

The development of quality indicators for Belgian midwives in antenatal and postnatal care

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Background: Why this project?

- The perinatal landscape in Belgium is changing — shorter hospital stays mean more care in the community.
- Yet, quality monitoring in midwifery-led care remains fragmented.
- We saw a **need for a shared, evidence-based framework** to evaluate and improve perinatal care quality.

Objectives

- Develop **evidence-based, feasible and relevant quality indicators** for midwives.
- Ensure **alignment with national and international guidelines**.
- Build a **foundation for future monitoring, policy and education**



Are quality indicators for midwifery already used in your country?



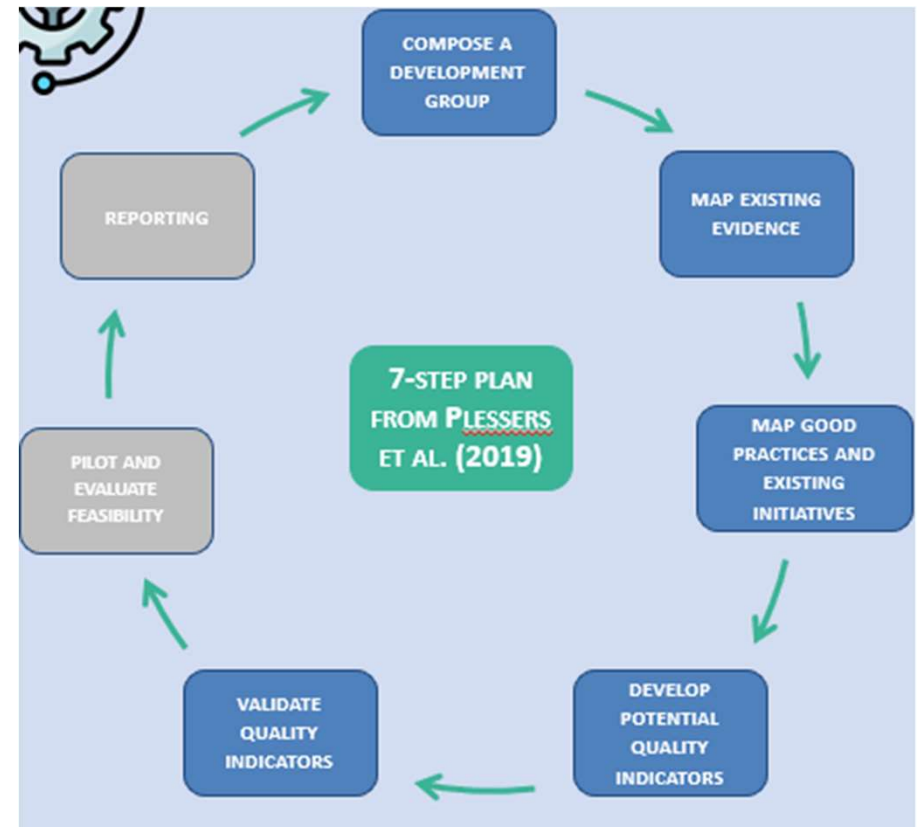
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Methodology

- Quality assessment of guidelines (AGREE)
- Screening on SMART criteria (double blind)
- Rand-modified Delphi method (n=3)
- Focusgroup discussion



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Overview of the 19 indicators

Structure	Process	Outcome
Collaboration between hospital and community midwives	Prenatal screening (toxoplasmosis, rubella, GBS, STI's) and follow-up	Timely screening and referrals in case of urgent medical reasons
Access to digital records and perinatal data linkage	Blood pressure monitoring	To avoid perinatal complications (e.g. hypertension, pre-eclampsia)
Access to perinatal health support	Timely home visit from a midwife within 24h after discharge Breastfeeding support	Maternal and neonatal physical and mental well being, safety, continuity of care, experiences of care, satisfaction
Evidence-based information materials for parents	Administration of anti-D immunoglobuline within 72h Breastfeeding support	Maternal and neonatal physical and mental well being, safety, continuity of care, experiences of care, satisfaction
Interprofessional agreements and continuity pathways	Documentation of informed decision-making and follow-up	Overall continuity and coordination of care

Which domain feels most relevant or transferable to your national context?



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Stakeholder engagement

- **Multi-stakeholder Delphi:** midwives, obstetricians, GP's, health authorities, professional associations, parent associations.
- Regular **focus groups** built shared understanding.
- Result: strong **buy-in from the field** — key for implementation.

Policy recommendations

- Integrate indicators into **national accreditation and financing systems**.
- Develop a **national digital portfolio** for midwives with built-in quality monitoring.
- Promote **data sharing via compatible software** and shared electronic records.
- Invest in **training on perinatal mental health and evidence-based practice**.
- Create a **central parental information platform** to strengthen health literacy.

