

National Association of Certified Professional Midwives



INTERNATIONAL CONFEDERATION OF MIDWIVES Member Association Capacity Assessment Tool

Original: April 2013

Revised: August 2014

(NI=needs improvement)

A. Governance	Comments on the standard	YES	NO	NI/NA
A1. Board				
1. The association has a Board and/or an Executive Committee governed by a constitution and by-laws.	NACPM by-laws govern the functioning of the Board and the organization, assisted by policies and procedures.	X		
2. The association has clearly defined roles and responsibilities for the Board/Executive and members.	There are job descriptions for staff (executive director and administrative assistant), and descriptions of Board and officer roles in the by-laws and Policies and Procedures.	X		
3. The Board/Executive meets at least twice a year.	The NACPM Board and staff meet regularly throughout the year, with two in-face three-day Board meetings, along with monthly conference call meetings. The Board works with a team structure, with each team carrying accountability for specific annual goals and tasks, and these teams meet by conference call monthly throughout the year.	X		

4. The Board/Executive Committee carries out the roles of strategy development.	Strategy, goals and steps for implementation are developed at the Fall in-face Board meeting for the following year.	X		
5. The Board/Executive Committee carries out the roles of policy formulation.	The Board develops the national policy goals for the organization.	X		
6. The Board/Executive Committee carries out the roles of fundraising.	The fundraising Team of NACPM develops a fundraising plan annually according to the needs projected by the budget. The Board as a whole holds responsibility for fundraising.	X		
7. The Board/Executive Committee carries out the roles of public relations.	Public relations are the responsibility of the executive director and the Board.	X		
8. The Board/Executive Committee carries out the roles of financial oversight.	The role of financial oversight is the responsibility of the whole Board, and is supported by a Finance team, which includes at a minimum the Treasurer, the ED, and the AA.	X		
9. The Board/Executive Committee carries out the roles of lobbying.	NACPM has a national lobbying function; state level lobbying is typically done by the state midwifery associations. NACPM provides targeted support for state level legislative advocacy.	X		
A2. Vision, Mission				
10. The association has clearly stated vision and mission statements.	The vision, mission and purpose are reviewed annually by the Board, and are posted on the home page of the NACPM website.	X		
11. The mission is developed in collaboration with members in some way (email, or meetings).	Historically, the charge for the mission and vision of the organization was developed by a CPM task force, and members have been engaged by a CPM Symposium, annual meetings, and surveys. In 2015, chapter meetings will further engage members. (Regarding NACPM engagement of CPMs in the work of NACPM, it is important to note that NACPM adopted Standards of Practice in 2004 that were developed over	X		NI

	two years with a process that gave all CPMs the opportunity for input into this important set of core documents. NARM was of great support to NACPM in this process, ensuring that all CPMs could be engaged.)			
12. New members have access and are oriented to the association's vision, mission, and goals.	These statements are publicly available on the home page of the NACPM website.	X		
13. The activities of the association are consistent with the mission and vision.	NACPM activities and initiatives are well-aligned with the mission and vision. The Association's activities are structured around an annual strategic planning process of the Board and reflected in a Board Plan.	X		
14. The vision and mission statements are shared with members, giving a sense of purpose and direction to the association.	The vision, mission and values of the organization are clearly articulated on the 2014 revised NACPM website. There is an on-going focus on engaging members and stakeholders with the activities, purpose and direction of the organization.	X		
15. The vision and mission statements are reviewed and updated regularly with input from members at least every 3-5 years.	The Board reviewed and revised the vision and mission statements at the 2013 semi-annual Board meeting. On-line surveys of the membership on mission and goals are carried out annually.	X		
A3. Goals and Strategies				
16. The association has a clear strategic planning process.	Strategic planning at the fall in-person Board meeting results in an updated Board plan which is implemented by the teams of the Board. Progress towards the goals of the Board plan are reviewed monthly by the teams and at the in-person Board meeting in the spring.	X		
17. The association has a clearly written strategic plan with achievable long term and short term goals.	The Board plan has clearly articulated goals which are housed within the work plans of the individual team. The work plans contain time lines and accountability and are revisited monthly.	X		
18. The association's goals and strategies, developed with input from members, and are in line with the mission and vision.	The goals and strategies are well in line with the mission and vision, and are developed specifically to further the			

