

TEAMBIRTH FOR COMMUNITY MIDWIVES

WHAT IS TEAMBIRTH?

TeamBirth is a process improvement designed to shift the traditional power dynamics in a hospital setting, to ensure that all members of the care team — birth givers and their families, doulas, nurses, and providers (both hospital and community-based) — feel empowered to **share their perspectives** and to **reach decisions together**.

The full care team meets in regular **huddles** around the client throughout birth and postpartum care to discuss **preferences and experiences** and to **set clear expectations** for what will come next, with the use of a shared planning board (below).

Initial huddle occurs:

At or around admission

Ongoing huddles occur:

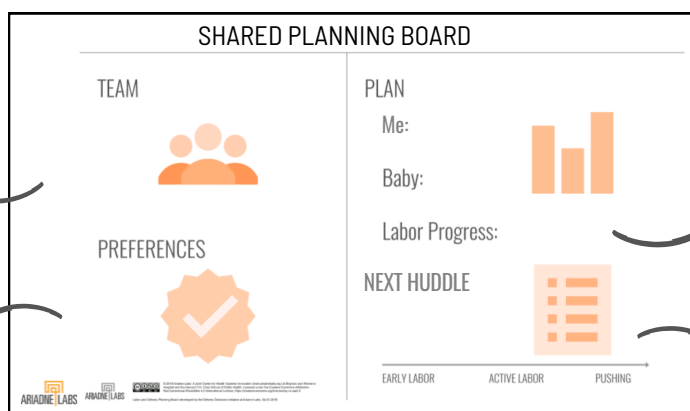
At key decision points

Changes in the plan of care

At request of any team member

PROMOTE **CONTRIBUTIONS**
AND PSYCHOLOGICAL
SAFETY OF **ALL TEAM**
MEMBERS

ELICIT BIRTHING
PERSON'S **PREFERENCES**
AND CONCERNS



CLEARLY DISTINGUISH
CARE PLANS FOR THE
PERSON GIVING BIRTH,
THE BABY, AND LABOR
PROGRESS*

**Labor progress refers to the laboring uterus and cervix. Plans for progress should also be discussed in postpartum and newborn huddles.*

SET CLEAR EXPECTATIONS
OF **WHAT'S NEXT** FOR THE
FULL TEAM

WHAT CAN I EXPECT?

Best practice indicates an initial huddle taking place at the time of transfer of care to a hospital-based provider. The community midwife is considered part of the team and is a key contributor to the initial huddle. The community midwife can request a huddle, and should advocate to participate, if necessary. During huddles, the team will use the planning board to support **shared decision-making**. Following transfer, the patient or a member of the hospital-based team can call the midwife at any point throughout care to join a huddle.

HOW CAN I PARTICIPATE?

Offer..

- ✓ Lead the initial transfer huddle and write on the whiteboard!
- ✓ Help identify what's most important during the huddle!

Ask...

- ✓ *"I'd like to share my contact information. How can I stay in communication with the hospital team?"*
- ✓ *"How can we coordinate a discharge huddle?"*

Suggest...

"This is a new environment for this family. **Let's huddle** to discuss which aspects of their birth preferences can be honored in this care setting."



COMMUNITY TRANSFER CONSIDERATIONS

- **Share** your client's relevant history/ medical information with team during huddle
- **Lead** the debrief with hospital-based team following transfer
- **Plan** for a huddle prior to time of discharge if postpartum or newborn care will **transfer back** to the community midwife after leaving the hospital setting

- **Utilize** the TeamBirth huddle structure to support conversations about the decision to transfer from a community birth center or home to a hospital.

TeamBirth huddles encourage the full team to discuss what is reassuring or concerning in clear categories: the birthing person, the baby, and the labor progress. Using this standard format provides the full team a clear, consistent way to review options and arrive at shared decisions together.

Birthing Person

- Upon request
- Concerns about wellbeing during and after birth

Baby

- Concerns about wellbeing during or after birth

Labor Progress

- Slow to begin
- Slow to progress
- Prolonged pushing without progress

HOW DO I KNOW IT'S WORKING?

A community midwife included in a TeamBirth birthing facility should be:

- **Invited** to add their name to the team section of the shared-planning board
- **Included** in huddles as part of the team (initial, as needed, including discharge)
- **Empowered** to request huddles when they feel it is needed
- **Encouraged** to contribute notes to the board that reflect huddle conversation
- **Acknowledged** by hospital-based team to answer questions and provide clarification



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TEAMBIRTH SITE
CONTACT
INFORMATION

Provided by the hospital
facility once they have
implemented TeamBirth

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