

**2016 ANNUAL REPORT** 



#### **From Our President**

Dear Friends,

For ACNM, 2016 was a year of transition. We continued to realize our vision of assuring that every individual who desires a midwife has access to one and embarked on steps to ensure that our organizational structure is in alignment with our strategic priorities. Our Board of Directors and national office leaders explored opportunities and the challenges of meeting our commitments, as outlined in ACNM's 2015-2020 strategic plan, to build a strong association that can serve as the voice of midwives locally, nationally, and globally.

Two years in, we needed to ensure that we were maintaining a solid infrastructure upon which to build our organizational capacity. This capacity, the fifth of the 5 domains of our strategic plan, defines our ability to improve our visibility and impact in serving midwives and growing our profession. And it encompasses our ability to acquire the resources, expertise, knowledge, finances, human creativity, and strategic thinking necessary to maintaining ACNM's position as a leader in women's health care. In 2016, in service to this goal, ACNM conducted a 9-month national search to identify a new chief executive officer (CEO). In October 2016, Frank Purcell began to serve in this role (see page 14).

In a parallel effort, we prioritized our financial stability to secure the necessary resources to continue to implement our strategic plan. We explored efficiencies, matched expenses to stated priorities, and invested in new technologies in the form of a new Association Management System (AMS). This process enabled us to reduce a prior deficit and make progress toward balancing our budget in 2017. ACNM also expanded fundraising and business development to attract more revenues, including domestic and global grants for strategic initiatives.

"We explored efficiencies, matched expenses to stated priorities, and invested in new technologies."

Central to ACNM's continued success as an organization is our hosting of an outstanding annual meeting each year, growing our membership in all categories, and sustaining a strategic plan for global outreach services and leadership. These core functions, in tandem with the key activities of our volunteer leadership and the expertise represented in our national office, enable ACNM to make a difference every day for midwives and those we serve. Yet ACNM will always still need every individual member to help us encourage more midwives to join our ranks and to convey the many ways we provide the foundation for a growing profession!

This report highlights the work we undertook in 2016 and offers a glimpse of the enormous dedication our individual members, ACNM volunteer leaders, and our national office staff in achieving the work that positions ACNM as a leader in women's health care, advocacy, and service to our members.

I look forward to our shared journey as we ensure that all our members, now and in the future, are well supported to make a difference. #MidwivesMakeADifference! I appreciate your support, contributions, and input as we undertake this journey together.

Sincerely, Lisa Kane Low, CNM, PhD, FACNM, FAAN President, ACNM Board of Directors

## A Midwife for Every Woman. Our 5-Year Vision

As the leading midwifery organization, ACNM is dedicated to serving and advocating for our members—CNMs and CMs—from student midwives to seniors. Our vision, a midwife for every woman, sets our course for delivering a lifetime of high-quality, cost-effective, respectful health care to the individuals we serve. We entered 2016 with a focus on continuing to roll out our 5-year strategic plan and ensuring that our organization advances the profession of midwifery in service to our members. As 2016 unfolded, we addressed challenges in matching resources with priorities to enable ACNM to continue as a well-positioned advocate for our members and to promote midwifery domestically and globally.

#### **REACHING OUR STRATEGIC PLAN, 2015-2020**

**Diversification & Inclusion** 

**Leadership Development** 

**Interprofessionalism** 

Communication

Research

To fulfill our mission and vision as outlined in the 2015-2020 Strategic Plan, ACNM targets 5 core commitments across 5 strategic domains.



#### **SUPPORTING OUR MEMBERS**

Increase the value of ACNM membership by providing high-quality resources and experiences



#### **SUPPORTING OUR AFFILIATES**

Support the growth and development of our affiliate organizations.



## ADVANCING MIDWIFERY & WOMEN'S HEALTH NATIONALLY

Expand access to midwifery care for all women.



#### **EXPANDING GLOBAL ENGAGEMENT**

Partner with global stakeholders to advance the health of women and newborns.



#### **BUILDING ORGANIZATIONAL CAPACITY**

Ensure the availability of resources and expertise to fully support our strategic plan.

## **SUPPORTING OUR MEMBERS**

At every step, ACNM's paramount focus is serving our members and providing an excellent membership experience. As of December 31, 2016, ACNM has 7,414 members. Although this represents a slight downturn from 2015 (see chart), our 2016 membership is still 9% higher than it was in 2010. Yet we are committed to surpassing that previous peak, and to achieve this, in 2016 we made significant advances in our membership strategy. In partnership, the ACNM Membership and Marketing Committee and the Membership Department expanded their outreach efforts, bringing creativity and fresh perspectives to their goal of appealing to all of the various demographics of ACNM's prospective members.

