2016 ACNM BENCHMARKING

BEST PRACTICES

How do you become a "best practice"?

Best practices are named based on the data reported by the practice being one of the top three practices in that category. The purpose of naming "best practice" is to recognize practices that are performing well. Perhaps more importantly, it gives ACNM members the opportunity to know which practices to contact to discuss how to improve performance. By networking with "best practices", you can learn how to modify your practice processes to achieve better outcomes on quality indicators.

To provide a fair comparison, practices are compared based on practice volume by number of births per year: Low: \leq 50, Low Moderate: 50 - 199, High Moderate: 200-499, High: \geq 500 births/ year.

Note: For some volume groups, it is impossible to determine best practice for certain indicators. In the low-volume group there are many practices achieving 100% breastfeeding rates and 0% cesarean birth rates.

How do I know which indicator to select for improvement?

When looking at the benchmarking report, the outcomes should fall within the appropriate range of colleagues in similar volume practices. For example, if your practice is above the 75th percentile of your comparison group in episiotomy, there is a practice variance that suggests need for improvement. This indicates overuse of the procedure when compared to midwifery practices attending a similar number of births/year. Similarly, if your practice is within the lowest 25% of your cohort in spontaneous vaginal birth or breastfeeding, the data suggests an opportunity to improve performance. The ACNM Division of Standards and Practice, Quality Section functions to support quality improvement activities of ACNM member practices.

Please note- there are mixed risk status and mixed models within EVERY "best practice" category (e.g. high volume birth centers and low volume, high risk practices). Please avoid the initial temptation to assume "my practice" is different or unique. By contacting best practices, you may find that there is a similar practice achieving better outcomes.

Congratulations to the 2016 ACNM Best Practices!

Labor and Birth Outcomes					
Variable	$Low Volume \le 50 \text{ births/year} $ (n=28)	Low Moderate Volume 50 -199 births/year (n=63)	High Moderate Volume 200-499 births/year (n=93)	High Volume $\geq 500 \text{ births/year}$ (n=94)	
Spontaneous Vaginal Birth Rate	• No Best Practice	 Welcome Home Midwifery (NY) BK Midwifery (NY) Skagit Family Health Clinic and Mount Vernon Birth Center (WA) 	 Health Foundations Birth Center (MN) Women's Birth & Wellness Center (NC) Midwifery Care of Monsey (NY) 	 Denver Health Midwives (CO) Gundersen Healthcare Midwives (WI) Park Nicollet- Methodist (MN) 	
Primary Cesarean Rate	• No Best Practice	 Skagit Family Health Clinic and Mount Vernon Birth Center (WA) Henry County Health Center Midwifery Services (IA) Welcome Home Midwifery (NY) 	 Health Foundations Birth Center (MN) Midwifery Care of Monsey North Metro Midwives 	 Gundersen Healthcare Midwives (WI) Parkland CNM (TX) Franciscan Women's Health Associates (WA) 	
VBAC Success Rate	• No Best Practice	• No Best Practice	• No Best Practice	 Shenandoah Women's HealthCare (VA) UW Health Nurse-Midwifery Service (WI) CMG Women's Center (VA) 	
Rate of Cesarean Birth among Nulliparous women with a Term, Singleton baby in a Vertex position (NTSV)	 The Natural Birthing Center (TX) Fairfax Home Birth (VA) Lucas County Health Center (IA) 	 North Country Midwifery (NY) Henry County Health Center Midwifery Services (IA) New Birth Company KCK (KS) 	 Midwifery Care of Monsey (NY) Certified Nurse Midwives at St. Joseph Hospital (CO) Canandaigua Medical Group OB/Gyn and Midwifery (NY) 	 Franciscan Women's Health Associates (WA) Eisner Pediatric & Family Medical Center (CA) UW Health Nurse-Midwifery Service (WI) 	
Rate of Postpartum Hemorrhage	 Khristeena Kingsley, Midwife, PC (NY) Labor of Love Midwifery Service (IL) Klamath Women's Clinic & Birth Center (OR) 	 Cleveland Clinic AGMC OB- GYN (OH) Northwest Professional Obstetrics & Gynecology (IL) Virginia Complete Care for Women (VA) 	 Midwifery Care of Monsey (NY) FamilyCare Health Centers (WV) Caring For Women (TX) 	 Florida Women's Center (FL) Shenandoah Women's HealthCare (VA) Kaiser Permanente Baldwin Parl Medical Center (CA) 	

Perineal Outcomes					
Variable	Low Volume ≤ 50 births/year (n=28)	Low Moderate Volume 50 -199 births/year (n=63)	High Moderate Volume 200-499 births/year (n=93)	High Volume ≥ 500 births/year (n=94)	
Rate of women with intact perineum (perineum is intact or only small laceration(s) not requiring repair)	 Klamath Women's Clinic & Birth Center (OR) Sweetwater Midwifery (WY) Hudson Valley Midwifery (NY) 	 M.A.M.A.S., Inc. (MD) The Midwife's Place (NE) New Beginnings Birth Center (ID) 	 Charleston Birth Place (VSC) Avalon-A Center for Women's Health (NJ) Carolina Women's Specialists (SC) 	 Catawba Valley Medical Center Maternity Services (NC) Providence Woman's Clinic, Providence St Vincent (OR) University Hospitals Case Medical Center Division of Nurse-Midwifery (OH) 	
Rate of episiotomies	• No Best Practice	• No Best Practice	• No Best Practice	 University Midwifery Associates (NY) Erie Family Health (IL) University Hospitals Case Medical Center Division of Nurse-Midwifery (OH) 	
3rd or 4th degree laceration rate	• No Best Practice	• No Best Practice	 Olmsted Medical Center (MN) Mercy Birthing Center (MO) Connecticut Childbirth & Women's Center (CT) 	 Maimonides Midwifery Faculty practice (NY) Gundersen Healthcare Midwives (WI) CMG Women's Center (VA) 	

