

Missi Burgess, CPM
President

Members of the Task Force:

Paige White, CPM
Vice President
Legislative Chair

Our purpose is to bring to the full Georgia Coronavirus Task Force's attention a healthcare resource that may be critically needed during this pandemic: Certified Professional Midwives (CPMs). CPMs are the only nationally credentialed midwives specializing in out-of-hospital birth.

Crystal Hanner, CPM
Secretary

It is important to note the following:

Margaret Byrne, CPM
Treasurer

“During the SARS epidemic in Toronto in 2003, several hospitals closed their maternity wards to contain the infection (at least one hospital quarantined five newborns and their mothers for 10 days), and area midwives reported an uptick in interest in home birth among pregnant women as they came to appreciate the risks of giving birth in hospital settings... The SARS and H1N1 events remind us that ***hospitals ought properly to be the preserves of the sick and the individuals who care for them***” (Armstrong EM. Home birth matters-for all women. *J Perinat Educ*. 2010;19(1):8–11. doi:10.1624/105812410X482329, emphasis added). As midwives, we are already seeing this “uptick in interest in home birth” through requests on social media as well as direct contact.

Tracy Cuneo, CPM BSM
Legislative Co-Chair

B. Maria Cranford, CPM MSM
Education Advisor

While health care facilities are currently capable of handling the influx of Coronavirus cases, that situation could quickly change. These skilled midwives would gladly assist low-risk women through their labors and births, managing these births at home, thereby freeing resources, providers and space for those that need a heightened level of medical care. CPMs are trained to provide all typical components of prenatal, labor & delivery, and postpartum care, ensuring screening for maternity needs that would require escalation to CNM or OBGYN services.

However, it is currently illegal for Certified Professional Midwives (CPMs) to practice in the state of Georgia. While a few CPMs continue to practice because Georgia women still demand home birth options, the majority of CPMs have recently shuttered or are closing their practices, fearing legal jeopardy.

One of our Georgia CPMs, in her previous state of residence, was part of a CERT sub-district healthcare team that included a physician, cardiac and NICU nurses, a retired paramedic and EMTs. They were trained and tasked with storing the sub-district's OTC medical supplies, knowing the location of additional supplies (which happened to be her own birth center) and acting as one of the first responders under

the direction of the CERT leaders. As CPMs are trained to oversee and manage pregnancy, birth and postpartum in low-resource settings (mainly the home), we were viewed in that state as a vital partner in possible emergency situations where medical resources might be rationed or non-existent.

During this pandemic, if just 50 Certified Professional Midwives (CPMs) were legally practicing and delivering 6-10 low-risk patients a month (patients who choose to deliver at home), there could be 300 - 500 moms and babies safely remaining at home over the next month (with 900-1500 over the next three months.) These moms would avoid possible exposure and infection, and hospital resources and staff would be freed to serve in other areas.

Surely, there must be a legal solution for us to be able to provide care, if simply through an Executive Order removing legal jeopardy for the duration of the Coronavirus pandemic.

The following Evidence-Informed Practice resources for Certified Professional Midwives (CPMs) are available by request:

- Practice Standards and Guidelines
- Transfer Protocols and Guidelines
- Informed Consent and Choice documents
- Peer-Reviewed Studies suggesting appropriate scope of practice for community/out-of-hospital birth

We are available at your earliest convenience to answer any questions or assist as needed.

Sincerely,



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