#### **NEW MARKETING INITIATIVES**

These efforts have resulted in the production of a compelling new membership recruitment video, the release of new online recruitment materials for members, and the creation of new membership campaigns, including a new Lifetime Membership opportunity launched at the end of 2016, which supports the retention of members in their retirement years. As another marketing initiative, designed to support members with their networking and job-hunting goals, we hosted ACNM's first annual Virtual Career Fair, which drew 215 students and midwives and connected them directly with midwifery employers nationwide.





#### LISTENING TO OUR MEMBERS

To gauge member needs and delve deeper about their needs and interests, the Membership and Marketing Committee and Membership Department conducted a membership survey during Fall 2016. We heard from 1,717 members with representation from every affiliate. Using this feedback, we have begun to better align our priorities to meet members' expectations. Initial review of the results have highlighted opportunities to improve member experiences through more tailored outreach and expanded development of networking opportunities.

#### A NEW AMS: PERSONALIZING MEMBER EXPERIENCES

To meet our members' needs for personalization of services and improved outreach, we realized ACNM would require a new association management system (AMS). During the second half of 2016, we committed to revamping our outdated membership database. The replacement AMS will be implemented by Summer 2017, under the direction of the Membership Department and the director of information technology. The new system will enhance effective delivery of member services online and enable members to conduct their activities with ACNM via smartphone or tablets. The new "ACNM Connect" member option will allow members to create and update their own profiles, establish and join online professional networks, and benefit from increased accessibility to the news and updates they want to receive. This means individual members will be able to tailor the ways in which they engage with other members and ACNM overall, based on their unique interests. ACNM Connect will also improve the technical infrastructure behind many member committee and affiliate activities, simplifying work and supporting the passage of knowledge from one year to the next.

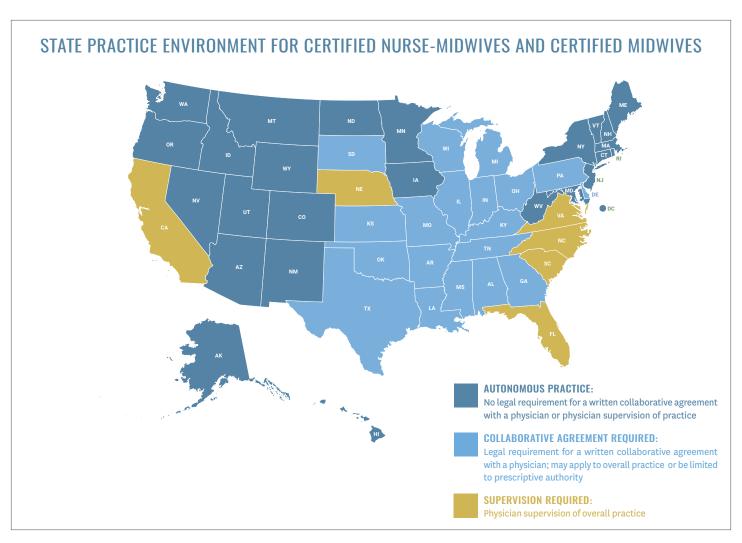
Through its affiliate organizations, ACNM is part of a national network of like-minded midwifery professionals dedicated to enhancing our professional standing and capacity. ACNM's strength on many fronts derives in large measure from this crucial network, and ACNM dedicates itself to supporting state efforts and amplifying its effectiveness.

#### ADVANCING STATE LEGISLATION

In 2016, ACNM's Advocacy and Governmental Affairs Department devoted itself to assisting our members more effectively tackle state issues related to midwifery scope of practice. Full practice authority remained the top advocacy goal of both the ACNM affiliates and the national office. This year, we achieved important wins, made outstanding progress, and got through a few setbacks, from which we are rebounding.

- West Virginia HB 4334 pushed through in March 2016!
   Midwives celebrated the overturn of outdated oversight.
   As of June 2016, CNMs achieved full practice authority as APRNs, eliminating the collaborative requirement.
- Maine's LD.690 passed on April 29, 2016. It provides for licensure of both CMs and Certified Professional Midwives (CPMs), and is the result of a successful multi-stakeholder negotiation, which could provide a model for the expanded recognition of CM credentials elsewhere.

To review all of our 2016 affiliate wins and initiatives, visit www.midwife.org/ACNM-Policy-Updates. Members can stay informed about the issues they care most about through ACNM's Legislative Tracking tool: www.midwife.org/Legislative-Report, and they can learn how to get involved by contacting their affiliate legislative chair. Every voice matters!



