-Discrimination

FSTM does not discriminate against any otherwise qualified student, instructor, staff member, or visitor with disabilities. FSTM strives to create a supportive environment for all. FSTM strictly prohibits retaliation. FSTM complies with all state and federal laws, rules, and regulations, including Title IX, Title VI, and Title VII of the Civil Rights Act, any and all Age Discrimination in Employment Acts, and any other laws, rules, or regulations that expressly prohibit discrimination in any form for any reason.

#### Stakeholders with Disabilities

FSTM is fully committed to complying to Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990 (ADA), as well as any other laws or guidelines created by the federal and state government that relate to individuals with disabilities.

All non-discrimination policies apply to the following:

- Staff
- Faculty (Classroom and Preceptors)
- Students
- Board Members
- Applicants
- Alumni

For FSTM purposes, a person has a disability if their physical or mental impairment significantly affects or limits a major life event. FSTM's "Stakeholders with Disabilities" section of the Non-Discrimination Policy is based upon Section 504 of the Rehabilitation Act of 1973 and the American with Disabilities Act (ADA) as well as from other pertinent policies and procedures.

This policy applies to all students, faculty, staff, and others with disabilities. It makes reasonable accommodations in facilities, use of equipment, supplies, services, and other resources as needed. The following sources have been consulted:

#### Section 504, Rehabilitation Act of 1973

## <u>Americans with Disability Act Information</u>

FSTM recognizes and affirms the language in place in Section 504 of the Rehabilitation Act of 1973, the ADA and all state laws designed to protect students, staff, faculty, and others from discrimination against qualified individuals. The purpose of this policy is to provide a supportive environment for all people, regardless of disabilities in an effort to overcome barriers that could prevent them from fully engaging in on-campus life.

## **ADA Requirements**

The ADA requires the following:

- Reasonable accommodations to be provided upon request for those individuals with disabilities.
- Disabilities can be either learning-related or physical.
- Disabilities require an accommodation to participate in school programs, functions, learning environments, or other circumstances.

## Section 504 of the Rehabilitation Act of 1973

Section 504 of the Rehabilitation Act requires the following:

- No otherwise qualified person with a disability in the United States shall, solely by reason of their disability, be excluded from the participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving federal financial assistance.
- Postsecondary institutions have an obligation to provide auxiliary aids and services that facilitate effective communication and participation for students with disabilities. Communication methods include speaking, listening, reading, and writing.

## Reasonable Accommodations for Learners

FSTM does not discriminate against otherwise qualified individuals with disabilities in decisions about admission, enrollment, registration, and participation in learning activities. Reasonable accommodations will be provided for all applicants or students who need permanent or temporary accommodations or support for their disability in order to perform their duties as a student.

Applicants may self-identify and are at the option of the applicant. This disclosure is not required.

All accommodations must

- Be consistent with the rationale of this policy and contribute to the FSTM supportive environment,
- Help students overcome barriers while ensuring rigor and academic integrity,
- Be appropriate for the essential duties of a student and/or licensed midwife,
- Be consistent with all applicable local, state, and federal law, rule, and regulation that governs such actions.

The type of accommodations provided will depend on the nature of the student's disability. The auxiliary support and accommodations include, but not limited to, copies of presentations used during class, permission to record lectures, extended time during exams, a quiet and separate environment during exams, and permission to use assisting technology during exam.

#### Student Accommodation Procedure

If a student or applicant believes that they require an accommodation, they must:

- 1. Freely contact the Program Team or any instructor through a written request describing the need for accommodation.
- 2. Appropriate medical documentation may be required.
- 3. The student will meet with the Program Director to determine what services and accommodations will best assist the student.
- 4. The Program Director will alert the instructional staff to the need for an accommodation and arrange all details associated with that accommodation.
- 5. FSTM may require medical documentation related to the need for an accommodation. Such documentation would be entered into the employee's permanent file.

Requests should be made as early as possible within the student's experience at FSTM to ensure that they receive all legally afforded protections and accommodations.

# Harassment and Bullying

All FSTM students, faculty, staff and visitors are fully entitled to be on campus in an environment that is free of any discrimination, harassment, or bullying with respect to their ability status and other protected status. This policy should not be construed to be inhibitory to controversial or sensitive subject matters that are otherwise protected from the educational and academic freedom of the school.

#### Harassment

Harassment is defined as a type of discrimination that is not permitted by both policy and law. Harassment includes any "unwelcome conduct" that could cause harm or discrimination to a protected class or any other member of the community by any member of the community. FSTM will not tolerate harassment in any form against students, faculty, administration, or visitors; or tolerate harassment from any of these groups. Harassment can contribute to a hostile learning and working environment and interferes with the learning process. As such, it is not tolerated at all at FSTM.

A hostile environment can be caused by any sort of harassment such as verbal, written, graphic or pictorial depictions, or physicality that is offensive to the person it is directed to. Harassment can limit or deny a person the ability to fully engage in the learning, teaching, or working environment at FSTM and prevents an individual from being a full, complete part of the teaching and learning community.

FSTM reserves the right to immediately address any conduct that a member of the community (student, teacher, staff, or visitor) deems to be offensive and/or harassment. Addressing the offensive conduct may include mediated confrontation, remediation of action, additional moments of education, and conflict resolution.

#### Retaliation

Any person who files a complaint or grievance or participates in the information gathering or resolution process shall be protected from coercion, intimidation, retaliation, interference, and discrimination. Disciplinary action up to and including termination, discharge, or suspension may be taken against any person who participates in any form of retaliatory conduct. Retaliation against any individual in the FSTM community (student, instructor, staff, or board member) for bringing a concern of harassment, being a whistleblower, or providing information that assists a claim of harassment is considered a very serious offense and will be handled as harassment.

#### Grievances

In the event that a student, faculty member, or staff member feels that this policy has been applied unfairly, has not been applied appropriately or that a person has been discriminated against, a formal grievance policy exists to protect students, faculty, and staff members. Please see the FSTM Grievance Policy.

Please note: FSTM is committed to promptly, fairly, and equitably investigate, research, and then address all allegations or complaints that FSTM receives regarding discrimination, harassment, bullying, or racist behavior (overt or microaggressive) on the part of any staff, instructors (clinical or classroom), board member, guest speaker, models, standardized patients, visitors, or other stakeholders.

In particular, please note the following:

- FSTM will respond to every complaint, report, or grievance.
- Off-campus behavior is not exempt from this policy.
- Social media engagement or other online behavior is not exempt from this policy.
- FSTM may handle these events in an informal way, but will most likely respond in a formal, official capacity, depending upon the severity of the accusation.
- Each individual investigation will be driven by the statements received from the complainant, the witnesses, and the respondent. Each party will be permitted to present evidence as it applies.
- FSTM will likely interview any and all witnesses to the event.
- FSTM expects that all participants involved in the event will be absolutely truthful, come with an intention to prevent harm and to cooperate fully.
- FSTM will protect the identity of both the complainant and the respondent as well as witnesses to the extent that it can. However, because of the nature of the small school environment, there is little way to ensure anonymity. However, all involved will be protected by the FSTM Whistleblower Policy explained in the Grievance Policy.
- All documents created or discovered during the course of the complaint investigation will be maintained safely and confidentially.
- Retaliation is strictly prohibited.
- Any person who retaliates in any manner will be subject to immediate disciplinary action.

## WHISTLEBLOWER PROTECTION POLICY

The Florida School of Traditional Midwifery (FSTM) requires directors, officers, and employees to observe high standards of business and personal ethics in the conduct of their duties and responsibilities. As employees and representatives of the FSTM, we must practice honesty and integrity in fulfilling our responsibilities and comply with all applicable laws and regulations. This Whistleblower Policy is intended to encourage and enable employees, board members, and other stakeholders (including students) to raise serious concerns internally.

This policy applies to all employees, instructors, students, visiting guests, contractors, board members or volunteers working for the institution. It applies to all facilities, owned, leased, or otherwise occupied by FSTM.

# Reporting Responsibility

This Whistleblower Policy is intended to encourage and enable employees, board members, and other stakeholders (including students) to raise serious concerns internally, so that FSTM can address and correct inappropriate conduct and actions. It is the responsibility of all board members, officers, employees, students, volunteers, and other stakeholders to report concerns about violations of FSTM's code of ethics or suspected violations of law or regulations that govern FSTM's operations.

## Retaliation

It is contrary to the values of FSTM for anyone to retaliate against any board member, officer, employee, volunteer, or student who in good faith reports an ethics violation, or a suspected violation of law, such as a complaint of discrimination, or suspected fraud, or suspected violation of any regulation governing the operations of FSTM. An employee (staff or instructor) who retaliates against someone who has reported a violation in good faith is subject to discipline up to and including termination of employment.

## Reporting Procedure

FSTM has an open door policy and suggests that employees, students, board members, and other stakeholders share their questions, concerns, suggestions or complaints with the person with whom there is an issue or their direct supervisor. If you are not comfortable speaking with the supervisor or you are not satisfied with your supervisor's response, you are encouraged to speak with the Executive Director or a member of the Board of Directors. Supervisors and managers are required to report complaints or concerns about suspected ethical and legal violations in writing to the FSTM's Executive Director, who has the responsibility to investigate all reported complaints or delegate if there is a real or perceived conflict of interest. Employees with concerns or complaints may also submit their concerns in writing directly to their supervisor or the Executive Director or the Board of Directors.

FSTM's Executive Director is responsible for ensuring that all complaints about unethical or illegal conduct are investigated and resolved. The Executive Director will advise the Board of Directors of all complaints and their resolution and will be reported.

