New York State

COVID-19 Maternity Task Force

Recommendations to the Governor to
Promote Increased Choice and Access to Safe Maternity Care
During the COVID-19 Pandemic

April 2020
**About the New York State COVID-19 Maternity Task Force:**

In April 2018, Governor Andrew M. Cuomo announced a multi-faceted initiative to combat maternal mortality and racial disparate outcomes in New York State. Continuing New York State’s commitment to improve maternal and child outcomes and recognizing the significant strain the COVID-19 pandemic has placed on hospital infrastructure and the concerns of many pregnant individuals across New York State, Governor Cuomo directed the NYS Council on Women and Girls, with the support of the New York State Department of Health (NYSDOH), to convene an expert task force to address the impact of COVID-19 on maternity. Chaired by Secretary to the Governor Melissa DeRosa, the Task Force was charged with examining the best approach to provide mothers a safe alternative, when appropriate, to already stressed hospitals amid the ongoing COVID-19 pandemic.

Comprised of a multi-disciplinary group of maternal and infant health professionals from across New York State, the Task Force met remotely to discuss these issues and propose recommendations. Given the urgency of the COVID-19 emergency and its impact on pregnant people, meetings of the Task Force were held within a week in order to make an initial set of recommendations, outlined in this report. During these meetings Task Force members discussed issues including surge capacity at hospitals during the COVID-19 emergency, state regulations related to the review and approval of birthing facilities, hospital visitation policies, testing protocols, and safety standards including infection control, community education and adequate access to personal protective equipment (PPE).

Following the second Task Force meeting, members were asked to submit their top three recommendations for consideration by the larger group. Recommendations were compiled and analyzed by NYSDOH staff and shared with Task Force members during the third meeting. Members reviewed the submissions and made a collective determination to advance the recommendations outlined below.

Secretary to the Governor Melissa DeRosa issued the task force’s initial recommendations to Governor Andrew Cuomo for consideration on April 29, 2020, who accepted them in full.

As the COVID-19 crisis continues to unfold, the Task Force will stay in place and consider additional ways to address issues that impact pregnancy and infants, starting with review of relevant literature conducted by NYSDOH and University at Albany School of Public Health’s Maternal & Child Health Program.

Prior to the creation of the Task Force, New York State took several steps to expand access to access to maternal care during the COVID-19 pandemic, including:

- Expanding access to telehealth and telephonic visits
- Expanding access to midwives to ensure sufficient personnel are available to provide maternity care
- Authorize out-of-state obstetrician-gynecologists and midwives from other states to practice in New York to improve surge capacity
Identified sexual and reproductive health services as essential

About this Report:
This report summarizes the activities to date of the NYS COVID-19 Maternity Task Force. This report does not include every recommendation submitted. This report summarizes where the Task Force has broad conceptual agreement, sets forth recommendations that were reflected in most of the submitted comments from Task Force members, and notes where the Task Force will continue its work to promote increased choice and access to safe maternity care for pregnant individuals across New York State.

Members of the Task Force Include:

Chair:
Melissa DeRosa: Secretary to the Governor and Chair, NYS Council on Women and Girls

Task Force Members:

- Christy Turlington Burns: Founder, Every Mother Counts
- Dr. Deborah E. Campbell, MD: Director, Division of Neonatology, Montefiore Medical Center
- Christa Christakis, MPP: Executive Director, American College of Obstetricians & Gynecologists District II
- Rose Duhan: President & CEO, Community Health Care Association of NY
- Helena Grant, CNM: Director of Midwifery, Woodhull Hospital
- Dena Goffman, MD: Chief of Obstetrics, New York Presbyterian/Columbia University Medical Center
- Whitney Hall, CCE, LM, CLC: President, NYS Association of Birth Centers
- Rev. Diann Holt: Executive Director & Founder, Durham’s Baby Café
- Sascha James-Conterelli, DNP, RN, CNM, FACP: President, NYS Association of Licensed Midwives
- Cynthia Jones, MD, MPH: Chief Medical Officer, Mosaic Health Center
- Ngozi Moses: Executive Director, Brooklyn Perinatal Network
- Natasha Nurse-Clarke, PhD, RN: Regional Perinatal Center Coordinator, Maimonides Medical Center
- Lorraine Ryan, Esq.: Sr. VP Legal, Regulatory & Professional Affairs, Greater NY Hospital Association
- Nan Strauss, JD: Managing Director, Policy, Advocacy & Grantmaking, Every Mother Counts
- Loretta Willis, RN, BSN, CCM, CPHQ: Vice President Quality & Research, Healthcare Association of NYS
**Research/Need/Issues:**
Approved birthing centers can provide New Yorkers with low-risk pregnancies an alternative and safe birthing option and may relieve the strain on hospitals during this state of emergency.

Even prior to COVID-19, black women in particular voiced a desire to expand birthing options and to expand access to holistic care teams that engaged in shared decision making. Birthing centers offer an important role in meeting the needs of pregnant people and communities looking for alternative environments in which to deliver outside of the hospital setting.

**Top Task Force Recommendations:**
The Task Force makes the following initial recommendations and findings to address hospital surge capacity and support patient birthing options:

**RECOMMENDATION #1: DIVERSIFY BIRTHING SITE OPTIONS TO SUPPORT PATIENT CHOICE**
The Task Force supports increasing access to a variety of birthing options and providers for all pregnant individuals, especially those most disproportionately impacted by the pandemic, regardless of their race/ethnicity, socio-economic status, or geographic region.

