Doula Guidelines Associated with BUMC-P Labor and Delivery

The purpose of the following guidelines is to foster an integrated culture that fosters collegial interprofessional collaboration that benefits patients and families.

In collaboration with our community doula partners, we have chosen the DONA International standards to incorporate into our guidelines. These standards of practice have been chosen as they align with the intent of this collaboration and provide clear guidelines of the doula role within our facility. There are many organizations that provide Doula training and the majority have similar standards of practice. We expect all Doulas to follow the guidelines outlined in this agreement including the standards of practice associated with the DONA International regardless of the organization that you are certified through.

Training and experience

1. Doulas will complete all the requirements set forth in the standards of practice for their specific certificating organization.
2. Maintenance of Certification by all doulas will be sustained as outlined in their specific certificating organization's guidelines.

Verifying Certifications

1. Email a copy of the doula certification to Bumcplddoulacontact@bannerhealth.com . If we are unfamiliar with the certifying body, we will ask for the training and standards of the organization.
2. A badge that has your photo will be provided. The badge must be worn with each visit and throughout each visit at facility. Your badge helps to identify you as registered doula within our facility and a member of the client/patient's care team. Badges are good for 3 years. To receive a new badge, you will follow the same steps.
3. Certifications must be current and maintained; a recertification copy must be provided to Bumcplddoulacontact@bannerhealth.com.
4. "Doula Guidelines Associated with the Women and Infant Department" and the DONA Standards of Practice must be read and signed.
5. If you would like to set up a phone or in person meeting to review information about the unit with one of the leaders for L&D, please e/mail Bumcplddoulacontact@bannerhealth.com .

Expectations and collaboration between the Doula and the Women and Infants team are as follows:

1. Courtesy and professionalism
2. Shared care of the patient
3. Medical decisions will be made by the Physician, Certified Nurse Midwife (CNM), Resident, RN, and the patient
4. Support and teamwork will be sustained between the patient, her Doula, her medical provider(s) and the RNs for labor and birth of the baby

5. Maintain consistency in upholding Doula guidelines
6. In supporting a collaborative open working relationship with the provider, facility staff, and the doula, we encourage a professional discussion with any concerns. If facility providers have concerns about a doula's failure to observe the expectations and guidelines the doula will be professionally informed of concerns.

Privileges for Registered Doulas in OB Triage and the operating room

OB Triage and OR attendance will be granted for certified doulas due to specific training that was completed during the national certification process.

1. Certified Doulas and the patient's significant other may accompany the patient during the triage assessment period and will cooperate with the triage RN in emergency situations or any situation that the triage RN deems necessary.
2. The Doula may accompany the patient's support person to the OR. The Doula's purpose is to give additional support to the patient and their significant other in the OR.
   If the patient is diagnosed with a fetal or maternal complication, which requires a cesarean section, the patient will have one person in the OR and the patient will decide who their support person will be. The physician does reserve the right to allow only one support person in the OR regardless of the situation.
3. Baby birth pictures may be taken after infant stabilization with the permission of the OR team under strict supervision to protect the sterility of the OR environment.
4. If the infant requires an assessment by the nursery RN and/or the Neonatal Practitioner (NNP), permission must be granted by the above said personnel before taking pictures. No pictures will be taken while the nursery staff is assessing and treating the baby. The significant other and the Doula will be invited to the infant warmer when appropriate to do so or per the nursery staff in attendance.
5. In case of an emergency where the patient is placed under general anesthesia, no one except the OR staff will be permitted in the surgical suite. The Doula may stay with the support person until the patient is transferred to the recovery room.

Additional Information

All patients complete a Consent for Visitation and Photography when they are admitted. This form reviews our visitor guidelines and expectations as well as the Banner policy related to photography and recording.

If a patient is declining Rhogam, Erythromycin, or Vitamin K, they will sign a form titled "WIS – Refusal for Medical Treatment or Medications"

_____

Printed Name

_____

Signature *Date*

Reference: DONA International Standards of Practice: Birth Doula

DONA INTERNATIONAL

Standards of Practice: Birth Doula

I. Scope

A. ***Services Rendered***. The doula accompanies their client, provides emotional and physical support, suggests comfort measures, and provides support and suggestions for the partner. Whenever possible, the doula provides pre- and post-partum emotional support, including explanation and discussion of practices and procedures, and assistance in acquiring the knowledge necessary for the client to make informed decisions about their own care. Additionally, as doulas do not "prescribe" treatment, any suggestions or information provided within the role of the doula must be done with the proviso that the doula advises their client to check with the primary care provider before using any application.