# **Auditing or Accounting Matters**

FSTM's Executive Director shall immediately notify the Audit Committee/Finance Committee of any concerns or complaint regarding corporate accounting practices, internal controls or auditing and work with the committee until the matter is resolved.

# Acting in Good Faith

Anyone filing a written complaint concerning a violation or suspected violation must be acting in good faith and have reasonable grounds for believing the information disclosed indicates a violation. Any allegations that prove not to be substantiated and which prove to have been made maliciously or knowingly to be false will be viewed as a serious disciplinary offense.

# Confidentiality

Violations or suspected violations may be submitted on a confidential basis by the complainant. Reports of violations or suspected violations will be kept confidential to the extent possible, consistent with the need to conduct an adequate investigation.

# Handling of Reported Violations

The FSTM Executive Director will notify the person who submitted a complaint and acknowledge receipt of the reported violation or suspected violation. All reports will be promptly investigated and appropriate corrective action will be taken if warranted by the investigation.

## **FERPA GUIDELINES**

Students have the right to review their educational records, and to ask for corrections if any mistakes are found. Records must be made available in a timely fashion, and administrative responses to any student request must also be timely. Your information will be kept private, unless you authorize us to release it. There are some exceptions to this rule, for directory information and emergencies. Directory information generally includes your name, class, local and permanent addresses, telephone number(s), email address, enrollment status, most recent previous educational institution attended, dates of attendance at FSTM, diploma earned, honors and awards received, participation in officially recognized activities. Your detailed Notice of your Rights under FERPA are posted on the FSTM website, and contain much more detail regarding your records and privacy rights.

## HIPAA GUIDELINES

The Health Insurance Portability and Accountability Act (HIPAA) Privacy and Security Rules are intended to enforce standards of ethics and confidentiality.

• Students will not to use real names or other individually identifiable health information when documenting their clinical experiences, discussing client cases in

class or otherwise. This includes: clients, midwives, physicians, and events that take place at clinical sites.

- When submitting clinical experience documentation to FSTM, student midwives are to use a standardized client coding system. This code shall include the first and last initial of the client, followed by a six-digit estimated date of birth (XXMMDDYY). For example, Sally Smith, with an EDB of March 4, 2018 would be coded as SS030418.
- Student midwives are encouraged to keep a private log (for personal use only) of all client names with client codes to use as a reference when submitting clinical paperwork. It is the responsibility of the student to ensure that these logs are kept secure and in compliance with HIPAA guidelines.
- Student midwives may never photocopy client records or charts without direct permission from the healthcare practitioner and the client.
- Violations of HIPAA may result in any of the following:
  - o Development of Student Success or Performance Plan
  - Clinical Probation
  - o Dismissal from the clinical site
  - o Dismissal from the program

## **ACADEMICS**

## **COPYRIGHT POLICY**

FSTM's copyright and fair use policy is based on the United States Copyright Law, Title 17, US Code, 1976. This policy is vital to ensure that FSTM students, instructors and staff members adhere to the US copyright law regarding the photocopies or other reproductions of copyrighted material. In addition to US Copyright law, the following sources have also been consulted:

Fair Use of Guidelines of 1997

TEACH Act of 2002

Digital Millennium Copyright Act

#### DMCA exemptions of 2006

The purpose of this policy is to help the FSTM learning community to have a better understanding of what is legally allowed with regard to copyright.

This policy applies to every stakeholder who engages with FSTM in any aspect: student, staff, instructor, preceptor, board member, volunteer, or visitor.

# Description of Copyright

Copyright provides the creator or author of a literary or artistic creation with rights to produce copies of his/her/their materials to publish and sell. Copyright exists for many different types of media including:

- Literary works
- Musical compositions with or without lyrics
- Works of drama
- Choreography
- Other artwork
- Motion picture
- Audiovisual work
- Sound recordings

## Copyright and "Fair Use"

Copyright law is very complicated and has stipulations regarding "fair use," which itself depends upon a number of circumstances for use. These are the important ideas regarding copyright and fair use:

- Copyright provides the holder with exclusive rights to the materials.
- The copyright protects the holder's right to "copy, distribute, adapt, perform, display, and create derivative or collected works."
- All copyrighted materials require permission from the copyright holder to reproduce the work unless the use falls under the terms of an exemption like the fair use exemption.
- All members of the FSTM learning community must make a good faith effort to both understand copyright as it applies to FSTM work and make an application of fair use.

## Determination of Fair Use

All FSTM community members should attempt to determine whether or not their use of copyrighted material meets the criteria of fair use or whether they need to seek permission for use.

The four questions to help determine fair use are:

- 1. Will the copyrighted materials be used for nonprofit, educational, or commercial use?
- 2. Is this an informational work or a creative work? Informational works are more likely to be considered fair use.
- 3. How much of the work are you thinking of reproducing? The more you're using the less likely it is to fall under fair use.

4. Will your use have an impact on the potential market for the copyright holder? For example, will your use prevent someone from purchasing this material?

#### Nonprofit use will not always constitute fair use.

# Copyright for Classroom Use Policies

In general, classroom instructors may reproduce photocopied materials to students in class without the publisher's prior permission, if:

- The same photocopied materials isn't used every semester
- Only one copy is used for each student, which then becomes the student's property
- Students are NOT assessed a fee for use
- The materials include a copyright notice
- The school library should have at least one copy of the work

#### General Guidelines for Print and Electronic Sources

- One book chapter
- One article from a journal at a time
- One article from newspaper edition
- Multiple excerpts from a single book or journal issue will be accepted only if the total length of the submission is 10% or less of the total length of the book or journal issue

#### Classroom Showings of Copyrighted Material Guidelines

Classroom use of a copyrighted audiovisual material is permitted according to following guidelines:

- Must be used by students and/or instructors
- Must be used as part of a specific course's curriculum
- Takes place in a classroom

#### Guidelines for Using Multimedia Sources

Existing multimedia (music, lyrics, music videos, motion media, photographs, and illustrations) can be incorporated into a student or faculty project. The amount of the copyrighted work that a student may use in her/his educational multimedia project is restricted by specific portion limitations (see below). Attribution and acknowledgement are required. Students must credit the sources of the copyrighted works, display copyright notice and ownership information, and include notice of use restrictions.

- Copyrighted Music, Lyrics, and Music Videos: up to 10%, but in no event more than 30 seconds.
- Motion Media Work: no more than 3 minutes.

• Photographs and Illustrations: no more than 5 images by an artist or photographer. For photographs or illustrations from a published collective work, no more than 10%

#### ACCEPTABLE USE POLICY

The purpose of this policy is to establish acceptable and unacceptable use of electronic devices and network resources at the Florida School of Traditional Midwifery (FSTM) in conjunction with its established culture of ethical and lawful behavior, openness, trust, and integrity. Florida School of Traditional Midwifery provides computer devices, networks, and other electronic information systems to meet missions, goals, and initiatives and must manage them responsibly to maintain the confidentiality, integrity, and availability of its information assets. This policy requires the users of information assets to comply with company policies and protects the company against damaging legal issues.

All students, employees, contractors, consultants, temporary and other workers at FSTM, including all personnel affiliated with third parties must adhere to this policy. This policy applies to information assets owned or leased by FSTM, or to internet-based sites/forums to which FSTM affiliates belong, or to devices that connect to a FSTM network or reside at a FSTM site.

#### General Policies

FSTM students, employees, instructors, and those working on behalf of FSTM are responsible for exercising good judgment regarding appropriate use of FSTM resources in accordance with FSTM policies, standards, and guidelines. FSTM resources may not be used for any unlawful or prohibited purpose.

For security, compliance, and maintenance purposes, authorized personnel may monitor and audit equipment, systems, and network traffic. Devices that interfere with other devices or users on the FSTM network may be disconnected.

## Passwords

FSTM students, employees, instructors, and those working on behalf of FSTM are responsible for the security of data, accounts, and systems under your control. Passwords must be kept secure. FSTM students, employees, instructors, and those working on behalf of FSTM should not share account information or passwords with anyone, including other personnel, family, or friends. Providing access to another individual, either deliberately or through failure to secure its access, is a violation of this policy. FSTM students, employees, instructors, and those working on behalf of FSTM must maintain system-level and user-level passwords in accordance with this policy.

# **Proprietary Information**

FSTM students, employees, instructors, and those working on behalf of FSTM must ensure through legal or technical means that proprietary information remains within the control of FSTM at all times. Conducting FSTM business that results in the storage of proprietary information on personal or non-FSTM controlled environments, including devices maintained by a third party with whom FSTM does not have a contractual agreement, is prohibited. This specifically prohibits the use of an e-mail account that is not provided by FSTM, or its customers and partners, for company business.

#### Protection of FSTM Assets

FSTM students, employees, instructors, and those working on behalf of FSTM are responsible for ensuring the protection of assigned FSTM assets that includes the use of computer cable locks and other security devices. Laptops left at FSTM overnight must be properly secured or placed in a locked drawer or cabinet. Promptly report any theft of FSTM assets to the Executive Director or Business Director. All PCs, laptops, and workstations must be secured with a password- protected screensaver with the automatic activation feature set to 10 minutes or less. FSTM students, employees, instructors, and those working on behalf of FSTM must lock the screen or log off when the device is unattended. Devices that connect to the FSTM network must comply with all policies. Do not interfere with organizational device management or security system software, including, but not limited to, antivirus software.