	mission and vision. Members are currently engaged via the 2012 CPM Symposium, member surveys and webinars. Beginning in 2015, further engagement will take place via chapter conference call meetings. Virtual annual membership meetings began in 2014.	X		
19. Mechanisms exist for reviewing and updating association goals with input from members.	Member surveys to engage members in goal setting via surveys beginning in 2014. Goals are mission-driven and regularly reviewed and updated by the Board. Member involvement is ensured through member surveys, the virtual Annual Meeting, and in 2015 with state chapters to build direct relationships with state midwifery associations.	X		
20. The association has realistic budgeted operational work plans, aligned with the strategic planning process.	Monthly Board and team oversight and active finance and fundraising teams provide alignment and accountability to the strategic plan.	X		
21. The association monitors and evaluates the quality and impact of its work.	Board teams report on progress towards goals of the Board plan monthly. Board members are engaged and accountable for achieving the goals through the team structure. This is a focus at in-face Board meetings; members are also involved through on-line member surveys.	X		.
22. The association uses evaluation results to influence service delivery planning.	Board uses a team structure and team work plans to evaluate progress towards goals on a monthly basis. The Board uses member surveys to ensure that Board priorities align with member priorities.	X		.
A4. Legal Status				
23. The association is registered as an autonomous organization according to the country's legislation.	NACPM is incorporated in Massachusetts as a 501(c)6 membership organization.	X		
24. The association is part of another health care professional association: a. Obstetric association b. Nursing association c. Other			X	

25. If yes, to 24 above, the association has its own structure and decision making processes and tools that are documented and transparent.				NA
26. The association has a constitution developed and shared with members.	By-laws are posted for members and the public on the NACPM website. NACPM by-laws require member approval of by-laws and any revisions. Original by-laws were approved by members in 2002.	X		
27. The constitution is reviewed with input from members every 5-10 years.	Member-approved amendments to the by-laws were passed in 2011. The Board is undertaking a complete by-laws review Fall 2014 and members will vote on proposed changes to the by-laws in early 2015. P&P are being developed for engaging members in the review of key documents every 5 years beginning in 2015. .	X		
28. All new members have access to or are given a copy of the constitution.	By-laws are posted on the NACPM website for members and the public.	X		
B. Management Practices and Leadership				
B1. Administrative policies and procedures				
29. The association has policies and procedures for electing leaders and office bearers.	Elections are prescribed by the by-laws, with compatible policies and procedures for conducting a call for nominations from the members and for the election process.	X		
30. The association has operational policies and procedures in place.	In 2014, NACPM initiated the review of existing P & P and the creation of needed P & P to be completed in 2015.	X		
31. The association has defined roles and responsibilities for the leaders, for staff, if any, and for members.	Roles and responsibilities for Board members, Board officers, and members are defined in NACPM by-laws. Roles and responsibilities for staff are defined in job descriptions.	X		
B2. Infrastructure and information systems				

32. The association has office/space to support and facilitate its daily work.	NACPM is a virtual organization that uses on-line tools and home office work spaces that are sufficient to accomplish its daily work. .	X		.
33. The office/space is well equipped and maintained with relevant communication systems (telephone, email, fax, internet).	Equipment and communications systems are fully adequate. The Board uses an on-line project management software platform to interface with each other and with staff.	X		
34. The association has systems in place to process/manage information including an updated list of its members.	The organization has an on-line data base that interfaces with our website to collect member and stakeholder information.	X		
B3. Authority and accountability				
35. Guidelines for the working relationship between the Board/Executive Committee, staff and members are clearly outlined in the policy documents.	These relationships are outlined in the by-laws of the organization. P & P provide guidance for evaluation and support of staff and is overseen by the executive team.	X		
36. The Board/Executive Committee regularly informs members on the association's activities and at the annual general meeting.	Board to member communication tools include the website, virtual annual membership meeting, regular e-news, surveys, webinars and the symposium.	X		
B4. Human Resources				
37. The association staff, if any, are recruited in a transparent, competitive manner, to fulfill its needs.	Because of the formative stage of development of the organization, a decision was made to hire the ED from within. This was a transparent process. There is a recruitment and hiring process in place for administrative staff.	X		
38. The association, if it has staff, has clear human resources and employment policies in place (employment contracts, salary structures and benefits, job descriptions.)		X		
39. The association incorporates capacity building/development of staff as part of its annual plan.	The Board employs organizational consultants to provide capacity building/development for the leadership team at each in-face Board meeting. The Board supports capacity	X		