B. ***Limits to Practice***. DONA International Standards and Certification apply to emotional, physical and informational support only. The DONA certified or member doula does not perform clinical or medical tasks, such as taking blood pressure or temperature, fetal heart tone checks, vaginal examinations or postpartum clinical care. The DONA certified or member doula will not diagnose or treat in any modality.

i. If the doula has qualifications in alternative or complementary modalities (such as aromatherapy, childbirth education, massage therapy, placenta encapsulation, etc.), they must make it very clear to their clients and others that those modalities are an additional service, outside of the doula's scope of practice.

ii. A healthcare provider (such as a nurse, midwife, chiropractor, etc.) may not refer to themselves as a doula while providing services outside of a doula's scope of practice.

iii. On the other hand, if a health care, alternative care or complementary care professional chooses to limit their services to those provided by doulas, it is acceptable according to DONA International's Standards of Practice for them to describe themselves as a doula.

C. ***Advocacy***. The doula advocates for the client's wishes as expressed in their birth plan, in prenatal conversations, and intrapartum discussion, by encouraging their client to ask questions of their care provider and to express their preferences and concerns. The doula helps their client incorporate changes in plans if and when the need arises, and enhances the communication between client and care provider. Clients and doulas must recognize that the advocacy role does not include the doula speaking instead of the client or making decisions for the client. The advocacy role is best described as support, information, and mediation or negotiation.

D. ***Referrals***. For client needs beyond the scope of the doula's training, referrals are made to appropriate resources.

II. Continuity of Care

A. The doula should make back-up arrangements with another doula to ensure services to the client if the doula is unable to attend the birth. Should any doula feel a need to discontinue service to an established client, it is the doula's responsibility to notify the client in writing and arrange for a replacement, if the client so desires. This may be accomplished by:

- Introducing the client to the backup doula
- Suggesting that another member of DONA International or other doula may be more appropriate for the situation

Initials: _____

BOD Original Approval: No Record
BOD Revision Approval: 3/29/17
BOD Revision Approval:8/18/20
Last Revised: 8/20

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- Contacting a DONA International regional representative or local doula organization for names of other doulas in the area
- Following up with the client or backup doula to make sure the client's needs are being accommodated

III. Training and Experience

A. ***Training***. Completion of a DONA International approved birth doula workshop is but one step in the process of training and certification. Doulas who are certified by DONA International will have completed all the requirements as set forth in the DONA International Requirements for Birth Doula Certification.

B. ***Experience***. Doulas certified by DONA International will have the experience as set forth in the DONA International Requirements for Birth Doula Certification.

C. ***Maintenance of Certification***. DONA International certified doulas will maintain certification as outlined in the DONA International recertification packet. Recertification must be completed after each three-year period of practice.

By signing this document, I agree to abide by DONA International's Standards of Practice.

Printed Name _____ Signature _____ Date _____

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Banner Health

WIS - REFUSAL FOR MEDICAL TREATMENT OR MEDICATIONS

My physician Dr. _____ has informed me of the availability of the drug used to:

❑ Decrease the risk of Rh disease in future children.

❑ Decrease the risk of infection to the eyes of my child.

❑ Decrease the risk of bleeding from the lack of Vitamin K in a normal newborn.

It has been explained to me that this drug should be used for my infant or myself. It has also been explained to me and I understand that my refusal to take this drug at this time may lead to dangerous results or complications for the infant (Vitamin K and antibiotic ointment) and (RHO {D} Immune Globulin) in the care of myself such as fetal or newborn death or severe damage.

In spite of this advice from my physician I request that this drug not be given to me during my stay at Banner _____ Medical Center.

_____ _____ _____

Patient/Parent / Legally Authorized Guardian | Date | Time

_____

Relationship (if signed by other than patient)

_____ _____ _____

Witness | Date | Time