

Concept Paper
Citywide Doula Initiative

Purpose of the Concept Paper and Program Background

Doulas are trained birth assistants who provide non-medical support during pregnancy, birth, and the early postpartum period. The New York City (NYC) Department of Health and Mental Hygiene (DOHMH) seeks to expand doula support for birthing parents in New York City by providing direct services, expanding capacity to provide those services, and increasing doula-friendly policies and practices among medical providers, including referrals to the services.

Research demonstrates that doula care is a promising intervention for improving birth outcomes and reducing racial inequities. Doula support during pregnancy is associated with reductions in preterm birth and low birthweight,¹ which are leading causes of infant mortality.² During labor, doula support is associated with lower rates of cesarean birth,³ as well as decreases in other interventions, such as medical pain management and instrumental deliveries. Additionally, people who have doula support are more likely to initiate breastfeeding, are less likely to experience postpartum depression, may feel more confident about their pregnancy and labor, and have greater satisfaction with the birth experience.^{4, 5, 6, 7}

Despite these many benefits, access to doula care is often limited for low-income people and people of color due to barriers such as out-of-pocket costs, lack of information about services, and lack of available services.⁸ The proposed project aims to address those barriers by providing no-cost doula care in underserved neighborhoods citywide, training community residents to provide doula services, and publicizing the services through a citywide social-media campaign. This work will be performed by DOHMH directly and in partnership with community-based doula programs around the city.

¹ Thomas M-P, Ammann G, Brazier E, Noyes P, Maybank A. Doula Services within a Healthy Start Program: Increasing Access for an Underserved Population. *Maternal and Child Health Journal*. 2017;21(1):59-64.

² Li W, Onyebeke C, Huynh M, et al. *Summary of Vital Statistics, 2017*. New York, NY: New York City Department of Health and Mental Hygiene, Bureau of Vital Statistics;2019.

³ Kozhimannil KB, Hardeman RR, Alarid-Escudero F, Vogelsang CA, Blauer-Peterson C, Howell EA. Modeling the cost-effectiveness of doula care associated with reductions in preterm birth and cesarean delivery. *Birth*. 2016;43(1):20-27.

⁴ Bohren M, Hofmeyr G, Sakala C, Fukuzawa R, Cuthbert A. *Continuous support for women during childbirth*. Cochrane Database of Systematic Reviews 2017.

⁵ Nommsen-Rivers LA, Mastergeorge AM, Hansen RL, Cullum AS, Dewey KG. Doula care, early breastfeeding outcomes, and breastfeeding status at 6 weeks postpartum among low-income primiparae. *Journal of Obstetric, Gynecologic & Neonatal Nursing*. 2009;38(2):157-173.

⁶ Gruber KJ, Cupito SH, Dobson CF. Impact of doulas on healthy birth outcomes. *The Journal of Perinatal Education*. 2013;22(1):49-58.

⁷ Wolman W-L, Chalmers B, Hofmeyr GJ, Nikodem VC. Postpartum depression and companionship in the clinical birth environment: a randomized, controlled study. *American Journal of Obstetrics and Gynecology*. 1993;168(5):1388-1393.

⁸ Kozhimannil KB, Attanasio LB, Jou J, Joarnt LK, Johnson PJ, Gjerdingen DK. Potential benefits of increased access to doula support during childbirth. *The American Journal of Managed Care*. 2014;20(8):e340.



Project Objectives

The New York City Department of Health and Mental Hygiene (“DOHMH”) proposes to issue an RFP to procure services from 4 to 10 qualified organizations to provide doula support and related services to pregnant people and families in New York City who are facing social, economic, and racial inequities, and other social determinants of health that affect their health and well-being. The selected organizations will also help build doula capacity in the city through recruitment, training, and certification of residents as doulas. The project objective is to reduce inequities in birth outcomes in New York City, including inequities in infant outcomes (breastfeeding, preterm birth, low birthweight, infant mortality, etc.) and in maternal outcomes (Cesarean birth, instrumental delivery, satisfaction with the birth experience, perinatal depression, severe maternal morbidity, maternal mortality, etc.)

