



Annual Report of Midwifery Practice

2020

Florida Council of Licensed Midwifery

Section I: Overview

A. Statutory Basis and Rule Implementation

The Council of Licensed Midwifery (Council), in its advisory capacity, is required by section 467.004(3)(e), Florida Statutes, to “collect and review data regarding licensed midwifery.” To implement this requirement, the Department of Health adopted Rule 64B24-1.004(5), Florida Administrative Code, requiring the Council to prepare an annual report no later than November 1st each year.

To ensure timely, consistent reporting, the *Annual Report of Midwifery Practice Form (DH-MQA 5011)* was developed with advisement from the Council and was adopted in 2016 as a part of Rule 64B24-7.014, Florida Administrative Code

B. Requirements of the Licensee

This report is derived from data provided using the *Annual Report of Midwifery Practice Form (DH-MQA 5011)* on an annual basis. Midwives whose licenses are active are required to report by July 31st each year.

C. Ongoing Development of the Annual Report of Midwifery Practice

The Council, acting in an advisory capacity, provides insight as to how the form might be further refined, what types of data to collect, and how to interpret that data in the context of the midwifery practice.

D. Reporting Rates

The reporting rate fell in this reporting cycle. We believe this decrease in returns is related to the ongoing effects of COVID-19 during the reporting period and a significantly higher percentage of delinquent licenses than in years prior. Delinquent licenses account for **10%** of all licenses in this reporting period, where they accounted for **5%** in the fiscal year (FY) 2018-2019 reporting period.

Reporting Period	Licensees Required to Report	Licensees in ACTIVE Status Required to Report	Reports Received	Percentage Returns / ACTIVE Percentage Returns
FY 2016-2017	198	(not available)	177	89.3% / (not available)
FY 2017-2018	206	(not available)	200	97.0% / (not available)
FY 2018-2019	217	206	167	77.0% / 81.1%
FY 2019-2020	212	191	134	63.2% / 70.0%

E. Limitations of the Dataset

The dataset compiled from the *Annual Report of Midwifery Practice Form (DH-MQA 5011)* is subject to inaccuracy introduced by licensees less familiar with the reporting mechanism, by error, or by omission.

The Annual Report of Midwifery Practice is designed to observe general trends within the profession, and to assess where regulatory response is appropriate in relation to the observed trends. The Annual Report of Midwifery Practice is not intended to provide information about specific midwives or specific cases.

Outliers – Required Reports for Non-Practicing Midwives

A significant number of licensees who were required to report do not appear to practice in Florida. Of the licensees in ACTIVE status in the reporting period, **23 out of 133** reported “0,” “none,” or similar in each data field. This represents **17.3%** of licensees, who hold an active license but do not practice in Florida. The non-practicing results received are not considered in analyses related to practice.

Section II. Midwifery Practice in Florida

A. Initial Visits and Antepartum Care

Initial Visits and Acceptance into Care:

Of the return reports, there were **110** where the response in 2A (total number of OB clients seen by you) was greater than or equal to 2B (total number of clients you accepted for care in the reporting period). Two reports have been excluded from calculations related to practice where 2B was greater than 2A. The totals from the 110 reports are:

Total Number of Initial Obstetrics Clients Seen:	5,367
Total Number of Maternity Clients Accepted into Care:	4,887
Percentage of Clients Accepted After Initial Visit:	91.1%

Transfers in the Antepartum:

Planned Transfers:	105
Unplanned Transfers:	242
Unknown/Other:	49
Total Number of Transfers in the Antepartum:	396
Antepartum Transfer Rate:	8.1% (396 / 4,887)

Outliers – Initial Visits / Acceptance into Care Only

Seven midwives reported only data in fields 2A and 2B. While these midwives are practicing, their results indicate that their practice is limited to initial visits and screening; they have been excluded from results that survey patterns in intrapartum and postpartum practice, since they do not have any intrapartum and postpartum practice.

2A (Total number of initial OB clients seen by you)	2B (Total number of maternity clients you accepted for care in the reporting period)
2	2
303	298
202	189
180	157
180	155
5	2
20	20

B. Labor and Delivery; Intrapartum Care

Delivery by Setting:

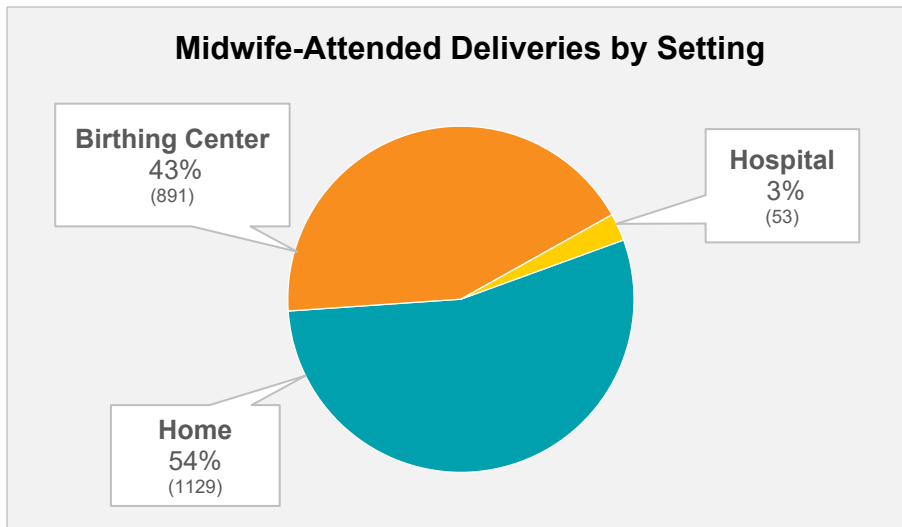
Midwives are required to report deliveries which they performed as the primary midwife. This subset excludes results where the total number of deliveries and delivery by location cannot be verified, except where the total deliveries as primary included delivery in a hospital setting as a part of the total in error; the unadjusted and adjusted totals are reported below.

The total number of midwives whose birth-related data could be included in this subset was **96 of 100**.

Reported Deliveries (unadjusted):	2,022
Home Deliveries:	1,129
Birthing Center Deliveries:	891
Total Reported Deliveries (Home, Birthing Center):	2,020
Total Reported Deliveries (adjusted):	1,993

Midwives may attend deliveries in hospitals but would not be considered the primary practitioner. The total reported deliveries below represent the number of confirmed births where a midwife was in attendance. In total, **19 out of 96** midwives included in this dataset (19.8%) reported attendance at a hospital birth.

Hospital Births:	53
Total Attended Deliveries (unadjusted; including Hospital):	2,073



Data Regarding Vaginal Birth after Cesarean Section:

Several midwives left fields related to planned vaginal births after caesarian (VBAC) section blank or entered an “X” or similar; it was assumed for the purposes of reporting data that a “X” or blank field was equivalent to entering “0” in these fields for purposes of analysis.

Planned VBAC: Includes all VBAC planned during the reporting period, regardless of delivery.

Midwives Planning VBAC:	10 of 100 (10.0%)
Number of Planned VBAC:	14

VBACs are reported in two categories:

Primary VBAC: Primary VBAC is defined as vaginal birth occurring as the next birth after a cesarean section.

Subsequent VBAC: Subsequent VBAC is defined as any vaginal birth occurring after a cesarean section which does not immediately follow a caesarian section.

Primary VBAC:	69	(37 of 100 midwives; 37.0%)
Subsequent VBAC:	57	(36 of 100 midwives; 36.0%)
Total VBAC:	126	(51 of 100 midwives; 51.0%)

Breech Births:

Five breech births were reported as completed by the midwife. There were no breech births reported by midwives whose birth-related data could not be validated.

Planned Antepartum Transfer for Breech:	7 of 105 (6.7%)
Overall Antepartum Transfer for Breech:	19 of 396 (4.8%)

Reported antepartum transfers where the reason for transfer was “breech” or similar are below:

<i>Date</i>	<i>Reason</i>	<i>Planned?</i>	<i>GA/Xfer</i>	<i>Outcome</i>
8/15/2019	Breech	Unplanned	41w 0d	C/S
8/16/2019	Breech	Unplanned	39w 3d	C/S
8/20/2019	Breech	Unplanned	36w 0d	C/S
8/26/2019	Breech presentation	Planned	39w 0d	C/S
9/23/2019	Breech	Unplanned	40w 3d	C/S
11/12/2019	Breech	Unplanned	39w 0d	NSVD
11/25/2019	Breech @ term	Planned	37w 3d	C/S
12/23/2019	Breech presentation	Planned	37w 0d	C/S
3/16/2020	Breech presentation	Unplanned	38w 0d	C/S
3/25/2020	Breech at term, External Version and IOL	Unplanned	39w 1d	NSVD
3/25/2020	Breech @ term/external version IOL	Unplanned	39w 1d	NSVD
3/25/2020	Breech @ term, eternal version & IOL	Planned	39w 1d	NSVD
3/25/2020	Breech	Unplanned	38w 5d	C/S
4/3/2020	Breech	Planned	36w 4d	NSVD
5/7/2020	Breech	Unplanned	39w 0d	C/S
5/9/2020	Breech	Planned	39w 0d	C/S
5/29/2020	Breech/Failed BPP on consult for ECV	Unplanned	37w 6d	C/S
5/31/2020	Breech presentation	Planned	39w 0d	C/S
6/1/2020	Breech Presentation	Unplanned	40w 0d	NSVD/ECV