## **ADVANCING MIDWIFERY & WOMEN'S HEALTH NATIONALLY**



#### THROUGH ADVOCACY

In 2016, ACNM advanced midwifery and women's health on the national front through many strategic activities. Among them, we galvanized members on the policy front, and they deluged their US Representatives and Senators with visits, calls, emails, and faxes. As a direct result of ACNM's members' advocacy:

- The Improving Access to Maternity Care Act passed out of the House of Representatives in October. The bill seeks to identify areas of the country where a shortage of maternity care providers exists, and it provides other measures to eliminate gaps in access to care.
- The Veterans Health Administration (VHA) recognized the full practice authority of CNMs in Veteran's Health facilities. This change in VHA rules ensures that women veterans will have full access to the midwifery services from the hundreds of midwives who proudly serve our military. ACNM is now working with the VHA to connect women vets with midwives and to extend full practice authority to CMs and other APRNs.

#### THROUGH PRACTICE IMPROVEMENT, QUALITY, AND SAFETY

In 2016, ACNM led or joined in a range of projects and grants to improve maternal and child health in the US. This important work is another opportunity to demonstrate the role of midwives in quality improvement in maternal health care. Highlights include the following.

#### The Reducing Primary Cesarean Project

The Reducing Primary Cesarean Project (RPC), funded by the Transforming Birth Fund, a donor-advised fund of the New Hampshire Charitable Foundation, is now in its second year and continues to advance practice change and develop midwifery quality improvement leaders. In 2016, 17 hospitals nationwide participated in the RPC perinatal quality learning collaborative, reaping the benefits of a carefully designed curriculum, supporting materials and resources, and individualized coaching calls with trained ACNM coaches. The project additionally brought all of the participants together for 2 in-person meetings to support the training they received to implement action steps and collect and monitor data. Preliminary RPC results suggest the project is reducing hospital rates of cesarean births for low-risk women by 1% to 27%. Twelve hospitals have requested continuation in the program and 5 new hospitals have joined the collaborative. More information is available on the Healthy Birth Initiative website at www.BirthTOOLS.org.

#### The Alliance for Innovation on Maternity Care

ACNM continues to contribute its expertise as a lead partner in the Alliance for Innovation on Maternity Care (AIM). Together with American Congress of Obstetricians and Gynecologists (ACOG) and under the auspices of the Council on Patient Safety in Women's Health Care, the AIM collaborative seeks to reduce maternal mortality by 1,000 incidents and severe maternal morbidity by 100,000 instances between 2014

## **ADVANCING MIDWIFERY & WOMEN'S HEALTH NATIONALLY**

and 2018, using data-driven, actionable safety bundles and associated tools and materials.

#### **Spotlighting AlM's Racial Disparities Bundle**

One of the bundles ACNM contributed to significantly during 2016 is AIM's new racial disparities bundle. Designed to address disparities elimination, this bundle includes a clinical perspective and social perspective. To develop it, AIM's team drilled down into key factors including systematic racism and ensured the bundle was actionable. The bundle follows a familiar 4 R format, with actionable steps in the categories of readiness, recognition, response, and reporting. Evaluators suggest that by taking the lead on tackling disparities elimination from a patient safety perspective, AIM has spearheaded standout work.

#### THROUGH SHARED KNOWLEDGE

Our volunteers in the Divisions of Standards and Practice, Education and Research, in partnership with the Department of Midwifery Practice, Education and Global Outreach (MPEGO), continued to produce relevant, evidence-based resources to

Health 40% breast cancer nore likely to die from breast cancer **Disparities** 20% depression **Among African** likely to receive treatment for depression **American Women** 30% heart disease nore likely to die of heart disease In the U.S\* 40% obesity ly to be obese 40% stroke e likely to die from stroke 2.1x asthma 2x cervical cance s likely to die from cervical 3x to 4x maternal mortality as likely to die during pregnancy 2.4x infant mortality can American babies are 2.4 times less li 60% diabetes more likely to be diabetic 9x HIV as likely to be diagnosed with HIV

keep our members informed about best-practice changes and updates, as well as ACNM's responses to challenges facing midwifery practice. On an ongoing basis the DOSP and its volunteer authors reviewed and updated existing documents and resources, including position statements, and researched, developed, and reviewed, new documents including "The Prevention of Gun Violence," and "Conscientious Refusal and the Profession of Midwifery." These resources are available at www.midwife.org/ACNM-Library.

In response to members' needs and interests, in 2016, ACNM also released several new publications, available via the ACNM store, updated the ACNM website to support students exploring educational opportunities to become a midwife, and expanded preceptor resources and tools, www.midwife.org/Preceptors.