	building for staff as part of its annual review process, including budgeting for continuing education.			
40. The association has information kits, policy manuals, etc., for its staff and members available on request.	NACPM currently has engaged with a communications consultant to help with messaging, strategy and outreach to support members	X		
C. Financial Resource Management				
C1. Accounting				
41. The association has an accounting system.	The association has shifted to QuickBooks on-line accounting system, with associated on-line banking.	X		
42. The association has regular audits conducted yearly.	NACPM does not currently conduct outside audits.		X	
43. The association's accounting system enables it to produce a financial report when required.	Financial reports are produced monthly, reviewed by the finance team and shared with the Board.	X		
C2. Budgeting				
44. The association has an annual budget which is approved by the Board/Executive Committee.	The annual budget is produced in the fall of the year for the next year by the Finance team, composed at least of the executive director, the treasurer, and the administrative assistant, with input from the team leaders, and approved by the Board.	X		
45. The association has a person specifically responsible for budget management.	The Finance team, and in particular the ED and treasurer, are responsible for budget management.	X		
C3. Financial Information				
46. Donors, members, or others can access financial information on request.	Financial information is available upon request, and beginning in 2015, will be published in an annual report sent to members and available on the NACPM website.	X		
47. The association produces annual financial reports which are reviewed and approved by the Board/Executive Committee.	Financial reports are reviewed monthly by the Board, and annually at the Fall Board meeting.	X		

48. The association presents a full financial statement in its annual report.	The Treasurer presents to members about the financial status of the organization at the annual meeting, and financial documents are available to all members at the time of the annual meeting.	X		
D. Functions				
D1. Membership Services				
49. The association has mechanisms to identify the needs of its members.	Several mechanisms for identifying the needs of members are underway, including the website, social media, e-news, member surveys, activation of the NACPM chapters system, and the virtual annual membership meeting. The 2012 CPM Symposium engaged members in a facilitated process to identify areas of importance to the development of the professions.	X		
50. The association organizes general meetings with its members annually.	NACPM has held annual membership meetings since its incorporation. To ensure increased accessibility for members and greater participation, the Board initiated virtual annual meetings in 2014.	X		
51. The association has a mechanism for recruiting new members.	Membership recruitment strategy is being significantly improved by the institution of NACPM chapters, including a discounted membership fee for chapter members, and the hiring of a staff consultant in early 2015 to implement NACPM Chapters.	X		
52. The association has mechanisms for membership retention.	Follow up is done with expired members by email and, at times, by phone, with most members renewing their membership annually.	X		NI
53. The association has a membership structure.	Membership requirements are established by the by-laws.	X		
54. The association has a membership fee structure.	Membership fees are income based, and this information is available on the membership enrollment page on the website. Special introductory rates are available for new	X		

	Pilot Chapter Members, and new CPMs are offered 1 year of free membership.			
55. The association has mechanisms for updating its membership list.	The association has a database system as the mechanism for tracking and updating membership information.	X		
56. New members are oriented to the information available and how to request it.	Membership information is readily available on the NACPM website.	X		
57. The association has mechanisms in place to make recommendations on salaries, and working conditions of its members.			X	NA
58. The association has mechanisms to provide continuing professional education for its members.	NACPM has hosted pre-conference workshops at the MANA conference for CPMs, as well as breakout session workshops. In 2012, NACPM co-hosted the first CPM Symposium for members, and has plans for future symposiums. CEUs are available for the many NACPM policy and practice webinar offerings.	X		
D2. Advancing Professional Practice				
59. The association develops or contributes to the development of professional standards for education and regulation.	Through a process that was inclusive of CPMs, in 2004 NACPM developed and adopted NACPM Standards of Practice, available on the website. NACPM participated in a review of MEAC standards for education accreditation, and informed its members of the opportunity to review and comment on the proposed MEAC standards. NACPM is participating in 2014-15 in a Delphi process with fellow USMERA organizations to develop consensus principles for model midwifery legislation. NACPM is offering a webinar series to members and stakeholders beginning in early 2015 on state legislation.	X		
60. The association has capacity to support and publicly recognize positive quality practice by members (e.g. practice, education, research policy, leadership, etc.)	.NACPM supports quality practice in a number of ways, including posting standards of practice from relevant professional sources on the website; encouraging its members to participate in data collection; membership in	X		.

