

Bridging early healthcare transitions

Parents are looking for education, resources and peer support to be successful with transition of their child to rehabilitation



Strengthening practice through partnerships: Supporting parents of children born preterm as they transition from neonatal follow-up to developmental/rehabilitation services

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Background

- Parents of children with complex needs experience distress with transition from neonatal follow-up (NFU) to children's treatment centres (CTC)
- To date, there is limited evidence-based practices to support transition between NFU and CTC; interviews with parents confirm the existence of a chasm between individual site policies and best practices across the system
- Without addressing this gap, parents will continue to encounter distress, which cumulatively threatens early attachment and child development

Activity #1 – Ontario Practices Scan

Objective: To identify parent-focused transition practices for parents of children born preterm/acutely ill when transitioning from Neonatal Follow-Up Programs (NFUP) to Children's Treatment Centres (CTC).

Methods:

- Health care providers participated in an online survey and qualitative interviews

Analysis:

- Descriptive statistics and conventional content analysis.

Results:

- 60 participants (17 sites) from diverse health disciplines completed the survey, and 14 (from 11 of 17 sites) participated in a follow-up interview.
- Enablers included knowledgeable practitioners, shared NFU/CTC services and parent engagement.
- Barriers included lack of time, understanding of roles, and parent engagement.
- Informal information sharing with parents was the most common practice; site specific practices varied.

Findings highlight the need to improve and bridge NFU-CTC transition practices for parents of children with complex health needs. No two sites were the same.

Activity #2 – Best Practice Symposium

Objectives: To bring a diverse group together to
(i) facilitate knowledge exchange/uptake
(ii) prioritize and develop strategies to strengthen NFU and CTC practices

Methods:

- Families, health care providers, researchers, and experts from across the continuum of hospital and community services for neonatal/infant/complex care, joined together in a full-day symposium focused on improving early healthcare transitions for parents
- The symposium addressed the need for essential collaboration to co-develop priorities, jointly working together in the best interests of families - and informed by families with lived experiences that can help create a changed culture and services
- Activities included parent experience panel, written stories, presentations, experiential exercises and small-group discussions

Results:

- 70 participants felt highly engaged and had the opportunity to collaborate together
- Participants identified three priority areas of research to co-create better transitions:



EDUCATION RESOURCES PEER SUPPORT

- Particular attention should be made to: shared communication tools and care plans between healthcare providers, being knowledgeable about each other's services and transfer-of-care, and parent needs, readiness, communication and peers

Implications for clients and families

- Parent-focused transition practices between NFU and CTC services is an important 'upstream' approach to strengthen family resiliency, parental engagement and partnership in care, and ultimately, better children's health and development
- The symposium offered families, clinicians, and researchers an opportunity to collaborate on setting priorities

Next Steps

- Study and symposium findings will be used to inform the development and testing of parent-centred transition interventions with families' continued engagement and input

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