A QI Project to Decrease Suboptimal Patient Transfers from the NICU to the Special Care Nursery (SCN)





BACKGROUND

- Suboptimal transfers lead to errors or near misses, interrupt continuity of care, and decrease patient safety.
- We developed a multi-disciplinary team to address noticed several problems identified in the NICU to Special Care Nursery (SCN) transfer process.

PROJECT AIM

To decrease the number of suboptimal transfers from the NICU to the Special Care Nursery by 50% in 9 months

*Suboptimal transfer - discharge within 72 hours of transfer or return to the NICU within 5 days of transfer.

PROJECT DESIGN/STRATEGY

- Baseline data collected
- Transfer checklist designed
- Transfer algorithm designed
- 3 staff surveys completed at the start, midway through and at the end of the improvement period.

Measures

Outcome measures:

- The percentage of suboptimal transfers monthly.
- The percentage of parents notified before transfer (goal 95%).
- **Process measures:**
 - The percentage of patients with a completed transfer checklist
 - The percentage of staff that report satisfaction with the transfer process (goal 30%).

Balancing measures:

• The percentage of providers who report increase in the burden of the transfer process (goal <u><</u> 50%).

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CHANGES MADE (PDSA CYCLES)



PDSA Cycle 2

- Transfer algorithm implemented
- Second staff survey completed



• First staff survey

completed



Table 1. Patient characteristics in baseline and intervention periods.

Variable	Baseline period (N=488)	Intervention period (N=280)	P-value
	N (%) or median (IQR)	N (%) or median (IQR)	
Gestational age (weeks)	32 (30, 34)	33 (30, 34)	0.761
Birth weight (grams)	1742 (1266, 2221)	1768 (1283, 2259)	0.755
SCN length of stay (days) ^a	15 (8, 26)	12 (8, 25)	0.103
Reason for transfer ^b			
Supplemental heat	N/A	147 (53%)	
Bradycardia monitoring	N/A	18 (6%)	
Learning to feed by mouth	N/A	224 (80%)	

^a Data missing for 26 cases in intervention period.

^b Data not collected in baseline period.

N/A, not available; SCN, special care nursery

Table 2. Survey responses by timepoint.

Clear Yes No Clear trans Parer prior Burd proce Not

^a Data missing for 1 case in midway survey. ^b "Not sure" response option not included on final survey. NICU, neonatal intensive care unit; SCN, special care nursery



RESULTS

Survey question/response	Initial survey (N=54)	Midway survey (N=41)	Final survey (N=46)	P-value	
	N (%)	N (%)	N (%)	Midway vs. initial	Final vs. initial
Clearly defined process? ^a				0.421	0.002
Yes	25 (46%)	24 (60%)	35 (76%)		
No or not sure ^b	29 (53%)	16 (40%)	11 (24%)		
Clear person responsible for transfer decisions?	24 (44%)	22 (54%)	29 (63%)	0.373	0.063
Parents are always notified prior to SCN transfer ^a	13 (24%)	23 (58%)	33 (72%)	0.001	<0.001
Burdensome transfer process?				0.287	0.550
Not at all	27 (50%)	27 (66%)	28 (61%)		
Somewhat	23 (43%)	13 (32%)	16 (35%)		
Very	4 (7%)	1 (2%)	2 (4%)		
Satisfied with transfer process				0.204	0.003
Not at all	3 (6%)	3 (7%)	1 (2%)		
Somewhat satisfied	43 (80%)	26 (63%)	25 (54%)		
Very satisfied	8 (15%)	12 (29%)	20 (43%)		

LESSONS LEARNED

The use of checklists and algorithms allowed for standardization of transfer process

Multidisciplinary team collaboration is essential in carrying out the interventions

Displaying key information in strategic places helps to increase awareness

Incorporating changes into the EMR will make for lasting success

NEXT STEPS

 Next steps for this QI project include monitoring for sustainability over a 6-month period.

ACKNOWLEDGEMENTS

This QI project team gratefully acknowledges Elaine Henry who assisted with retrieving data, as well as members of Vidant Health's CRG office and ECU ITCS, who assisted with the surveys.

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