The majority of Task Force members recommend that, during this emergency, Governor Cuomo issue an Executive Order to allow for the immediate establishment of additional birthing surge sites operated by currently established licensed birthing hospitals and centers.

The Task Force also recommends that the New York State Department of Health be directed to develop a streamlined process to accept applications from licensed health care facilities, such as community health centers and federally qualified health centers, to convert unused space in their facilities to dedicated labor and delivery spaces during an emergency. This process will clarify application requirements, requesting information on:

- Appropriate staffing.
- Patient risk criteria, to account for the fact that no space can be considered COVID-19 free.
- Infection prevention and control policies.
- Physical space standards.
- Communication/Notification to community providers, especially prenatal care providers, about the availability of birthing services as this location.
- Communication/Notification to community members, especially communities of color and community members with Medicaid coverage, to ensure they are aware of additional birthing options. Information should be presented in a way that reflects and respects the culture of the community, and easily understood by community members.
- Partnerships with local hospitals and emergency medical services to transfer patients that need more care than can be provided at this location.
The Task Force recommends that the State limit emergency birthing centers to licensed facilities.

Further, to increase access to midwifery services, the Task Force recommends NYSDOH move to expedite, within the next 45 days, the finalization of the licensure process for the establishment of midwifery led birthing centers in New York State. By expediting the final licensure process, NYSDOH will help to ensure there are sufficient birthing facilities available to meet community need during emergency situations.

**RECOMMENDATION #2: SUPPORT PERSONS**

The Task Force recommends that Governor Cuomo update the Executive Order 202.13, authorizing at least one support person to accompany a pregnant individual for the duration of their stay in any hospital, birthing facility, or postpartum unit, as medically appropriate.

- This order must clarify that “duration of stay” includes labor, delivery, and the postpartum period, including recovery.
- This order should clarify that doulas are considered an essential part of the support care team and should be allowed to accompany a pregnant individual during labor and delivery as an additional support person, as medically appropriate.
- Exceptions should be made only in limited circumstances and based on clinical guidance, such as availability of PPE.

**RECOMMENDATION #3: UNIVERSAL TESTING OF PREGNANT PATIENTS**

The Task Force recommends universal COVID-19 testing for all pregnant individuals.

The Task Force recommends universal COVID-19 testing for all support persons accompanying pregnant individuals at birthing facilities, as testing becomes available.

The Task Force recommends the issuance of NYSDOH guidance for COVID-19 testing that defines pregnant individuals as a priority population for testing and states that pregnant individuals be tested during pregnancy and one week prior to their estimated due date or upon admission if second test is not conducted one week prior to delivery.

The Task Force recommends that the NYSDOH monitor the availability of testing supplies to support equitable access to testing kits and laboratory analysis for all pregnant individuals in all birthing settings, particularly those serving marginalized communities and those most impacted by racial disparities in birth outcomes.

**RECOMMENDATION #4: ENSURING EQUITY**

The Task Force recommends that community voice and participation are centered in work groups charged with developing standards, policies, and/or regulations related to birthing options. The Task Force supports existing NYSDOH efforts to include community members in upcoming initiatives related to maternal health including, but not limited to the NYS Maternal Mortality & Morbidity Advisory Council, the Maternal Mortality Review Process, and development of the Title V Maternal Child Health Services Block Grant application.
The Task Force advises that NYSDOH identify and engage community members and representatives from maternal and child health community-based organizations to join a NYS COVID-19 Maternity Task Force working group charged with the development of a public education campaign for those most impacted by racial/ethnic, economic, or other disparate outcomes.

**RECOMMENDATION #5: MESSAGING AND EDUCATION**

The Task Force recommends that NYSDOH to engage subject matter experts, community members, and representatives from community-based organizations serving maternal and child health populations to create and disseminate an educational campaign on behalf of the NYS COVID-19 Task Force. This campaign would be designed to:

- Emphasize the safety of and rebuild confidence in maternity care at all certified birthing facilities.
- Explain infection control practices in each type of birthing facility.
- Increase patient understanding of different levels of maternity care and types of birthing facilities as well as how to work with your provider to select the appropriate patient-centered delivery.

**RECOMMENDATION #6: DEPARTMENT OF HEALTH WILL COLLABORATE WITH ACADEMIC INSTITUTIONS, REGIONAL PERINATAL CENTERS, AND MEDICAL ORGANIZATIONS TO REVIEW THE IMPACT THAT COVID-19 HAS ON PREGNANCY AND NEWBORNS.**

The Department will work with the University at Albany School of Public Health Maternal & Child Health Program to conduct a review of the impact of COVID-19 on pregnancy and discuss a summary of its findings with the Task Force and the Regional Perinatal Centers.

The Department will host weekly statewide interactive webinars addressing the management of maternity care during the pandemic as needed as part a collaboration with the New York State Perinatal Quality Collaborative (NYSPQC) in partnership with American College of Obstetrics and Gynecology District II.

- The Department and ACOG II issue guidance on best practices, including prenatal care, during the time of COVID-19, with a special emphasis on reducing racial disparities.
- The Department will also host a webinar on obstetrical care and implicit bias within the context of COVID-19.

The Department will collaborate with the Centers for Disease Control and Prevention on a COVID-19 Pregnancy Module that will capture supplemental data on COVID-19 during pregnancy.

- This module will help describe risk for severe illness or adverse outcomes among pregnant individuals with laboratory evidence of COVID-19 infection up to delivery, and their newborns, to inform public health guidance and risk communication messages.