#### **2016 Practice Documents and Publications**

- · An Administrative Manual for Midwifery Practices
- The Homebirth Practice Manual (3rd Edition)
- · Midwife Birth and Skills Log
- · The Midwife as First Surgical Assistant (2nd Edition)

#### **Clinical Bulletins**

- · Midwifery Provision of Homebirth
- A Model Practice Template for Hydrotherapy in Labor and Birth

#### **Position Statements**

- · Conscientious Refusal and the Profession of Midwifery
- · Prevention of Gun Violence
- Provision of Health Care for Women in the Criminal Justice System
- · Shared Decision-Making in Midwifery Care
- Statutory and Regulatory Language Differentiating Scope of Practice/Practice Authority

#### THROUGH THE JOURNAL OF MIDWIFERY & WOMEN'S HEALTH

#### JMWH. Growing Impact and Value

ACNM members continue to consider the peer-reviewed *Journal of Midwifery & Women's Health* among their most highly valued member benefits, and its impact continues to grow. The frequency in which that a *JMWH* article is cited yearly increased in 2016 from 1.067 to 1.432, the highest to date, and *JMWH* articles have received wide-ranging media attention. "Maternal and Newborn Outcomes Following

## **ADVANCING MIDWIFERY & WOMEN'S HEALTH NATIONALLY**

Waterbirth: The MANA Statistics Project 2004 to 2009 Cohort," for example, was featured in reports from MSN, CBS News, *Science Daily*, and *Medical News* Today, and a piece about "The Baby-Friendly Hospital Initiative as an Intervention to Improve Breastfeeding Rates: A Review



of the Literature" on Slate.com attracted a high readership. This year, *JMWH* many highlights include the following.

- JMWH published 2 continuing education theme issues in 2016: "Women's Health Across the Lifespan" included articles addressing a variety of gynecology and primary care topics, and "Achieving Health Equity in Midwifery and Women's Health" was developed in conjunction with the ACNM Diversification and Inclusion Task Force.
- The November/December 2016 issue of JMWH included an innovative supplement on clinical education that focused on techniques and resources clinicians can use to strengthen their existing precepting skills, or guide them as they become preceptors for the first time. The supplement was sponsored by 20 midwifery education programs across the country, and the faculty and preceptors of these programs receive complimentary continuing education for the activities in this supplement.
- JMWH editors partnered with the editors of Obstetrics & Gynecology; The Journal of Obstetric, Gynecologic, and Neonatal Nursing; and Anesthesia & Analgesia to co-publish the "National Partnership for Maternal Safety: Consensus Bundle on Venous Thromboembolism," developed by an interprofessional working group of midwives, nurses, and physicians.

#### THROUGH MEASURES OF OUALITY

#### The ACNM Benchmarking Project

The ACNM Benchmarking Project enables members to compare their practice outcomes and productivity measures against other midwifery practices, facilitating quality management techniques in clinical practice, and increasing member awareness of "best practices" in midwifery care. The 2015 data, released in 2016, reflected selected outcome measures, and encompassed 285 practices that participated in ACNM benchmarking and reported on 138,357 births in 46 states. It also included:

- A variety of birth settings, including 30 homebirth and 27 freestanding birth center practices
- 3054 water births
- · 64 practices providing care using the Centering model
- Over 1400 CNM FTEs (full-time equivalents)
- The affiliate with the most participation was New York with 32 practices. Region IV had the greatest participation rate with 56 practices.

#### THROUGH PUBLIC CHANNELS

#### **Telling our Story and Sharing Key Messages**

ACNM has a compelling story to tell. Whether we're sharing stories about the dedication and achievements of our midwives, the impact of their research, the honors they have achieved, their advocacy on behalf of their profession or women's health, or the way they're making a difference globally, ACNM's stories, blog and Facebook posts, Tweets, Youtube videos, and Instagram activities have reverberated around the internet. For instance, ACNM's 3 promotional videos about women's health and the value of midwifery

	All practices	< 50 births/year	51-199 births/year	200-499 births/year	500+ births/year
	n=285	n=32	n=61	n=98	n=94
Spontaneous Vaginal Birth	83.8%	93.6%	86.7%	83.5%	78.5%
VBAC Success	81.7%	91.7%	84.9%	80.9%	76.9%
Total Induction	19.3%	10.7%	17.3%	21.6%	22.1%
Episiotomy	2.4%	0.7%	2.6%	2.2%	3.2%
Exclusive Breastfeeding at Discharge	84.4%	92.0%	89.1%	91.2%	70.9%

## **ADVANCING MIDWIFERY & WOMEN'S HEALTH NATIONALLY**

continue to garner attention. They are available on the ACNM YouTube channel and www.ourmomentoftruth.com/Midwifery-and-Womens-Health-Videos.