	the National Quality Forum; planning support and Board member participation in the Home Birth Summit and its work groups; membership in the ICM; participation in national meetings and conferences on quality & research such as the IOM meeting on research & site of birth; and especially through the Practice Committee work group launched in the spring of 2014. NACPM recognizes member/CPM contributions by invitations to speak at the CPM symposium and on NACPM webinars.			
61. The association has mechanisms in place to share best practices and engage in mutual learning opportunities with other organizations.	NACPM co-hosted the 2012 CPM Symposium with the Association of Midwifery Educators, and co-hosted the ACA webinar series with the Association of Midwifery Educators (AME), and for 2015 has invited Citizens for Midwifery as well as AME to co-host the NACPM webinar series on state legislation issues & USMERA. An NACPM Practice Committee interim workgroup was launched in Summer 2014 to design a practice committee for NACPM, which will offer evidence-based clinical guidance to CPMs.	X		
D3. Quality control for care				
62. The association has mechanisms for providing guidance, advice and information to its members on quality of care.	See response to #60 and #61 above.	X		
63. The association contributes to/advocates for the development and implementation of midwifery regulation.	NACPM supports the licensing of CPMs in all 50 states, and currently provides support to states developing licensing regulation, including strategy development and letters of support. NACPM is a member of USMERA, working collaboratively on support for state licensure, including participating in a Delphi process to develop a consensus set of principles for model midwifery legislation and regulation. NACPM is offering a webinar series on state legislation in 2015. In addition NACPM is hiring a consultant to develop and implement a state chapter system for the organization, in particular to be of support in state legislation and policy development.	X		.

64. The association has mechanisms to assist its members in meeting any continuing competency requirements needed for licensure or renewal of license.	See response to #61 above.	X		
65. The association has a regularly reviewed Code of Ethics for members or works within the ICM code.	NACPM's preamble to the NACPM Standards of Practice entitled Principles of Practice functions is an ethics statement. NACPM is considering adopting the ICM Code of Ethics.	X		
66. All new members have access to or are given the Code of Ethics in conjunction with other documents.	All new members have access to the NACPM Essential Documents on the NACPM website.	X		
67. The association is in attendance in situations where member midwives' professional practice is being questioned.			X	
68. The association is involved in human resources planning as it relates to MNCH practitioners and quality of health care provision.				NA
D4. Communication				
69. The association has a clearly defined communication strategy for internal and external relationships.	Communications is the purview of the Membership Team which works with consultants to develop and implement a comprehensive communication strategy with members and stakeholders. Internal leadership communication takes place via work flow tools, such as Basecamp, within Teams and at Board meetings.	X		
70. The association has mechanisms for regular (at least quarterly) two way communication with its members.	NACPM uses surveys, including two comprehensive member surveys per year, as well as targeted surveys (such as after each webinar), and initiated virtual annual membership meetings in 2014.	X		
71. The association has a mechanism to regularly inform MOH and other relevant bodies of activities and issues impacting on its members and the midwifery profession.	There is no national midwifery regulatory body to receive such information in the U.S. system. NACPM reaches out to and communicates with Congress and federal agencies about the midwifery profession, and collaborates with other professional associations and stakeholders on	X		NA

	national policy issues relating to midwifery and maternity care delivery.			
72. MOH regularly informs the association of issues impacting on midwives, women, maternal newborn and child health.				NA
73. The association has communication systems in place such as newsletter and/or a website to communicate with all stakeholders (members, women, donors, civic society and grassroots NGOs such as WRA).	NACPM sends regular e-newsletters to its members, non-member CPMs, donors, and associate supporters. The website and webinars are available to members, stakeholders and the public.	X		
D5. Advocacy				
74. The association has systems in place to facilitate advocacy for women, midwives and newborns.	NACPM, along with MAMA Campaign partner organizations, advocates to Congress and Federal agencies on behalf of increasing access for all women to quality maternity care services, including the care of CPMs. NACPM collaborates with other organizations and coalitions in such advocacy.	X		
75. There is a mechanism to provide advocacy training to association leadership and members (negotiation, public speaking, information kits, etc.)	NACPM hosts periodic Federal lobby days, which provide opportunities for advocacy training for members and association leadership.	X		
76. The association has representatives in key government committees and policy making bodies on maternal, newborn and child health and midwifery.	NACPM presently does not have a seat on any government committees. However, NACPM has supported the development of policy and initiatives to improve the care of women and newborns by co-developing the <i>Consensus Statement by ACNM, MANA, and NACPM: Supporting Healthy and Normal Physiologic Childbirth</i> , helping to plan and participate in the 2012 & 2013 Home Birth Consensus Summits (HBCS), and participating in inter-professional workgroups to implement the HBCS consensus statements and to expand the impact of the consensus statement on normal physiologic birth. NACPM is a founding member of the Coalition for Quality Maternity Care, a national partnership supporting Federal legislation and policy to improve the care and	X		

