



# Babies' Transition from the NICU to Home: Clarifying Occupational Therapist's Role in the Process (Phase II)

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## Abstract

- There remains a gap in service delivery at the point of transition from the neonatal intensive care unit (NICU) to the home regarding the needs of parents and caregivers
- In the absence of someone to coordinate the flow of discharge information, parents have reported feeling confused and overwhelmed during the transition
- **Transition to home:** the time parents are told they will be taking their child home, up to the point of returning home and initial days of "settling in"
- Specific challenges identified in an earlier phase of this research study included concerns across the domains of **feeding, bathing/diapering, use of medical equipment, and preparation of the home environment** at the time of discharge from the NICU. Additionally, half of the participants did not receive formal training in the areas of **feeding, bathing, putting baby to sleep, addressing social/emotional needs and changing diapers/clothing**
- Based on these findings, the **NICU Transition Contract** was developed, which is intended to serve as a baseline for discussion with a NICU professional prior to discharge, easing the transition process

## Objectives

The objectives of this research project were to develop a NICU Transition Contract using data collected from Phase I and to assess the effectiveness of the Contract. Primary sources for this document were the American Academy of Pediatrics and the Centers for Disease Control and Prevention. Revisions have been made based on the participant interviews.

## Methods

- Study approved by SUNY Downstate Health Sciences University's IRB
- Convenience sampling method used to recruit parents/guardians of babies in the NICU. Sources of Recruitment:
  - University Hospital's NICU follow-up clinic
  - Distribution of recruitment flyer
  - SUNY Downstate alumni contacted via email
  - Recruitment material posted in message boards on AOTA.org
- Screening questionnaire to determine if participants met study criteria
- Confidence rating scale and semi-structured interview:
  - Used to obtain information about parents/guardians experience taking their babies home from the NICU
  - Incorporated quantitative and qualitative questions
  - Interviews held one-on-two either in person or via phone; one student researcher conducted interview while other documented participant responses
  - Responses were analyzed using Qualtrics and Microsoft Excel
- 18 parents were screened, 13 (all parents) were interviewed
- Age range of participants: 23-42 years old (mean age=33.8 years)



## Results

- Confidence Rating Scale responses of the Contract's effectiveness were **overwhelmingly positive** with 70.5% of these answers "Absolutely" and 24.4% "Somewhat"
- Topics mentioned most frequently as being most helpful include: **Developmental Milestones, Family Support Services, and Safe Sleep**
- 6 out of 13 participants felt the Feeding section should be expanded, and provided specific recommendations
- 5 out of 13 participants recommended expanding the Social Emotional and Physical Stimulation section
- Nearly all (12 of 13) felt that none of the information provided was unnecessary or redundant
- 9 out of 13 participants responded positively or neutral to the title "NICU Transition Contract"; 4 participants found it too "businesslike" or "formal"
- **Mobile app** was ranked as top choice for delivery of this information when asked to rank preference of mobile app, paper document, and in-person class



## Implications for Occupational Therapy

- The NICU Transition Contract has significant potential to improve the experience of families transitioning to home from the NICU, reducing stress and friction within the family system. This may enhance the parental-child bond and developmental and health outcomes.
- OTs are uniquely suited to assist in navigating this complex process, based on the five domains of occupational therapy (occupations; client factors; performance skills; performance patterns; and context and environment) and the discipline's foundation in medical sciences, pediatrics, rehabilitation, and mental health. OTs should be principal players in the transition process, serving to prepare families for logistical hardships, connecting them to support systems, and empowering them to recognize and advocate for their own needs and those of their babies.
- By serving as liaison between familial caregivers and NICU staff, OT practitioners advocate not only for their patients and their families, but also for policy changes that may reduce readmissions and thereby benefit the institution as well.

## Conclusions

Occupational therapists are uniquely suited to assist in navigating the complex NICU discharge process and transition home, consolidating information and connecting parents/guardians to support services needed to ensure a smooth adjustment. The Contract serves as a mechanism to assist with this process.

## References

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