Impact for midwifery education

Educational level	Impact/use of indicators
Curriculum design	Integrating evidence-based, woman-centred, and respectful care principles across all modules. Indicators help define learning outcomes linked to real practice.
Clinical training	Using indicators as learning tools to evaluate clinical reasoning, communication, and continuity of care during placements.
Professional development	Encouraging lifelong learning and reflective practice — midwives learn to monitor and improve their own quality of care using measurable criteria.

Next steps – Building collaboration & future directions

1. Explore pilot testing in Belgian regions

- Assess feasibility and acceptability of the indicators in **Flanders, Wallonia, and Brussels**.
- Include both midwives and service users to evaluate practical relevance

2. Prototype an online dashboard (exploratory phase)

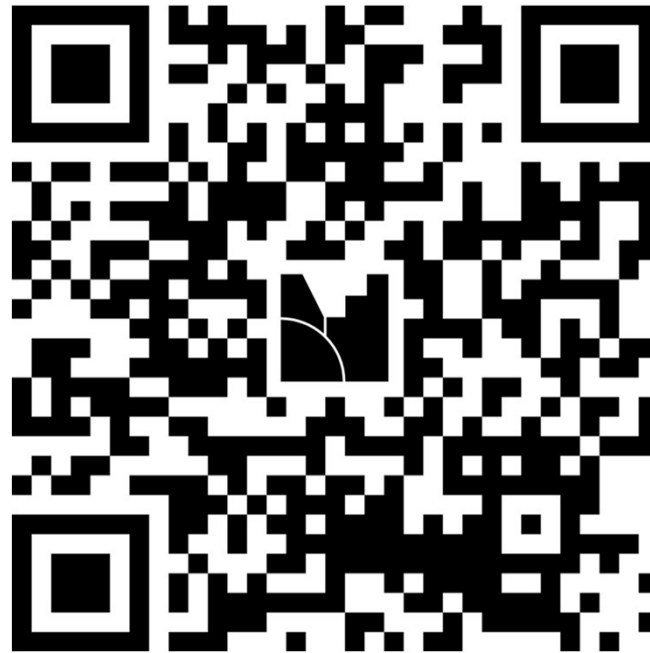
- Investigate how digital tools could support **self-evaluation** and **reflective practice** among midwives.
- Develop a small-scale prototype if resources allow.

3. Strengthen collaboration & partnerships

- **Collaboration:** exchange knowledge and compare approaches to quality measurement with international colleagues.
- **Partnerships:** explore strategic links with organisations such as the **European Midwives Association (EMA)** and the **International Confederation of Midwives (ICM)**.
- Aim for alignment with frameworks like the **ICM Quality Framework** or the **Midwifery Unit Standards**

Reflections and discussions

Q1: How could these indicators be implemented in your country?



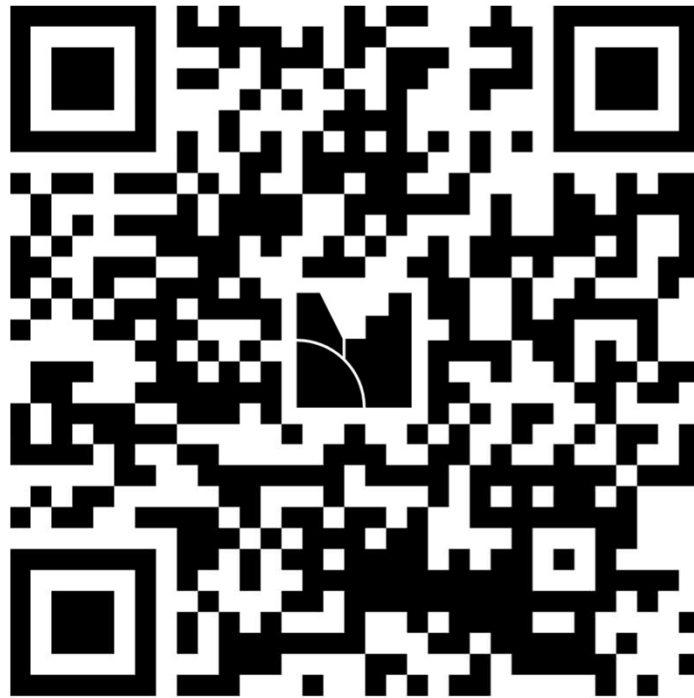
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Reflections and discussions

Q2: Which challenges or enablers do you foresee?



Reflections and discussions

Q3: How can we ensure these indicators truly reflect woman-centred, respectful care?



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Let's continue the conversation



Florence D'haenens

Researcher in midwife-led and
woman-centred care



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