#### **Expanding Our Presence**

In 2016, @ACNMMidwives joined one of the most popular social platforms – Instagram. Within 4 months of its launch, our new account had gained nearly 500 followers. Facebook saw no signs of slowing down, and steadily grew by 31%, up from last year's 18% growth. Twitter stayed steady with an average of 11,800 followers, and became the go-to resource for advocacy updates and response. Our social media platforms continue to see substantial engagement, with the highest post reaching 61,000 people.

We also use these channels to provide regular, timely women's health information to our members, which they can share with their clients. Find this content on our consumer site, Midwifery & Women's Health, Discover Midwifery Care at www.ourmomentoftruth.com.

Both new and traditional media reporters rely on ACNM to connect them with midwives and provide statements on the news of the day, building our public presence and promoting midwifery among health leaders, influencers, and the public.

#### THOUGH EXPANDING PRACTICE OPPORTUNITIES

#### Interprofessional Education: The Macy Foundation Grant

When ACNM and the Accreditation Commission for Midwifery Education (ACME) released the most recent Midwifery Education Trends Report in late 2015, the

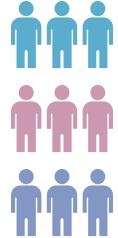


numbers told a powerful story. The national shortage of providers of primary, reproductive and obstetric health care for women was resulting in 1 million mothers not receiving adequate prenatal care. To ACNM leaders, increasing the number of US midwives is a clear solution to this problem. In 2016, ACNM and ACME undertook a number of initiatives in response to the report's recommendations with a focus on expanding educational opportunities to develop the midwifery workforce. A key recommendation was to increase

31% Up on Facebook

500+
Instagram followers and counting....

**61,000**People reached from highest post



the number of clinical education sites through greater collaboration with OB/GYN residency education programs.

This common-sense recommendation included the expansion of opportunities to promote interdisciplinary education. To this end, ACNM invested substantially to support the work of the Interdisciplinary Task Force with joint leadership from ACNM and ACOG. Together with ACOG, ACNM developed a proposal for a national interdisciplinary professional education (IPE) initiative. The Macy Foundation agreed to fund this important 3-year project, which aims to expand interprofessional learning opportunities nationally for shared didactic content and expanded shared clinical learning opportunities. The project will formally launch in February 2017 and is designed to have the net effect of increasing the numbers of women's health care providers educated in an IPE Model.

#### **Petition for Continued Recognition**

In 2016, ACME also submitted its petition for continued recognition, which is required very five years. The process, now underway, includes several layers of review culminating in a public meeting with the National Advisory Community on Institutional Quality and Integrity in the fall of 2017. ACNM is recognized by the US Department of Education as a programmatic accrediting agency for midwifery education programs since 1982. It is housed within ACNM's corporate structure, but is administratively and financially autonomous from the college. More information can be found at www. midwife.org/acme.

## **EXPANDING GLOBAL ENGAGEMENT**

CNM's Department of Midwifery Practice, Education and AGlobal Outreach (MPEGO), which includes the former Department of Global Outreach, continued to provide leadership, expertise, and direct technical assistance to an expanded number of grant-funded initiatives in 2016. In collaboration with its global stakeholders, including United States Agency for International Development (USAID), International Confederation of Midwives (ICM), ACOG, American Academy of Pediatrics (AAP), Laerdal Global Health, Jhpiego, Save the Children, ABT Associates, and Project Concern International, MPEGO projects focused on promoting evidence-based interventions for preterm and low-birth weight babies; and improving health outcomes and contributing to the achievement of major global efforts, especially Ending Preventable Child and Maternal Deaths and Working Toward an AIDS-Free Generation.

Through private sector engagement, MPEGO also participated in Family Planning 2020, which aims to strengthen the primary health care system in Jordan to better respond to challenges from the increasing refugee population and to strengthen education capacity in Zambia. ACNM is 1 of the 3 American professional association partners in the Survive and Thrive Global Development Alliance (GDA) and staff participated in GDA activities related to the 100K Babies Project, which focuses on preventing newborn deaths in Ethiopia, India, and Nigeria.

In addition to providing direct technical assistance in several countries, ACNM's global team provided expertise to develop key documents and resources in service to the global community. In partnership with Jhpiego, we authored the newest module in the Helping Mothers Survive series, Normal Labor and Birth and served as co-authors for Improving Care of Mothers and Babies: A Tool for Improvement Teams, which will be used as a part of WHO's global quality of care initiative and led development of a Professional Association Strengthening Manual in collaboration with ACOG and AAP.