#### Network Use

FSTM students, employees, instructors, and those working on behalf of FSTM are responsible for the security and appropriate use of FSTM network resources under their control. Using FSTM resources for the following is strictly prohibited:

- Causing a security breach to either FSTM or other network resources, including, but not limited to, accessing data, servers, or accounts to which FSTM students, employees, instructors, and those working on behalf of FSTM are not authorized; circumventing user authentication on any device; or sniffing network traffic.
- Causing a disruption of service to either FSTM or other network resources, including, but not limited to, ICMP floods, packet spoofing, denial of service, heap or buffer overflows, and forged routing information for malicious purposes.
- Introducing honeypots, honeynets, or similar technology on the FSTM network.
- Violating copyright law, including, but not limited to, illegally duplicating or transmitting copyrighted pictures, music, video, and software.
- Exporting or importing software, technical information, encryption software, or technology in violation of international or regional export control laws.

- Use of the Internet or FSTM network that violates FSTM policies, or local laws.
- Intentionally introducing malicious code, including, but not limited to, viruses, worms, Trojan horses, e-mail bombs, spyware, adware, and keyloggers.
- Port scanning or security scanning on a production network unless authorized in advance by Information Security.

## CLINICAL LEARNING

## Clinical Overview

Clinical Lab typically begins in year one, term two of the program and includes hands-on experience at clinical sites with health care practitioners and patients. Requirements for Clinical Lab registration can be referenced in the FSTM Catalog. Students gradually increase Clinical Lab credits and hours as they advance throughout the midwifery program. Students will document all clinical hours spent at their clinical site, as well as clinical experiences including births, prenatal exams, postpartum exams, and newborn exams. Each student will be evaluated every semester by their preceptor and students will meet with the Clinical Director at least once per semester to discuss progress with skills and clinical experiences.

Students are encouraged to participate in a variety of clinical settings including home birth practices, birth centers, clinics, and hospitals. The goal is to provide the student with ample experiences with midwifery and obstetrics care.

Our program is designed to integrate the academic and clinical components concurrently. Students attend campus academic classes two days per week on average and participate in weekly clinic and on-call time with their preceptors through their clinical site. In the first two academic semesters students will gain theory knowledge, basic hands-on skills, and preparation for participation in the midwifery clinical setting through the Healthcare Skills I and Healthcare Skills II courses. Midwifery Practicum courses begin in the second year of the program and are designed for review and practice of skills covered in the corresponding theory courses so that students will be able to apply these skills at their clinical sites with quidance from their preceptors.

# Required Clinical Equipment

The following equipment will be needed to participate in Clinical Lab:

- Blood pressure cuff and stethoscope
- Watch with a second hand
- A dependable vehicle

- Cell phone with voicemail (smartphone preferred)
- Computer/internet access for documenting clinical experiences
- A birth bag packed and ready at all times (suggested items are clothes for birth and clinic, appropriate footwear, food/water, toiletries, and cell phone charger)
- Scrubs may be required for certain clinical sites

## Clinical Placement Process

Students are assigned to work directly with a qualified Preceptor or Clinical Observation Site. These include Florida Licensed Midwives, Certified Nurse Midwives, Registered Nurses, or physicians who work in home birth practices, birth centers, women's health facilities, and hospital settings. Clinical experiences may include attending prenatal and postpartum appointments, participation during labor and birth, participation and observation in pregnancy related services, and learning office procedures for various practices. Students will progress through a tiered process of observation, assistance under supervision, and primary under supervision in the antepartum, intrapartum and postpartum period.

Students may obtain clinical experience in two types of settings:

- Clinical Observation Sites
  - Receive clinical clock hours
  - Serve as "Silent Observer" (see below, "Clinical Experience")
  - May work with a variety of health care practitioners and newly licensed midwives referred to as "mentors"
- Clinical Preceptor Sites
  - Receive clinical clock hours
  - Serve as "Silent Observer," "Assistant Under Supervision" or "Primary Under Supervision" (see below, "Clinical Experience")
  - Preceptors are physicians, licensed midwives, or certified nurse midwives who
    have a minimum of 3 years' professional experience, and who direct, teach,
    supervise, and evaluate the learning experiences of the student midwife

The Clinical Director facilitates placement of students at clinical sites. A student's Clinical Profile (see below) is distributed to preceptors that the student is interested in being placed with. Prior to clinical placement, multiple students may meet/interview with a single preceptor/mentor who then selects the student(s) they are interested in working with. FSTM does its best to place students at their preferred sites and within their current communities, but assignment is dependent upon a number of factors including availability

of sites in a community, number of students seeking placement at a given site, and student experience level.

In the event that students cannot be placed at a site within their own community, they may be required to commute or relocate in order to attend clinic. Students are responsible for the costs related to travel, room and board related to clinical lab/preceptor sites. Students must have reliable transportation while on call and must be accessible by telephone.

Clinical placement is assigned on a per semester basis. A Semester Agreement shall be signed by the student, Preceptor, and Clinical Director at the beginning of each semester. Students and Preceptors satisfied with their arrangement may continue to work together for the duration of the program; however, it is encouraged for students to gain experience with more than one Preceptor for exposure to varying practice styles. Students are required to attend a requisite number of births in both hospital and home settings.

Students are not permitted to change clinical sites without the Clinical Director's approval. Unauthorized changes in clinical site will result in denial of clinical experiences received at the unapproved site, placement on a Performance Plan, and/or clinical probation.

# Experience in the Clinical Setting

All clinical requirements are in compliance with Chapter 467, Florida Statute, the Commission for Independent Education, the North American Registry of Midwives (NARM), 40 and the Midwifery Education Accreditation Council (MEAC). Students shall abide by the clinical site's personnel policies, protocols, and contracts as deemed by the Preceptor.

# Definition of clinical experience roles:

- Observer: Students are introduced to antepartum, intrapartum, postpartum, and newborn skills at the clinical site. Students observe or assist in a role that meets their skill level. The observer role is one of learning and observation, beginning to explore the relationship between theoretical knowledge of skills and practical application. Five Silent Observer experiences do not require an FSTM-approved Preceptor and can be approved in observation-only clinical sites.
- Assistant Under Supervision: Students are developing antepartum, intrapartum, postpartum, and newborn skills at the clinical site. Students assist the primary midwife, providing supportive care that helps to develop critical thinking and other clinical skills, but does not yet apply those skills consistently or proficiently. They may be beginning to make management decisions, but may not yet be consistently using best practice.
- **Primary Under Supervision\***: Students are proficient in antepartum, intrapartum, postpartum, and newborn skills at the clinical site. Students act as primary midwife under the supervision of an FSTM-approved Preceptor. Students apply theoretical

knowledge to practice and demonstrate the ability to consistently and correctly make management decisions regarding client/patient care.

\*Note: Only one student can assume the Primary Under Supervision role at a clinical experience. If two students are present, they may not "co-manage." However, one student may take the Assistant Under Supervision/Observation role (see above) and one may take the Primary Under Supervision role, or two students may take the Assistant Under Supervision/Observation role.

## Clinical Documentation

## Semester Agreement:

Students will submit a Semester Agreement for each term they are enrolled in Clinical Lab and for each preceptor they are assigned to. Students are not required to complete a semester agreement when they are participating in first-term observation rotations. The semester agreement should be signed and initialed by the student and preceptor.

Students may not attend clinic unless a current agreement has been sent to the program team. Clinical hours and experiences may not be counted until the completed agreement is received by the program team

# Clinical Hours Log

Each Clinical Lab credit is equivalent to 60 clock hours. Students will document clinical hours on the Clinical Hours Log and will submit a final and signed version at the end of each semester. The total number of hours submitted must be equivalent to or exceed the number of clock hours associated with the number of Clinical Lab credits for which the student has registered. As an example, if the student has registered for two credits of Clinical Lab, they must show documentation of at least 120 Clinical Lab clock hours. Students may not include driving time to or from clinic and births on the Clinical Hours Log. Students at risk for not obtaining the minimum number of clinical hours in a semester may obtain hours in additional settings at the discretion of the Clinical Director.

# Clinical Experience Tracking System

Students are required to submit clinical experience forms to the clinical director using our online clinical experience tracking system, Clinical BirthTree. Students should document all clinical visits at the end of the clinic day and birth experiences soon after client discharge. This is consistent with good midwifery charting practice. Forms submitted more than 30 days after the clinical experience date will be subject to further review and may not be approved by the Clinical Director. FSTM may conduct audits of student's clinical experience in BirthTree as needed. In the event that there is a dispute regarding the student's

participation at an experience, FSTM may request records from the preceptor (with data redacted as necessary) in order to determine the student's presence or participation.

## **BLS/NRP**

To participate in Clinical Lab, FSTM requires current certification of:

- BLS (Basic Life Support) for Healthcare Providers. No other CPR classes may be substituted for BLS.
- NRP (Neonatal Resuscitation Program)

Current BLS for Healthcare Providers and NRP certifications must be maintained for all semesters in which a student is enrolled in Clinical Lab. Standard renewal is every 2 years. The student is responsible for the fees and scheduling of these trainings and must maintain proof of certification in both BLS and NRP on file at FSTM. If certifications lapse while enrolled in Clinical Lab, students must discontinue attending all clinical experiences until they renew certifications. This could result in a student failing a semester of Clinical Lab, if it is not resolved.

# Law and Rule at Preceptor Sites

Students shall review and abide by Florida law governing midwifery practice detailed by Florida Statute 467 and Florida Administrative Code 64B24.

The unlicensed practice of midwifery in the state of Florida is a felony (FS. 467.201). The student must, at all times, function within the student/preceptor relationship and the provisions of Chapter 467, Florida Law and Rule. If a student is asked to perform clinical duties outside of the scope of practice of Florida Statute/Administrative Code, the student shall decline and notify the Clinical Director within 24 hours.

While enrolled at FSTM, the student agrees not to be present at a birth or clinical experience or to perform midwifery or medical services without the physical presence of a supervising FSTM-approved preceptor. Any student practicing midwifery in the birth or clinical setting without the presence and supervision of an FSTM-approved preceptor, except in the case of an emergency, is in violation of Florida Statute 467.201, an act that constitutes a felony of the third degree. Violation of this statute will result in immediate dismissal from the program.