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Reported intrapartum transfers where the reason for transfer was “breech” or similar are below:

Date	Reason	Delivery Method	Complications	Birth Weight (g)	NICU Admit?	NICU Reason	NICU Days	Death?
7/4/2019	Breech	C/S	None		N	N/A	N/A	N
7/12/2019	Breech baby	C/S	N	3543.6	N	N/A	N/A	N
7/26/2019	Breech	C/S	N	3175	N	N/A	N/A	N
10/17/2019	Breech in labor	C/S	None	unk.	N	N/A	N/A	N
10/20/2019	Breech	C/S	N	2750	N	N/A	N/A	N
12/12/2019	Breech	C/S	N	4110.7	N	N/A	N/A	N
2/22/2020	Breech	NSVD	N	3628.7	N	N/A	N/A	N
3/3/2020	Breech	C/S	N	3175.1	N	N/A	N/A	N
5/21/2020	Breech	NSVD	N	3373	N	N/A	N/A	N
6/10/2020	Breech	NSVD	N	2494.7	N	N/A	N/A	N
6/22/2020	Breech	C/S	N	3374	N	N/A	N/A	N

Multiple Births:

No unplanned multiple births were reported as completed by the midwife.

Planned Antepartum Transfer for Twins/Multiple: 19 of 396 (4.8%)
Overall Antepartum Transfer for Twins/Multiple: 7 of 105 (6.7%)

Reported antepartum transfers where the reason for transfer was “multiple,” or similar are below:

Date	Reason	Planned?	GA/Xfer	Outcome
3/3/2020	Twins	Unplanned	26w 0d	C/S
12/2/2019	SAB Twins	Unplanned	9w 0d	
6/25/2020	Twins	Unplanned	12w 0d	SVD
1/2/2019	US stated she pregnant w/ twins	Unplanned	7w 0d	C/S
4/20/2020	Twins	Unplanned	12w 0d	unknown
12/5/2019	multiple gestations	Unplanned	20w 0d	unknown

Deliveries Completed in Water:

Of the 100 midwives whose birth-related data could be validated and indicated that their practice was not limited to intake and screening, **93 midwives** (93.0%) reported deliveries completed in water.

The total number of deliveries reported as completed in water in this subset was **955**, or **46.7%** of the total births that could be verified.

Transfers in the Intrapartum:

Reported complications after transfer: 35 (11.7%)
 Reported neonatal intensive care unit (NICU) admissions: 18 (6.0%)
 Reported deaths after transfer in the intrapartum: 1
Total Number of Transfers in the Intrapartum: 298
Intrapartum Transfer Rate: 6.1% (298 / 4,887)

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All reported intrapartum transfers are listed below:

Date	Reason	Delivery Method	Complications	Birth Weight (g)	NICU		
					Admit?	Reason	Days
11/12/2019	Hx^d elevated BP	NSVD	Fetal Demise	2778.2	Yes	Tetoric ctx Stillborn	
5/27/2020	Bleeding is 1st stage	Vag	P.P. Hemorrhage	3231.8	No		
10/4/2019	Elevated Blood Pressure	NSVD	BP medication post delivery	3430.2	No		
9/9/2019	FTP, 1st stage	C/S	Spinal headache, blood patch	unk	N		
5/26/2020	moderate mec -/s active labor	CD	emergency CD for NFHR, time knot x2	3680.0	N		
11/3/2019	failure to progress	C/S	fever	4082.3	N		
1/5/2020	Failure to progress	Vag	Vacuum extraction		N		
4/27/2020	Meconium / FTP	C/S	Spinal leak/caffeine used	4507.6	N		
5/15/2020	Pain Management	SVD	returned placenta d/c after delivery	2579.8	N		
5/18/2020	Hypertension	SVD	postpartum HTN Tx	3685.4	Yes	Mec Aspiration	
9/12/2019	PROM, febrile, HTN	NSVD	Yes, retained placenta	3203.5	N		
9/29/2019	PROM, HTN	NSVD	PPH, D + C	4167.4	N		
6/16/2020	Maternal Seizure	NSVD	Hyponatremia	3543.7	Yes	Hyponatremia	
2/21/2020	non reassuring FHT	C/S	maternal hospitalization postpartum per infection in spinal fluid suspect epidural complications	unsure	N		
2/5/2020	FTP -/c Prolonged ROM	NSVD	Fetal distress -/c thick mec upon arrival, NSVD quickly	2551.5	N		
2/12/2020	Preterm	C/S	preterm weight		Y	unknown	0
5/11/2020	Hypertension	C/S	Eclampsia, fetal distress	2778.3	Y	low APGARs	
12/4/2019	Pre-eclampsia	NSVD	Pre-Eclampsia	3572.0	N		
8/20/2019	2nd stage arrest, thick mec	NSVD	2 degree LAC	4139.0	N		
1/5/2020	2nd stage arrest, ROP/acynclitic	NSVD	ROD - ROA, Kiwi	4054.0	N		
4/4/2020	exhaustion, pain mgmt	C/S	terrible on-call hospital	3288.5	N		
4/23/2020	slow push & advancement	NSVD	compound pres, 3 degrees LAC	2892.0	N		
1/15/2020	FTP	NSVD	HTN	3118.0	N		
5/10/2020	PROM & FTP	C/S	maternal fever	4195.7	N		
10/27/2019	High blood pressure Premature Rupt. Of Memb.	C/S	elevated BP fetal decels	3628.7	N		

