

# Birth Matters

Understanding how physiologic, healthy birth benefits hospitals and organizations

**W**ith nearly 4 million infants born in the United States each year,<sup>1</sup> childbirth has become a major focus in our health care system. However, for decades the U.S. perinatal care system has been inconsistent in meeting the needs of childbearing families in several important areas. These include communication about appropriate use of interventions in labor, accountability for shared decision making, respect for the woman's autonomy, and compliance with evidence-based standards of care.<sup>2-4</sup> Extensive routine use of technology and procedures, including ultrasound, induction of labor, cesarean, continuous fetal monitoring, and routine formula supplementation, along with under-utilization of effective interventions, including prenatal education, centering prenatal care, doula care, continuous labor support, hydrotherapy, intermittent auscultation, skin to skin contact, and uninterrupted breastfeeding in the first few hours of life, negatively affect health outcomes and quality, increase cost, and reduce authentic choice for women.<sup>2,3,5-14</sup>

Traditional measures for evaluating obstetric care have focused on the prevention of relatively rare events rather than on promoting physiologic labor and birth. These adverse events are unusual in healthy women, and a disproportionate amount of time and money are targeted towards their prevention. "Physiologic labor and birth are powered by the innate human capacity of the woman and fetus,"<sup>16</sup> and supporting these processes, rather than disrupting them with non-evidence-based interventions, has the potential to enhance best outcomes for mother and infant.<sup>2,3,5-14</sup>

Instead of focusing exclusively on reducing harm or injury, a comprehensive quality improvement program should focus on optimizing the overall quality of care while accounting for family preferences. Implementing evidence-based practices achieves this goal through the conscientious use of current best evidence to make clinical decisions to achieve optimal patient outcomes.<sup>17-19</sup> Evidence-based maternity care is characterized by the provision of effective care with the least risk of harm.<sup>5</sup> Implementing an evidence-based strategy focused on physiologic birth increases the well-being of families, acknowledges pregnancy as a health promoting event, and prevents rare, adverse outcomes.



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***Adopting a physiologic birth framework within obstetric quality improvement programs meets national quality outcome measurement requirements, broadens the scope of traditional perinatal quality improvement activities, and promotes systems-level change towards a health improvement model.***

- Hospital discharges for maternal and newborn care far outnumber those for any other major category of care.<sup>14</sup>
- Increasingly, hospital quality measures include perinatal outcomes.<sup>15</sup>
- The Affordable Care Act provides an incentive to improve quality outcomes for prenatal care.

## Physiologic Labor and Birth Practices Improve Quality Outcome Measures

Increasing access to care that promotes physiologic birth is a major national strategy for achieving high-quality maternity care. In 2012, the National Priorities Partnership Maternity Action Team, a multi-stakeholder group of leading national organizations and agencies, began to develop and implement a plan to reduce the rate of elective deliveries prior to 39 weeks gestation to 5% or less and to reduce the rate of cesarean birth in low-risk women to 15% or less.<sup>20</sup> A major focus of this national effort is engaging consumers and professionals in collaborative efforts to promote full-term, physiologic childbirth.

In concert with these initiatives, the American College of Nurse-Midwives (ACNM), Midwives Alliance of North America (MANA), and National Association of Certified Professional Midwives (NACPM) issued a consensus statement that identified practices and policies consistent with supporting physiologic approaches to childbirth.<sup>21</sup> In 2014, the American College of Obstetricians and Gynecologists (ACOG) and the Society for Maternal-Fetal Medicine (SMFM) promoted evidence-based approaches to safely avoid primary cesarean births.<sup>22</sup> Together, obstetric, nursing, and midwifery organizations are promoting ways to increase evidence-based maternity care with the goal of improving birth outcomes and achieving safe, high quality, high value maternity care for women, newborns, and families.<sup>21-25</sup>



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### Who cares about perinatal quality measures?