# Risk Management and Incident Reporting

A 'Clinical Incident' is any clinical situation where the possibility exists that the school could be named in an insurance claim or lawsuit, even when the practitioner is not at fault or when the incident resolves favorably. Some examples of events that students might report include (but are not limited to): shoulder dystocia, hemorrhage resulting in a hospital transfer, infection or allergic reaction, or neonatal resuscitation. It is preferred that students

submit incident reports that are unnecessary, rather than not having one on file in the case of a problem.

#### Incident Reporting Procedure:

- 1) When an incident occurs, the student shall call the Clinical Director within 24 hours. If the Clinical Director is not available the student or preceptor should contact the Executive Director or Associate Director. Do not write any description of the incident or refer to the incident in an email or social media forum.
- 2) Complete the Incident Report Form. This form is available for download in the 'Student Documents' section of Sycamore. Statements on the Incident Report should be strictly factual.
- 3) When the Incident Report Form is completed, send it via US mail or hand deliver to the Clinical Director within one week of the incident. Do not fax or email.
- 4) The student should not discuss the incident with other students or faculty. Students are further advised to avoid making statements while in a highly emotional state. The student is encouraged to seek the advice of the Clinical Director as early as possible.
- 5) An incident may not be discussed in private email at any time. Reporting or discussing any incident, other than in the incident report, must occur by telephone.
- 6) If the student or preceptor has a question about whether an incident merits reporting, please contact the Clinical Director.

# **CAMPUS INFO & SAFETY - GAINESVILLE**

Policies and discussion about access to campus, general security considerations used in the maintenance of the building, how FSTM keeps its buildings secured, and how individuals are prevented from gaining access to these buildings.

# FSTM Gainesville Campus - 810 East University Avenue

The Florida School of Traditional Midwifery is located in the historic Howard-Kelley House, which was built in 1883. The house was restored under the expert supervision of Mary Barrow and received the Florida Trust for Historic Preservation Adaptive Use Award for the State of Florida in 1987. Dr. Mark Barrow, a retired cardiologist, and his wife Mary, were delighted to assist the Florida School of Traditional Midwifery with



the purchase of the mansion for use as a midwifery school and birth center in the spring of 2004. This charming Victorian mansion is the perfect backdrop for midwifery in North Central Florida.

The FSTM Gainesville campus includes two classrooms equipped with learning technology, a Health Sciences Lab, a Clinical Skills Lab, a spacious student lounge and kitchen facility, a student library, offices for staff and faculty, and a wrap-around porch. FSTM adheres to all required building, fire, safety, and sanitation regulations. Additional information is available to students upon request.

## Access to Campus

The campus has five entrances/exits on the first floor of the building. Students are to enter and exit the school through the front door that faces University Avenue, the side door that faces NE 8<sup>th</sup> Street, or through the student kitchen entrance that is located on the Southeast side of the building off of the front porch. There is an after-hours or emergency exit located upstairs next to the bathroom. This door locks automatically upon closing. This exit is to be used when the building has been secured for the night if students are on campus with an instructor.

# Parking on Campus

Student parking is located in the front parking lot and the east parking lot and along NE 8th Street. Students should be considerate of neighbors' driveways, etc. and should not park within 20 feet of the stop sign. Extra parking is available one block west at the Kirby Smith Center.

# Keeping Campus Secure

The safety and wellbeing of our students, staff, faculty, and volunteers/guests are of utmost importance. FSTM provides students, faculty and visitors with information on safety, security procedures, policies and resources available and asks that they cooperate in crime prevention.

To this end, the following policies apply to Campus Safety:

- Campus doors should remain locked at all times, except for the reception door facing 10th street.
- At no time should students, instructors, staff, volunteers, or guests prop open any automatically closing door with a door stop.
- Keys to the building or classrooms are signed out with the Business Coordinator and a log is kept to ensure that all keys are returned to the school in a timely manner. This is in adherence to the <u>Key Control Policy</u>.

• If there is a suspected or actual key that is lost or stolen, the owner of the key should contact the Business Coordinator immediately.

# Safety of Campus

The surrounding areas of the Gainesville campus is well-lit and well-maintained to ensure student safety. The back parking lot has two lighted poles. It is recommended that all students remain in a group while on campus and not be alone while walking to cars parked on the street. If there is a concern for student safety after hours, please contact the Executive Director at 863-632-2323 or call Gainesville Police Department at 352-393-7500.

## DRUG AND ALCOHOL POLICY

FSTM is committed to providing an environment free of the abuse and/or illegal use of alcohol and other drugs. FSTM has adopted policies and procedures that seek to prevent the illicit use or abuse of alcohol and drugs on campus.

#### Definitions

- 1. Alcohol any beverage containing more than one-half of one percent of alcohol by volume, which is capable of use for beverage purposes, either alone or when diluted.
- 2. Alcohol abuse the excessive use of alcohol in a manner that interferes with (1) physical or psychological functioning; (2) social adaptation; (3) educational performance or (4) occupational functioning.
- 3. Controlled substance a substance listed in schedules I through V of the Controlled Substances Act (21 U.S.C.A. 812) or whose possession, sale or delivery results in criminal sanctions. In general, controlled substances include all prescription drugs, as well as those substances for which there is no generally accepted medicinal use (e.g., heroin, LSD, marijuana, etc.), and substances that possess a chemical structure similar to that of a controlled substance (e.g., designer drugs). The term does not include alcohol.
- 4. Criminal drug statute a criminal statute involving the manufacture, distribution, dispensation, use or possession of any controlled substance.
- 5. Criminal drug statute conviction a finding of guilt (including a plea of nolo contendere) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the state or federal criminal drug statutes.
- 6. Drugs or other controlled substances any substances capable of altering an individual's mood, perception, pain level or judgment.
- 7. Employee in a sensitive position an employee who has been granted access to classified information or an employee in another position determined by appropriate

- administrative personnel to involve national security, health or safety concerns, or functions requiring a high degree of trust and confidence.
- 8. Illicit drug or chemical substance (a) any drug or chemical substance, the manufacture, distribution, dispensation, use or possession of which is illegal under any state or federal law or (b) one that is legally obtainable but has not been legally obtained. The term includes prescribed drugs not legally obtained and prescribed drugs not being used for prescribed purposes.
- 9. Prescribed drug any substance prescribed for individual consumption by a licensed medical practitioner. It includes only drugs that have been legally obtained and are being used for the purpose for which they were prescribed or manufactured.
- 10. Reasonable suspicion –will be established by (1) observation of the actions/behaviors of the individual; (2) a supervisor or other reliable individual witnessing possession or use; or (3) any other legal measure used for alcohol or drug detection.
- 11. Sanctions may include completion of an appropriate rehabilitation or assistance program, suspension or expulsion from school, suspension or termination from employment, other disciplinary action or referral to authorities for prosecution. If an employee has been convicted of a criminal drug statute, sanctions must be imposed within 30 days.
- 12. Workplace a site for the performance of work at which employees are prohibited from engaging in the unlawful manufacture, distribution, dispensation, use or possession of a controlled substance.

### Right to Test for Drugs and/or Alcohol

FSTM reserves the right to test for drugs and/or alcohol those students who could reasonably be suspected of drug or alcohol abuse, based on appearance, smell, speech, irrational or unusual behavior, or carelessness or disregard for the safety of others. This suspicion may be raised by students, faculty, staff, preceptors, or other concerned parties. Urine or blood samples would be obtained under the supervision of an appropriate health care professional. Results of any drug/alcohol test may be shared with the members of the Administrative Team and may result in disciplinary actions up to and including dismissal. The drug/alcohol tests will not be conducted if an individual refuses to submit; however, refusal to submit may result in immediate referral to the Administrative Team for dismissal. To be under the influence of drugs or alcohol while providing patient care could jeopardize the health and safety of clients and would be a prime cause for the Administrative Team to recommend dismissal.

#### Health and Behavioral Risks

The negative physical and mental effects of the use of alcohol and other drugs are well documented. Use of these drugs may cause: blackouts, poisoning, and overdose; physical and psychological dependence; damage to vital organs such as the brain, heart, and liver; inability to learn and remember information; and psychological problems including depression, psychosis, and severe anxiety. Risks associated with specific drugs are described later in this section. Impaired judgment and coordination resulting from the use of alcohol and other drugs are associated with acquaintance assault and rape; DUI/DWI arrests; hazing; falls, drownings, and other injuries; contracting sexually-transmitted infections including HIV; and unwanted or unplanned sexual experiences and pregnancy.

The substance abuse of family members and friends may also be of concern to individuals. Patterns of risk-taking behavior and dependency not only interfere in the lives of the abusers, but can also have a negative impact on the affected students' academic work, emotional well-being, and adjustment to school life.

This Drug and Alcohol Abuse Prevention policy is posted on the FSTM website for electronic access. The policy includes information on the dangers of drug and alcohol abuse and prevention of the same, with further information on sanctions for violations of FSTM regulations as well as federal and state statutes.

On-campus counseling services for students is not currently available to students who need drug and alcohol counseling, treatment, or recovery services, but FSTM fully supports students in utilizing the resources and materials contained in the <u>Confidential Assistance</u> <u>link here</u>. In addition, students are encouraged to utilize the national resources below.

#### National Resources:

- Substance Abuse and Mental Health Services Administration (SAMHSA): Students can use this help service for "365-day-a-year treatment referral and information service. Students and employees can also call 1-800-662-4357
- SAMHSA Online Treatment Locator: By putting in their zip code, students can be provided information and treatment facilities anonymously.

