2017 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 2017 ACNM Best Practices!

Labor and Birth Outcomes						
Variable	Low Volume ≤ 50 births/year (n=22)	Low Moderate Volume 50 -199 births/year (n=56)	High Moderate Volume 200-499 births/year (n=88)	High Volume ≥ 500 births/year (n=91)		
Spontaneous Vaginal Birth Rate	 Thrive Midwives LLC JJB Midwifery Seventh Moon Homebirth Midwifery Services 	 New Birth Company Springs Midwifery and Women's Care, LLC Nativiti Family Birth Center 	 Midwifery Care of Monsey Health Foundations Birth Center New Birth Company 	 Gundersen Healthcare Midwives Providence Medical Group Women's Services Everett Midwifery Services at the GW MFA 		
Primary Cesarean Rate	No Best Practice	BK MidwiferyBSD MidwiferyNew Birth Company	 New Birth Company Midwifery Care of Monsey Metropolitan Hospital Center 	 Gundersen Healthcare Midwives Park Slope Midwives CommuniCare Health Centers, Inc. 		
VBAC Success Rate	No Best Practice	No Best Practice	No Best Practice	 Westside Women's Care UW Health Nurse-Midwifery Service UMMS CNM 		
Rate of Cesarean Birth among Nulliparous women with a Term, Singleton baby in a Vertex position (NTSV)	 JJB Midwifery Thrive Midwives LLC Local Care Midwifery, PLLC 	 Fort Worth Midwives LLC Auburn Birthing Center Seattle OB/GYN 	 Midwifery Care of Monsey New Birth Company Lifestages Samaritan Centers for Women 	 Intermountain Nurse-Midwives Providence Medical Group Women's Services Everett Aurora UW Medical Group Midwifery & Wellness Center 		
Rate of Postpartum Hemorrhage	Postpartum •JJB Midwifery Service		 Natural Beginnings Birth and Wellness Avalon-A Center for Women's Health the childbirth center 	 San Diego Kaiser Permanente Salem Health Medical Group Midwives Shenandoah Women's HealthCare 		

Perineal Outcomes					
Variable	Low Volume ≤ 50 births/year (n=22)	Low Moderate Volume 50 -199 births/year (n=56)	High Moderate Volume 200-499 births/year (n=88)	High Volume ≥ 500 births/year (n=91)	
Rate of women with intact perineum (perineum is intact or only small laceration(s) not requiring repair)	 Mountain Miracles Midwifery, Inc. Local Care Midwifery, PLLC Manhattan Birth Midwifery 	 Riverside Midwifery LLC Atlanta Birth Care Lebanon Valley Midwifery and Women's Wellness 	 Avalon-A Center for Women's Health Charleston Birth Place OMG Women's Healthcare 	 Catawba Valley Medical Center Maternity Services HealthPartners Westside Community Health Services 	
Rate of episiotomies	No Best Practice	No Best Practice	No Best Practice	 North County Health Services UR Medicine Midwifery Group Intermountain Nurse-Midwives 	
3rd or 4th degree laceration rate	No Best Practice	No Best Practice	 FamilyCare Health Centers Best Start Birth Center Peace Health Nurse- Midwifery Birth Center 	 Woodhull Medical Center Women's Excellence in Midwifery Catawba Valley Medical Center Maternity Services 	

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.