#### AN ACMM PRESENCE INTERNATIONALLY

ACNM was well represented at key global meetings including Women Deliver in Copenhagen, the Family Planning 2020 conference in Indonesia, and the Global Midwifery Advocacy Strategy Group convened by the White Ribbon Alliance, ICM and UNFPA. As a result of our efforts, ACNM joined other American and global professional organizations as a signatory to 3 major joint statements supporting World Health Assembly resolutions:

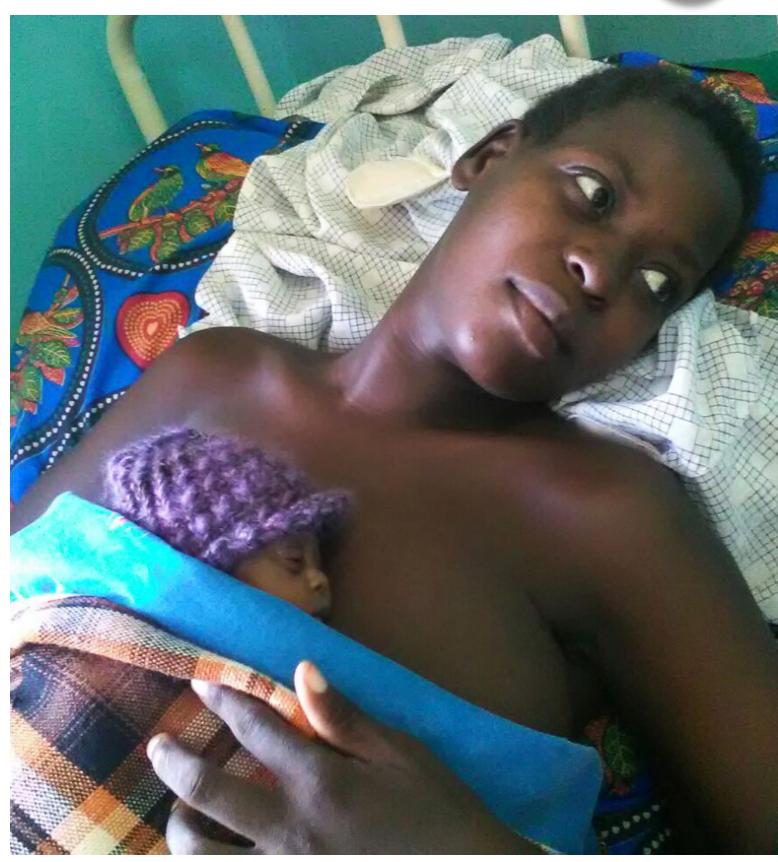
- International WHO Recommendations on Interventions to Improve Preterm Birth Outcomes;
- Improving Quality of Maternal and Newborn Care in Lowand Middle-Income Countries, and
- International Policy Statement for Universal Use of Kangaroo Mother Care for Preterm and Low Birthweight Infants.

The Division of Global Health (DGH), the member volunteer section, is focused on scaling its online presence to support member engagement in global health opportunities including practice, research and advocacy. DGH has also refined its objectives for online engagement to promote networking between midwives working globally and those with an interest in global health. To learn more about global health and ACNM's work through DGO, see www. midwife.org/Global-Outreach, and www.midwife.org/dgh.

TAZA Midwives (Twinning Association of Zambian and ACNM) worked collaboratively with DGH volunteers on Zambian midwife Beatrice Zulu's excellent proposal to improve the abilities of faculty members in about 16 schools of midwifery throughout Zambia. Beatrice received 5000 Euros for her project. MPEGO and the Division of Global Health also jointly hosted the Pedersen awardee, Bupe Mwamba from Zambia, also a member of TAZA, at the Annual Meeting in Albuquerque in May 2016.

## **EXPANDING GLOBAL ENGAGEMENT**





### **BUILDING ORGANIZATIONAL CAPACITY**

The mission and strategy of the ACNM is supported by the organizational capacity, resources, and expertise of the ACNM and its national office, located in the Washington, DC, suburb of Silver Spring, Maryland. To enhance this capacity, during 2016, the ACNM placed a special focus on:

- developing and strengthening relationships with stakeholders critical to improving maternity care and women's health, and reducing barriers to midwifery practice;
- · building financial stability in the organization; and
- making a significant new investment in ACNM's technical infrastructure to substantially improve members' experiences

#### **NEW AND DEEPENED PARTNERSHIPS**

ACNM deepened partnerships and coalitions critical to achieving our mission, including with the A.C.N.M. Foundation Inc., the American College of Obstetricians and Gynecologists; the Association of Women's Health, Obstetrics and Neonatal Nurses; and the American Registry for Diagnostic Medical Sonography, and with the midwifery professional, certification and accreditation bodies represented by the United States Midwifery Education, Regulation and Association (US MERA); the American Midwifery Certification Board, and the Accreditation Commission for Midwifery Education. The ACNM also maintained an organizational affiliate relationship with the American Nurses Association, and continued as an important member of the National Quality Forum.