#### Standard of Conduct

The unlawful possession, use, or distribution of drugs and alcohol is prohibited on property owned or controlled by FSTM. No employee or student is to report to work, class, or a clinical site while under the influence of illegal drugs or alcohol.

As primary providers of obstetrical care, licensed midwives and their students must adhere to a high standard of conduct as it relates to drugs and alcohol. Impairment as a healthcare provider is subject to Florida law and rules that explicitly prohibit practicing midwifery while impaired.

The FSTM Alcohol Standards of Conduct are:

- Do not violate the underage drinking laws of the State of Florida through
  - o Possessing, consuming alcoholic beverages if you are younger than 21
  - Selling, furnishing, giving, serving, or producing alcoholic beverages to any person younger than 21
  - Misrepresenting or mistaking your age or the age of any other person to induce anyone to provide alcohol to anyone younger than 21
- Do not sell, intend to sell, alcohol without a proper license
- Do not operate a motor vehicle while under the influence of alcohol
- Do not be intoxicated in public
- Do not have an open house party where minors may possess or consume alcohol
- Do not attend a class, function, clinical experience, or meeting conducted by FSTM that is intended for educational purposes while under the influence of alcohol

### Legal Aspects and Consequences

Faculty, staff, and students of FSTM are expected to abide by local, state and federal laws and campus regulations pertaining to controlled substances and alcohol possession/consumption. More specifically, FSTM prohibits "manufacturing, possessing, having under control, selling, transmitting, using or being party thereto to any illegal drug, controlled substance, drug paraphernalia, and alcohol on college premises or at FSTM-sponsored activities."

The term "controlled substance" when used in this context shall refer to those drugs and substances whose manufacture, possession, sale or delivery results in criminal sanctions under the <u>Florida Statutes</u>, <u>Chapter</u> 893, as well as substances which possess a chemical structure similar to that of a controlled substance.

Violation of the policies and laws described in this statement by an employee or student is grounds for disciplinary action, including reprimand, suspension, termination or expulsion. See conditions for dismissal in the FSTM course catalog policies and procedures. Additionally, a violation may be the reason for evaluation and treatment of a drug and/or alcohol-use disorder or referral for prosecution consistent with local, state, and federal criminal law. Disciplinary action by FSTM does not preclude the possibility of criminal charges. Conversely, the filing of criminal charges does not preclude action by FSTM.

### FSTM and Legal Sanctions for Alcohol

Any criminal violation of the Florida alcohol laws may result in criminal prosecution. Criminal prosecution may include incarceration, criminal probation, fines, and court costs. The Alachua County Clerk of the Circuit Court addresses all criminal prosecutions and sanctions. Any employee or student determined to have violated FSTM policy or regulation with regard to the manufacture, distribution, possession, use, or sale of alcohol shall be subject to institutional disciplinary action for misconduct. Such violations of policy by any employee or student will be reason for evaluation or treatment for an alcohol use disorder or for institutional disciplinary action up to and including termination or expulsion.

#### Municipal and County Alcohol Ordinances (Gainesville)

Municipal and county ordinances prohibit the consumption or possession of alcoholic beverages in public parks or recreation areas or on any public school property. Local laws also forbid the possession of alcoholic beverages in open containers on any public street, thoroughfare, sidewalk, or any public or semi-public parking facility. The consumption of alcohol is prohibited during specific hours in clubs and certain premises open to the public. Penalties for violations of local laws regarding alcoholic beverages include fines of up to \$500 and/or imprisonment for terms of up to 60 days. See generally, Chapters 1 and 4, Gainesville City Ordinances; and Chapters 63, Alachua County Code.

#### State Alcohol Ordinances

Florida state law prohibits both the sale of alcoholic beverages to persons under 21 years old and the possession of alcohol by anyone under 21. It is unlawful for any person to misrepresent or misstate his or her age in order to procure alcoholic drinks. This includes the manufacture or use of false identification. Use of forged identification for the purpose of procuring alcoholic beverages is a felony. State law also makes it illegal to possess open containers of alcoholic beverages or consume alcohol in moving or standing vehicles. Under Florida law, driving under the influence of alcohol or any controlled chemical substance (DUI) is an offense evidenced by impairment of normal faculties or an unlawful blood or breath alcohol level of .08 or higher.

Depending on the severity and aggravating factors, violations of these state laws may be misdemeanors or felonies. Penalties range from community service, probation, treatment at an alcoholism treatment program, driver's license suspension or revocation, fines of thousands of dollars, and imprisonment of up to thirty years. See generally, Florida Statutes, Sections 316.193, 316.1936, 322.212 & 562.11.

#### Federal Alcohol Ordinances

At the Federal level, the regulation of alcoholic beverages generally is given over to State and local control.

### Legal Sanctions for Controlled Substances

Under state law, it is a crime for any person to possess or distribute controlled substances/drugs as described in Section 893.03, Florida Statutes, except as authorized by

law. Punishment for such crimes ranges from first-degree misdemeanors (up to one-year imprisonment and up to a \$1,000 fine) to first-degree felonies (up to 30 years imprisonment and up to a \$10,000 fine).

Individuals who have been convicted of a felony involving the sale of or trafficking in or conspiracy to sell or traffic in, a controlled substance under certain circumstances may be disqualified from applying for state employment. Penalties under federal law for drug trafficking generally are greater than penalties under state law. Convictions on drug-related charges also may result in disqualification for federal financial aid. Punishments may include a fine of up to \$8 million and life imprisonment. **All criminal convictions must be disclosed and explained when applying for your midwifery license**.

#### Municipal and County Controlled Substances Ordinances (Gainesville)

City and county laws prohibit the possession or consumption of illegal drugs or intoxicating substances in public parks. See Chapter 18, Gainesville City Ordinances; and Chapter 76, Alachua County Code.

#### State Controlled Substances Law & Rule

In Florida it is a crime to possess, manufacture, deliver, sell, or possess with the intent to sell certain controlled substances, including illicit drugs such as cannabis (marihuana), cocaine, and opium. Trafficking in illegal drugs constitutes a felony. It is a felony to sell, purchase, manufacture or deliver, or possess with the intent to sell, purchase, manufacture, or deliver, a controlled substance in, or within 1,000 feet of the real property comprising a public or private elementary, middle, secondary school, community, or state School or university. Felony level penalties include substantial terms of imprisonment, civil fines, and civil forfeiture of all real or personal property used in the illegal activity or obtained with the proceeds of the illegal activity. See generally, Florida Statutes, Chapter 893.

#### Federal Controlled Substances

Federal: Federal law penalizes the unlawful manufacturing, distribution, use, sale, and possession of controlled substances. The penalties vary based on many factors, including the type and amount of the drug involved, and whether there is intent to distribute. Federal law sets penalties for first offenses ranging from less than one year to life imprisonment and/or fines up to \$10 million. Penalties may include forfeiture of property, including vehicles used to possess, transport, or conceal a controlled substance; the denial of professional licenses or Federal benefits, such as student loans, grants, and contracts; successful completion of a drug treatment program; community service; and ineligibility to receive or purchase a firearm. Federal law holds that any person who distributes, possesses with intent to distribute, or manufactures a controlled substance on or within one thousand feet of an educational facility is subject to a doubling of the applicable maximum

punishments and fines. See "Controlled Substances Act" 21 USC 800 et seq., Part D "Offenses and Penalties."

### Impaired Student Policy

It is the FSTM policy to encourage an environment that is free of substance abuse by students, faculty and staff. Because of the clinical nature of midwifery, it is critical that students, faculty and staff refrain from the following:

- A. Unlawful possession, use, purchase, or attempted purchase of drugs, narcotics, or controlled substances even if obtained legally by prescription.
- B. Unlawful manufacture, distribution, or intended distribution of drugs, narcotics, or controlled substances.
- C. Misuse or misappropriation of any prescription, even if obtained illegally, or over-the-counter mediation.
- D. Knowingly being in the presence of illegal use of a drug, prescription drug, narcotic, or controlled substance.
- E. Disrupting the campus or clinical site, or off-campus community or engaging in any policy violation while under the influence of a drug, controlled substance obtained by legal prescription, or narcotic.

When a student is suspected of violating the policy above, the following procedure will be enacted. It is the goal to protect the students, those in attendance at clinical sites (preceptors, patients/clients) from the harm that an impaired student may cause. Other goals include:

- Providing effective and compassionate assistance to the impaired students before irreversible harm is done to their health, educational process, eligibility for licensure, or ability to function competently upon successful graduation.
- Providing an avenue by which the impaired student may request and be provided with professional resources without stigma or penalty, which also encourages personal responsibility.
- Enabling the impaired student to confront their problem and, where feasible, receive effective redirection with minimal disruption of the student's education.
- Providing a means to protect other students' educations by preventing disruption and off-task behavior due to a violation of the Policy above.

### Counseling and Treatment Programs

The School encourages individuals with alcohol or other drug-related problems to seek assistance. If a student is enrolled in or seeks counseling for alcohol or other drug-related problems, he/she is required to discuss the situation with the Executive Director, Program Director, or Clinical Director to formulate a plan for support during the educational process.

Access this link for Confidential Assistance for FSTM students, faculty and staff members.

# SEXUAL ASSAULT, DOMESTIC VIOLENCE, DATING VIOLENCE, AND STALKING PREVENTION POLICIES

#### Overview

FSTM unequivocally states that all forms of sexual assault are unacceptable. This includes intimate partner violence, dating violence, sexual assault, or stalking. FSTM endorses a reporting policy that strongly encourages victims to report all crimes to local police at once. Reporting of a crime ensures that appropriate action can be taken. FSTM is committed to establishing a safe campus where people can learn to be a midwife in an atmosphere free of unwelcome and unwanted sexual criminal offenses or violence. Safety and security measures are provided at New Student Orientation and at the time of new employee onboarding. Any changes to these policies will be provided to students through email or posting on the FSTM website.

