

Appendix 20: Overview of Data Collection Tools for Midwifery Practices

This appendix provides a summary and potential uses of the four data collection tools referenced in this guide. They include:

- New OB Log (Appendix 21)
- Patients Due Log (Appendix 22)
- Delivery Log (Appendix 23)
- Midwifery Practice Statistics Spreadsheet (Appendix 24)

The **New OB Log (appendix 21)** tracks the number of New OB appointments each month. The log helps you monitor the volume/growth of your practice and identifies important features of your patient population. This data should be entered by the midwife who saw the patient for that appointment. The “Referred” column is very helpful and often underutilized. If you know how your patients learned about you, you can focus your marketing or outreach efforts on specific strategic partners. Feel free to modify the spreadsheet to meet the needs of your practice.

The **Patients Due Log (appendix 22)** helps you track which patients are due every month. A midwife should enter the initial data points who sees the patient for her New OB visit. Then, when a patient’s status changes, should she have a miscarriage, transfer to another provider or move, the midwife who is signing off on the chart should enter the data. If the patient is no longer going to deliver with the practice, the visits she has had should be billed at that time.

Over time, the Patients Due Log can help you project future volume and identify the right time to add another midwife. If a practice, for example, has been delivering 40 babies per month for the last year. While they consistently record 50 new OB patients (in appendix 24) each month, the Patients Due log indicates only 40 women are due to deliver per month. The practice has staffing model adequate for this delivery volume. A new strategic partnership is developed with a community health center, increasing the new OB’s patients recorded. In about 5-7 months in the future, the practice will also see an increased number of patients due. The practice projects out to see when their deliveries will increase by ten per month so they can plan well ahead of time to have a new midwife on board by then. Tracking New OB visits and Patients Due every month helps you anticipate an increased need in staffing and potentially additional hours in the office.

The **Delivery Log (appendix 23)** should be completed by the midwife attending the delivery. If a patient is followed by the practice until right before delivery, but she is delivered by a physician, her data should still be tracked here. For example, the midwives follow a patient until she is full-term but her baby is breech and she has a cesarean section by one of the consulting physicians, she is still considered a “midwifery caseload” patient.

The **Midwifery Practice Statistics Spreadsheet (appendix 24)** tracks volume and outcomes in your midwifery practice across time. For the key measures you want to highlight, use national, state, hospital and midwife practice statistics. Make sure to monitor indicators where midwives make known contributions such as cesarean section rate, preterm birth rate or low birthweight rate. You may want to monitor volume trends for new OB visits, EDCs and deliveries.