- Medicare: Inpatient Quality Reporting System and EHR Incentive Program
- Medicaid: Core Set of Health Care Quality Measures for Enrolled Adults and Core Set of Children's Health Care Quality Measures (CHIP)
- The Joint Commission: Performance Measures (5 perinatal quality measures required for hospitals with > 1,100 births/year)
- National Quality Forum: (14 endorsed perinatal and reproductive health measures)
- Health Care Providers
- Consumers

Operationally, and for the purpose of quality improvement, physiologic birth can be measured using 4 of the 14 perinatal and reproductive health measures endorsed by the National Quality Forum: elective induction

of labor, incidence of episiotomy, cesarean section, and exclusive breast milk feeding.<sup>26</sup> The implementation of physiologic birth will also improve outcomes on 3 of the 5 Joint Commission mandatory reporting core measures for hospitals with more than 1100 births per year.<sup>27-28</sup>

Collectively, these measures represent a hospital's accountability to provide safe, reliable care for women and newborns when the majority of women begin labor spontaneously, give birth vaginally without unnecessary surgical interventions, and initiate exclusive breast milk feeding.

### Joint Commission measures that improve with physiologic care:

- PC-01 Elective Delivery
- PC-02 Cesarean Section
- PC-05 Exclusive Breast Milk Feeding

## Why is physiologic birth good for my institution?

Physiologic birth is associated with reduced health care costs and adverse iatrogenic events related to the overuse of medical interventions.<sup>3-4</sup> Perinatal care data are increasingly available to the public for use when choosing health care providers and facilities. Hospitals that foster and encourage physiologic birth will perform higher on perinatal care quality measures and will attract more patients. Transparency is increasing as organizations providing health care are being held responsible for reporting outcomes, and consumers are becoming more educated about using those outcomes to make health care decisions. When consumers

are able to directly evaluate hospital performance measures, they will make deliberate choices about the hospitals and providers they use. Because women make the majority of the health care decisions for their families, institutions, providers, and health care insurers that establish positive relationships with women during their births are more likely to continue those relationships long-term.

Consumer satisfaction with maternity services is a long-standing outcome measure for quality of care.<sup>2,7</sup> Application of physiologic birth procedures reduces unnecessary interventions and their associated costs, promotes quality outcomes, and increases patient satisfaction. As a result, hospitals that promote physiologic labor and birth



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*Implementing healthy, physiologic birth will increase your facility's bottom line: as positive birth experiences increase, patient satisfaction scores will improve and billing can be proactively aligned with future requirements.*

### How promoting physiologic birth can benefit your institution...

As reforms roll out, measures likely to be linked to payment and accreditation at your institution include

- cesarean birth (nulliparous, term, singleton, vertex)
- elective delivery before 39 weeks
- episiotomy
- exclusive breastfeeding during the hospital stay
- patient satisfaction measures

Institutions may also see a reduction in adverse events and related liability claims or payouts due to a reduced use of oxytocin, a high-alert medication implicated in half of obstetric claims.<sup>13</sup>

practices have an opportunity to raise their quality-related reimbursement rates while reducing the cost of providing care.

Adopting a strategy that promotes physiologic labor and birth can have a positive effect on birth outcomes, reduce unwarranted variations in care, and improve quality and value. These goals are achievable through continuous quality improvement processes. A maternity unit that is committed to safety and quality will identify these aims as the ideal when planning, implementing, and evaluating quality improvement programs. Care that promotes, supports, and protects physiologic labor and birth and the judicious use of technology when indicated will help achieve these aims.

By fostering physiologic birth, institutions and insurers can encourage women to be healthy change agents in their own lives, the lives of their families, and in their communities.



Birth Matters was developed under the leadership of ACNM in consultation with representatives from the Association of Women's Health, Obstetric and Neonatal Nurses (AWHONN), Childbirth and Postpartum Professional Association (CAPPA) and quality and safety leaders from various facilities across the U.S.

Information about the ACNM Healthy Birth Initiative can be found at [www.midwife.org/ACNM-Healthy-Birth-Initiative](http://www.midwife.org/ACNM-Healthy-Birth-Initiative). For clinician tools, please visit [www.BirthTOOLS.org](http://www.BirthTOOLS.org).

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