### Expectations

No FSTM student, employee, instructor, or guest may commit or attempt domestic violence, dating violence, a sexual assault or battery, or stalking against any FSTM student, employee, instructor, or guest on an FSTM campus or at any FSTM-sponsored or supervised event. If such behavior occurs, in addition to the criminal or civil actions which may be pending or are already in process, FSTM will take separate disciplinary action against any student believed to have committed or attempted any sexual crime described in Florida Statute 794.011, 784.046, 741.28, 784.048, or as defined by Federal law:

- 1. Domestic violence
- 2. Dating violence
- 3. Sexual Assault
- 4. Stalking

#### Domestic Violence

Domestic violence is described as any felony or misdemeanor violent crime committed (1) by a current or former spouse or intimate partner of the victim, (2) by a person with whom the victim shares a child, (3) by a person cohabitating or who has cohabitated with the victim as a spouse or a intimate partner, (4) by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction in which the crime of violence occurred, or (5) by any other person against an adult youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction in which the crime of violence has occurred.

### **Dating Violence**

Violence committed by a person who is or has been in a social relationship of a romantic or intimate nature with the victim. The existence of such a relationship shall be determined by the victim with consideration of the length of the relationship, the type of relationship, and the frequency of interaction between the persons involved in the relationship. For the purpose of this definition – dating violence includes sexual or physical abuse or the threat of such abuse. Dating violence does not include acts covered under the definition of domestic violence.

#### Sexual Assault

Physical sexual acts perpetrated against a person's will or when a person is incapable of giving consent (for example, due to the the person's age or use of drugs or alcohol, or because an intellectual or other disability prevents the person from having the capacity to give consent). This includes, but is not limited to rape, fondling, incest, statutory rape, or any other nonconsensual sexual act. For the purposes of complying with the requirements of this section, any incident meeting this definition is considered a crime for the purpose of Clery Act reporting.

### Stalking

Engaging in a course of conduct directed at a specific person that would cause a reasonable person to – (1) Fear for his or her safety or the safety of others; or (2) Suffer substantial emotional distress. For the purpose of this definition-- indirectly, or through third parties, by any action, method, device, or means follows, monitors, observes, surveils, threatens, or communicates to or about, a person, or interferes with a person's property. Substantial emotional distress means significant mental suffering or anguish that may, but does not necessarily, require medical or other professional treatment or counseling. Reasonable person means a reasonable person in the victim's circumstances. FSTM uses the State of Florida Definition of "Consent" as contained in Florida Statutes (F.S.) 794.011 (1)

(a) "Consent" shall not be deemed or construed to mean the failure by the alleged victim to offer physical resistance to the offender.

For the purposes of complying with the requirements of this section, any incident meeting this definition is considered a crime for the purpose of Clery Act reporting.

### If You Are Sexually Assaulted

If you are sexually assaulted, you should take the following actions:

- Go to a safe place.
- Call the police or 911 and get immediate medical attention.
- Contact a trusted friend or family member.
- Do not bathe or douche. If possible, do not urinate.
- Do not eat, drink, smoke or brush your teeth if oral contact was made.
- Keep clothes worn during the offense. If you remove them, place them in a paper bag.
- Do not destroy or move any physical evidence that may be in the vicinity of the crime.
- Tell someone and/or write down the details of the assault as soon as possible.
- Seek counseling services from Victim Services & Rape Crisis Center of Alachua County 1-866-252-5439, or the Rape Hotline (RAINN Hotline) 1-800-656-4673

### Getting Help

- Resources include:
  - The Gainesville Police Department
  - Alachua County Sheriff's Office Victim Services
  - o Alachua County Victim Services And Rape Crisis Center
  - Peaceful Paths
  - o The Alachua County Crisis Center
  - o North Florida Regional Medical Center Emergency Center
- Five basic things to know:
  - o 1. You are not alone.
  - o 2. The abuse is not your fault.

- o 3. You deserve to live in a safe environment.
- 4. There are resources to help.
- 5. Hope can happen here.
- Please reference the FSTM Annual Security Report for more detailed information about the above organizations or call the Executive Director, Program Director, Clinical Director, or Academic Dean.

### Reporting Procedures and Confidentiality

FSTM will always maintain the confidentiality of all student information. If a sexual crime is reported to FSTM administrative staff, staff will provide all options for the reporting of the crime to the victim, including the following:

- 1. Notifying law enforcement.
- 2. Be helped by FSTM staff in notifying law enforcement if the victim chooses
- 3. Decline to notify law enforcement
- 4. Provide information when applicable rights of victim to obtain "no contact orders," restraining orders, or similar lawful orders

FSTM will always comply with recordkeeping that protects the names of the victim as required by law.

FSTM staff encourages the victim to seek out proper medical attention and to protect evidence (see above). Victims of any crime may be referred for counseling to Victim Services & Rape Crisis Center of Alachua County, 1-866-252-5439.

Students who have been the victims of sexual assault, stalking, domestic violence, dating violence may be given academic accommodations within the ability of the school to do so.

### Prohibition on Retaliation

FSTM maintains an atmosphere of open dialogue, safety, and expression, including the promotion of good faith filing of a grievance, complaint, or report by employees and students of violations of law, rule, regulation, policy, or other misconduct. FSTM does not tolerate retaliation, retribution, or reprisals against an employee or student who submitted such a good faith filing. Employees and students who learn of retaliation should report it immediately to the Executive Director. See the Whistleblower Policy for more information.

Students who engage in retaliation in violation of the Whistleblower Policy will be referred to the Executive Director for engagement in the Student Code of Conduct process.

An FSTM student who believes they may have been retaliated against, as a result of filing a grievance, complaint, or report of violations of law, rule, regulation, policy, or other misconduct, should immediately report the retaliation to the Executive Director or Program Director. An appropriate, timely review and response will be provided to an employee or student who alleges retaliation.

### Procedures for Disciplinary Actions

These steps provide highlights for the complete procedure for disciplinary action for alleged student violations. All alleged violations of the FSTM Student Code of Conduct will be referred to the Executive Director. All alleged violations (dating violence, domestic violence, stalking, sexual assault) follow the same procedures, regardless of the type of allegation.

- 1. Receipt of complaint
- 2. Investigation
- 3. Hearing Process
- 4. Written Determination
- 5. Appeal
- 6. Disciplinary Sanctions

Please see the Annual Security Report for more information on this process.

### Incidences of Sexual Assault on Campus

Any report of sexual assault on the FSTM campus will immediately be investigated. If evidence of an offense is presented, the investigation will immediately be provided to the local law enforcement. If there is an incident of sexual assault, domestic violence, dating violence or stalking on the FSTM campus, disciplinary actions will immediately be taken.

There will be a prompt and fair disciplinary inquiry during which students or employees will have the opportunity to present information, be accompanied by an advisor of their choice, and be given timely access to information that will be used during the disciplinary inquiries. The officials that engage in the inquiry will have training specific to VAWA violations, protecting the victim's safety and promoting accountability; will be fair and unbiased; and will promptly return with a report upon completion of the inquiry. Both students (or employees) are notified of the decision. All this will be conducted in compliance with FERPA.

Students or employees may challenge a disciplinary inquiry finding by using the Grievance Process found in the Catalog.

Any student found to be guilty of perpetrating any sexual or criminal offense will be immediately expelled from the school. Any employee, instructor, preceptor, or person otherwise involved with FSTM who is found to have committed any sexual or criminal offense will be immediately terminated.

### Victim Protections and Supports

Victims of violence will be provided the following to the extent feasible:

- Freedom from intimidation and harassment on campus after the reporting of an alleged incident including, but not limited to, reassignments within the residence halls and changes of course sections to ensure the student victim's academic and living situation are considered after an alleged sex offense has occurred;
- Information describing both the criminal and campus conduct processes; Information concerning the status of the case as it proceeds through the process;
- Information concerning the availability of counseling and medical services off campus as well as academic assistance aimed at retaining the victim as a member of the FSTM community;
- Treatment in a dignified and compassionate manner by representatives of the FSTM community;
- Ability to remain present throughout the evidentiary portion of the conduct hearing;
- Presence of a person who agrees to accompany the victim throughout any investigation or campus conduct proceeding for the purpose of providing support and/or serving as an advisor;
- In cases of sexual assault/abuse or relationship violence, the ability to testify from another room provided that it does not interfere with the accused party's right to question the complaining party or a witness;
- Ability to submit proposed questions for all witnesses in advance of the hearing with the understanding that the hearing officer/chair will determine the appropriate questions to be asked;
- Exclusion of previous, unrelated sexual behavior from the student conduct hearing;
- Submission of a written impact statement to the hearing body to be considered during sanctioning, if the charged student is found responsible;
- Creation of a sensitive environment for the victim throughout the campus conduct process.

In all cases handled by the FSTM's conduct process, both the complaining party and the accused party are entitled to the same opportunities to have others present during a disciplinary proceeding, and both the complaining party and the accused party shall be informed of the outcome of the disciplinary proceeding if requested. These procedures are also required to be followed by FSTM as outlined in federal law and do not constitute a violation of the Family Educational Rights and Privacy Act (FERPA).

