

Guide for Hospital Doula Policy Creation

Learning Session
Thursday, June 13, 2024

We will begin shortly. In the meantime:

Change your Zoom name:

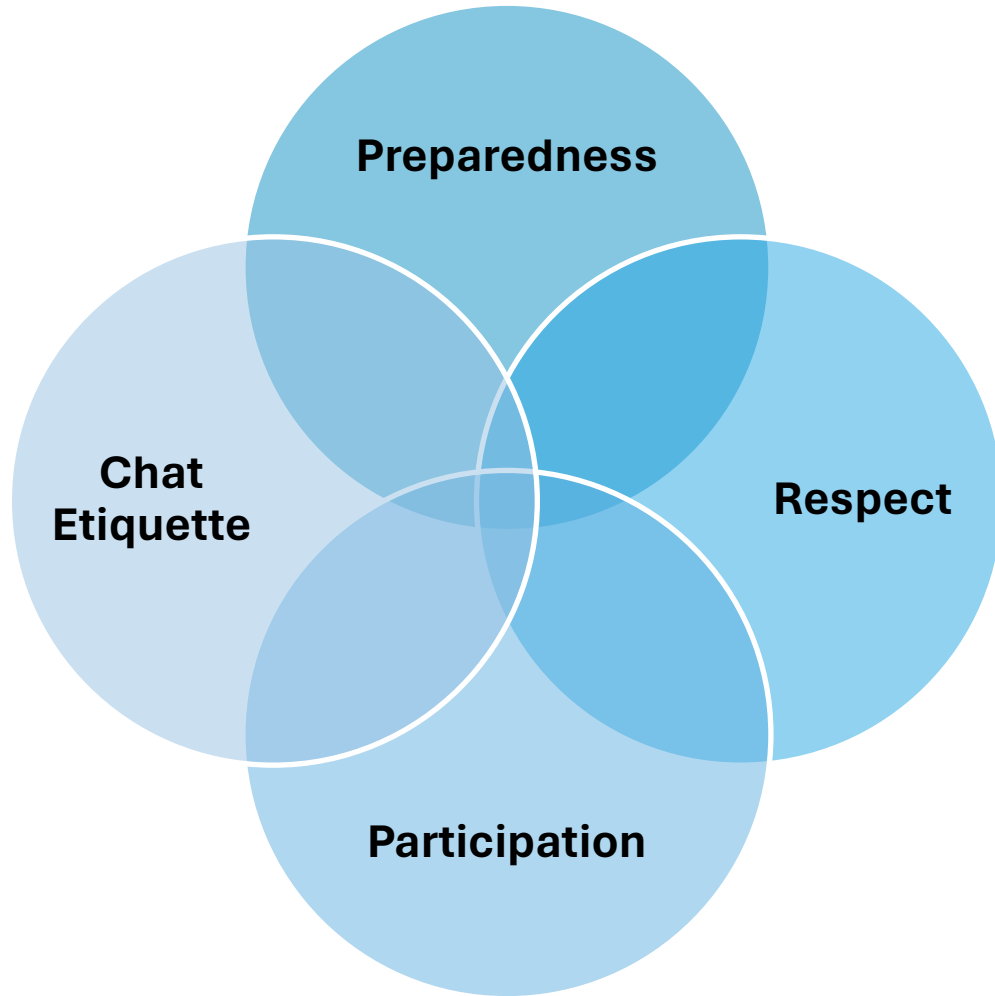
- **Hover your mouse over your name, then click the ellipses (...)**
- **Click “Rename”**
- **Rename yourself as *First Name Last Name, Organization***

Share in the Chat:

- **Name, Organization, and where you’re tuning in from**

- 1. Welcome & Purpose of the Joint Workgroup**
- 2. Overview of NJ P.L. 2023, c.286**
- 3. Walkthrough of Guide for Hospital Doula Policy Creation**
 1. Hospital Doula Policy Implementation and Internal Education Across Hospital Sites and Departments
 2. External Distribution of the Health System's Doula Policy
 3. Definition of a Doula and Process for Allowing Them to Enter the Hospital
 4. Where Doulas are Allowed Within the Facility
 5. Doula Liaison
 6. Additional Best Practice Considerations for Health Systems and Doulas
- 4. Q&A**


Ground Rules



 Use hand-raising feature via **Menu Bar**

 Click **Reactions**

 Then click **Raise Hand**

 Click **Lower Hand** after your question has been addressed





About the Quality Institute

Mission: Improving the safety, quality, and affordability of health care for everyone.

Vision: A world where all people receive safe, equitable, and affordable health care and live their healthiest lives.

Values: To support healthy communities and individuals, the Quality Institute believes that health care should be:

- Safe and of high quality;
- Accessible and affordable;
- Equitable, respecting individual dignity; and,
- Transparent to promote accountability and quality improvement.



HealthConnect One is the national leader in advancing equitable, community-based, peer-to-peer support for pregnancy, birth, breastfeeding, and early parenting.

Our vision is to see every baby, mother, and family thrive in a healthy community. We work to achieve this vision through an equity-focused approach supporting the first 1000 days for birthing families.



The NJ Doula Learning Collaborative provides New Jersey doulas with billing support, education, training and workplace development in service of birth equity.

The New Jersey Doula Learning Collaborative (NJ DLC) strives to advocate for a thriving doula community (independent and group practitioners), who are equitably compensated, have ease with Medicaid reimbursement, and have a sustainable career that mitigates high turnover.