In 2016, we also forged the following new collaborations:

- · American Institute of Ultrasound in Medicine
- · Association of Professors of Gynecology and Obstetrics
- · Health working group for the US End FGM/C Summit
- · March of Dimes Prematurity Prevention Collaborative
- · Medicaid Innovations
- · National Advisory Council on Nurse Education and Practice
- CDC's Elimination of Mother-to-Child HIV Transmission (EMCT) Stakeholders Workgroup
- · National Council on Financing Group Prenatal Care
- · ACOG Committees and Task Forces:
  - · Maternity Care Episode Work Group
  - · Task Force on Redefining the Postpartum Visit
  - Planning Committee for Facility Standards Development Initiative
  - · Perinatal Depression Convener Meeting
  - · Women's Preventive Services Initiative

#### THE ACNM TEAM

The success and advancement of ACNM members and the profession of midwifery are largely due to the vision, commitment and hard work of the ACNM Board of Directors, our dedicated staff, and the engagement of our committed members through their volunteer activities. Our members serve on divisions, committees, task forces, as representatives to other organizations and initiatives, and in other volunteer positions at ACNM. View the full team, including national office staff at www.midwfe.org/ACNM-Reports.

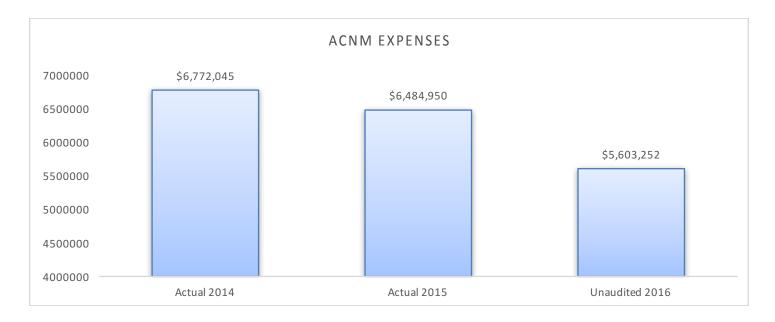
#### **FNSURING FINANCIAL STABILITY**

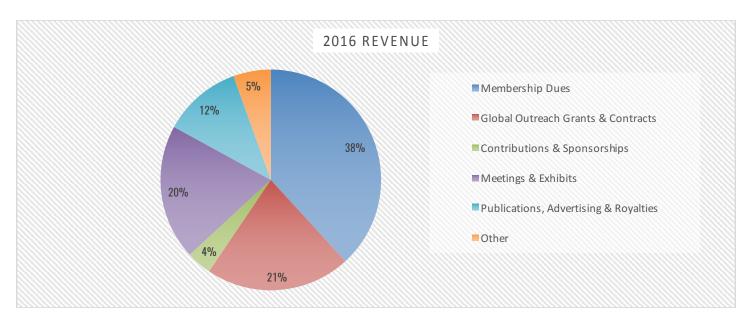
Our organizational capacity rests on ACNM's financial stability. Therefore, throughout 2016, ACNM leadership significantly prioritized enhancing the financial stability of our organization, focusing substantially on reducing overall spending while supporting crucial member services. We also prioritized investing in technological infrastructure, with a major decision to replace the ACNM's outdated association management system (AMS). ACNM is grateful to the A.C.N.M. Foundation for having called for member contributions to the Teresa Marsico Fund to support this critical initiative and to ACNM affiliates who have directly supported it.

On the cost-saving side, between December 31, 2015 and December 31, 2016, ACNM cut approximately \$800,000 in expenses from its budget, relative to the previous year. We achieved this primarily through a careful evaluation of costs matched against organization priorities and a reduction in expenses such as consulting fees, travel, and personnel. We continued to explore revenue streams and opportunities to diversify our approach to fund development through domestic and global grants as well as industry partnerships. Overall, we ended 2016 with a deficit of about \$160,000, a reduction of more than 80% of what we experienced the year before. Our long- and short-term investment reserves combined equal \$1.8 million, and our budgetary goals for 2017 include a balanced budget and then rebuilding the reserves going forward into 2019. Audited financial statements are available for members on the website at www.midwife.org/fac.