#### Risk Reduction

With no intent to victim blame and recognizing that only rapists are responsible for rape, the following are some strategies to reduce one's risk of sexual assault or harassment (taken from Rape, Abuse, & Incest Nation Network, www. rainn.org)

- 1. Be aware of your surroundings. Knowing where you are and who is around you may help you to find a way to get out of a bad situation.
- 2. Try to avoid isolated areas. It is more difficult to get help if no one is around. Walk with purpose. Even if you don't know where you are going, act like you do.
- 3. Walk with purpose. Even if you don't know where you are going, act like you do.
- 4. Try not to load yourself down with packages or bags as this can make you appear more vulnerable
- 5. Make sure your cell phone is with you at all times and charged.
- 6. Have cash available for emergency situations or transportation needs.
- 7. Don't allow yourself to be isolated with someone you don't trust or someone you don't know.
- 8. Avoid putting music headphones in both ears so that you can be more aware of your surroundings, especially if you are walking alone.
- 9. When you go to a social gathering, go with a group of friends. Arrive together, check in with each other throughout the evening, and leave together. Knowing where you are and who is around you may help you to find a way out of a bad situation.
- 10. Trust your instincts. If you feel unsafe in any situation, trust that feeling. If you see something suspicious, contact law enforcement immediately (local authorities can be reached by calling 911 in most areas of the U.S.).
- 11. Don't leave your drink unattended while talking, dancing, using the restroom, or making a phone call. If you've left your drink alone, just get a new one.
- 12. Don't accept drinks from people you don't know or trust. If you choose to accept a drink, go with the person to the bar to order it, watch it being poured, and carry it yourself. At parties, don't drink from the punch bowls or other large, common open containers.
- 13. Watch out for your friends, and vice versa. If a friend seems out of it, is way too intoxicated for the amount of alcohol they've had, or is acting out of character, get him or her to a safe place immediately.
- 14. If you suspect you or a friend has been drugged, contact law enforcement immediately (local authorities can be reached by calling 911 in most areas of the U.S.).

- Be explicit with doctors so they can give you the correct tests (you will need a urine test and possibly others).
- 15. If you need to get out of an uncomfortable or scary situation here are some things that you can try:
  - a. Remember that being in this situation is not your fault. You did not do anything wrong, it is the person who is making you uncomfortable that is to blame.
  - b. Be true to yourself. Don't feel obligated to do anything you don't want to do. "I don't want to" is always a good enough reason. Do what feels right to you and what you are comfortable with.
  - c. Have a code word with your friends or family so that if you don't feel comfortable you can call them and communicate your discomfort without the person you are with knowing. Your friends or family can then come to get you or make up an excuse for you to leave.
  - d. Lie. If you don't want to hurt the person's feelings it is better to lie and make up a reason to leave than to stay and be uncomfortable, scared, or worse. Some excuses you could use are: needing to take care of a friend or family member, not feeling well, having somewhere else that you need to be, etc.
- 16. Try to think of an escape route. How would you try to get out of the room? Where are the doors? Windows? Are there people around who might be able to help you? Is there an emergency phone nearby?
- 17. If you and/or the other person have been drinking, you can say that you would rather wait until you both have your full judgment before doing anything you may regret later.

### Bystander Information

FSTM maintains a position that "the only person responsible for committing sexual assault is a perpetrator" (RAINN, 2021). However, the FSTM community can help each other by looking out for everyone's safety. A bystander is a person who is present when an event takes place but isn't directly involved. In the circumstance of sexual assault, bystanders may be actually present during the assault, but not involved in the assault. Or bystanders could witness or participate in circumstances that lead up to sexual assault.

### Confusion of Bystanders

Many times, bystanders do not intervene in sexual assaults or the conditions leading up to sexual assaults for various reasons. For example, they might say that they didn't know what to do, or that it's not their business to intervene. They might assume that someone else will

do something. They sometimes don't know if they are safe to intervene or to help another person.

### Importance of Bystanders

Stepping in as a bystander is very important and can prevent a sexual assault from occuring. Sometimes bystanders try to avert the situation but are unsuccessful. However, by stepping in bystanders who intervene help to make people think about their own roles in sexual assault prevention.

### What Bystanders May Do

Bystanders play a critical role in helping to prevent sexual assault. Learning that intervention is important and critical is important. At FSTM, we have an obligation to help people and part of this help may be bystander intervention if it is safe to do so. RAINN recommends the following to play a bystander role in sexual assault prevention:

- 1. Create a distraction interrupt what is occurring. Create a diversion that breaks up the situation. This diversion can help the person who is at risk to get to a safer place.
- 2. Ask directly speak directly to the person who may be in trouble. You can ask them questions directly related to the situation, or ask them if they need you to remain with them.
- 3. Refer to an authority find a neutral party with some authority to change the circumstance. For example, you can find a security guard or an employee of the business. Never hesitate to call 911 if you are worried about safety.
- 4. Enlist others ask someone to accompany you if you are going to intervene. Or speak to the people who are with the person in trouble.

### Getting More Help

FSTM remains committed to providing victims with information regarding counseling, health, mental health, victim advocacy, legal assistance, visa and immigration issues, student financial aid, and other services at FSTM and in the community where the student lives and works. FSTM will support the student in identifying options for how to change academic and living circumstances, transportation, and working situations or protective measures. FSTM will make accommodations or protective measures if the victim needs them, if they are reasonably available. This support is offered regardless of the victim's choice to report to local law enforcement.

Other supportive measures are available to the complainant before or after filing a report without fee and as a non-punitive action. These may include counseling, extensions of deadlines, modifications of coursework, class schedules, changes in locations, leaves of absence, increased security measures. Any supportive measures remain confidential.

People who are trained to help can be reached by calling the National Sexual Assault Hotline at 800-656-4673 or by chatting online at online.rainn.org.

### Information about Registered Sexual Offenders and Predators

The Campus Sex Crimes Prevention Act (CSCPA) requires any person who is required to register under a state sex offender registration program to notify the state regarding which institutions of higher learning at which they work or attend school. They must also notify for each change in enrollment or employment status.

# Registered Sex Offender Database

Florida Department of Law Enforcement is required by law to put all registered sexual predators and offenders who qualify under the Florida Public Safety Information Act on the Internet. This information can be printed from the web page. For a search of registered sex offenders and sexual predators, please visit here.

### Dissemination of Information About VAWA

Every year, FSTM will provide information regarding sexual violence, including domestic violence, stalking, sexual assault, and dating violence to students, employees, instructors, and preceptors. This information will contain the following:

- 1. Resources for sexual violence awareness
- 2. Policy and procedure for reporting incidences of sexual violence
- 3. Information on notifying law enforcement about the sexual violence
- 4. Counseling services available for students, employees, and instructors

### **FSTM CRIME STATISTICS**

The FSTM Clery Act Crime Statistics Report which includes the statistics for the most recent three calendar years, includes the number of each crime required by the Clery Act within the Clery-identified geography and that have been reported to local police agencies.

These statistics are gathered for the following locations:

- On-campus buildings that are owned or leased by FSTM
- Non-campus buildings that are owned or leased by FSTM
- Public property, including parks, thoroughfares, sidewalks, and parking facilities immediately adjacent to the to and accessible from campus.

These statistics are gathered from the following:

- Communication with Gainesville Police Department
- FSTM reported crime log data (if applicable)

### REPORTED CRIMINAL OFFENSES

Criminal Offense	Year	Campus Building or Property	Non-Campus Building or Property	On Public Property	Total by Type
Murder/Non-Neglient	2020	0	0	0	0
Manslaughter	2019	0	0	0	0
	2018	0	0	0	0
Negligent Manslaughter	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0
Rape	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0
Fondling	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0
Statutory Rape	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0
Incest	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0
Robbery	2020	0	0	0	0

	2019	0	0	0	0
	2018	0	0	0	0
Aggravated Assault	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0
Burglary	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0
Motor Vehicle Theft	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0
Arson	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0
Violence Against Women (	VAWA) Cri	imes			
Domestic Violence	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0
Dating Violence	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0
Stalking	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0

	0000	_	0	_	0		
Unfounded Crimes (And therefore withheld from report)	2020	0	0	0	0		
	2019	0	0	0	0		
	2018	0	0	0	0		
Number of Arrests/Referrals - Select Offenses							
Liquor Law Violations							
Arrest	2020	0	0	0	0		
Referral	2020	0	0	0	0		
Arrest	2019	0	0	0	0		
Referral	2019	0	0	0	0		
Arrest	2018	0	0	0	0		
Referral	2018	0	0	0	0		
Drug Law Violations							
Arrest	2020	0	0	0	0		
Referral	2020	0	0	0	0		
Arrest	2019	0	0	0	0		
Referral	2019	0	0	0	0		
Arrest	2018	0	0	0	0		
Referral	2018	0	0	0	0		
Weapons Law Violations							
Arrest	2020	0	0	0	0		
Referral	2020	0	0	0	0		
Arrest	2019	0	0	0	0		
Referral	2019	0	0	0	0		
Arrest	2018	0	0	0	0		
Referral	2018	0	0	0	0		

Hate Crimes					
Larceny-theft	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0
Simple Assault	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0
Intimidation	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0
Destruction/Damage/Van dalism of Property	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0
Any Other Crime Involving Bodily Injury	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0

Number of Arrests/Referrals for Disciplinary Actions for Weapons Violations, Drug/Narcotic Violations, and Alcohol Violations

Arrests	Year	Campus Building or Property	Non-Campus Building or Property	On Public Property	Total by Type
Illegal Weapons Violations	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0

Drug Law Violations	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0
Liquor Law Violations	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0
Judicial Referrals	Year	Campus Building or Property	Non-Campus Building or Property	On Public Property	Total by Type
Illegal Weapons	2020	0	0	0	0
Violations	2019	0	0	0	0
	2018	0	0	0	0
Drug Law Violations	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0
Liquor Law Violations	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0

# **Hate Crime Statistics**

Hate Crime Bias	Year	Campus Building or Property	Non-Campus Building or Property	On Public Property	Total by Type
Race	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0
Gender	2020	0	0	0	0
	2019	0	0	0	0

	2018	0	0	0	0
Religion <sub>)</sub>	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0
Sexual Orientation	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0
Ethnicity	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0
Disability	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0
National Origin	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0
Gender Identity	2020	0	0	0	0
	2019	0	0	0	0
	2018	0	0	0	0

Hate crimes include the following: criminal homicide, murder and non-negligent manslaughter; and negligent manslaughter; sex offenses (rape, fondling, incest, and statutory rape); robbery; aggravated assault; burglary; motor vehicle theft; arson; domestic violence; dating violence; stalking, larceny-theft, simple assault, intimidation, and destruction, damage, or vandalism of property

### Maintenance of the Campus

If staff, students, instructors, or volunteers notice that there is concern about the safety of the facility, it is expected that they would immediately report any issue to any staff member, who will then report the issue to the Business Coordinator or his/her/their designee.