	access for women and newborns. In addition, NACPM has established relationships with staff and divisions of the Centers for Medicare and Medicaid Services, in partnership with MAMA Campaign leadership, as an avenue to advocate for improved maternity care services.			
77. The association has guidelines for how to involve NGO partners in advocacy networks serving the interest of its beneficiary groups.				NA
D6. Service Delivery				
78. The association has the relevant resources (human, capacity, financial, material) to achieve its mission.	NACPM has the resources, financial and human, to carry out its mission and achieve its goals. NACPM is gradually adding consultants/staff to accomplish its work. We currently employ 2 organizational consultants, a communications/strategy consultant, and are in the process of hiring a consultant for 2015 to develop and implement a chapters system for NACPM. We are developing future capacity for member dues to support the work of the organization by developing chapters.	X		
79. The association has the tools to monitor and evaluate the quality and impact of its work.	NACPM's Board plan and annual goals, team structure and work plans, team work plans and reporting, all ensure the quality and impact of the work of the association. The virtual annual membership meeting and member surveys engage members and stakeholders in evaluation of goals, as well as member services, such as the website, webinars, and e-news. Staff are evaluated annually.	X		.
80. The association uses evaluation results to influence service delivery planning.	NACPM uses internal leadership reporting and feedback such as described in #71 to influence strategic planning and uses feedback from members to evaluate and review Board goals, as well as member services such as webinars and e-news.			
E. Collaboration, Partnerships and Networks				

E1. With women, government and other NGOs				
81 The association involves women and families as true partners in service provision including planning, decision making, and civic activities.	<p>To date the mechanisms for engaging citizen/consumer input have been the Standards Advisory Committee and Citizens for Midwifery participation as a partner in the MAMA Campaign. Consumer groups are partner organizations in some of the collaborations that NACPM participates in, such as the Home Birth Summit and CQMC. Consumer input is included in the planning of USMERA, and consumers will be included as stakeholders in the Delphi Process of USMERA to develop principles for model midwifery legislation. NACPM is proposing a by-law change to members to include public members on the Board, and will co-host the NACPM webinar series on state legislation with Citizens for Midwifery.</p> <p>As there is no formal mechanism in the U.S. for consumer engagement in planning and decision making for midwifery, there is always room for improvement in this area.</p>	X		NI
82. The association has established a collaborative relationship with the government.	A structural collaborative relationship with the federal government certainly does not exist for health professions, including CPMs, in the U.S. as it does in most other countries. However, the initiative to secure national recognition for CPMs is engaging legislators and the Center for Medicare and Medicaid Services and other federal partners in considering the role that CPMs can play in improving the quality of maternity care and saving health care dollars for the government and public insurers.	X		
83. The association has collaborative relationships with national and international NGOs, including women's organizations	The association engages in strategic relationship-building with ACNM, Childbirth Connection, Amnesty International, the International Center for Traditional Childbearing, the National Association of Birth Centers of Color, the	X		

	Coalition for Quality Maternity Care, etc. – and ICM as of 2014.			
84. The association collaborates and networks with other health care professions' associations in the country.	See comment in # 83 above. .	X		X
E2. Relationship with donors and the private sector				
85. The association has mechanisms for maintaining relationships with current donors and establishing contact with potential ones.	NACPM has an active annual fundraising plan for maintaining relationships with current donors and identifying new potential donors.	X		
86. The association engages donors in a free and open dialogue.	This happens during donor solicitations and annual follow up with previous and current donors.	X		
87. The association engages the private sector in open dialogue relating to health issues.	NACPM engages the private sector through the website, social media, e-news, webinars, and coalition work.	X		
F. Visibility, including Media relations				
88. The association is approached by women and their families for information and advice on women's health issues.	NACPM includes information for women and families on the association website and via social media. A find-a-midwife website is under development.	X		NI
89. The Board/Executive Committee and staff are recognized by their stakeholders as being highly skilled and credible in their field.	NACPM is increasingly being sought out and turned to for technical support and involvement by maternal health policy makers (IOM, CMS), and is increasingly seen as a go-to organization for midwifery, health policy, and as a desired and effective coalition partner.	X		
90. The association is invited by government to provide midwifery expertise and contribute to policy and decision making in midwifery issues.	Yes. For example, CMS has reached out to NACPM for technical support in the implementation of the birth center provisions of the ACA, and invited CPM participation in the 2011 CMS symposium on improving perinatal outcomes. In summer 2014, the IOM invited NACPM to help plan for a consensus process on developing a research agenda on site of birth.	X		