The services will be provided using a health-equity, strengths-based, trauma-informed, and resilience-informed lens. They will fall into three broad categories:

- Direct services—Birth doula services will be provided to eligible residents of TRIE ([Taskforce on Racial Inclusion and Equity](#)) neighborhoods. Priority will be given to people who are income-eligible for Medicaid and/or are giving birth for the first time (or the first time in 10+ years), as well as those who have had a previous traumatic birth experience, have no other labor support, live in a shelter, are in foster care, and/or have a high-risk medical condition. Additional services to be provided may include childbirth education, prenatal yoga, support for fathers, mental health services, couples’ programs, newborn-care classes, and 4th trimester support groups.
- Capacity building—The expansion of doula services will require a corresponding expansion of the city’s doula workforce. The project will train community members as doulas, support trained doulas in achieving certification, train all participating doulas in the program model (based on DOHMH’s By My Side Birth Support Program, operated by [Healthy Start Brooklyn](#)), and provide continuing education, including compensation for the doulas’ time in attending trainings.
- Clinical-CBO-community partnerships—Vendors will collaborate with DOHMH’s Maternity Hospital Quality Improvement Network (MHQIN), which works with hospitals to create doula-friendly policies and practices and to increase provider referrals to doula services. Vendors will also work with DOHMH and governmental and health-care partners to achieve system-level change.

Program Information

Selected vendors will:

- Engage doulas to provide community-based services to families that meet the eligibility criteria outlined above. Participating families will receive a continuum of maternal and infant support both in their home (three home visits before the birth and three after) and in the clinical setting (during labor, delivery, and postpartum, as well as a hospital follow-up within 24-48 hours of the birth⁹). The program curriculum will be based on DOHMH’s By My Side Birth Support Program and will include screening and referrals for family needs and stressors such as food insecurity,

⁹ Clients who give birth at home or at a birthing center will receive the same number of visits.



mental health challenges, and lack of adequate housing. Vendors will work with DOHMH to fine-tune the curriculum and develop best practices for the doulas to follow.

- Partner with DOHMH to recruit residents of TRIE neighborhoods to receive services as part of the Citywide Doula Initiative through a variety of methods, including direct engagement, partnership with local health and social-service providers, social media campaigns, and participation in DOHMH's Coordinated Intake and Referral (CI&R) system (currently in development).
- Partner with DOHMH to recruit residents of TRIE neighborhoods to be trained as doulas through a variety of methods, including direct engagement, partnership with community-based organizations, and social media campaigns. The Citywide Doula Initiative will use a community-based model of doula care, which is responsive to the needs of birthing people and their families in the community being served. An important element of this model is the provision of culturally congruent services, including by doulas whose racial, ethnic, and linguistic background reflect those of families served by the program. The initiative aims to increase the number of TRIE-neighborhood residents in the city's doula workforce.
- Support newly trained doulas and experienced but uncertified doulas in achieving certification through the initiative's apprenticeship program. Certification is important for demonstrating a baseline level of ability and to facilitate eventual reimbursement from the broadest possible array of payors. Vendors will match each apprentice with a mentor doula; match apprentices with clients to support; hold regular meetings with the apprentice cohort to debrief on births attended, review certification requirements, discuss challenges and opportunities; and review the apprentices' certification paperwork. Doulas must be certified within two years of joining the initiative, through a certifying body approved by DOHMH.
- Ensure that all doulas collect the prescribed data from each client and enter it into the program database within the specified time period. Vendors will have the opportunity to review the initiative's data-collection forms and make suggestions for optimizing them.
- Participate in doula-friendly-hospital activities coordinated by MHQIN, including capacity assessment and action planning meetings, follow-up technical assistance sessions, meet-and-greets with hospital staff, Grand Rounds, and other presentations and trainings about the contribution of doula support to improved perinatal health outcomes.
- Optional: In addition to the required items listed above, organizations may apply to provide workshops to train community residents to work as doulas in the Citywide Doula Initiative.
- Optional: In addition to the required items listed above, organizations may apply to provide related services to families in the program, including childbirth education, prenatal yoga, support for fathers, mental health services, couples' programs, and/or newborn-care classes.
- DOHMH expects that all vendors and doulas will maintain full compliance with HIPAA rules and regulations and will ensure that clients' confidentiality is protected in all communications. DOHMH also expects that selected vendors will have experience providing community-based doula services, providing complementary support services to clients (e.g., screenings, referrals, case management, maternity/baby/family items, etc.), working within clinical settings, and applying community-engagement strategies and practices.



Approach

DOHMH anticipates that the Citywide Doula Initiative will be implemented throughout the five boroughs of New York City. The responsibilities of the vendors will include but not be limited to the following:

- Recruiting and engaging a sufficient number of doulas to serve all clients referred to that vendor for services.
- Participating in DOHMH's CI&R system, both receiving referrals and making additional referrals for doula clients;
- Communicating promptly with the referrer, whether within or outside the CI&R system, when a client is matched with a doula;
- Facilitating the training of community residents as doulas, including recruiting participants and subcontracting with trainers if applicable;
- Facilitating the training of all doulas working for the vendor in the Citywide Doula Initiative model;
- Facilitating the provision of continuing education for doulas working for the vendor;
- Adhering to performance metrics established by DOHMH;
- Ensuring fidelity to the Citywide Doula Initiative model, including through monthly meetings of all doulas in the program and home-visit observations;
- Adhering to best practices for the doula scope of service, client matching, and building and maintaining of relationships with referral partners;
- Participating in a DOHMH-led learning collaborative for apprenticeship and capacity building, to strengthen the delivery of doula services through case-management skills and to provide support both in real time and during client debriefs;
- Ensuring effective referral and follow-up for indicated client needs;
- Collaborating with DOHMH to support program evaluation;
- Ensuring accurate and timely submission of client data;
- Managing contracts; maintaining records; paying doula invoices within 30 days of approval;
- Attending MHQIN hospital assessment and technical assistance meetings, as well as providing doula presentations, meet and greets, and Grand Rounds presentations at MHQIN hospitals as requested;
- Participating in mandatory and routine meetings as scheduled by DOHMH, including calls with DOHMH and other stakeholders, and serving on the Community Advisory Board for the Citywide Doula Initiative;
- Nominating at least two doulas, one apprentice, and two clients (pregnant or postpartum) to serve on the Community Advisory Board, in renewable one-year terms;
- Submitting monthly reports to DOHMH using DOHMH report template.
- Full-time project personnel hired by the vendor is anticipated to include, at minimum, one director, one administrative staff member, and one doula supervisor per 150 clients.
- The vendors and their doulas must have access to tablets, laptop computers, and/or desktop computers and internet service to connect to the DOHMH platform.

DOHMH anticipates that it will be responsible for the following:

- Providing the By My Side Birth Support Program curriculum



- Referring eligible families for doula services
- Convening citywide stakeholders to serve on the Community Advisory Board for the Citywide Doula Initiative
- Providing outcomes measures and data-reporting requirements
- Supporting evaluation and quality-improvement efforts
- Coordinating MHQIN hospital meetings, providing evaluation support, maintaining and following up on action plans
- Managing a social-media plan to raise awareness of doulas and of this initiative
- Providing the following items to be used by the vendors:
 - Policy and procedures manual
 - Templates for intake interviews, matching emails, calendar of births, etc.
 - Data use agreements
 - Marketing materials

DOHMH will also provide access to technology, including but not limited to remote access to program application(s) that the vendors will be required to use.

Procurement Timeline

It is anticipated that the RFP issuance date will be in Summer 2022, with an approximate proposal due date in Fall 2022 and the award decision by Winter 2022.

Proposed Term of the Contract

It is anticipated that the term of the contract awarded for the forthcoming RFP will be for nine (9) years. DOHMH reserves the right, prior to contract award, to determine the length of the initial contract term and option to renew, if any.

Funding information and Proposed Payment Structure

It is anticipated that DOHMH will issue between 4 and 10 awards and the available funding amount for the procurement will be approximately \$2 million per year for all awards for a total of \$18 million, contingent upon the availability of funds. DOHMH expects that the payment structure of the resulting contract will be performance-based.

Planned Methods of Evaluating Proposal

DOHMH anticipates that proposals will be evaluated based on proposer's relevant experience; approach to the scope of services; approach to program monitoring, data management, and reporting; organizational capacity, including proposed staffing plan; and proposed approach to budget management.

Provider Conference

DOHMH will hold a meeting for interested providers on Zoom, as follows:

- Date: Friday, February 25, 2022
- Time: 12:00 p.m.



- Link: <https://health-nyc-gov.zoom.us/meeting/register/tZcpdu2tpzwejEt1d-4hyDLh-bd3JuXBw7uKn>
- In order to access the meeting, click the above link (or copy the URL into your browser), enter the registration information as prompted and follow the instructions for joining.
- You may register in advance. However, in order to ensure that you have time to complete the registration process, please be sure to sign-in at least 5 minutes prior to the scheduled meeting time.

The purpose of these meetings is for DOHMH to obtain feedback and input from the provider community on the Citywide Doula Initiative. Agenda topics will be further specified at the meetings.

Use of PASSPort and Prequalification

To respond to this forthcoming RFP and all other Human/Client Services RFPs, organizations must have an account and an Approved HHS Accelerator PQL qualification status in PASSPort. Proposals and Prequalification applications will ONLY be accepted through PASSPort.

If you do not have a PASSPort account or Approved PASSPort HHS Accelerator PQL Application, please visit nyc.gov/passport to get started.

If you have any questions about your HHS Accelerator PQL status or for assistance with creating a PASSPort account, submit an inquiry to the [MOCS Service Desk](#).

Contact Information/Deadline for Questions/Comments

Comments are invited by April 4, 2022. Please email RFP@health.nyc.gov and indicate “Citywide Doula Initiative Concept Paper” in the subject of the email.