### Monitoring and Reporting of Criminal Activity

How to Report Crimes or Other Emergencies on Campus

FSTM community members are encouraged to promptly report known or suspected crimes to Gainesville Police Department. Any emergency involving a threat to life or property should be immediately reported by calling 911. All campus phones may be used to dial 911 at no charge. If 911 is activated, the caller should remain on the line until the dispatcher ends the call. Do not hang up.

After the emergency has resolved, report to the Campus Security Authority.

"Campus security authority" is a phrase from the Clery Act that defines who within FSTM must report Clery/VAWA crimes and incidents to the Executive Director. The following campus security authorities are:

- Any employee who has the responsibility for campus security, who monitors the entrances and exits into the institution.
- Any individual or organization that FSTM specifies as a person to whom to report criminal offenses.
- An official of an institution who has significant responsibility for student and campus activities

FSTM Campus Security Authorities:

- 1. Executive Director
- 2. Program Director
- 3. Academic Dean
- 4. Clinical Director

#### Reporting of Crime on Campus

All victims or witnesses of a crime have the right and responsibility to report crime on a voluntary, confidential basis for the purpose of including those statistics in the annual disclosure of crime statistics. Victims of crime or witnesses of crimes committed on campus or off campus should report the crime on a voluntary, confidential basis to FSTM.

To report criminal action or other emergencies on campus, students or employees should report to the following people:

- Executive Director
- Program Director
- Business Coordinator

#### Anonymous, Confidential and Voluntary Reporting Procedures

FSTM community members who have been a victim or a witness of a crime on the FSTM campus, but do not want to pursue action within the criminal justice system, may want to consider asking an FSTM administrative team member to file a report on the details of the incident without revealing their identity. As with an anonymous report, the purpose of a confidential report is to comply with the victim's wish to keep the matter confidential, while taking steps to enhance the future safety of the victim and others in the community.

This allows FSTM to maintain accurate records of incidents involving students, employees and visitors; determine where there is a pattern of crime with regard to a particular building location, method, or assailant; and alert the campus community to potential danger, thereby keeping FSTM safe. Reports filed in this manner are counted and disclosed as part of the FSTM's annual crime statistics.

#### Law Enforcement Agency Information

Gainesville Police Department: located at 545 NW 8th Ave, Gainesville, FL 32601

The Gainesville Police Department is the local police agency responsible for law enforcement at the Gainesville campus. If there is a crime committed, suspected, or a person is in fear for their life or property, they should immediately call 911 to report a crime.

For non-emergent issues, Gainesville Police Department can be reached by calling 352-393-7500.

After contacting emergency services and securing a safe place, please call the Executive Director at 863-632-2323.

#### **FSTM Expectations**

Each employee and student at FSTM is encouraged and expected to be vigilant and report all suspicious/criminal activity immediately to the school and the appropriate authorities. Members of the school community should immediately report a crime or emergency by calling 911 or by coming to the administrative office or to any faculty or staff member. By doing this, FSTM keeps FSTM safe.

#### **FSTM Actions**

When notified of any criminal activity, the FSTM employee will immediately report the activity to the local law enforcement agency, if not already reported. Finally, the FSTM Security Administrator must be informed so that appropriate actions can be tracked by FSTM. Please call 352-338-0766 if a situation arises.

#### **FSTM Notifications**

FSTM notifies the students, faculty, staff and volunteers of of a need for an immediate emergency response and evacuation procedures including the use of electronic and cellular communication (if appropriate), which does the following:

- 1. Immediately notify the campus community upon the confirmation of a significant emergency or dangerous situation involving an immediate threat to the health or safety of students or staff occurring on the campus, unless issuing a notification will compromise efforts to contain the emergency.
- 2. Publicize emergency response and evacuation procedures on an annual basis in a manner designed to reach students and staff.
- 3. Test emergency response and evacuation procedures on an annual basis and an as needed basis.

For immediate threats, the FSTM administrative office (specifically the Executive Director, Program Director, or Business Coordinator) will alert the FSTM community of any threats to the community through announcements directly in classes and through the campus-wide text alerting system. This system is embedded in Sycamore Campus and is tested once per year on July 1, 2021. Please see Section 4: Policies for Emergency Notification and Evaluation for more information.

FSTM makes timely reports to the campus community about crimes considered to be a threat to students and employees that are reported to local police agencies or to administration. FSTM encourages students, faculty, staff and volunteers to make timely and clear notifications of crimes to the local law enforcement agencies and to FSTM administration.

#### **Awareness Programs**

FSTM addresses the Campus Security procedures to encourage students, employees, and volunteers to be responsible for their own security and the security of others in the following manners:

- 1. Annual Training Annually all employees must complete the Campus Security training, which occurs as part of the routine training. This training covers the materials in the Annual Security Report as well as other tips.
- 2. New Student Orientation All students engage in new student orientation related to campus security and maintenance.
- 3. Returning Student Orientation All returning students engage in orientation related to campus security and maintenance.

#### Immediate and Timely Warnings

If a Clery Act crime is committed within Clery Act Geography that is reported to FSTM administration or to local law enforcement and is considered by FSTM administration to be a serious or continuing threat to students and employees, FSTM will issue a timely warning by using classroom notifications (for students on campus) or text notification system through Sycamore Campus (for student not on campus).

FSTM will, without delay and taking into account the safety of the community, determine the content of the notification and initiate the notification system, unless notification of the system will, in the professional judgment of the responsible administrator, compromise efforts to assist a victim or respond to, contain, or mitigate the emergency.

In the event of an emergency involving an imminent threat on campus, which is confirmed by FSTM administration, a member of administration will utilize the emergency notification system:

- 1. Sycamore Campus text messaging system (for both on and off campus)
- 2. Email notification (for off-campus)
- 3. Classroom notification (for on-campus)

Members of the FSTM campus community are not required to sign up for these notifications; members of the community are automatically enrolled if they are a current student, staff person, or instructor.

#### STUDENT EXPECTATIONS

The presence you bring to campus and your clinical setting impacts your relations and communications with other students, staff, faculty, midwives, and clients. Your professional presence can shape your experience and is significant because you are a reflection of FSTM student midwives as well as the greater Florida midwifery community.

FSTM Professional Presence Standards

- 1. Demonstrate RESPECT
- 2. Practice COMPASSION
- 3. Exude CONFIDENCE
- 4. Wear INTEGRITY
- 5. Show PASSION
- 6. Generate OPTIMISM
- 7. Use EMPATHY

#### 8. Be HUMBLE

#### Student Representatives

Each new class of students will be asked to elect a Student Representative from their group in Year One, Term One. The Student Representative has the following responsibilities:

- Communicating with the students of their group on issues, concerns and plans, and relaying this information to the FSTM Administration and/or Board of Directors at a scheduled meeting.
- Relaying information shared with the Student Representative by FSTM to their class group.
- Submission of a basic Student Representative Board Report at midterm each semester, to be reviewed at the Board of Directors next meeting.

#### Student Mentors

Each Fall term, a new class group is seated at FSTM. These new students benefit from the support, guidance and inclusion given by upper-level student midwives. This opportunity is given in the spirit of student connectivity, and upholds the age-old principles of teaching and mentoring that midwives have passed down to each other from generation to generation. Students are encouraged to reach out to the new class and establish connections with individual students, perhaps with someone in their geographic region or with whom they share common interests.

#### Conflict Resolution

FSTM supports open communication and resolution of conflicts through discussion and mediation. If you have a grievance or complaint against a classmate, school administrator, a faculty member, or a staff member, the first step in resolution should be speaking with the individual(s) directly involved unless there is a conflict of interest. If direct communication does not solve the conflict, you may submit a Formal Complaint through the Academic Director or Executive Director of ESTM.

FSTM promotes a learning environment that is transparent, professional and respectful. Students are asked to handle conflict with each other, a staff member or instructor in a direct and respectful manner. There is no tolerance for continuous negativity, gossip or rumor spreading.

#### CONDITIONS FOR DISMISSAL AND TERMINATION

A student may be dismissed for any of the following reasons:

 Failure to meet SAP requirements for academic or clinical courses following a performance review / probationary period

- Failing three or more classes throughout the entire midwifery program
- Failure to correct violations after notification by the Academic Director and/or the Clinical Director
- Failure to adhere to the FSTM Policies and Procedures
- Failure to meet financial commitments
- Failure to attend birth when on-call (see the clinical section of the catalog)
- Violating HIPAA guidelines
- Dismissal from two or more clinical sites due to poor performance or behavior
- Failing Clinical Skills Exam more than once
- Attending classes or clinical experiences under the influence of alcohol or drugs
- Failure to correct behaviors identified at Performance Review
- Other behavior that is disruptive to the learning environment