

AAP DISTRICT VIII SECTION ON NEONATAL PERINATAL MEDICINE

**2021 ANNUAL CONFERENCE ORIGINAL RESEARCH (BASIC SCIENCE or CLINICAL)
ABSTRACT SUBMISSION FORM**

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DEADLINE FOR RECEIPT OF ABSTRACT IS FEBRUARY 19, 2021. Submissions will be accepted for either poster or oral presentation. Authors will be notified of acceptance and format for presentation (poster or poster symposium) by **March 12, 2021.**

Title: Parental Perception of Neonatal Transfers: A Qualitative Study

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Background: Southern Alberta, Canada has a catchment of approximately 2.5 million people and an annual birth rate of approximately 24,000; there are 54 level 3 NICU beds available. The Current model of neonatal care is based on regionalization of neonatal care where neonatal intensive care units (NICUs) are classified as level 1, 2, 3 and 4 based on acuity of provided care. A key element in regionalization is transport links between referral centers and community hospitals. Infants are transferred to a NICU providing higher level of care if they are sick, clinically unstable or require further investigations for complex neonatal issues. Infants are also transferred to a NICU providing a lower level of care once they are deemed to be stable and no longer require level 3 intensive care. One of the limitations of regionalized care is the need to transfer patients between nurseries. These transfers are termed as back-transfers or retro-transfers.

Objective: To identify parental perceptions of their neonates' back transfers from level 3 to level 2 NICUs in Calgary, Alberta, Canada

Design/Methods: We conducted a cross-sectional study between January 1, 2016 and December 31, 2017. 140 Parents of infants experiencing transfers between NICUs, were asked to respond to qualitative questions in written format (Tables 1 & 2).

Results: Three themes emerged from our data analysis with respect to what could be done differently: 1) 22% of parents (n=31) would like more notice of the transfer; 2) 45% of parents (n=63) would like to receive more information and communication regarding the transfer including the transfer process itself, why the transfer is occurring, the risks associated with the transfer, and the differences between level 3 and level 2 NICUs; 3) 9% of parents (n=13) would have liked to be transferred with the infant in the ambulance. In terms of what parents liked about their infants' respective transfer processes, three themes came to light: 1) 19% of parents (n=27) were satisfied with the level of communication and reassurance received from NICU staff; 20% of parents (n=28) were satisfied with the transfer process; and 18% of parents (n=25) were happy with the care and respect they received from NICU staff during the transfer process.

Conclusion(s): For Neonatal transfers from level 3 to level 2, improvements are necessary in order to increase parental satisfaction with the transfer process.

TABLE:

Table 1. Themes Regarding What Could be Improved with the Transfer of Infants in the NICU

What Could be Improved About Transfers	Percentage; N=140
More notice of Transfers	22% (n=31)
More information and communication	45% (n=63)
Would have liked to ride in ambulance	9% (n=13)

Table 2. Themes Regarding What Parents Liked About Transfers

What Parents liked About Transfers	Percentage; N=140
Level of communication and reassurance	19% (n=27)
Transfer process	20% (n=28)
Care and respect received from staff	18% (n=25)