Purpose of the Joint Workgroup

1. Develop, through a consensus process model, a Guide for Hospital Doula Policy Creation to support NJ hospitals as they adopt their own policies.
2. Consider and address in the policy guidance, a multitude of issues from a legal, regulatory, patient quality, equity, and safety lens, related to doulas supporting clients within the hospital.
3. Include ideas to promote on-going education and collaboration amongst patients/clients, clinical and hospital team members, and doulas.
4. Include ideas that hospitals in NJ and other states are already implementing to further access to doulas for patients giving birth in NJ hospitals.

Workgroup Participants

- **16 hospitals and health systems** across NJ, representing **97%** of 2023 birthing volume
- Chief Nursing Officer
- VP of Patient Care Services
- Sr. Vice President, Women Services
- Sr. Vice President, Wellness, Equity, and Population Health
- Assistant Vice President, Maternal Child Health
- Director, Maternal OB Medicine
- Clinical director, Mother-Infant unit
- Senior director of nursing
- Associate Director of Nursing, L&D/ Mother-Baby unit
- Director of Women's and Children's Services
- Director Maternal-Child Services
- Director for inpatient women's and children's services
- Program director research, department of OB/GYN
- Nurse manager for Pediatrics and Special Care
- Nurse manager, Women's and Children Outpatient
- Nurse manager, OB/GYN
- Manager of the Center for Family Education
- Maternal Child Health Clinical Coordinator
- Chair of OB/GYN

- **16 doulas** across two focus groups, serving all 21 counties in New Jersey who accept Medicaid, commercial and private pay
- **7 doulas** individually interviewed

NJ P.L. 2023, c.286 requires hospitals and birthing centers to:

Adopt and maintain written policies and procedures authorizing a patient to select a doula of the patient's choice to accompany the patient within the facility's premises for the purposes of providing support before, during, and after labor and childbirth.

Provide a written copy of the policies and procedures to:

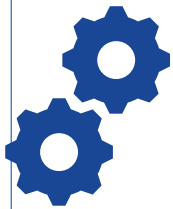
- Health care providers providing maternity services at the facility
- Each patient receiving maternity services and any other person at the request of the patient
- Nearby reproductive health service providers, including, but not limited to, Planned Parenthood health clinics
- Nearby local WIC agencies and clinic offices

Post a summary of the facility's policies and procedures in the room of the patient and on the facility's website in 10 languages most commonly spoken in New Jersey, and any other languages deemed appropriate

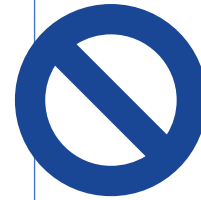
Designate a staff member to serve as a liaison between the facility and doulas and doula organizations

Guide for Hospital Doula Policy Creation Walkthrough

Hospital Doula Policy Implementation and Internal Education Across Hospital Sites and Departments



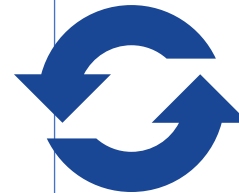
Maintain consistency across a system's facilities, departments, and staff. This should not vary based on an attending clinician's preferences



Default: Doula is always allowed with client
Call out exceptions and provide alternatives



Provide Doula Policy education to hospital staff & independent clinicians. Include background on the role and benefits of a Doula



Review/update policies regularly

External Distribution of the Health System's Doula Policy



Doula policy should be comprehensive and understandable, and written at an appropriate health literacy level



Policy and any required forms should be easily available online



Provide patients a hard-copy of the Policy at admission. Also consider sharing a digital version



Share hospital policies that promote physiological birth



Optional: A patient "acknowledgement of receipt" of the doula policy

Definition of a Doula and Process for Allowing Them to Enter the Hospital



Doulas are expected to follow all hospital infection control and vaccination policies in place for visitors



Hospitals may ask doulas to verbally or in writing acknowledge that they are trained or in-training, and received and will comply with the Doula Policy



Doulas should be allowed to submit any forms either electronically or in hard copy



Doula Acknowledgement Form: Align with recent NJ Law, include space to collect doula contact information and emergency contact



Health systems should not be a restrictive list of "approved" trainings



Keep a directory or list of doulas who have already completed forms to expedite doulas' entry

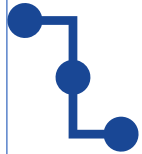


Consider ID Card for doulas who regularly support patients at a facility



Optional doula tours, orientations, or meetings among doulas, clinicians, and staff

Where Doulas Are Allowed Within the Facility



Doulas stay with client throughout all stages; limit restrictions



Doulas should follow Hospital Doula Policy, or may be asked to leave



Bedside access for support during interventions and recovery



Establish process for communication with care team for activities that impact the birthing person



Debrief sessions post-birth to reflect on care team collaboration



Provide a reference to the Health Care Heroes Violence Prevention Act

Doula Liaison



Designate a Doula liaison, and designees for different locations and shifts.



Designate a person who regularly interacts with clinical staff and the community. Consider nurses, midwives, childbirth educators, LCSW, individual with holistic health care experience



Liaisons should schedule check-ins with doulas and host doula orientations



Establish formal feedback channels for clinicians, staff and doulas to address concerns



Summarize and document feedback and follow-ups for improvement and policy change considerations



Include issue resolution strategy in Doula Policy

Additional Best Practice Considerations for Health Systems and Doulas

Additional Best Practice Considerations for Health Systems and Doulas



Doula education sessions for hospital staff and clinicians



Introduce clinicians, staff and doulas to one another



Share doulas' headshots and short biography



Grant-funded doula programs



Hold patient information session on the role of doulas and the system's doula policy



Communicate birthing positions and aids to support physiological birth



Birth plan and shared decision-making- Team Birth



Assess health system's doula-friendliness



Hold post-delivery care team debriefs

Q&A



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