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Date	Reason	Delivery Method	Complications	Birth Weight (g)	NICU		
					Admit?	Reason	Days
12/18/2019	Post-Dates	C/S	maternal exhaustion fetal decels	4961.2	N		
12/17/2019	Premature Rupt. Of Membranes >12 h fetal tachycardia	C/S	fetal decels	3968.9	N		
4/5/2020	Elevated BP	SVD	pre-eclampsia, oligo, MSAF	3968.9	Y	MAS unstable O2 sats	
7/2/2020	FTP	C/S	Fetal Distress	3231.8	unk		
1/2/2020	Mec, fever	C/S	Fetal Distress	3345.2	Y	unknown	
9/24/2019	Elevated Blood Pressure	NSVD	Retained Placenta	3657.1	N		
8/6/2019	Prolonged Labor Maternal Exhaustion Pain Management	VD	SVD		N		
7/31/2019	Traverse arrest, fetal intolerance	C/S	Arrest in descent-cesarean	3175.1	Y	bilirubin monitoring	2
8/15/2019	Failure to progress	C/S	Failure to progress	4535.9	N	N	
10/29/2019	Failure to progress, non-reassuring FHT	C/S	Failure to progress, non-reassuring FHT	4082.3	N	N	

C. Newborn and Maternal Outcomes; Postpartum Care

Mothers Requiring Sutures

Of the 100 midwives whose birth-related data could be validated, **84 midwives (84.0%)** reported providing sutures as part of postpartum care. In total, **558** mothers required sutures following birth, or **27.2%** of deliveries completed by midwives.

Of the **70** mothers transferred postpartum, **15** were transferred for repair of lacerations of the third or fourth degree. Suturing outside the scope permitted accounts for **21.4%** of all postpartum transfers.

Reported postpartum transfers where the reason for transfer was “laceration,” “tear,” etc. are below:

Date	Reason	Hospital Days	Outcome
7/30/2019	3rd degree repair	0	Discharged to home without complications
10/28/2019	3rd degree laceration	0	Laceration repaired, stable condition
6/1/2020	3rd degree laceration	2	sutured
6/14/2020	3rd degree laceration	1	sutured
5/23/2020	Suturing	1	Stable condition
10/9/2019	Laceration repair	0	Lac repaired without incident
8/6/2020	#3 tear, repaired	1	Repaired stable released for flu with midwife
9/19/2019	3rd degree laceration repair	<1	OB did repair
11/13/2019	Sutures only - peri-urethral	<1	sutured d/c in 4 hours
6/25/2019	4th degree laceration	2	stable
10/27/2019	4th degree laceration repair	0	Discharged to home without complications
8/26/2019	PPH % sutured	2	2 units blood/stable at discharge
7/3/2020	Clitoral Laceration	0	Good condition
4/6/2020	perineal tear 3rd degree	1	uncomplicated repair
4/15/2020	Third degree laceration	0	laceration repair with hospital d/c 2 hours later

Newborn Postpartum Transfers

In total, **32 newborn transfers** occurring postpartum were reported, and **21** of these transfers (65.6%) resulted in admittance of the newborn to a NICU.

Stillborn Delivery, Fetal Demise, Maternal Death

One stillborn delivery was reported. Two neonatal deaths occurring within seven days of delivery were reported. Neither neonatal death occurred under the primary care of a midwife; one followed admittance of the newborn to a neonatal intensive care unit. No maternal deaths were reported.