FINANCIAL SUMMARY					
(in \$thousands)	2016 (unaudited)	2015	2014		
Revenues	\$5,443	\$5,294	\$5,862		
Expenses	\$5,603	\$6,437	\$6,772		
Net loss	(\$161)	(\$1,142)	(\$910)		
Assets	\$2,935	\$3,189	\$4,992		
Liabilities	\$1,786	\$1,881	\$2,394		
Net Assets	\$1,149	\$1,308	\$2,598		

OPER	ATION EXPE	NSES	
	2016 (unaudited)	2015	2014
Member Services & Programs	88%	93%	92%
Management & General	12%	5%	7%
Development	<1%	2%	1%





## **Introducing A New CEO**



A CNM named Frank J. Purcell its CEO following a national search by an executive search committee comprised of a wide-ranging group of its members, and he began service in October 2016.

With more than 25 years of professional association leadership and advocacy experience, chiefly with the American Association of Nurse Anesthetists (AANA) and on Capitol Hill, Purcell's areas of focus for the ACNM include working to strengthen the organization's membership and fiscal outlook while ensuring ACNM is a strong voice for women's health and midwifery in times of policy and industry change.

Originally from St. Louis, Purcell is a graduate of the Harvard Kennedy School executive education program in healthcare delivery systems policy, undertook MBA coursework at Johns Hopkins University, and is a bachelor's graduate of Southern Illinois University-Edwardsville. "Given his work at the AANA, particularly in the area of health care coalitions, Frank is not new to midwifery," noted ACNM Board of Directors President Lisa Kane Low, CNM, PhD, FACNM,

FAAN. "His experience demonstrates his understanding of the important role our specialties play in delivering quality health care to women and their families. I'm confident Frank will be a strong advocate for certified nurse midwives and certified midwives as we continue to work to break down our barriers to practice. He will also be key to strengthening and growing our organization in the United States and globally, responding to the needs of our members and collaborating with important stakeholders."

At AANA, Purcell also helped to broaden its public engagement and revised the budget and financial data-processing procedures for its Political Action Committee (PAC), the largest PAC in nursing.

He secured publication of a proposed rule in May 2016 granting full practice authority to Advanced Practice Registered Nurses (APRNs) in the Veterans Health Administration, and the inclusion of legislative provisions in the Affordable Care Act of 2010 promoting provider nondiscrimination, Graduate Nursing Education, and Title 8 nurse workforce development.

## The A.C.N.M. Foundation, ACNM Team, ACNM Affiliates

he A.C.N.M. Foundation, Inc., a 501 (c)(3) nonprofit organization, has 2 charitable purposes: to advance public knowledge and understanding of midwifery, and to support the mission and strategic priorities of ACNM. Our efforts remain closely aligned with ACNM's core commitment of diversification and inclusion through scholarships for students and midwives of color, and other awards that address global health inequities. We also advance ACNM's core commitment to leadership development through the Frances T. Thacher Midwifery Leadership Endowment. In 2016, we extended our efforts to strengthen ACNM's organizational capacity with the Marsico Memorial Fund to support ACNM's new association management system (AMS), a top priority. "Excellent customer service is essential to ACNM's future health," ACNM Past-President Kitty Ernst, CNM, MPH, FACNM, noted. "In this information age, it is a sine qua non that ACNM have cutting edge technology that enables staff to efficiently and effectively meet the needs of members, volunteers, and affiliates."

The Foundation continued its annual award of more than \$60,000 to meet our mission and help ACNM achieve its strategic goals. Specifically the funds provide support for

midwifery education, research, practice, and leadership activities that advance the provision of high quality maternal, newborn, and well-woman health care services worldwide. Recent strategic efforts to improve fundraising have led to a twofold increase in donations from individuals over the 3-year period, 2014-2016.

We accomplish our mission by awarding scholarships for students in midwifery programs and midwives in doctoral education, funding midwifery researchers, and by providing fellowships for practice and business leaders, international midwifery awards, and high-impact community grants. In 2016, we added a new endowed scholarship from the Texas affiliate and continued our recognition of professional excellence through our Pioneer Midwife and Physician Partnership Awards, and through the work of our Midwifery Legacy Project.

A complete listing of 2016 Scholarship and Award winners can be found at www.midwife.org/2016-Award-Recipients. The full 2016 Annual Report of The A.C.N.M. Foundation, Inc. can be found at www.midwife.org/ACNM-Foundation.



