The ACNM Benchmarking Project

Benchmarking is a method for comparing care processes to those of other practices and identifying "best practices." Benchmarking helps project participants to improve and adapt the care they provide to obtain superior outcomes: in patient satisfaction, patient safety, effectiveness and efficiency.

The purpose of the ACNM
Benchmarking Project is to improve and maintain the quality of midwifery care provided to women and children by promoting member awareness of best practices. To facilitate this, members share data on nationally recognized quality metrics.

Participants receive custom reports comparing their practices to those

of similar size.

For 2010 (reported in 2011), a total of 50 data points were collected and analyzed, resulting in 33 benchmarks for comparison. A total of 98 midwifery practices participated, representing more than 53,000 births and the work of approximately 570 midwives. The majority of participating practices were located in urban areas and described their caseload as midwifery-managed, as opposed

ACNM 2010 Benchmarking Project Selected Results			
	Small Practices <199 births per year	Medium Practices 200-499 births per year	Large Practices >500 births per year
Spontaneous Vaginal Birth rate	88.3%	85.5%	85.6%
Primary C-Section rate	9.0%	10.7%	10.5%
Total C-Section rate	11.7%	14.5%	14.4%
VBAC Success rate	79.7%	76.3%	78.3%
Episiotomy rate	3.1%	3.0%	3.5%
Neonatal Intensive Care Unit Admission rate	3.3%	3.6%	5.2%
Preterm Birth rate	6.6%	4.2%	4.7%
Low Birth Weight Infant rate	2.7%	3.0%	3.5%
Rate of 5-Minute APGAR scores <7	1.3%	1.6%	1.4%
Breastfeeding Initiation rate	81.0%	85.0%	77.6%
Breastfeeding Continuation rate	95.3%	78.2%	71.2%
Total Induction rate	14.9%	19.3%	19.1%
Epidural Use rate	23.1%	41.7%	49.3%
Intact Perineum rate	52.5%	44.7%	49.3%

Data is shown as AVERAGE of all participating practices.

to a shared caseload with physicians. Small, medium, and large practices were equally represented. Births at community-based hospitals and tertiary care hospitals were well represented but participation numbers were significantly lower among birth centers and homebirth practices.

It is important to note that the purpose of the ACNM Benchmarking Project is not data collection for research purposes. Rather, benchmarking data is intended to provide an annual snapshot comparison of midwifery practices.

More information about the ACNM Benchmarking Project is available at http://www.midwife.org/Benchmarking.



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