

# CALIFORNIA MIDWIVES ARE ESSENTIAL MATERNITY CARE PROVIDERS

## COMMUNITY BIRTH PARTNERSHIP INITIATIVE



## Midwives Play A Crucial Role in Ensuring Safe Maternity Care in California

**Robust studies in recent years show that excellent birth and infant outcomes result when midwives are a part of an integrated system of care committed to delivering whole-person safety.<sup>1-5</sup>**

### Landscape of Midwifery in California

*Certified Nurse Midwives (CNMs) and Licensed Midwives (LMs) attend about 12% of births in California, or about 50,000 births/year.*

*There are 1,600 midwives in California. CNMs are licensed and regulated by the Board of Registered Nursing, and LMs are licensed and regulated by the Medical Board of California.*

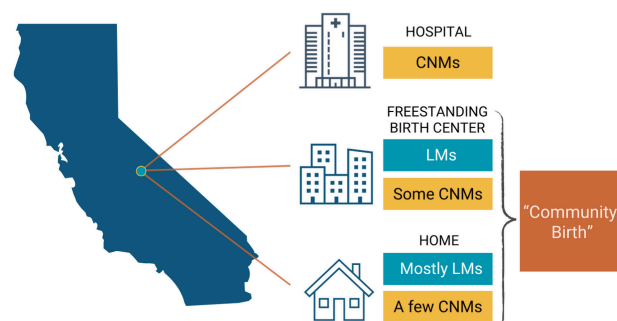
*CNMs complete a nurse-midwifery education program housed in a school of nursing or health sciences, then take the certification exam administered by the American Midwifery Certification Board (AMCB).*

*LMs complete an accredited three-year midwifery education program approved by the Medical Board of California, then take the certification exam administered by the North American Registry of Midwives (NARM).*

*CNMs and LMs care for patients who meet the criteria of “low-risk” as defined by the Board of Registered Nursing and the Medical Board of California, respectively; CNMs and LMs are obligated to transfer higher-risk patients.*

*CNMs and LMs are Medi-Cal providers and in-network with commercial insurers.*

### SITES OF MIDWIFE-ATTENDED BIRTHS IN CALIFORNIA



**Certified Nurse-Midwives (CNMs) and Licensed Midwives (LMs) in California are independent maternity and reproductive health care providers who consult, collaborate, and transfer care when indicated**

1. Nethery E, et al. Birth Outcomes for Planned Home and Licensed Freestanding Birth Center Births in Washington State. *Obstetrics & Gynecology*. 2021. <https://doi.org/10.1097/AOG.0000000000000457>
2. CMS Strong Start for Mothers and Newborns Initiative. 2018. <https://www.cms.gov/priorities/innovation/innovation-models/strong-start>
3. Vedam S, et al. Mapping Integration of Midwives across the United States. *Plos One*. 2018. <https://doi.org/10.1371/journal.pone.0192523>
4. Cheyney M, et al. Outcomes of Care for 16,924 Planned Home Births in the United States: The Midwives Alliance of North America Statistics Project, 2004 to 2009. *J Midwifery Womens Health*. 2014;59(1):17-27. <https://doi.org/10.1111/jmwh.12172>
5. Bovbjerg ML, et al. Planned Home Births in the United States Have Outcomes Comparable to Planned Birth Center Births for Low-Risk Birthing Individuals. *Med Care*. 2024;62(12):820-829. <https://doi.org/10.1097/MLR.0000000000002074>

### Mission of the Community Birth Partnership Initiative (CBPI)

The mission of CMQCC's Community Birth Partnership Initiative (CBPI) is to improve health outcomes during pregnancy and birth by increasing the quality and whole-person safety of hospital transfer processes, when a transfer is needed for a community birth. The Initiative also seeks to enhance integration between perinatal care systems that have traditionally worked in isolation from each other in California. CBPI is supported by funding from Skyline Foundation.

### The initiative aims to improve maternal and neonatal outcomes by:

- Improving relationships and sustained collaboration between community midwives, emergency medical services (EMS), and hospital birth providers;
- Enhancing whole-person safety through co-design of policies for hospital transfer by community midwives and hospital providers;
- Ensuring safe, coordinated, respectful transfer of care;
- Improving understanding of community birth and reduce stigma around home and birth center births;
- Improving patient experience of transfer;
- Partnering with community-based organizations to expand stakeholder understanding of community birth, find opportunities for joint initiatives that meet our collective goals around community birth, and engage patients in telling their stories about community birth; and
- Utilizing transfer data to improve whole-person safety and quality of care.