Interim Guidance for Maternal and Child Health Services in the Perinatal Period by the Kansas Department of Health and Environment (KDHE)

Updated February 28, 2022

This guidance is based on what is currently known about the spread and severity of coronavirus disease 2019 (COVID-19). The purpose of the guidance is to prevent the spread of COVID-19 among maternal and child health services, childcare facilities, families, and communities. KDHE will provide updated guidance as necessary based on the changing situation. Please check the CDC website and the KDHE website (COVID-19 Resource Center) periodically for updated information and guidance for a variety of settings as well as public health and health care professionals.

Staff Guidance and Resources Updated 2/28/22

Follow state and local guidance on provision of in-person services based on COVID-19 community level.

Plan for alternative routes of service delivery to enable a continuation of support and access to resources until ongoing in-person services can be reestablished, based on community level.

- Utilize telephonic or virtual options for client education and support if staffing resources are available.
  - The prenatal and postpartum period are very vulnerable times for families.
  - It is essential to stay connected, provide education, screenings, and referrals for services.
  - Consider providing virtual or telephonic options for individual visits, screenings and assessments, with email or text provision of educational resources.
  - Consider providing virtual options for group education and support groups.
  - Email or text links to educational resources vs. hard copies when possible.
- Prepare to support changing obstetrical service delivery.
  - Communicate regularly with local delivering hospital and OB/prenatal and postpartum care providers.
  - Be knowledgeable about current practice and effective modes for service delivery to help support these efforts by educating clients on new expectations (e.g., possible telehealth for prenatal visit and early hospital discharge).
  - Offer continued wrap-around services through a variety of alternative modes mentioned above and reach out to peers to learn more about other creative solutions to address needs.
• Plan for reintegration of in-person services according to state and local guidance on community level.
  o Check the Centers for Disease Control and Prevention (CDC) website for COVID-19 Community Levels.
• Monitor level of community transmission through local resources or the CDC's COVID Data Tracker.
• Refer to the Interim Guidance for Home Visiting Services by the Kansas Department of Health and Environment (KDHE) (found here under “Workers Who Enter Homes” tab), which will provide guidance and linkage to numerous other helpful resources.
• Promote vaccination and booster dosing of pregnant and recently pregnant people, sharing information about its safety as shown in recent studies as well as the latest guidance for this population.
  o ACOG’s Clinical Guidance on Vaccinating Pregnant and Lactating Patients Against COVID-19
  o CDC’s Guidance on COVID-19 Vaccines While Pregnant or Breastfeeding
  o New CDC Data: COVID-19 Vaccination Safe for Pregnant People
  o Kansas COVID-19 Vaccine Information
  o Featured Resources on COVID-19 Vaccines within the CDC’s Toolkit for Pregnant People and New Parents
• Promote collaboration among local perinatal service providers to assure follow-up case management and support services are provided to COVID-19+ pregnant women throughout pregnancy and the postpartum period.
  o Special concerns with pregnant/postpartum population:
    ▪ Pregnant women may decelerate in the postpartum period
    ▪ The virus may contribute to vascular disease, leading to increased risk for clots, potentially causing embolism or stroke
    ▪ More likely to be hospitalized and are at increased risk for intensive care unit (ICU) admission and receipt of mechanical ventilation
    ▪ Pregnant people with COVID-19 are 20 times more likely to die than those not infected1
    ▪ Increased risk to infant of positive mother, including preterm birth
• Standardized referral processes should be developed and in-place between local infectious disease investigator and local agency/program/clinical staff who will provide follow-up support services.
  ▪ Follow-up phone calls or other contact made periodically throughout pregnancy and at least 2 months postpartum

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1 American Public Health Association; The Nation’s Health November/December 2021, 51 (9) 1-20; Pregnant women urged to get COVID-19 shots: Infections, deaths skyrocket among vaccine-hesitant people; retrieved from https://www.thenationshealth.org/content/51/9/1.1
• Provide education on risks, signs and symptoms of complications to monitor for, when to call provider and/or go to emergency department
• Educate on Maternal Warning Signs
• Assure access to continued care and monitoring by clinical provider
• Assess needs and connect to resources
• Stay informed on changing access to support services (e.g., WIC, home visiting, and family planning services).

Stay informed and up-to-date with best-practice recommendations in this rapidly changing environment.