91. The association promotes its image and uses the media for public education.	Periodically the press reaches out to NACPM for information on home and birth center birth, the profession of CPMs and their practice, trends in maternity care, and for input into current media reports on these topics. NACPM does not have the capacity at this time to engage the media for public education or to proactively use the media to promote its image.	X		NI
92. The association develops positive relationships with the media.	NACPM's contacts with the press have been positive in nature, and NACPM has been quoted several times in national press reports, including Medscape's dialogue in response to the Wax meta-analysis. NACPM has issued some press releases proactively, but currently has limited capacity in this realm. Expertise in media relations is one of the qualifications that the association might want to consider in recruiting new Board members.	X		NI
93. The association is invited to take part in civic matters organized by other organizations and by government.	Examples: CMS outreach to NACPM as referred to in #90. NACPM recently attended and engaged in the IOM conference on research on site of birth, and through our MAMA Campaign health policy firm, was able to successfully submit recommendations for speakers for this important conference. See also # 90.		X	
G. Sustainability				
94. The association has a diversified funding base capable of sustaining its programs over the long-term.	NACPM has been remarkably successful in attracting funder interest and commitment to the work of the association. Chapter development will increase member/CPM capacity to contribute substantially to the support of the association.	X		NI
95. The association actively engages in fundraising and other resource mobilization activities as a means of limiting its dependence on donors.	NACPM has had significant fundraising success over the past several years. NACPM has an active Fundraising Team with a developed plan to secure necessary funding through a variety of funding mechanisms, including increasing membership.	X		NI

96. The association regularly seeks expertise (among its leaders and members when possible) to write fundraising proposals and to help generate ideas for resource mobilization.		X		
H. Addressing Racism and Maternal & Child Health Inequities	(These areas are not included in the ICM MACAT. NACPM has added these to reflect special circumstances in midwifery and maternity care in the U.S.)			
97. The association commits to weaving awareness and actions steps to address racism throughout all organizational activities.	NACPM has empowered an Anti-Racism Team of the Board to support and monitor our actions and progress on this goal, and is guided by the NACPM Statement of Strategic Intent to Address Racism and Racial Disparities in Maternity Care in the U.S.	X		NI
98. The association commits to including women of color in all aspects of leadership and initiatives of the organization.	NACPM expanded the Board by two positions to fill Board vacancies in response to requests from the MOC community to include women of color in all aspects of NACPM leadership. The Board is proposing a by-laws revision to allow such appointments into the future, even when there are no Board position vacancies that can be used for this purpose.	X		NI
99. The association undertakes initiatives to address disparities in the workforce, access to maternity care, and birth outcomes.	Key NACPM projects include a national scholarship fund for students of color project, federal policy work, participation in the USMERA Education Task Force to expand affordable & accessible direct assessment accredited educational programs, and the Practice Committee to work towards these goals. NACPM is seeking opportunities to partner with organizations and individual midwives of color to support the important work of others to address racism and disparities. Periodic e-news and the NACPM webpage "Social Justice and Birth" feature the work of midwives of color nationally.	X		NI
100. The association commits to addressing racism in as individuals, as leadership, as an organization and as a profession.	The association has attended Board AROM trainings, engaged in self-study and Board discussions, had attendance by Board members at an AROM day-long training at MANA 2013 and at the 15 th White Privilege	X		NI

	<p>Conference, and is currently engaged in an 11-week AROM course for Board and staff. The CPM Symposium generated an action group (AROM) for addressing racism in midwifery and birth outcome disparities, with an active website of resources for anti-racism training and experience. The NACPM website includes a Social Justice and Birth page with resources for leadership and membership. This is an area that needs continual review, engagement and commitment by the Board and staff.</p>			