		Infant Outcomes					
Low Volume ≤ 50 births/year (n=28)	Low Moderate Volume 50 -199 births/year (n=63)	High Moderate Volume 200-499 births/year (n=93)	High Volume ≥ 500 births/year (n=94)				
• No Best Practice	• No Best Practice	 Health Foundations Birth Center (MN) Mercy Birthing Center (MO) Mountain Midwifery Center (CO) 	 Kaiser Westside Medical Center (OR) El Rio Birth and Women's Health Center (AZ) Parkland CNM (TX) 				
• No Best Practice	• No Best Practice	 North Shore Birth Center (NJ) Connecticut Childbirth & Women's Center (CT) Silverton Health Midwives (OR) 	 Oregon Health & Science University Nurse-Midwives (OR) Kaiser Westside Medical Center (OR) CMG Women's Center (VA) 				
• No Best Practice	 River & Mountain Midwives (NY) Mt. Eaton Midwifery (OH) Westside Midwifery & Women's Health (MT) 	 Women's Specialist of Houston at Texas Children's Pavilion for Women (TX) Swedish Midwifery and Women's Health Issaquah (WA) Health Foundations Birth Center (MN) 	 Midwives at Magee (PA) Shenandoah Women's HealthCare (VA) UMHS Nurse Midwifery Service (MI) 				
• No Best Practice	 The Midwife's Place (NE) Lebanon Valley Midwifery and Women's Wellness (PA) A Gentle Beginning (OR) 	 IHA Nurse Midwives (MI) Perkin Alternative Birth Center (LA) Women's Birth & Wellness Center (NC) 	 Center for Midwifery (CO) OSU (OH) LMG Midwifery (OR) 				
	Volume ≤ 50 births/year (n=28) • No Best Practice • No Best Practice • No Best Practice	Volume ≤ 50 births/year (n=28)Low Moderate Volume 50 -199 births/year (n=63)• No Best Practice• No Best Practice• No Best Practice• River & Mountain Midwives (NY) • Mt. Eaton Midwifery (OH) • Westside Midwifery & Women's Health (MT)• No Best Practice• The Midwife's Place (NE) • Lebanon Valley Midwifery and Women's Wellness (PA)	Volume ≤ 50 births/year (n=28)Low Moderate Volume 50 -199 births/year (n=63)High Moderate Volume 200-499 births/year 				

Breastfeeding Outcomes					
Variable	Low Volume ≤ 50 births/year (n=28)	Low Moderate Volume 50 -199 births/year (n=63)	High Moderate Volume 200-499 births/year (n=93)	High Volume ≥ 500 births/year (n=94)	
Rate of Women who Attended their 6week Postpartum Visit.	 Scenic Drive Midwives, LLC (WV) Manhattan Birth Midwifery (NY) Tania Zirulnik Home Birthing (NY) 	 Skagit Family Health Clinic and Mount Vernon Birth Center (WA) Lebanon Valley Midwifery and Women's Wellness (PA) Mat-su Midwifery and Family Health (AK) 	 UH Westshore Midwifery Associates (OH) Canandaigua Medical Group OB/Gyn and Midwifery (NY) Minnesota Birth Center (MN) 	 Shenandoah Women's HealthCare (VA Oregon Health & Science University Nurse-Midwives (OR) OB-GYN and Midwifery Associates of Ithaca (NY) 	
Rate of Women Breastfeeding at their 6week Postpartum Visit.	• No Best Practice	• No Best Practice	• No Best Practice	 UC San Diego Nurse-Midwifery Service (CA) Oregon Health & Science University Nurse-Midwives (OR) UNC Midwives, Dept of OB GYN, University of North Carolina (NC) 	

Resource Utilization Outcomes					
Variable	$\begin{array}{c} \textbf{Low Volume} \\ \leq 50 \\ \text{births/year} \\ (n=28) \end{array}$	Low Moderate Volume 50 -199 births/year (n=63)	High Moderate Volume 200-499 births/year (n=93)	High Volume ≥ 500 births/year (n=94)	
Rate of Inductions	• No Best Practice	 Nativiti Family Birth Center (TX) Mat-su Midwifery and Family Health (AK) Alaska Family Health and Birth Center (AK) 	 Health Foundations Birth Center (MN) Valley Women for Women (AZ) Beach Cities Midwifery & Women's Health Care (CA) 	 Parkland CNM (TX) Midwifery Services at the GW MFA (DC) EMCM Midwives 	
Rate of epidurals used for pain relief during labor (not including epidurals placed only for anesthesia for operative delivery)	• No Best Practice	 Nativiti Family Birth Center (TX) Alaska Family Health and Birth Center (AK) New Birth Company KCK (KS) 	 Health Foundations Birth Center (MN) Mountain Midwifery Center (CO) BirthCare & Women's Health, Ltd (VA) 	 Midwifery Services at the GW MFA (DC) HealthEast Certified Nurse-Midwives (MN) UW Health Nurse-Midwifery Service (WI) 	

• No Best Practice: Unable to establish a "Best Practice" as all practices in the birth volume sub-category reported "0" or 100% per the variable.

Practice Measures					
Variable	Low Volume ≤ 50 births/year	Low Moderate Volume 50 -199 births/year	High Moderate Volume 200-499 births/year	High Volume ≥ 500 births/year	
Total number of practices reporting at least one water birth	14	20	30	19	
Total number of practices reporting births of term infants with delayed cord clamping	16	20	27	9	
Total number of practices reporting that they provide care using the Centering pregnancy model	4	7	13	33	