• Check for updates to guidance from reliable sources (e.g., KDHE, CDC, ACOG, AAP, etc.) on a frequent and regular basis.
  o ACOG’s Clinical Guidance, Practice Advisory – COVID-19
  o ACOG’s Clinical Guidance, Implementing Telehealth in Practice
  o ACOG’s Clinical Guidance, Hospital Disaster Preparedness
  o ACOG’s COVID-19 Algorithm
  o ACOG’s COVID-19 FAQs for Obstetrician-Gynecologists, Obstetrics
  o Society for Maternal-Fetal Medicine COVID-19 Information (get clinical resources, no-cost online education, and information for patients)
  o Association of Women’s Health, Obstetric and Neonatal Nurses (AWHONN) Guidance on COVID-19
  o CDC’s Information on COVID-19 if You are Pregnant, Breastfeeding, or Caring for Young Children
  o CDC’s Toolkit for Pregnant People and New Parents
  o Harvard Medical School’s Information on Weighing the Risks and Benefits of Separating Infected Mothers from Infants
  o World Health Organization’s (WHO) Frequently Asked Questions on Breastfeeding and COVID-19 For Health Care Workers
  o Count the Kicks: A message for Public Health Providers
  o KDHE Resource Center and Updates on COVID-19
  o ACOG’s Clinical Guidance on Vaccinating Pregnant and Lactating Patients Against COVID-19
  o CDC’s Vaccination Considerations for People who are Pregnant or Breastfeeding
  o New CDC Data: COVID-19 Vaccination Safe for Pregnant People
  o Kansas COVID-19 Vaccine Information
  o Featured Resources on COVID-19 Vaccines within the CDC’s Toolkit for Pregnant People and New Parents
  o CDC’s Information on COVID-19 Community Level
Client Guidance and Resources Updated 2/28/22

It is very important to focus program participant/patient education on the topics listed below. This information is also available in the FAQ for Perinatal and Infant Populations guidance published on the KDHE COVID-19 Resource Center under Local Health Departments:

- Importance of continued regular prenatal, postpartum, and infant care
  - Prepare for continued changes, including telehealth for regular visits as COVID-19 community levels rise.
  - Remain in continuous communication/close contact with the prenatal/postpartum care provider’s office, pediatric provider’s office, and all providers delivering services to the patient, assuring all contact information is up-to-date.
  - Report a positive COVID-19 test, or any symptoms, immediately – cough, fever (100.4 or greater), chills, muscle pain, sore throat, congestion, nausea, diarrhea, new loss of taste or smell, shortness of breath or difficulty breathing, sudden confusion, being unable to respond to others, blue lips or face - in addition to normal symptoms of pregnancy/postpartum/newborn complications (with emphasis on signs and symptoms of a dangerous blood clot, including: shortness of breath or difficulty breathing; chest pain or pressure; sudden, severe headache; swelling or pain in only one leg). New outpatient treatments are available for COVID-19 infected persons who are at risk for clinical progression (pregnancy is considered a qualifying condition), but treatment must be started within the first days after infection to be effective, so it is important to seek care right away.
  - Keep a 30-day supply of medications on hand.

- COVID-19 Risks and Disease Transmission, including specifics related to pregnancy, postpartum, infants and breastfeeding
  - Concern that pregnant women may decelerate in the postpartum period
  - Concern the virus contributes to vascular disease, leading to increased risk for clots, potentially causing embolism or stroke
  - Pregnant people are more likely to be hospitalized and are at increased risk for intensive care unit (ICU) admission and receipt of mechanical ventilation²
  - Pregnant people with COVID-19 are 20 times more likely to die than those not infected³
  - Increased risk to infant of positive mother, including preterm birth

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³ American Public Health Association; The Nation’s Health November/December 2021, 51 (9) 1-20; Pregnant women urged to get COVID-19 shots: Infections, deaths skyrocket among vaccine-hesitant people; retrieved from https://www.thenationshealth.org/content/51/9/1.1
Need for protective measures to reduce the risk of transmission to the newborn of an infected mother

CDC, ACOG and the Society for Maternal-Fetal Medicine (SMFM) recommend and strongly urge a COVID-19 vaccine for people thinking about becoming pregnant, are currently pregnant, recently pregnant and breastfeeding people, pending other risk factors unique to each individual. Share the following resources for more information on this guidance:

- CDC’s Vaccination Considerations for People who are Pregnant or Breastfeeding
- ACOG’s Clinical Guidance on Vaccinating Pregnant and Lactating Patients Against COVID-19
- New CDC Data: COVID-19 Vaccination Safe for Pregnant People
- Kansas COVID-19 Vaccine Information
- Featured Resources on COVID-19 Vaccines within the CDC’s Toolkit for Pregnant People and New Parents

- Universal Precautions for Preventing Spread
  - Frequent handwashing with warm soapy water for at least 20 secs
  - Use of alcohol-based hand sanitizer with at least 60% alcohol
  - Cover cough (coughing into elbow)
  - Limit in-person interactions with people who might have been exposed to or who might be infected with COVID-19, including people within your household, as much as possible.
  - Take steps to prevent getting COVID-19 when you do interact with others not in your private home.
    - Wear a mask when indoors in public in a community determined to have a high level of risk. Check the COVID-19 community level for your area here. Find more information on KDHE Mask Guidance here. Cloth face coverings should not be placed on young children under age 2 due to risk of suffocation and strangulation.
    - Keep space between yourself and others (stay at least 6 feet away, which is about 2 arm lengths).
    - Avoid crowds.
    - Avoid poorly ventilated spaces.
  - Frequent cleaning of commonly touched surfaces with soap or detergent.

- Get the full COVID-19 vaccine series and booster; get vaccinated for influenza, and all other recommended vaccinations, if haven’t already

- Be prepared for continued changes in the postpartum period
  - Shorter hospital stays
  - Restrictions on visitors
  - Encouraged social distancing for protection of mother and newborn
    - Have symptom-free support person help with stocking of supplies, newborn care, and self-care
- Stay connected with friends, family, and other support systems via phone, text, FaceTime, etc. instead of in-person visits
  - Need for ongoing monitoring for potential complications through at least 2 months postpartum
- Importance of self-care and utilization of mental health services
  - Pregnancy and postpartum period are a particularly vulnerable time in a woman’s life
  - Time of increased stress and isolation due to the COVID-19 pandemic

More Information Updated 2/28/22

KDHE Resources
- Frequently Asked Questions for the Perinatal and Infant Populations
- COVID-19 Resource Center
- Kansas COVID-19 Vaccine Information
- Information Line 1-866-534-3463 (1-866-KDHEINF)
- Guidance for Home Visitors
- Mental Health Resources
- Individual and Family Care
- KDHE Mask Guidance

CDC Resources
- Toolkit for Pregnant People and New Parents
- Information on COVID-19: Pregnant Women and Breastfeeding
- Vaccination Considerations for People who are Pregnant or Breastfeeding
- New CDC Data: COVID-19 Vaccination Safe for Pregnant People
- Coronavirus Disease 2019 website
- COVID-19 Community Levels
- Public Health Guidance for Potential COVID-19 Exposure Associated with Travel
- About Coronavirus Disease 2019 (COVID-19)
- What to Do If You Are Sick with COVID-19
- Coronavirus Disease 2019 Information for Travelers
- Do Your Part. Slow the Spread of Germs
- Don’t Spread Germs at Work
- Stay Home if You’re Sick
- Use of Cloth Face Coverings to Help Slow the Spread of COVID-19
- Taking Care of Your Emotional Health during an Emergency

Other National Agency and Partner Resources
- Frequently Asked Questions on COVID-19, Pregnancy, and Breastfeeding
- Vaccinating Pregnant and Lactating Patients Against COVID-19
- Pregnant Women Urged to Get COVID-19 Shots
- Hand Washing: A Powerful Antidote to Illness
- Reducing the Spread of Illness in Child Care
- Germ Prevention Strategies
- When to Keep Your Child Home from Child Care
- Tips for Social Distancing, Quarantine, and Isolation during an Infectious Disease Outbreak
- Why You Shouldn't Mask a Baby
- Why is now an important time for Count-the-Kicks
- Breastfeeding During COVID-19 Pandemic
- Q&A on COVID-19 and Breastfeeding
- Eight Ways to Look After Your Mental Health During Covid-19 Pandemic
- Screen Time for Children
- Warning Signs of Health Problems After Birth
- Urgent Maternal Warning Signs
- Postpartum Blood Clots and Bleeding: What to Expect