Infant Outcomes					
Variable	$\begin{array}{c c} Low & & \\ Volume & \\ \leq 50 & & 50 - 199 \text{ births/year} \\ in=22) & & (n=56) \end{array}$		High Moderate Volume 200-499 births/year (n=88)	High Volume ≥ 500 births/year (n=91)	
Preterm Birth Rate (infants from a singleton birth born at less than 37weeks gestation)	No Best Practice	No Best Practice	 New Birth Company Baystate Midwifery and Women's Health IU Health Arnett CNMs 	 Baylor College of Medicine, Department of OB-GYN, Midwifery Section Women's Healthcare Associates LLC - Peterkort South Reliant Medical Group 	
birth born weighing less than 2500 grams)PracticeRate of NICU Admissions of infants born from a singleton birth.•A Gentle Be •Springs Mic Women's Call		No Best Practice	 New Birth Company Avalon-A Center for Women's Health the childbirth center 	 Greenville Midwifery Care & Birth Center Kaiser Sunnyside Summa Health Medical Grp 	
		 A Gentle Beginning : Springs Midwifery and Women's Care, LLC Bloomin' Babies Birth Center 	 El Rio Birth and Women's Health Center Womens Specialist of Houston at Texas Children's Pavilion for Women Lake Health OB/GYN Midwifery 	 Suncoast Community Health Centers Women's Care of Lakeland UMHS Nurse Midwifery Service Shenandoah Women's HealthCare 	
Exclusive Breastfeeding Rate first 48 hours	No Best Practice	 Bloomin' Babies Birth Center Inanna Birth & Women's Care Lebanon Valley Midwifery and Women's Wellness 	 Beach Cities Midwifery & Women's Health Care Seven Hills Women's Health Center Swedish Midwifery and Women's Health Issaquah 	 Vanderbilt School of Nursing (West End Women's Health Center & Melrose) Valley Women for Women UC San Diego Nurse-Midwifery Service 	

Variable	Low Volume ≤ 50 births/year (n=22)	Low Moderate Volume 50 -199 births/year (n=56)	High Moderate Volume 200-499 births/year (n=88)	High Volume ≥ 500 births/year (n=91)	
Rate of Women who Attended their 6week Postpartum Visit.	No Best Practice	No Best Practice	 Midwifery Care of Monsey the childbirth center Coastal OBGYN Specialists and Midwifery 	 Lifecycle Womancare OB-GYN and Midwifery Associates o Ithaca Greenville Midwifery Care & Birth Center 	
Rate of Women Breastfeeding at their 6week Postpartum Visit.	No Best Practice	No Best Practice	 Womens Specialist of Houston at Texas Children's Pavilion for Women New Birth Company Midwifery Care of Monsey 	 UC San Diego Nurse-Midwifery Service Lifecycle Womancare Greenville Midwifery Care & Birth Center 	

Resource Utilization Outcomes						
Variable	Low Volume ≤ 50 births/year (n=22)	Low Moderate Volume 50 -199 births/year (n=56)	High Moderate Volume 200-499 births/year (n=88)	High Volume ≥ 500 births/year (n=91)		
Rate of Inductions	No Best Practice	No Best Practice	 New Birth Company North Shore Birth Center Natural Beginnings Birth and Wellness 	 Midwifery Services at the GW MFA Neighborcare Health Stony Brook Midwifery Practice 		
Rate of epidurals used for pain relief during labor (not including epidurals placed only for anesthesia for operative delivery)	 Seventh Moon ~ Homebirth Midwifery Services Mountain Miracles Midwifery, Inc. 13th Moon Midwifery 	No Best Practice	 Health Foundations Birth Center Peace Health Nurse-Midwifery Birth Center The Birth Center: Holistic Women's Health Care 	 Lifecycle Womancare Midwifery Services at the GW MFA UW Health Nurse-Midwifery Service 		
Rate of women staying less than 12 hours after the infant's birth	e of women staying less han 12 hours after theNo Best Practice• The Birth Center: Holistic Women's Care		Women's Care •Beach Cities Midwifery &	 Lifecycle Womancare Greenville Midwifery Care & Birth Center Franciscan Womens Health Associates 		
Rate of infants who required length of stay that was longer than mother'sNo Best PracticeNo Best Practiceat Texas Children's Women •The childbirth center		 Womens Specialist of Houston at Texas Children's Pavilion for Women The childbirth center Silverton Health Midwives 	 Maimonides Midwifery Faculty practice Penn OB/GYN and Midwifery Lifecycle Womancare 			
Readmission rate for newborns within 6 weeks of birth	No Best Practice	No Best Practice	 •OMG Women's Healthcare •Oregon Health & Science University Nurse-Midwives •New Birth Company 	 Bronson Women's Service Shenandoah Women's HealthCare Neighborcare Health 		

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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	15	45	31	25		
Total number of practices reporting births of term infants with delayed cord clamping	16	27	26	13		
Total number of practices reporting that they provide care using the Centering pregnancy model	1	5	16	33		