

CALM Position Paper on Community Midwifery During the Pandemic

In the early stages of the COVID-19 pandemic California's community midwives were working hard to educate themselves about the risks of SARS-COV-2 to our pregnant clients as well as make practice guideline modifications to minimize exposure and try and keep everyone healthy.

Over the past few months, we have learned much about the virus, watched public health and healthcare worker policies change, and have made many midwifery practice modifications. We have slowly come to realize that these modifications are not short-term changes but rather something that we as community midwives will need to continue doing for an undetermined amount of time. Shelter in place restrictions are being lifted, the economy is reopening and mask requirements in public places vary by county. Essential businesses that remained open and businesses that reopen are making modifications to minimize transmission -- employees wear face coverings, require customers to wear face coverings, allow limited numbers of customers and take extra precautions to disinfect surfaces and accommodate social distance.

What does this all mean for community midwives? What should prenatal/postpartum care and out of hospital birth look like going forward? The risk of infection still remains and may actually increase as restrictions are lifted. In San Bernardino County mask wearing requirements were lifted on May 8th and on May 16th health officials reported that the number of new coronavirus infections had doubled. Alameda county recently announced that face coverings are required for all outdoor activities and within 30 feet of people outside of one's own household.

Under these uncertain times and as licensed health care professionals, CALM maintains the following recommendations regarding COVID-19 that were originally shared on May 4th, 2020. You can access the recording [here](#) and the PowerPoint slides [here](#).

CALM'S POSITION ON REDUCING RISK OF SARS-COV-2 INFECTION FOR PLANNED OOH BIRTHS

Midwives have an obligation to protect themselves, their clients and the community by

- practicing proper handwashing or using hand sanitizer when washing isn't possible
- reducing close contact exposures and therefore community risk by the use of telemedicine, reduced appointment schedule, shorter appointment times, outdoor appointments or a combination of the above.
- wearing masks and asking clients/partners/doulas etc. to wear masks during in person visits and labor/birth
- encouraging the presence of a birth partner for all laboring women and recommending the number of people present at a birth be kept to a minimum in order to protect everyone's health
- recommending families follow shelter in place guidelines during pregnancy and postpartum
- properly disinfecting all supplies and equipment